

Christopher Columbus High School
Make-Up Entrance Exam Application 2010/2011
Tuesday, February 23, 2010 (2:30pm)

Contact Information:

Student Name: _____
Last First Middle

Address: _____

City _____ Zip Code _____ Home Phone _____

Mother's Name: _____ Father's Name: _____

Business Phone: _____ Business Phone: _____

Cell Phone: _____ Cell Phone: _____

Custodial Parent's E-mail: _____

Student's E-mail: _____

Is Father a Columbus Alumnus? Yes _____ Graduation Year _____

Is Brother a Columbus Student/Alumnus Yes _____ Graduation Year _____

Grade level you are applying for? _____

School Presently Attending: _____ Schools since 6th grade _____

Has the child ever been tested for learning disabilities? Yes _____ No _____ Date Tested: _____

(If yes, please explain): _____

Are you applying for McKay _____ Florida Pride _____

Statement to Verify Appropriate Status: After September 11, 2001, the Department of Homeland Security (BCIS) expects the schools to have complete and accurate information pertaining to any foreign student entering their school. We must make sure that our students have the appropriate status that allows them to attend school in the United States. Students who are changing their "tourist B-1" status to a "student F-1" status should have their status granted before attending school.

Payment Information:

The cost to register for the Columbus Entrance Exam is **\$50**. Fill out this form and mail to Christopher Columbus High School with a check for \$50 made out to CCHS. 3000 SW 87th Ave, Miami, FL 33165, Attn: Mrs. Rafuls

You can also pay by credit card by filling out the information below.

Pay by: _____ Visa _____ Mastercard

Name of Credit Card Holder: _____

Credit Card Number: _____ Expiration Date: _____

I certify that the information given in this application is complete and accurate, and I understand that to make false statements or omit information within this application may result in the denial of admission.

Signature of parent or legal guardian

Date