



For office use only:

Enrollment Interest Form

Thank you for your interest in joining the GES Learning Community! Please download form this fillable form and complete one form per student.

Completed forms should be emailed to learn@greatexpectationsschool.com OR printed and mailed/hand delivered to Great Expectations School, 550 E 5th St, PO Box 310, Grand Marais, MN 55604. Incomplete applications will not be processed.

Once you have been notified of an opening for your student(s), you will receive an enrollment packet.

Student Name:

Date of Application:

Student Grade at Entry:

Entry Date Desired:

Note: For kindergarten entry, student must be age 5 **before** September 1st. Please contact the school regarding exceptions.

Parent / Guardian Contact Information:

Name(s):

Relationship to Student:

Address: (mailing):

Address: (physical):

Primary Phone:

Preferred Email:

To the best of my knowledge, the information on this application is true and complete:

Signed:

Date: