

MORRISON CAMPUS STUDENT APPLICATION

Student Name:			Birth Date:	
Address:			Age:	Grade:
Phone:	Parent/Guardian(s):			
Currently Enrolled at Dallas High School?	ΥN			
Student Information:		og vour time at Marrican		
What would you like to accomplish	i aurir	ng your time at Morrison?		
Why is your current school situation	n not	working well for you?		
What learning environment or tead	ching	style works best for you?	What are your stre	engths and challenges?
What do you hope your life looks li	ke aft	er high school?		
Student Signature:			Da	te:
Office Use Only:				
Office Use Offig.				

Transcript: Y N Records Check Needed: Y N

GUARDIAN INFORMATION				
Parent/Guardian Name(s):				
Student Name:				
Best Contact? (email, Phone, Cell)				
Parent / Guardian Information:				
Why do you want your child to attend Morrison?				
What information would be helpful for us to know in working with your child?				
what information would be helpful for us to know in working with your child:				
Why do you hope the Morrison environment will work for your child?				
What are your child's strengths? How does your child learn best?				
Parent/Guardian Signature: Da	te:			
Information About Your Child (if yes, please explain)				
Has your child ever been expelled? Y N				

Are there any pending court issues or POs? Y N

ΥN

Is your child currently a parent?