



FURLOW CHARTER SCHOOL 2024-2025 STUDENT APPLICATION

Student Information

Name _____ Date of Birth _____ 24-25 Grade _____

Address _____
House Number and Street City State ZIP Code

Parent/Guardian Information

Name _____ Phone _____

Email _____ Relation to Child _____

Sibling & Preference Information (if applicable)

Is the applicant the child of an employee or Governing Board member? Yes No

If yes, name of employee/member _____

Does the applicant have a sibling currently enrolled at FurLOW? Yes No

If yes, name of brother/sister _____

Does the applicant have a sibling applying to FurLOW on a separate application? Yes No

If yes, name of brother/sister _____

Weighted Lottery Information (optional, if applicable)

FurLOW Charter School uses a weighted lottery for Educationally Disadvantaged Students in accordance with O.C.G.A. 20-2-2066(a)(1)(A). To receive an increased chance of admission, please check any of the following that apply to the applicant:

____ Students who are economically disadvantaged -- qualifies for free & reduced lunch, federal benefits, or are below the poverty line

____ Students with disabilities -- eligible for and receive services under IDEA

____ Limited English proficient students -- eligible for services and English Language assistance

____ Neglected or delinquent students -- adjudicated delinquent or determined to be neglected by a juvenile court

____ Homeless students -- lack a fixed, regular, & adequate nighttime residence as defined by the McKinney-Vento Act

I affirm that the information contained in this application is, to my knowledge, completely true.

Parent/Guardian Signature _____ Date _____

Please return completed application, no later than February 14, 2024, to

FurLOW Charter School
Student Admissions
63 Valley Drive
Americus, GA 31709

SCHOOL USE ONLY
Date Received _____
By _____