

**Brashier Middle College Charter High School
9th Grade Lottery Application
2019-2020**

Student Name (please print) _____

Parent Name (please print) _____

Parents: Circle the letter that reflects your student's status.

- A. This student is currently enrolled in a school within the Greenville County school district.
(This includes charter schools.)**

School Name: _____

- B. This student is not currently enrolled in a Greenville County school (this includes students attending private school and/or home-schooled students).**

School/Cooperative: _____

- C. This student is enrolled in a public school other than a Greenville County school.**

County: _____ State: _____

The parent of the applicant should complete this two page basic application. It must be signed by the parent or guardian. ***Parents are responsible for submitting this two page required application between October 1, 2018 and November 2, 2018. The deadline for qualification for the lottery is November 2, 2018 no later than 3:00 p.m.*** The lottery will be held November 13, 2018 at 4:30. Applications are accepted at the main office of **BMCCHS** on the Greenville Technical College **Brashier** campus, 1830 West Georgia Road, BLD 203, Simpsonville, during normal school hours 8:00-3:45, *email to info@brashiermiddlecollege.org or mail to:

***Brashier Middle College Charter High School
1830 West Georgia Rd
Building 203
Simpsonville, SC 29680***

***Office - 864-757-1800
Fax- 864-757-1850
Email: info@brashiermiddlecollege.org***

***If you choose to fax, email or use US mail for your student's application, it is your responsibility to confirm the receipt of this application.**

Equal Education Opportunity: No student shall be denied equal opportunity for admission on the basis of race, sex, color, religion, disability, or national origin.

Student Signature: _____

Parent Signature: _____

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PLEASE PRINT CLEARLY

STUDENT NAME: (as it appears on birth certificate and report card)

First: _____ Middle: _____ Last: _____

Date of Birth (Month/Day/Year): _____

Street Address: _____

City & State _____ Zip: _____

STUDENT INFORMATION

Schools(s) Attended for previous year: _____

Ethnicity: (Check what applies)

- American Indian or Alaska Native
 Black or African American
 White

- Asian
 Native Hawaiian or other Pacific Islander
 Other _____

Gender: _____ F _____ M

How did you learn about BMC? _____

PARENT/LEGAL GUARDIAN INFORMATION

Father's First Name: _____ Middle: _____ Last: _____

Father's Home Phone: _____ Work Phone: _____ Cell Phone: _____

Father's E-mail: _____

Father's Street Address if different from above: _____

City & State: _____ Zip: _____

Mother's First Name: _____ Middle: _____ Last: _____

Mother's Home Phone: _____ Work Phone: _____ Cell Phone: _____

Mother's E-mail: _____

Mother's Street Address if different from above: _____

City & State: _____ Zip: _____

***Please indicate "Parent/Legal Guardian" preferred email and phone number.**