

**Dr. Toni Bilbao Preparatory K-8 Academy**  
*Building, Achieving & Succeeding*  
*Pre-K-2<sup>nd</sup> Grade*  
**2017 Student Interest Form**

STUDENT'S NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
HOME TELEPHONE NUMBER \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
PRESENT GRADE \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_  
MOTHER'S EMPLOYER \_\_\_\_\_  
EMPLOYMENT TELEPHONE# \_\_\_\_\_  
CELL PHONE NUMBER \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_  
FATHER'S EMPLOYER \_\_\_\_\_  
EMPLOYMENT TELEPHONE# \_\_\_\_\_  
CELL PHONE NUMBER \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

**IN CASE OF AN EMERGENCY, PLEASE NOTIFY:**

NAME \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_  
ADDRESS \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_  
ADDRESS \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

\_\_\_\_\_ I am interested in my child attending Dr. Toni Bilbao Preparatory K-8 Academy for the 2017-2018 school year.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

