

Southwest Georgia STEM Charter School

185 Pecan Street, Shellman, GA 39886 | P.O. Box 300 Fax: 229.679.2018 | Phone: 229.345.3033

Ginger Almon, School Leader galmon@sowegastemcharter.org

2022-2023 Student Application				
Student Information				
Name			Date of Birth	
Last	First	Middle		
Address				
House Number and Street City S	State Zip code			
Current Grade	(mark N/A if not in	school) Grade Appl	ying For	
Parent/Guardian Information				
Parent/Guardian 1				
Name			Phone	
E-mail		F	Relation to Child	
Parent/Guardian 2				
Name		P	Phone	
E-mail		R	telation to Child	
Additional Information				
			STEM Charter? If yes, please list ol year.	



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Does the applicant have a sibling applying to Southwest G yes, please list all siblings that will have an application on year.	· · · · · · · · · · · · · · · · · · ·
Is the applicant the child of a member of the Southwest Gochild of a faculty/ staff member of the school? If yes, name	-
I affirm that the information contained in this application below, I acknowledge that I have the legal right to enroupplication does not guarantee admission into Southvoltery, enrollment, and wait-list procedures.	oll this child in school. I understand that this
Parent/Guardian Signature	Date
Please return comp	oleted application to:
Admissions P.O. Box 30 Email: galmon@so	M Charter School Student 0 Shellman, GA 39886 Or wegastemcharter.org 229.345.3033
School Use Only:	
Date Application Received:	_Lottery Number Assigned
Signature of Application Recipient:	
Contact Log	
Attempt Date/Information:	
Attempt Date/Information:	
Attempt Date/Information:	

Southwest Georgia STEM Charter School does not discriminate on the basis of race, color, religion, national origin, age, disability, or gender in its employment practices, student programs, and dealings with the public.