



School District of New London

Next Generation Academy

Enrollment Application

Today's Date: _____ Student's Home District* _____

I am a continuing Next Generation Academy student.

Student Information

Full Name _____ Birth Date _____

Age _____ Male/Female _____ Current Grade Level _____

Street Address _____

City _____ State _____ Zip Code _____ Email _____

Student Phone _____ cell/hm

First Parent/Guardian Information

Full Name _____ Email _____

Street Address _____

City _____ State _____ Zip Code _____

Phone #1 _____ cell/hm/wrk Phone #2 _____ cell/hm/wrk

Second Parent/Guardian Information

Full Name _____ Email _____

Street Address _____

City _____ State _____ Zip Code _____

Phone #1 _____ cell/hm/wrk Phone #2 _____ cell/hm/wrk

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (print) _____

Requested starting date: _____

*If enrolling from another school district, additional paperwork will be required.

Questions may be referred to: Danielle Sievert at dsievert@newlondon.k12.wi.us

Megan Yeska at myeska@newlondon.k12.wi.us

Website: www.newlondon.k12.wi.charters/catalystacademy.cfm

For Office Use Only

Date App Received _____ Enrollment Date _____

Placement Info _____

