

To be completed by school official:

**2010-2011
NORTHWEST IOWA ALTERNATIVE HIGH SCHOOL
ENROLLMENT FORM**

NAME _____

GRADE IN SCHOOL IN FALL OF 2010: **9 10 11 12**
(Circle which is appropriate)

REQUIRED WEEKLY ATTENDANCE: _____ **HOURS**

STUDENT IS REQUIRED TO TAKE STANDARDIZED TESTS (ITED, ASVAB) DURING THIS ACADEMIC YEAR: ___yes; date tests will be given: _____ ___no

CREDITS NEEDED FOR DIPLOMA:

English _____

Math _____

Science _____

Social Studies _____

Other Required Courses _____

Electives _____

The _____ School District has agreed to enroll the above student and to pay NCC tuition for said student as outlined in the Northwest Iowa Alternative High School Cooperative Agreement. Student _____ was _____ was not counted in our enrollment.

CHECKLIST:
_____ enrollment form
_____ transcript
_____ referral form
_____ IEP (if applicable)

ATTENDANCE SITE:
_____ Ireton
_____ Marcus
_____ Sheldon

The above-named student has visited with an Alternative High School instructor and understands the rigor of the program.

Signature of AHS staff Date

Send completed forms to:
Northwest Iowa Alternative High School
Attn: Tracy Lukkes
603 West Park Street
Sheldon, IA 51201

Signature of Authorized Individual

Date

To be completed by parent/guardian:

**2010-2011
NORTHWEST IOWA ALTERNATIVE HIGH SCHOOL
ENROLLMENT FORM**

STUDENT NAME _____

ADDRESS _____
Street/Box # City State Zip

E-MAIL ADDRESS _____

AGE _____ BIRTHDATE _____ PHONE # _____

SOCIAL SECURITY# _____ CELL PHONE # _____

Mother's Name: _____		Phone # _____	
Address: _____		_____	
Street/Box #	City	State	Zip
E-mail Address: _____		Cell Phone # _____	
Father's Name: _____		Phone # _____	
Address: _____		_____	
Street/Box #	City	State	Zip
E-mail Address: _____		Cell Phone # _____	

Whom should we contact in regard to student? _____ When is the best time? _____ Contact by: home phone _____ cell phone _____ email _____

Where do you want progress reports and other correspondence mailed?

Please list those to whom we may release information (non-custodial parents, social service agencies etc.):

**If you (the student) are 18 or will turn 18 during the school year, please indicate to whom information may be released (including parents).*

Student Signature

Date

Parent/Guardian Signature

Date