



Student Application

Student's Legal Name:

Last Name

First Name

Name child goes by if not first name

Name(s) of Parent(s)/Guardian(s) with whom the student lives:

Relationship:

Residency:

- Currently a resident of Jackson County
- Will be a resident of Jackson County prior to 22-23 School Year (this may delay official acceptance/enrollment)

Home Address (911 Address):

House Number & Street

City

State

Zip Code

Mailing Address:

- Same as Above

House Number & Street

City

State

Zip Code

Parent/Guardian Email:

Primary -

Secondary -

Parent/Guardian Phone Number:

Parent/Guardian 1 ()

Area Code

Alternate ()

Area Code

Parent/Guardian 2 ()

Area Code

Alternate ()

Area Code

Grade for the current or most recently completed school year (2021-22):

- 5th Grade
- 6th Grade
- 7th Grade



Student Application

School Currently Attending:

- Cullowhee Valley School
- Fairview School
- Scotts Creek School
- Smokey Mountain Elementary School
- Blue Ridge School
- Mountain Discovery Charter School
- Summit Charter School
- Homeschool
- Other _____

Recommendation:

The Catamount School also requests the family obtain from a teacher, administrator, or other involved adult (who is not a relative) a recommendation explaining why the Catamount School is a good fit for the student. Please indicate below the name of a teacher, coach, or youth leader your child has been involved with most recently and will be writing the letter or completing the referral form available on the web site.

Name Contact number or email

Why do you think your child is a good candidate for The Catamount School? 250 words or less
(Feel free to attach another sheet, if needed)

In order to finalize this application, a letter of recommendation from a teacher, administrator, or a non-related adult and a signed Academic Records Waiver form must be turned into the main Catamount School office in Smoky Mountain High School. No application will be considered without the waiver of records and a letter of recommendation from a teacher, administrator, or a non-related adult. Officials from the Catamount School will be in contact with you once the application is final.

If mailing application, please address to: The Catamount School 100 Smoky Mountain Dr. Sylva, NC 28779	Scanned copy can be emailed to: akarup@wcu.edu
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