



**STUDENT INFORMATION:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Development \_\_\_\_\_ Home Phone: \_\_\_\_\_

Male  Female Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Incoming Grade: \_\_\_\_\_

Please provide the name & location of your previous school: \_\_\_\_\_  
School Name City State

**Ethnicity (please check only one)**

- Hispanic or Latino
- Non-Hispanic or Latino

**Race (Select all that apply)**

- African American
- White
- American Indian / Alaskan Native
- Asian
- Native Hawaiian or Other Pacific Islander

**PARENT/GUARDIAN 1 INFORMATION:\***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Development: \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Business Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_

Home/Primary Email Address: \_\_\_\_\_

**PARENT/GUARDIAN 2 INFORMATION:\***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Development: \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Business Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_

Home/Primary Email Address: \_\_\_\_\_

**Child lives with (check only one)**

- Both Parents/Guardians
- Parent/Guardian 1 Only\*\*
- Parent/Guardian 2 Only\*\*
- Both Parents/Guardians Alternately\*\*

**\* If the student lives with a Guardian who is NOT the child's mother or father, please attach a copy of the guardianship papers.**

**\*\* Please attach a copy of the Custody Order.**

## STUDENT SUPPORT INFORMATION

Has your child been recommended for or placed in a program for English Language Learners (ELL)?

No  Yes

Does your child have an IEP or a 504 Plan, or otherwise receive special services?  No  Yes

**If yes, a copy of the IEP records or 504 Plan is REQUIRED in order to complete acceptance.**

Has your child been recommended for or placed in any alternative setting in the past two years?

No  Yes

**If YES, please explain:** \_\_\_\_\_

\_\_\_\_\_

Has your child had repeated discipline issues at his/her previous school?  No  Yes

**If YES, please explain:** \_\_\_\_\_

\_\_\_\_\_

## AUTHORIZATION TO PRODUCE PHYSICAL LIKENESS

- I give permission without restrictions to MOT Charter School to use still photographs and video images taken of my child for use in professional development, public presentations, public displays, school social media, the school's web site, and other electronic and printed publications, including the school yearbook.
- I DO NOT give permission to MOT Charter School to use still photographs and video images taken of my child for use in professional development, public presentations, public displays, school social media, the school's web site, and other electronic and printed publications, including the school yearbook.

## NEW STUDENT COMMITMENT

Title 14, Section 506(c)(3) of the Delaware Code requires that parents of all students entering a charter school for the first time sign an acknowledgment of their intent for the child to remain in the charter school for at least one school year.

- We **ACCEPT** enrollment for the above-named child to attend MOT Charter School. **We understand that we are required to remain at MOT Charter School for one full school year, in the absence of any condition constituting good cause.**
- We **DECLINE** enrollment.

I attest that the information provided in this FIRST YEAR AGREEMENT is correct and that I have the authority to register my child for admission into MOT Charter School. I acknowledge that MOT Charter School will use my responses to provide required information to the Department of Education and other state and federal agencies as required by law.

**All custodial parents and guardians must sign the FIRST YEAR AGREEMENT. This signature will be used for comparison purposes should any questions arise as to the authenticity of a signature.**

\_\_\_\_\_  
Parent / Guardian Signature (handwritten signature-not typed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian Signature (handwritten signature-not typed)

\_\_\_\_\_  
Date



DATE: FEBRUARY 8, 2019

DESCRIPTION	AMOUNT
REGISTRATION FEE	\$100.00
TOTAL	\$100.00

Payments may be made by check made out to "MOT Charter School" or electronically by going to [www.motcharter.com](http://www.motcharter.com) and clicking on Online Payments under Quick Links.

To make the payment online, click on the Online Payment link and complete your payment as follows:

1. Fill in your Billing information – including your full name and address.
2. Fill in your Payment information:
  - a. Amount: 100.00 for EACH child you are registering for high school.
  - b. Purpose of Payment: Use the drop down menu to select "Other"
  - c. Student(s) name: Please provide your student(s) full name
  - d. Grade field: Please enter the grade level your student will be entering in the 2019-2020 school year.
  - e. Name of Club/Sport/Trip or other Details field: Please type "HS Regist. AND "Shirt Size ..... "
    - In this field include the size shirt you are ordering for your incoming student – AS (Adult Small), AM (Adult Medium), AL (Adult Large), AXL (Adult Extra Large), A2XL (Adult 2-Extra Large).
3. Enter your phone number and click Proceed
4. Select method of payment: Credit, Debit, or ACH payments from your checking or corporate account.
5. Click Pay Now
6. Complete your payment information, including an email address for your receipt.

Please be sure to complete all required information so that the payments will be correctly credited to your student's account. Your information will not be stored but including a phone number will allow us a way to contact you if there are any questions regarding your payment.

**Paid Registration Fees will include ONE Black MOT Charter School logo uniform shirt for each incoming student, you will receive information on how to order additional uniform shirts. If you are paying online, please follow the instructions on [Welcome to MOT Charter High School](#) page on our website to indicate shirt size. If you are paying by cash or check, **please indicate below the size shirt you are ordering for your student:****

- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> Adult Small  | <input type="checkbox"/> Adult Large       | <input type="checkbox"/> Adult 2-Extra Large |
| <input type="checkbox"/> Adult Medium | <input type="checkbox"/> Adult Extra Large |  |

NOTE: Registrations will not be considered complete until payment is made, or a payment plan has been determined. Please call the High School at 302-696-2000 if you are unable to make the registration payment in full.