

GATE Seminar Program Intent to Enroll

For the _____school year

- If your child's current school has a Seminar Program complete this form, attach the GATE assessment form which states that your child was recommended for GATE Seminar, and submit to the school office. Requests will not be processed without the child's GATE Assessment Report. If you are submitting this to your child's current school you do not need to submit this form to gate@sandi.net.
- Make a copy of your student's Seminar Intent to Enroll form and GATE Assessment Report for your records.
- *If there is not a seminar program in your school of attendance high school feeder please submit your "Intent to Enroll" form and GATE assessment form to gate@sandi.net. Requests will not be processed without the child's GATE Assessment Report

Important: All applications must be submitted to gate@sandi.net prior to the last day of student attendance to be placed in a Seminar Program.

Student's name:	dent's name:		Birthdate:	
	Last	First		
Name of parent/gua	rdian:			
Daytime phone:		e-mail:		
Home address:				
City:		State:	Zip code:	
Present school				
of attendance:			Present grade:	
School and grade le	vel at which you	will register:		
C	, and the second	School	Grade	
Has your child participated in a seminar program before? (Check one)				
		(If yes, most rece	ent grade level:)	
Parent's signature:		I	Date:	
Student's signature:				