## **Tidioute Community Charter School Letter of Interest For 2024-2025**

(This form will be accepted starting on Friday, March 1st, 2024)

Student Last Name	ne:First Name:				
Middle Name:		Gender: Male / Female		Female	
Home Address:					
City/State/Zip:		Telephone: ()			
Work Phone;			Cell Phone:		
Date of Birth:	Age:	_Township:	County:		
			Grade for the 2024-2025 school year current school year: No / Yes	ar.	
They have been atte	ending			School	
Mailing Address (if	different from home	address): _			
City/State/Zip:					
Do you have sibling	s that currently atter	nd the Char	ter School? Yes / No		
Name(s)					
I am an employee of K4 & K5 students: I in having my child when School Year Parent	of the Charter Schoo attended preschool who is listed above a	I. Yes / . Yes / .ttend the Ti	No How many years?idioute Community Charter School fo		
Parent/Guardian Ce	ell Phone:		Work Phone:		
Office use:			Date Time:		
Signature of person					

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