



PETITION AND INTENT TO ENROLL

As a member of the community where Moving Everest School intends to open a public charter school, I am signing this petition to affirm that I have read Moving Everest's mission and agree that there is an urgent need for this school in our community and would like to see Moving Everest open a public charter school in the fall of 2019.

Mission: The mission of Moving Everest Charter School is to create a school that dramatically transforms the lives of K-8 students and prepares them for success in college and in life through: the delivery of a rigorous and personalized academic program, a focus on holistic education and the development of strong character.

Core Principles:

- Student-centered, personalized learning
- Culture of high expectations
- Self-pacing and mastery-based instruction
- Blended instructional model
- Data-driven instruction
- Student-ownership
- Focus on reading
- Character development
- Social and emotional needs
- Partnership with an afterschool provider

PETITION SIGNATURE

Full Name: <u>DELOS CAEON WINDSEY</u>		
Address: [REDACTED]		
Street	[REDACTED]	Apartment No
City	State	Zip Code
[REDACTED]		
Phone: [REDACTED]	Email: [REDACTED]	

Signature

Date

ENROLLMENT

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Child's Information:

Your Child's Full Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> Pre-K
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> Pre-K
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		



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PETITION SIGNATURE

Full Name: Katerina Jordan			
Address: [Redacted]			
Street		Apartment No	
City		State	Zip Code
Phone: [Redacted]		Email:	

[Redacted Signature]
Signature

9-17-18
Date

ENROLLMENT

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Your Child's Full Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> Pre-K
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> Pre-K
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
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**MOVING
EVEREST**
CHARTER
SCHOOL

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PETITION SIGNATURE

Full Name: <u>Cassandra Shofu</u>		
Address: [Redacted]		
Street		Apartment No
City		State
City		Zip Code
Phone: [Redacted]	Email: [Redacted]	
[Redacted Signature]		<u>9-17-18</u> Date

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Child's Information:

Your Child's Full Name: [Redacted]		
Current Age/Grade:	<input checked="" type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old
	<input type="checkbox"/> Pre-K	
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?
	<input type="checkbox"/> No	

Second Child's information:

Full Student Name:		
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old
	<input type="checkbox"/> Pre-K	
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?
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PETITION SIGNATURE

Full Name: <u>Rosa Gonzalez</u>	
Address: <u>[Redacted]</u>	
<u>[Redacted]</u> Street	<u>[Redacted]</u> Apartment No
<u>[Redacted]</u> City	<u>[Redacted]</u> State <u>[Redacted]</u> Zip Code
Phone: <u>[Redacted]</u>	Email: <u>[Redacted]</u>

[Redacted Signature]
Signature

8-2-18
Date

ENROLLMENT

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Child's Information:

Your Child's Full Name: <u>[Redacted]</u>

Second Child's information:

Full Student Name: <u>[Redacted]</u>			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> Pre-K
Currently enrolled in daycare or preschool: <input type="checkbox"/> Yes	If yes, what daycare or preschool?		
<input type="checkbox"/> No			



**MOVING
EVEREST
SMARTER
SCHOOL**

PETICIÓN E INTENCIÓN DE INSCRIBIRSE

Como miembro de la comunidad donde Moving Everest School tiene la intención de abrir una escuela pública autónoma, estoy firmando esta petición para afirmar que he leído la misión Moving Everest y estoy de acuerdo en que hay una necesidad urgente de esta escuela en nuestra comunidad y me gustaría ver Moving Everest abrirá una escuela charter pública en el otoño de 2019.

Mission: Nos comprometemos a ser una escuela que transforma radicalmente las vidas de los estudiantes de K-8 y los prepara para el éxito en la universidad y en la vida a través de: la entrega de un programa académico riguroso y personalizado, un enfoque en la educación holística y el desarrollo de carácter fuerte

Principios Centrales:

- Aprendizaje personalizado centrado en el estudiante
- Cultura de altas expectativas
- Instrucción basada en dominio propio y autoaplicable
- Modelo de instrucción combinado
- Instrucción basada en datos
- Propiedad del estudiante
- Centrarse en la lectura
- Desarrollo de personaje
- Necesidades sociales y emocionales
- Asociación con un proveedor después de la escuela

FIRMA DE LA PETICIÓN

Nombre Completo: <i>Maria Moreno</i>		
Dirección: [Redacted]		
Calle	Número	
Ciudad	Estado	código postal
[Redacted]		
Teléfono: [Redacted]	Correo Electrónico: [Redacted]	

[Redacted Signature]

Firma

9-1-18

Fecha

INSCRIPCIÓN Este formulario muestra interés en que su hijo asista a Moving Everest School. Estamos planeando abrir en el otoño de 2019 para Kindergarten y primero grado. Completar este formulario no requiere que su hijo asista al Moving Everest. El formulario tampoco garantiza la admisión. Con la aprobación de la escuela, nos contactaremos con usted para comenzar un proceso de solicitud.

Información del niño/a

Nombre completo del niño/a			
Cuántos años tiene de niño/a	<input type="checkbox"/> 3 años	<input type="checkbox"/> 4 años	<input type="checkbox"/> 5 años
Actualmente inscrito en la guardería o preescolar:	En caso afirmativo, ¿qué guardería o preescolar?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Información del segundo niño

Nombre completo del niño/a			
Cuántos años tiene de niño/a	<input type="checkbox"/> 3 años	<input type="checkbox"/> 4 años	<input type="checkbox"/> 5 años
Actualmente inscrito en la guardería o preescolar:	En caso afirmativo, ¿qué guardería o preescolar?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			



PETICIÓN E INTENCIÓN DE INSCRIBIRSE

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- Necesidades sociales y emocionales
- Asociación con un proveedor después de la escuela

FIRMA DE LA PETICIÓN

Nombre Completo: <i>Dora DeLeon</i>	
Dirección:	[Redacted]
	<i>Calle</i> [Redacted] <i>Número</i> [Redacted]
	<i>Ciudad</i> [Redacted] <i>Estado</i> [Redacted] <i>código postal</i> [Redacted]
Teléfono:	[Redacted]
Correo Electrónico:	[Redacted]

[Redacted Signature]

Firma

8/9/19
Fecha

INSCRIPCIÓN

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Información del niño/a

Nombre completo del niño/a			
Cuántos años tiene de niño/a	<input type="checkbox"/> 3 años	<input type="checkbox"/> 4 años	<input type="checkbox"/> 5 años
Actualmente inscrito en la guardería o preescolar:	En caso afirmativo, ¿qué guardería o preescolar?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Información del segundo niño

Nombre completo del niño/a			
Cuántos años tiene de niño/a	<input type="checkbox"/> 3 años	<input type="checkbox"/> 4 años	<input type="checkbox"/> 5 años
Actualmente inscrito en la guardería o preescolar:	En caso afirmativo, ¿qué guardería o preescolar?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			



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PETITION SIGNATURE

Full Name: Leticia Rosas	
Address: [Redacted] [Redacted] [Redacted] City State Zip Code	
Phone: [Redacted]	Email: [Redacted]
Signature [Redacted]	Date 09-01-18

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Your Child's Full Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
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PETITION SIGNATURE

Full Name: Veronica Huerta		
Address: [Redacted]		
Street		Apartment No
[Redacted]	[Redacted]	[Redacted]
City	State	Zip Code
Phone: [Redacted]	Email: [Redacted]	
[Redacted]	08-01-18	
Signature	Date	

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Child's Information:

Your Child's Full Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
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PETITION SIGNATURE

Full Name: <i>Minnie Jordan</i>		
Address: [Redacted]		
[Redacted]		
City	State	Zip Code
Phone:	Email:	
[Redacted]	[Redacted]	
Signature	Date: <i>8-29-2018</i>	

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Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
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PETITION SIGNATURE

Full Name: <u>Isacahyn Schreter</u>	
Address: [Redacted]	
[Redacted] Street	Apartment No. [Redacted]
[Redacted] City	[Redacted] State [Redacted] Zip Code
Phone: [Redacted]	Email: [Redacted]
[Redacted] Signature	Date: <u>9/8/2019</u>

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Currently enrolled in daycare or preschool:	<input type="checkbox"/> Yes	If yes, what daycare or preschool?	
	<input type="checkbox"/> No		

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
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PETITION SIGNATURE

Full Name: <u>CORA TERRY</u>	
Address: <u>[REDACTED]</u>	
Street	Apartment No
City	State
[REDACTED]	
Zip Code	
Phone: <u>[REDACTED]</u>	Email: <u>[REDACTED]</u>
<u>[REDACTED]</u>	<u>9-8-2018</u>
Signature	Date

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Second Child's information:

Full Student Name:			
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PETITION SIGNATURE

Full Name:	Anzella Ware		
Address:	[Redacted]		
	[Redacted]	[Redacted]	[Redacted]
	City	State	Zip Code
Phone:	[Redacted]	Email:	[Redacted]
Signature	[Redacted]		Date

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Currently enrolled in daycare or preschool: <input type="checkbox"/> Yes		If yes, what daycare or preschool?	
<input type="checkbox"/> No			

Second Child's information:

Full Student Name:			
Current Age/Grade:	<input type="checkbox"/> 3 yrs old	<input type="checkbox"/> 4 yrs old	<input type="checkbox"/> 5 yrs old
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