

**INTEREST FORM**  
**Proposed Destiny K-8 Public Charter School**

Dear current and potential (SOAR) Destiny K-8 Public Charter School parents and guardians:

Destiny Charter Middle School is requesting authorization to expand grade levels served from 6-8 to K-8 next school year. By submitting this form, you are indicating that you are meaningfully interested in enrolling or re-enrolling (as applicable) your child/children in Destiny K-8's program during the 2019-20 school year, should it be authorized to expand. This form may be used to inform this authorization process by capturing parent interest in the Destiny K-8 school. Should Destiny be authorized to expand to a K-8, it will contact you regarding formal enrollment in February 2019.

**Student & Guardian Information:**

<b>Name:</b> _____ <b>Grade in 2019-20:</b> _____ Last, First, Middle
<b>Home Address:</b> _____ Street City, State Zip
<b>Home Phone:</b> _____ <b>Age:</b> _____ <b>Date of Birth:</b> _____
<b>Current SOAR Charter School student? Y/N (circle one)</b> <b>Resident of Tacoma Public School District? Y/N (circle one)</b> <b>If yes, please list the school within the District your son/daughter would otherwise attend:</b> _____
<b>Name:</b> _____ <b>Grade in 2019-20:</b> _____ Last, First, Middle
<b>Home Address:</b> _____ Street City, State Zip
<b>Home Phone:</b> _____ <b>Age:</b> _____ <b>Date of Birth:</b> _____
<b>Current SOAR Charter School student? Y/N (circle one)</b> <b>Resident of Tacoma Public School District? Y/N (circle one)</b> <b>If yes, please list the school within the District your son/daughter would otherwise attend:</b> _____
<b>Parent/Legal Guardian Information:</b>
<b>Parent/Legal Guardian Name:</b> _____ Last, First, Middle
<b>Home Address:</b> _____ Street City, State Zip
<b>Home Phone:</b> _____ <b>Email:</b> _____

By signing below, I am indicating that I am meaningfully interested in [re-enrolling/enrolling] the above named child(ren) in Destiny K-8 Charter School for the 2019-20 school year, should it be authorized to open. I further understand that this information will be used to inform and support Destiny Charter Middle School's request for authorization and that signing this form does not guarantee enrollment in Destiny.

**Signature of Parent/Legal Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IMPORTANT!! Return by December 20<sup>th</sup>, 2018 in person to the Destiny or SOAR offices at 1301 E. 34<sup>th</sup> St. Tacoma WA 98404.**

**Before officially enrolling my child, my considerations include:**

A large empty rectangular box intended for the user to write their considerations.