



OFFICE ONLY

Date Received: _____

Lottery Number: _____

LoveWorks Academy
Enrollment Application Phase I
School Year: _____

I. STUDENT INFORMATION (Please fill out a separate form for each child applying)

Last Name _____ First Name _____ M.I. _____

Home Address _____ Apt # _____

City _____ State _____ Zip Code _____

I am applying for admission into grade: **(Please circle your child's grade)**

K4 K5 1st 2nd 3rd 4th 5th 6th 7th 8th

Do you currently have any other children attending LoveWorks? Yes__ No__

If yes, please list their name(s) and grade(s):

Name: _____ Grade: _____

Name: _____ Grade: _____

Do you have children currently on the waiting list? Yes__ No__

If yes, please list their name(s) and grade(s):

Name: _____ Grade: _____

Name: _____ Grade: _____

II. PARENT/GUARDIAN INFORMATION

Parent/Guardian

Last Name _____ First Name _____

Work Phone (____) ____ - ____ Cell Phone (____) ____ - ____

Email: _____

Parent/Guardian

Last Name _____ First Name _____

Work Phone (____) ____ - ____ Cell Phone (____) ____ - ____

Email: _____

Parent/Guardian Signature _____ Date _____

LoveWorks Academy for Visual and Performing Arts

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