

APPLICATION FOR ADMISSION
The Gladys H. Oberle School
404 Willis Street P.O. Box 801
Fredericksburg, VA 22404
2019-2020

STUDENT NAME:	DATE:
PARENT:	PHONE:
ADDRESS:	E-MAIL:
HANDICAPPING CONDITION:	BASE SCHOOL:
BIRTHDATE:	GENDER:
AGE:	GRADE:
CONTACT PERSON:	ETHNICITY:
CONTACT E-MAIL:	CONTACT PHONE:
FUNDING SOURCE:	CONTACT FAX:
INVOICING ADDRESS:	

To be considered for acceptance, the following records must be provided with this application form.

Copy of Current IEP including Addendums

Copy of Latest Eligibility Documents

Minutes

Psychological Report

Educational Report

Sociocultural Report

Medical Report

Copy of Up-To-Date Student Transcript

Current Report Card

Academic & Career Plan

Copy of Student Attendance (Year to Date)

Copy of Student Discipline Record (Including Year to Date Suspensions and Reasons for Suspensions)

SOL Testing Results

Copy of Physician's Certificate (Physical) with Doctor's Signature

Up-To-Date Immunization (Shot) Record which includes TDAP booster