

Application for Enrollment

Highlands Community Learning Center

5120 Godown Road
Columbus, Ohio 423220

Phone: 614-210-0830

Fax: 614-210-7201

Student Name: _____ Parent Contact Name: _____

Student Current Grade Level: _____ School Currently Attending: _____

Email: _____ Phone: _____

Instructions:

In order to begin the enrollment process Highlands Community Learning Center needs the following information:

1. A completed Jon Peterson Funding Application
2. A completed Autism Student Funding Application (If you child has been diagnosed with Autism)
3. A current copy of the child's IEP
4. A current copy of the child's ETR
5. A copy of the child's birth certificate
6. A proof of address (this can be a copy of an electric bill, gas bill, or water bill)

If you have any questions please call the school at 614-210-7201