

LAUSD – Zones of Choice Office FREMONT ZONE OF CHOICE

2024 - 2025 HIGH SCHOOL APPLICATION

TEL: (213) 241-0466 – WEB: <u>LAUSD.ORG/ZOC</u>



Fax or Email completed application to:

Zones of Choice Office (213) 241-4108 | zoc@lausd.net

Date

Please complete <u>ALL</u> sections and <u>PRINT CLEARLY</u> . Incomplete application	ons may not be processed.				
Last School AttendedSchool District					
	What country if outside of USA?				
Type of School Charter Home Schooling Private					
(check one) Other	9 th	☐ 10 th	11th	12 th	
Student Name Last name	First name	Male	Female	Non-binary	
Date of Birth MonthDayYear Parent / Lega	I Guardian Name				
Home Address					
Street name and number, include apartment #	City			Zip Code	
· · ·	rnate Telephone No.				
Email:	Is the student a foster child ls the student homeless?		Yes Yes	No No	
Does the student receive Special Education services (has an IEP)? Attac			Yes	No	
If student has a sibling enrolled at one of the schools below, would you			Yes	No	
If yes, name of school	If yes, name of school Grade Level				
Sibling's Name	Date of Birth Month	Day	Year		
SCHOOL SELECTION IN ORD	ER OF PREFERENCE				
INSTRUCTIONS: Please select schools in order of preference using number. EXAMPLE: #1 = first choice		ble option box	should conta	ain a	
For additional information, visit web LAUSD.ORG/ZOC and read the Fremont Zor		lete details abou	it each of the	schools.	
Option # School Name					
(1 - 8) School Name	Campus Location		Type of School		
Academy for Multilingual Arts and Sciences	Mervyn M. Dymally High Sch		ehensive		
Communications and Technology School	Diego Rivera Learning Comp		Pilot School		
Green Design STEAM Academy	Diego Rivera Learning Comp	lex Pilot So	Pilot School		
Medical Science Academy	John C. Fremont High School	Small L	Small Learning Community		
Performing Arts Community School	Diego Rivera Learning Comp	lex Pilot So	Pilot School		
Public Service Community School	Diego Rivera Learning Comp	lex Pilot So	Pilot School		
School of Global Media Arts	John C. Fremont High School	Small L	Small Learning Community		

IMPORTANT NOTE: Once a student has been assigned to a school and received confirmation from the Zones of Choice Office, the parent / legal guardian must go to the school to complete enrollment.

Parent / Legal Guardian Signature

School Use ONLY
School Name:
Date Faxed: