



Sherman Thomas Charter School 2021-2022 Student Application

Submit completed applications to
101 W. Adell Street, Madera, CA 93638
559-674-1192 ncarranza@mystcs.org or
mrodriguez@mystcs.org

Student Name

First

Last

Student Birthdate ___/___/___

School of Residence _____

Student Siblings:

Student Primary Address

Street

City/Zip

Grade Student will be in for

2021-2022 school year: _____

Parent/Legal Guardian Name

First

Last

Phone Number

Parent/Legal Guardian Email Address (if applicable)

I certify that all of the above information is accurate and this does not guarantee placement at Sherman Thomas Charter School.

Parent/Legal Guardian Signature

Date

For Office Use Only:

App Received by: _____

Date app submitted: _____