

2024/2025 ADMISSIONS GUIDELINES (Grades K-8)

- Robert Frost Public Charter School is a tuition free, public school for students residing in NH.
- Beginning in January, RFPCS will be accepting applications for children in grades K through 8, for the 2024/2025 school year.
- All NH applicants will be eligible for the mixed-age classroom that corresponds with their age as of September 30, 2024.

Age requirements are as follows: (*As of September 30, 2024)

Kindergarten – 5 years of age*	5th grade – 10 years of age*
1 st grade – 6 years of age*	6th grade - 11 years of age *
2 nd grade - 7 years of age*	7th grade - 12 years of age but not older than 13 years of age*
3 rd grade - 8 years of age*	8 th grade – 13 years of age but not older than 14 years of age*
4 th grade – 9 years of age*	

Please follow these steps to ensure your initial application is complete and ready for processing:

- 1. Parent/guardian must sign the "Admission Guidelines."
- 2. Complete and sign the "Student Enrollment Application Form."
 - Please complete and submit a separate application for each child that you wish to enter the lottery.
 - Please complete and include all pages of the application packet.
 - Please print clearly. Any incomplete applications will be returned.

3. PLEASE MAIL APPLICATION PACKET TO:

Robert Frost Public Charter School | BOX 1038 | Conway, NH | 03818

Lottery: If there are more applications than there are available places, by NH law, a lottery will occur.

Lottery Guidelines:

- **Applicants**: All names of students who have submitted completed applications will be given a lottery number
- **Drawing**: As a student's lottery number is drawn, the student will be admitted or placed on a waiting list, according to the criteria outlined above.
- **Siblings of Currently Enrolled Students.** Siblings of currently enrolled students, who have completed applications during the open enrollment period, will be placed in a class prior to the lottery. If there are more siblings of currently enrolled students applying than there are available places, siblings will be placed on the sibling wait list in the order of initial family enrollment date.
- Admitted Students: If a student's number is drawn and they meet the requirements outlined above, he or she is conditionally admitted to RFPCS. Parents of admitted students will receive enrollment paperwork and are expected to attend an orientation.
- **Siblings of admitted students**: When a student is admitted, siblings' names are automatically drawn. If there is space, siblings are admitted as well. If not, they will be placed on a waitlist.
- Waitlisted Students: When all available spaces are filled, the student will be placed on a waitlist in the order that his or her name was drawn. If an opening occurs in a given grade, students on the wait list will be contacted according to their order on the waitlist.
- **Students who apply to RFPCS after the lottery date** will be conditionally admitted only if space is available and they meet the appropriate requirements outlined above. If space is not available, they will be placed on the waitlist in the order that their completed application is received.
- Confirmation of receipt of applications will be sent by email if provided. Please ensure the email address you provide is current and legible on the application.

If RFPCS receives more applications than available student slots, by law, a random public lottery will be held in March. The date will be announced to all applicants.

If Applications do not exceed availability by the end of the enrollment period and a student meets the criteria outlined above, he or she is conditionally admitted to RFPCS. Students who choose to attend RFPCS must *fully complete and submit the Conditional Student Enrollment Package within 14 days of notification.* Students who do not submit a complete enrollment package within the designated period will be withdrawn from the accepted enrollment list and must re-apply if they wish to attend RFPCS.

Parent/Guardian Signature:	Date:
Student's Name:	Grade applying for:

I have read the above requirements for enrollment to the Robert Frost Public Charter School. By signing this document, I am acknowledging that I understand the requirements for enrolling my child in the Robert Frost

Public Charter School. I also acknowledge that I have the full legal right to enroll my child.

Non-Discrimination Policy: Robert Frost Public Charter School does not discriminate on the basis of age, race, color, religion, national origin, sex, sexual orientation, marital status, familial status, physical or mental disability, political affiliation, nor in employment, enrollment policies or the administration or operation or access to its programs.



2024/2025 Student Enrollment Application Form

APPLICATION DEADLINE:

Completed application packet (Enrollment Application and Admission Guidelines) must be sent by US Mail. Applications must be postmarked by **March 1, 2024.**

PLEASE MAIL APPLICATION PACKET TO:

Robert Frost Public Charter School | BOX 1038 | Conway, NH | 03818

Male Female	Date of Birth:/	Age as of 09/30	/2024:	
First Name:		_		
Physical Address:				
City/Town:	New H	Hampshire Zip Code: _		
Telephone: ()				
PARENT/GUARDIAN INFORMA	TION			
Parent/Guardian Name:	Relationshi	p to student:		
Mailing Address (if different from ab	ove):		State	Zip
Email Address:				
Cell Phone#:	Work Phone#:			
Parent/Guardian Name:	Relationsh	ip to student:		
Mailing Address (if different from ab	ove):		State	Zip
Email Address:	·	1ain Telephone:		•
Cell Phone#:	Work Phone#:			
SCHOOLING INFORMATION Please list all schools (including he Check here if child has <u>not yet</u> at	_	s attended.		
Current School:				
City/State:	Dates	S Attended:		
Previous School:				
City/State [.]	Dates	s Attended:		

SIBLING INFORMATION Please list the names and entering grades for a	any siblings currently enrolled in the RFPCS.			
Sibling Name:	Grade:			
Sibling Name:	Grade:			
Please list the names and entering grades for a	any siblings being enrolled in the RFPCS for 2024/2025.			
Sibling Name:	Grade entering in Sept 2024:			
Sibling Name:	Grade entering in Sept 2024:			
Sibling Name:	Grade entering in Sept 2024:			
DECLARATION OF TRUTH 1. I attest that I am the legal guardian for this child and if my child is able to attend RFPCS, I will participate in the RFPCS plan for academic expectations and parent involvement. 2. I am submitting my child's name into the <i>Robert Frost Public Charter School</i> Admissions Lottery. 3. I understand that submitting this application packet does not guarantee admission to the <i>Robert Frost Public Charter School</i> . 4. I understand that per NH Statutes and Rules, RFPCS is required to keep accurate records for all potential students. This application will become part of my child's permanent cumulative record. 5. I understand that should my child be offered a place at the <i>Robert Frost Public Charter School</i> , I must provide a completed Conditional Student Enrollment packet including a health form, birth certificate and proof of residency, as required by the State of New Hampshire.				
-	Date:			
Printed Parent/Guardian Name:				
Parent/Guardian Signature:	Date:			
Printed Parent/Guardian Name:				

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Student Name	Grade
NOTICE OF RESIDENCY REQUIREMENT	
resident of New Hampshire in accordance with N	he Robert Frost Public Charter School, he/she must be a legal New Hampshire RSA:194-B:11. Failure to comply with this all action to recover tuition costs for the student attendance.
I have read the above statement and attest that m	y son/daughter is a legal resident of New Hampshire.
Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

For RFPCS Use Only			
Date Rec'd:	Rec'd by:	Date of Email Acknowledge	ment:
Grade: K $_{\square}$ 1 $_{\square}$ 2 $_{\square}$ 3 $_{\square}$ 4 $_{\square}$	50 60 7080 Lottery#:	S1ot #;	Wait List #:
Offer Date:	Offered By:	Via Phone: o Via	Letter: 🗆
Accepted Date:	Declined Date:	By whom:	
Start Date:		Date Enrollment Pac	cket Sent: