



ACCELERATED INTERDISCIPLINARY INTERMEDIATE ACADEMY

“ The school where every challenge becomes a mission accomplished. ”

P.O. Box 20589 Houston, TX 77225-0589
Telephone: (713) 283-6298 Fax: (713) 283-6190
School Hours: Mon. thru Thurs. 8am-5pm, Fri 8 am -2pm

Application for Admissions

School Year 2019-2020

Parent's/Guardian's Information Responsibility

I hereby affirm that I will only provide true, correct and current information on this form, and that it is my responsibility to notify the school of any change to this set of information.

Signature of parent/guardian

Date

Student Information

First Name:	Middle Name:	Last Name:	Grade Level:
Birth Date (mm/dd/yyyy)			
Does the student have a documented history of discipline, history of criminal offense, or have been adjudicated through the juvenile justice system? Please check Yes or No			
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Parent's/Guardian's Information

Prefix:	First Name:	Middle Name:	Last Name:	
Address		City	State	Zip Code
Home Phone		Email Address		
Cell Phone				