



Enrollment Date: ___/___/___
 (For MIS use only)

APPLICANT'S INFORMATION

Applying for: Pre-Primary 3 Pre-Primary 4 K 1st Grade 2nd Grade 3rd Grade 4th Grade 5th Grade

Applicant's Name _____
FIRST NAME MIDDLE NAME LAST NAME NAME USED IN SCHOOL

Gender: M F Date of Birth _____ Citizenship _____ Country of Birth _____
MM / DD / YY

Home Address _____
NUMBER AND STREET CITY

STATE ZIP Home Telephone _____

Home Language (check all that apply): English Spanish Others (specify) _____

Race (Optional – check all that apply): White Black/African American Native American Asian
 Asian Indian Pacific Islander Other (specify) _____

Ethnic Background (Optional): Hispanic/Latino Non-Hispanic/Latino

APPLICANT'S SCHOOL HISTORY

Current School _____

Dates of Attendance From _____ to _____ Current Grade _____
MM / YY MM / YY

School Address _____
NUMBER AND STREET CITY

STATE ZIP School Telephone _____

Name of Current Teacher _____

Previous School _____
SCHOOL NAME CITY / STATE DATES ATTENDED

SIBLING INFORMATION

Number of Siblings: _____

Does the applicant have a sibling who is also applying to MIS? Yes No

Provide the following information on all siblings of the applicant (attach additional sheets if necessary):

Sibling's name: _____ Gender: M F Date of Birth: _____
MM / DD / YY

Current School: _____
SCHOOL NAME CITY / STATE DATES ATTENDED

Sibling's name: _____ Gender: M F Date of Birth: _____
MM / DD / YY

Current School: _____
SCHOOL NAME CITY / STATE DATES ATTENDED

PARENT / LEGAL GUARDIAN INFORMATION

Parents are: married separated divorced partners, not married
 single parent mother or father deceased

Child lives with: both parents mother father guardian other (specify) _____

If divorced: Are parent(s) remarried? both are remarried neither is remarried
 mother is remarried father is remarried

If divorced or separated: The School should communicate with: both parents mother only father only

Parent / Guardian 1

Check one: Mr. Mrs. Ms. Miss Dr. Other Relationship to applicant _____

Name _____
FIRST NAME MIDDLE NAME LAST NAME SUFFIX

Citizenship _____ Birthplace _____

Race (Optional): _____ Ethnicity (Optional): _____

Secondary school attended: _____

College/University attended: _____

Occupation _____ Employer _____ Title _____

E-MAIL WORK PHONE MOBILE PHONE

Native Language (check all that apply):

English Spanish Other Language (specify) _____

Parent / Guardian 2

Check one: Mr. Mrs. Ms. Miss Dr. Other Relationship to applicant _____

Name _____
FIRST NAME MIDDLE NAME LAST NAME SUFFIX

Citizenship _____ Birthplace _____

Race (Optional): _____ Ethnicity (Optional): _____

Secondary school attended: _____

College/University attended: _____

Occupation _____ Employer _____ Title _____

E-MAIL WORK PHONE MOBILE PHONE

Native Language (check all that apply):
 English Spanish Other Language (specify) _____

GRANDPARENT(S) INFORMATION (attach additional sheets if necessary)

Paternal Grandfather

Name _____
FIRST NAME MIDDLE NAME LAST NAME SUFFIX

Home Address _____
NUMBER AND STREET CITY STATE ZIP

Home Telephone _____ Email Address _____

Native Language (check all that apply):
 English Spanish Other Languages (specify) _____

Paternal Grandmother

Name _____
FIRST NAME MIDDLE NAME LAST NAME SUFFIX

Home Address _____
NUMBER AND STREET CITY STATE ZIP

Home Telephone _____ Email Address _____

Native Language (check all that apply):
 English Spanish Other Languages (specify) _____

Maternal Grandfather

Name _____
FIRST NAME MIDDLE NAME LAST NAME SUFFIX

Home Address _____
NUMBER AND STREET CITY STATE ZIP

Home Telephone _____ Email Address _____

Native Language (check all that apply):

English Spanish Other Languages (specify) _____

Maternal Grandmother

Name _____
FIRST NAME MIDDLE NAME LAST NAME SUFFIX

Home Address _____
NUMBER AND STREET CITY STATE ZIP

Home Telephone _____ Email Address _____

Native Language (check all that apply):

English Spanish Other Languages (specify) _____

APPLICANT EVALUATION

Please tell us why you would like your child to attend the Magellan International School.

Please tell us about your child's Spanish level. In addition, please share with us your child's exposure to Latin culture such as music, arts, and so on.

Please describe your expectations from your child's education. That is, what kind of education do you want your child to receive?

Please describe your child's strengths, challenges, and special interests.

Please describe your child's health.

Does your child have any specific allergies or learning disabilities that would limit his/her participation in the full range of school activities?

Is your child currently under the care of a physician, psychiatrist, psychologist, or therapist? Yes No
If so, describe briefly.

Has your child had an education/psychological evaluation? Yes No

If yes, are you willing to share a copy of the results? Yes No

Is there anything else you would like us to know about your child? (Use a separate sheet if necessary.)

How did you learn about the Magellan International School?

- Internet Search
- Radio
- Magazine
- Friend
- Teacher Recommendation
- Other

If Other, please explain:

PERSONS FINANCIALLY RESPONSIBLE

Person 1 _____
FIRST NAME MIDDLE NAME LAST NAME

HOME PHONE WORK PHONE MOBILE PHONE

EMAIL ADDRESS

Person 2 _____
FIRST NAME MIDDLE NAME LAST NAME

HOME PHONE WORK PHONE MOBILE PHONE

EMAIL ADDRESS

Billing Address _____
NUMBER AND STREET CITY

STATE ZIP

Disabled applicants (or disabled family members of applicants) requiring any type of accommodations during the application process or otherwise are encouraged to identify themselves and indicate what type of accommodations are needed.

Signatures of parent(s) or guardian(s) _____ Date _____

_____ Date _____

- **Please submit this application with the non-refundable application fee of \$100 (Check or Money Order) in person or by mail to the address below. Make checks out to "THE MAGELLAN SCHOOL".** Applicants who file by the stated priority due dates and meet all other deadlines will receive priority consideration from the School. Applications received after this date will be considered as space allows.
- The Magellan International School admits students of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

The Magellan International School
7130 Chimney Corners
Austin, TX 78731
(512) 961-5289
admissions@magellanschool.org