



SEM Lab School Student Application

Student Name _____ **Grade:** _____ **Birthdate:** ___/___/___

Parent(s) Name(s): _____

Parent(s) Address(s): _____

Parent(s) Phone Number(s): _____ **(home)** _____ **(cell)**

Parent(s) Email Address(s) _____

Does your family have home internet access? (Please check one) ___ **Yes** ___ **No**

Please list your child's strengths:

Please list school concerns you or your child have:

We (parent and student) are willing to sign and adhere to the SEM Lab School

Parent/Student Contract. (Please check one) ___ **Yes** ___ **No**

Parent Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____