



Excelsior School (eCampus) Enrollment Form

41 W Santa Clara St.
Arcadia, CA. 91007
Tel: (626) 623-6339
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Email: admissions@excelsioreCampus.com

Student Information					
First Name		Middle Name		Last Name	
Street Address			Date of Birth	Grade	Gender
City	State	Zip		Home Phone Number	
E-mail			Cell Phone Number		
Mother/Guardian Information					
First Name		Last Name		Home Phone Number	
Street Address (if different from student)			Cell Phone Number		
City	State	Zip		E-mail	
Father/Guardian Information					
First Name		Last Name		Home Phone Number	
Street Address (if different from student)			Cell Phone Number		
City	State	Zip		E-mail	
Previous School Information					
School Name			School Phone Number		
Street Address			School Fax Number		
City	State	Zip		Counselor/Advisor Name	
School Name			School Phone Number		
Street Address			School Fax Number		
City	State	Zip		Counselor/Advisor Name	
School Name			School Phone Number		
Street Address			School Fax Number		
City	State	Zip		Counselor/Advisor Name	
Academic Goals					
My academic plan is to: <input type="radio"/> Graduate through Excelsior School <input type="radio"/> Transfer credits to my current school <input type="radio"/> I'm not sure			My post high school plans are: <input type="radio"/> College/University <input type="radio"/> Workforce <input type="radio"/> Military <input type="radio"/> Other		
Do you have an Individualized Education Plan? <input type="radio"/> Yes (if yes, then please attach) <input type="radio"/> No					