

Hamilton Community School Corporation 903 S. Wayne Street Hamilton, IN 46742

Phone: (206) 488-2101 Fax: (260) 488-3634

Notice of Enrollment

Student Name					
Student First Name:					
Student Grade Level:					
Home Address:					
Address Line 1:			Please enter your home/landline		
Address Line 2:			phone number:		
Unit/Apt#:			Is this number	Yes	No
			a mobile or cell		
My stude	ent will return to face to	race instruction at Har	milton Community Sci	100IS.	
My stude	ent will enroll in alternati	ve education delivery	through Hamilton Co	mmunity	Schools.
Mv student has interne	et access at home.	Yes No)		
Please provide transp	ortation for my student	during the 2020-21 sc	hool year:Y	es	No
	rill be the primary pick u y office at 260-488-210	-	_		e made, please
Parent / Guardian Sig	nature:		Date:		