

**EAGLE CHARTER SCHOOLS OF NEVADA**  
**Student Registration**

**SY2024-2025**

<b>Name of Student:</b>					
Student Last Name:		First Name:		Middle Name:	
Date of Birth: MM/DD/YYYY		Grade for SY24-25:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Race</b> <i>(check all that apply)</i> <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Filipino					
<b>Address Information:</b>					
Street:					
City:		State:	Zip code:		
Phone Number:			Email:		
Has the student ever received Special Education Services?				<input type="radio"/> Yes <input type="radio"/> No	
Has the student ever been expelled?				<input type="radio"/> Yes <input type="radio"/> No	
Language: <input type="radio"/> English <input type="radio"/> Spanish <input type="radio"/> Other _____ <input type="radio"/> Other _____					
<b>School History Information</b> <i>(We will require the final report card that indicates the level of completion.)</i>					
School Name:					
Last Grade of Completion:			School Phone Number:		School Registrar:
<b>Parent/Legal Guardian Information:</b>					
<b>Primary Contact:</b>			<b>Secondary Contact:</b>		
Name:			Name:		
Current Address:			Current Address:		
City:		State:	Zip code:		
Is your current living condition temporary? ___Yes ___No			Is your current living condition temporary? ___Yes ___No		
Is it due to economic hardship? ___Yes ___No			Is it due to economic hardship? ___Yes ___No		
Are you active military? ___Yes ___No			Are you active military? ___Yes ___No		
Active Custody Court Order: ___Yes ___No    If yes please provide copy.					
Primary Phone No.		Secondary Phone No.		Primary Phone No.	
Relationship to Student:		Relationship to Student:			
Parent/Guardian E-mail:			Parent/Guardian E-mail:		
I certify that all information is accurate and true to the best of my knowledge.					
Parent/Guardian Signature: _____ Date: _____					
Print Name: _____					



**Eagle Charter Schools of Nevada  
INSTRUCTIONS FOR REGISTRATION**

Please fill out the Registration Form that is attached and provide us with the listed supplemental documents. You can either email the documents, send by TEXT, or deliver them in person to our Registration Office:

**EMAIL:** office@eagleschoolsnv.org  
**OFFICE:** Eagle Charter Schools  
2025 E. Sahara Ave.  
Las Vegas, NV 89104  
**OPEN:** 7:30am- 4:30pm (Monday-Friday) OR By Appointment (Saturday)  
**PHONE:** (702) 550-2876  
**TEXT:** (725) 400-5775

To accept and reserve your student's seat for the 2024-2025 school year, please gather and submit the five (5) listed required documents.

- 1) Attached Registration Application
- 2) Student's Birth Certificate
- 3) Parent/Guardian ID (Driver's License, State Issued, or Passport)
- 4) Immunization Records
- 5) Proof of address (utility bill with service address, lease agreement, car registration)

All required registration documents may be submitted by email, TEXT, or delivered to our Eagle Office located at:

Eagle Charter Schools  
2025 E. Sahara Ave.  
Las Vegas, NV. 89104

**Eagle Charter Schools of Nevada  
INSTRUCCIONES PARA LA INSCRIPCIÓN**

Por favor, rellene el formulario de inscripción que se adjunta y proporciónenos los documentos complementarios enumerados. Puede enviar los documentos por correo electrónico, enviarlos por MENSAJE de texto, o entregarlos en persona a nuestra Oficina de Registración:

**EMAIL:** office@eagleschoolsnv.org  
**OFICINA:** Eagle Charter Schools  
2025 E. Sahara Ave.  
Las Vegas, NV 89104  
**ABIERTO:** 7:30am-4:30pm (lunes-viernes) O con cita previa (sábado)  
**TELÉFONO** (702) 550-2876 (oficina)  
**TEXTO de OFICINA:** (725) 400-5775  
**(Enviar documentos por texto)**

Para aceptar y reservar su asiento de estudiante para el año escolar 2024-2025, reúna y envíe los cinco (5) documentos requeridos enumerados:

- 1) Solicitud de registro adjunta
- 2) Certificado de nacimiento del estudiante
- 3) Identificación del padre / tutor (licencia de conducir, emitida por el estado o pasaporte)
- 4) Registros de vacunación
- 5) Comprobante de domicilio (factura de servicios públicos con dirección de servicio, Contrato de arrendamiento, registro de automóvil)

Todos los documentos de registro requeridos pueden enviarse por correo electrónico, MENSAJE de TEXTO, o entregarse a nuestra Oficina Eagle ubicada en:

Eagle Charter Schools  
2025 E. Sahara Ave.  
Las Vegas, NV. 89104