
Family Information

Applicant lives with _____

Name _____ Address _____

Occupation _____

Employer: _____ Business Address _____

City _____ State _____ Zip Code _____ Home Phone _____

Business Telephone _____ Cell: _____ E-mail _____

Applicant lives with _____

Name _____ Address _____

Occupation _____

Employer: _____ Business Address _____

City _____ State _____ Zip Code _____ Home Phone _____

Business Telephone _____ Cell: _____ E-mail _____

If parents are divorced or separated, please provide the following information for the parent who is responsible for the child's attendance. _____

Extended Family Information

Please list the applicant's grandparents.

Name _____ Occupation _____

Address: _____

Home Telephone (____) _____ E-mail _____

Name _____ Occupation _____

Address _____

Home Telephone (____) _____ E-mail _____

Previous Schools

The Marcus Garvey School reserves the right to call previous schools to request records of attendance, grades, and conduct before and after accepting your child.

Please list applicant's previous schools starting with the current school.

School Name: _____	Dates attended: _____
Address: _____	
Telephone (____) _____	Principal: _____

School Name: _____	Dates attended: _____
Address: _____	
Telephone (____) _____	Principal: _____

School Name: _____	Dates attended: _____
Address: _____	
Telephone (____) _____	Principal: _____

Health

Please check one of the following: It is extremely important that we understand the nature of your child's health in the event of an emergency.

Good

Minor Problems (allergies, injuries) Please Explain: _____

Bad

Major Problems (chronic illness or ongoing treatment) - Please attach a detailed explanation to the application. _____

Tutoring/ Counseling Therapy/Personality/Strengths/Weaknesses

Has your child received, or is he/she receiving special tutoring counseling or therapy?

Yes no If yes, please list the name of the specialist, nature of concern and dates of service: _____

Name _____ Specialty _____

Dates of Service: _____

Nature of Concern

Marcus Garvey instructors are committed to enhancing your child's current academic learning and social skills. Please take a few minutes to explain your child's strengths, weaknesses, and personality. This information will assist us in getting off to a great start with your child.

Which academic areas should receive the greatest levels of concentration?

Please describe any outside activities your child is involved in currently.

Will these activities interfere with your child's daily academic schedule and homework schedule?

Parent Involvement

Marcus Garvey is a community school. Parents are expected to join us in the adventure of education. There are many avenues by which this can be accomplished. If your child is accepted to the school, in what kind of way would you be interested in participating?

A. During the School Day

- Assist the teachers in the classroom.**

- Share hobbies, interests, collections, or performing arts skills in the classroom.**

- Please specify other _____**

B. Beyond the School Day

- Supply Materials (i.e. furniture, films, paint, equipment, classroom incentive prizes)**

- Services (grounds keeping, painting, carpentry, gardening, decorating, hosting events)**

- Fundraising (working with or forming committees, sending and posting flyers, e-mailing)**

- Other: Please Explain.**

MARCUS GARVEY SCHOOL'S
PARENT/GUARDIAN CONSENT FOR
EMERGENCY MEDICAL OR SURGICAL CARE

I hereby give my consent for Marcus Garvey School to obtain the proper medical care in case of an emergency. The school will make every attempt to notify me or my husband/wife before such action is taken. I agree to accept the expense of such service.

Parent Signature: _____ / Date: _____

Parent Signature: _____ / Date: _____

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Student's Name: _____
Date of Birth: _____

Name: _____
Address: _____
Telephone #: Home () _____ Cell () _____
Email: _____

Additional contact information for other relatives or friends:

Name: _____ Relationship: _____
Address: _____ Telephone: _____
Cell: _____
Email: _____

Name: _____ Relationship: _____
Address: _____ Telephone: _____
Cell: _____
Email: _____

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AUTHORIZATION FORM FOR RELEASE OF STUDENT(S)

I, _____, parent or guardian of
_____, authorize the following people to pick up my
child/children from school on my behalf or in the event of an emergency. I understand that the
authorized people must be 18 years of age or older. If in any instance the person picking up my
child is under age, I understand that my child will not be released from the Marcus Garvey School.

Name: _____	
Address: _____	
Relationship to Child or Parent: _____	
Home Phone: _____	Cell: _____
Business Phone: _____	Email: _____

Name: _____	
Address: _____	
Relationship to Child or Parent: _____	
Home Phone: _____	Cell: _____
Business Phone: _____	Email: _____

Name: _____	
Address: _____	
Relationship to Child or Parent: _____	
Home Phone: _____	Cell: _____
Business Phone: _____	Email: _____

Parent's Signature: _____

Parent's Signature: _____

PARENT COMMITMENT FORM

MANDATORY FUNDRAISING

The Marcus Garvey School greatly appreciates the fundraising efforts that have been made by a portion of our parents in the past. Marcus Garvey Parents are mandated to sign up for intermediate fundraisers or two major fundraisers each year. The total amount of fundraising per semester is \$200.00. The total amount of fundraising per school year is \$400.00. Parents choosing not to participate in mandatory fundraising events shall pay the mandated \$200.00 per semester. This payment is in addition to the tuition and will be added to your Smart Tuition account. The payment will be due to the school no later than the end of the five (5) month fundraising period. Refusal to pay within a timely manner will result in separation from the school. “

MANDATORY VOLUNTEER HOURS

Each family is responsible for volunteering at least **30 hours a year**, 15 hours per semester. Given that the school year begins in September of each year and ends in June of the following year, (10 months) with two additional summer school months of July and August, the following is a schedule for volunteer periods.

First Phase: Volunteers hours are to be completed during the period of **Sept. thru January.**

Parents will be given a statement with the number of hours completed at the end of February. If hours have been completed before this time a statement will be issued at an earlier time.

Second Phase: Volunteers hours are to be completed during the period of **February thru May.**

Parents will be given a statement with the number of hours completed at the end of May. If hours have been completed before this time a statement will be issued at an earlier time. Hours not completed are charged \$10.00 an hour. The balance will be billed to your **Smart Tuition** invoice at the end of your volunteer phase.

It is the **parent's duty** to keep track of volunteer hours. Parents will be provided with a tracking form for their own record keeping. However, this form may not be used as the school's official record keeping form. You will not be reminded about fulfilling your volunteer duties. Parents may choose to pay a \$300.00 fee to the (MGS) Marcus Garvey School Fundraising Fund and not participate in the Parent Volunteerism Program.

Please Sign: _____ Date: _____

Print: _____ Child: _____

Thank You

RELEASE

I irrevocably consent to and authorize the use, publication and reproduction at any time by any media at Marcus Garvey School, or anyone it authorizes, of all photographs taken of me or my child, the minor, or both me and my child, the minor, as the case may be, with or without names, for editorial purpose, promotion, advertising, trade, the Marcus Garvey School website, other purpose.

And I, the minor's parent(s) and/or legal guardian, understand the nature of the activity and the minor's experience and capabilities and believe the minor to be qualified, and in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, and covenant not to sue, Marcus Garvey School/ Fernando Community Arts Center, their administrators, directors, agents, officers, members, volunteers, and employees, other participants, officials, rescue personnel, sponsors, advertisers, owners and leases of Premises on which the activity is conducted, (each of the forgoing shall be considered one of the releases herein) from all liability, claims, demands, losses, or damages on the minor's account caused by, in whole or in part by the negligence of the releases or otherwise, including knowledge negligent rescue operation and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any other releases named above, I will indemnify, save, and hold harmless each of the releases from any litigation expenses, attorney fees, loss liability, damage, or any other cost that may occur as a result of any such claim.

Parent's Signature: #1 _____

Printed Name: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ **Email:** _____

Parent's Signature: #2 _____

Printed Name: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ Email:

How did you learn about Marcus Garvey? (Please be specific)

Parent's Signature: _____

Parent's Signature: _____

Date of Admission: _____

Dear Parent(s),

Thank you for choosing the Marcus Garvey School as a vehicle for your child's continued advancement into a world outside of the family unit you have carefully nurtured. Your child will feel very safe and welcomed in our environment. With prior notice, you are encouraged to observe the activities of your child's day on any given day of the week. We look forward to you becoming an involved parent in that a strong connection between home and school is the ideal ingredient for your child's success. All information revealed will be held confidentially as a purpose for admissions only.

Peacefully Yours,

Linda Saunders
Executive Director
Marcus Garvey School

MARCUS GARVEY SCHOOL

Hours of Operation: 6:30 am - 6:30 pm

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Website -MGSLA.com**