



Palmetto Middle School

FORENSIC SCIENCE ACADEMY

OFFICIAL STUDENT APPLICATION

DIRECTIONS

- Applications **MUST** be received by **April 3, 2020**
- Use black or blue ink to fully complete the application.
- Read and sign the Agreement of Understanding.

ELIGIBILITY REQUIREMENTS:

- Must have a cumulative 3.0 GPA or higher in core academic subjects
- Must have a minimum **3.0 or higher** in conduct
- All effort grades in core academic classes must be a "2" or higher
- No more than five (5) unexcused absences

Please use the student's legal name as indicated on birth certificate. Do not use nicknames, assumed names, etc.

| | | | |
|--|----------------------------|---|---------------------------------|
| Last Name | First Name | Middle Name | |
| _____ | _____ | _____ | |
| Student Birthdate (MM/DD/YYYY) | Gender (circle one) | Current Grade | M-DCPS Student ID Number |
| _____ | Male / Female | _____ | _____ |
| Student Address – Number and Street | | Apt. # | City |
| _____ | | _____ | _____ |
| ZIP | State | School Student Currently Attends | Public School: YES NO |
| _____ | _____ | _____ | _____ |

| | | |
|---------------------------------------|-------------------------------|-----------------------|
| 1. Parent/Guardian's Last Name | First Name | Initial |
| _____ | _____ | _____ |
| (Area Code) Home Phone | (Area Code) Work Phone | E-Mail Address |
| _____ | _____ | _____ |
| 2. Parent/Guardian's Last Name | First Name | Initial |
| _____ | _____ | _____ |
| (Area Code) Home Phone | (Area Code) Work Phone | E-mail Address |
| _____ | _____ | _____ |

AGREEMENT OF UNDERSTANDING – I, hereby, give permission for my child to be screened for admission to the selected program designated in this application. If accepted, he/she will be enrolled as a full-time student at the school of acceptance. Transportation availability is limited and may not be available to all students. My child must demonstrate acceptable performance, attendance, and conduct (as determined by school-site policy) in order to remain in the program.

Parent/Guardian's Signature _____ **Date:** _____

Parent/Guardian's Name (PRINT) _____

SUBMIT ORIGINAL COMPLETED APPLICATION TO:
Palmetto Middle School
7351 SW. 128TH Street
Miami, FL. 33156
305-238-3911

| |
|------------------------------|
| For Internal Use Only |
| Approval Date: _____ |
| Initials: _____ |



APPLICATION FORM DEADLINE: APRIL 3, 2020