

Union Street Charter

Wait List Application 2025-26

Return to School Office (email, mail or deliver to office drop box)

Name of Student: _____ **Grade for Fall 2025:** _____

Age of Student: _____ Birth Date: _____

Present School & Grade: _____

Name of Parent: _____

Physical Address & Zip: _____

Mailing Address if different from above: _____

Home Phone: _____ Work Phone: _____

Cell/Other Phone: _____ Email: _____

Name of Parent: _____

Physical Address & Zip: _____

Mailing Address if different from above: _____

Home Phone: _____ Work Phone: _____

Cell/Other Phone: _____ Email: _____

Please check any of the following that apply to you:

- ☐ This student is the child of a Union Street Charter employee.
- ☐ This student has a sibling in Union Street Charter.
- ☐ I live in the Arcata School District. Please use the district locator tool to determine your school district at <https://hcoe.org/district-locator/>

Signed: _____ Date: _____