

MASCOTTE CHARTER SCHOOL

Tiffany Mayhugh-Rego, Principal Radean Johnson, Assistant Principal

460 Midway Avenue Mascotte, FL 34753 P. 352-429-2294 F. 352-429-4836

Dear Parent(s)/ Guardian(s):

As we begin preparation for the 2020-21 school year, we want to express our deepest appreciation for choosing Mascotte Charter School as your school choice for educating your child/children. Mascotte Charter School has an amazing group of parents whose dedication has helped students succeed. To help us plan for enrollment for the upcoming school year we need parents to complete the "Intent to Return" (form below). We will have a certain number of spots available per grade to meet class size, resulting in a maximum amount of students per class, and grade level. This Intent to Return Form indicates that you have a current student who plans on returning to Mascotte Charter School. Students with attendance and/or discipline concerns may not be re-enrolled in Mascotte Charter School. Please fill out the form below and return to your child's teacher by Friday, January 24, 2020. Failure to return by the deadline may result in your child not having a spot for the 2020-2021 school year. Please fill out a separate form for each child returning to Mascotte Charter School for the 2020-21 school year.

Student's Last Name:	First Name:
	Grade for 2020-21 School Year:
	g for the 2020-21 school year.
	rning for the 2020-21 school year.
Does your child have a sib	ling(s) already attending the school? Y/N
Sibling(s) Name /Grade	
1	/ Grade for the 2020-2021 School Year:
2	/ Grade for the 2020-2021 School Year:
3	/ Grade for the 2020-2021 School Year:
Parent Signature:	Date:
Printed Name:	Relationship to Student:
Address:	
Home Phone:	Work/Cell Phone:
Email:	
—For Office Use Only—	
Date Received	Time Received
	Attendance Denied
Student Conduct Accepted	d Student Conduct Denied

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