



MINNESOTA NORTH STAR ACADEMY

Preparing students who communicate in ASL and English to become successful and valued world citizens

STUDENT PRE-ENROLLMENT FORM

Date: _____

Please return this form to address listed at the bottom.

STUDENT INFORMATION

First Name _____ Last Name _____

Home Address _____ Apartment _____

City _____ Zip code _____ Home Phone (v/tty) _____

Last school attended _____ Grade _____

Student's Birth date ____/____/____

PARENT/GUARDIAN INFORMATION

Parent/Guardian (please print) _____ Daytime Phone Number _____

Parent/Guardian (please print) _____ Daytime Phone Number _____

Home address _____

Email address _____

St. Paul Star Schools.