

***The Family Place PCS Application Form***

***Aplicación 2025-2026 School Year***

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**Application Date: \_\_\_\_\_\_\_/\_\_\_\_\_\_\_/ 2025**

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| **Applicant Information /** Información del Aplicante | |
| **Last Name**/Apellido **First Name/**Primer Nombre | **Date of Birth**/Fecha de Nacimiento |
| **Address/**Dirección: | |
| **City/**Ciudad: **State/**Estado: **Zip Code/**Código Postal: | |
| **Phone Number/**Número de Teléfono: (\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_  **E-mail**/Correo Electrónico: @­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_. \_\_\_ | **Gender/**Genero: **Male/Female** Masculino/Femenino **Other**/Otro:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Use Social Media/**Medios de Comunicación Social: **Facebook / LinkedIn / Twiter / Instagram / Pinterest / YouTube**  **How did you hear about us**/Como escucho de la escuela? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

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| **Emergency Contact /** Contacto de Emergencia | |
| **Name/**Nombre: | **Relationship to Student/**Relación all Estudiante: |
| **Phone Number**/Número de Teléfono:  (\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **E-mail**/Correo Electrónico:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_\_\_ |

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| **Program Enrollment /** Inscripción de Programa |
| [ ] **ESL/Inglés *AM / PM / EVE )*** [ ] **Foundation of Literacy/**Alfabetización ***AM / EVE*** [ ] **CDA** ***Fridays Only*** |
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| **Number in Household (including children)**/Cuántos viven en su casa (incluyendo niños): **1 2 3 4 5 6 7 8**  [ ] **Head: Single Parent**/Cabeza de Familia: Padre/Madre Soltero [ ] **Head: 2 Parents**/Dos padres en casa |

***TFPPCS does not discriminate*** *on the basis of actual or perceived race, color, religion, national origin, sex, age, disability, or any other classification protected by law in any of its activities, including its educational programs and activities, which comply fully with the requirements of state and federal law*

I declare that I have answered all of the questions accurately, and I acknowledge that any falsification of information may be grounds for denial of entry into the school or dismissal from the school. **Declaro que he respondido todas las preguntas con precisión, y reconozco que cualquier falsificación de información puede ser motivo de negación de ingreso a la escuela o de despido de la escuela.**

**Participant Signature /** Firma del Participante **Date/** Fecha: \_\_\_\_\_\_/\_\_\_\_\_\_/2025

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