



DISTRICT USE ONLY		

JONESBORO PUBLIC SCHOOLS

2022-2023 Elementary Magnet School Application

This application must be filled out completely and correctly by a parent with custodial authority or by a legal guardian. Incomplete applications or inaccurate information may result in this application not being processed.

Please use legal names. Please do not use nicknames.

Applications will be accepted on a first come; first serve basis. Placement is based upon availability.

Student Name | | | | | | | | | | | | | | | | | | | | | |
Last Name First Name Middle Name

Date of Birth | | | | | | | | **Age** | | | **Gender** ☐ Female ☐ Male

Race ☐ Black or African American ☐ American Indian or Alaskan Native ☐ Asian
☐ White ☐ Hispanic ☐ Native Hawaiian or Pacific Islander ☐ Two or More Races

Parent or Guardian Name | | | | | | | | | | | | | | | | | | | | | |

Home Address | | | | | | | | | | | | | | | | | | | | | |
Street
| | | | | | | | | | | | | | | | | | | | | |
City State Zip

Mailing Address | | | | | | | | | | | | | | | | | | | | | |
(if different) Street
| | | | | | | | | | | | | | | | | | | | | |
City State Zip

Telephone Numbers (| | | |) | | | | - | | | | | (| | | |) | | | | - | | | | |
Home Cell

E-mail | | | | | | | | | | | | | | | | | | | | | |

Current/Last School Attended | | | | | | | | | | | | | | | | | | | | | |

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****Does this student currently receive any of the following services?**** Yes_____ No_____

Please check those that apply: Speech _____ Self -Contained Classroom _____
Resource _____ Mental Health Services _____
Physical Therapy _____ Occupational Therapy _____

*** This info is NOT for placement purposes. It is used to assure children receive appropriate services upon placement.

Grade level information (i.e.: K, 1st, 2nd, etc.)

<u>Grade Level</u>		<u>Grade Level</u>	
2021-2022		2022-2023	
School Year		School Year	

Please select your desired Magnet School preference: write the number 1 in the box by your first choice, 2 by your second choice and 3 by your third choice, etc.

****Placement is based on availability****

	Health, Wellness & Environmental Studies	1001 Rosemond Ave.
	International Studies	1218 Cobb St.
	Math and Science	213 E. Thomas Green Rd.
	MicroSociety	1110 W. Washington Ave.
	Visual and Performing Arts	1804 Hillcrest Dr.

Does this student have a brother or sister *currently attending* a JPS magnet school? Yes____ No____

If “Yes”, please provide sibling name _____

Current JPS Magnet School _____ Current grade_____

NOTICE: This form only registers ONE student. If registering multiple children, you must submit a separate application for EACH student.

I am the parent or legal guardian of this child. I am applying for placement of my child at the magnet school indicated above. I understand that the information provided by me on this application will be checked for accuracy and that false information will disqualify the applicant.

**Parent or
Legal Guardian**

Signature_____ **Date**_____

**Notification letter of placement will be mailed in May to the address on file with JPS.
Please verify the information on file is correct.**