

Signature of Parent:

CHESAPEAKE SCIENCE POINT PUBLIC CHARTER SCHOOL

7321 Parkway Drive South, Hanover, MD 21076
Phone: (443) 7575-CSP
Fax: (443) 757-5280
Web: http://www.mycsp.org

RE-ENROLLMENT FORM FOR 2019-2020 SCHOOL YEAR **DEADLINE – March 1, 2019**

STUDENT INFORMATION: ONLY ONE STUDENT PER FORM First Name Last Name Middle Initial Home Phone **Current Grade** DOB Address City Zip _ I would like to renew my child's enrollment at Chesapeake Science Point for the 2019-2020 school year. My child will NOT be attending Chesapeake Science Point for the 2019-2020 school year. ~Please tell us why you choose NOT to re-enroll your child at CSP. By signing, I have read and understand the middle school program (if it applies), high school program (if it applies), and Repeat Free policy for the 2019-2020 school year. Printed Name of Parent: Date: _____

STUDENTS THAT DO NOT TURN IN THE FORM, OR TURN THE FORM IN LATE WILL LOSE THEIR SEAT FOR 2019-2020.

Date: