



**Piedmont Classical High School  
Application for Enrollment 2018-2019**

Applying for Grade: 9<sup>th</sup> \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_

Applications must be received by **5:00 PM on Wednesday, January 31st.**

Please mail, fax, e-mail or hand deliver.

The lottery will be held on **Friday, February 16th at 10:00 AM.**

**Student Information**

Student's Legal Last Name

First Name

Middle Name

Preferred Name/AKA

Date of Birth

Street Address

Apt #

City

State

Zip Code

Mailing Address if different from above

Apt #

City

State

Zip Code

Primary Telephone

Primary Email Address

County of Residence

Do you have a student(s) currently attending Piedmont Classical High School? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please complete info below.

Name/Grade: \_\_\_\_\_ Name/Grade: \_\_\_\_\_

Are you or any other guardian a Staff/Board Member of PCHS?

Yes \_\_\_\_\_ Name of Staff/Board Member: \_\_\_\_\_

**Parent /Guardian Information**

**Parent/Guardian #1**

**Parent/Guardian #2**

Name \_\_\_\_\_

Name \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

1401 Lees Chapel Road Greensboro, NC 27405 E-Mail: [office@piedmontclassical.com](mailto:office@piedmontclassical.com)

Phone (336) 701-2271 Fax (336) 897-2076