

**WILLITS CHARTER SCHOOL
INDEPENDENT STUDY APPLICATION**

Date Received _____
(WCS use)

For Entry _____
(WCS use)

Grade at Entry _____

Student Name _____

Parent/Guardian Name(s) _____

Mailing Address _____

Physical Address _____
(if different from above)

City, Zip _____ Gender M F

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail _____ Primary Language _____

Student's Birthdate _____ Student's Current Grade Level _____

School Currently Attending _____

Reasons for transferring from previous school _____

Student's interests/hobbies _____

How did you hear about Willits Charter School? _____

Have you ever been suspended? Yes No Have you ever been expelled? Yes No

Parent/Guardian initial here to acknowledge that you understand there is a commitment on the part of the parent to fulfill 40 hours (20 hours-independent study students) of service at or for WCS during the course of the school year.

Student Applicant: Please attach a one-page essay telling us why you are interested in independent study, how this program will serve your needs and goals better than an on-site program. This essay is considered part of your application.

***Please attach the most recent student report card or transcript.**

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