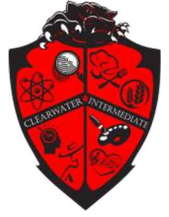




# Clearwater Intermediate

*Ryan Green, Principal*



## ENROLLMENT APPLICATION

Student Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Current School: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Address: \_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip \_\_\_\_\_

Will Need Bus:  Yes  No

SIBLING ATTENDING CIS  YES  No NAME \_\_\_\_\_

ESE:  Yes  No

504:  Yes  No

**For School Administrators:** You must provide a copy of the student's IEP when applicable. All other Portal information will be obtained by Clearwater Intermediate.

For Office Use Only: Date Application Received: _____	Application Approved by: _____
Date _____	Orientation Date/Time: _____ Referring School Notified: Date _____
_____ Application Declined _____	

1220 Palmetto St. Clearwater, FL 33755  
Phone: 727-298-1616 Fax: 727-469-4189

The School Board of Pinellas County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, sexual orientation or disability in any of its programs, services or activities.

Pinellas County Schools  
www.pinellas.k12.fl.us

<https://www.pcsb.org/clearwater-ms>