



Extended Day Programs 2018-19  
At Seattle World School  
**Application Form**



Today's Date: ዕለት

ናይ ተማሃራይ ሓበሬታ

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
ወርሒ.(Month) ዕለት.(Day) ዓመት (Year)

<b>Student's Name: ሽም ተማሃራይ</b> _____ (Last Name) መጨረሻ (First Name) መጀመርታ (Middle Initial) ማእከል		<b>Grade: ክፍሊ</b> _____	<b>Gender: ጾታ</b> _____
<b>Address: አድራሻ</b> _____ (Street Address) ጎዳና አድራሻ (City/State/Zip Code) ከተማ/ስቴት/ዚፕ ኮድ			
<b>Date of Birth: ትውልዱ ዕለት</b> _____ (Month) ወርሒ (Day) ዕለት (Year) ዓመት		<b>Student Phone Number: ናይ ተማሃራይ ቁጽሪ ቴሌፎን</b> _____	
<b>Race: ዓሌት</b> <input type="checkbox"/> American Indian, Alaska Native/ አሜሪካዊ ኢንዲያን, አላስካ ኔቲቭ <input type="checkbox"/> Asian/ ኤዲያን <input type="checkbox"/> Southeast Asian/ ደቡብ ምብራቕ ኤዲያን <input type="checkbox"/> Black/African American- ጸሊም/ አፍሪካዊ አሜሪካዊ <input type="checkbox"/> African/ አፍሪካዊ <input type="checkbox"/> East African/ ምብራቕ አፍሪካዊ <input type="checkbox"/> Pacific Islander, Hawaiian Native/ ፓሲፊክ አይላንዲር, ሓዋይን ኔቲቭ <input type="checkbox"/> Latino/ ላቲን <input type="checkbox"/> Multi-Racial/ ብዙሕ ዓሌታዊ <input type="checkbox"/> White/ ጸዕዳ <input type="checkbox"/> N/A or Unknown/ ዘይፍሉጥ <input type="checkbox"/> Other: ካልእ _____		<b>አበይ ቤት ትምህርቲ ትማሃር? What school do you go to?</b> <input type="checkbox"/> Seattle World School ሲያትል ወርልድ <input type="checkbox"/> Garfield High School ጋርፊልድ <input type="checkbox"/> Franklin High School ፍራንክሊን <input type="checkbox"/> Other: ካልእ _____	
		<b>Country of Origin: ዓዲ</b> _____	
		<b>Language Spoken at Home: ኣብ ገዛ ዝዛረቦ ቋንቋ</b> _____	
<b>What class(es) are you signing up for? እንታይ ክፍሊ ተመዝጊብካ?</b> 1. _____ 2. _____ 3. _____		<b>How will you get home? ብኸመይ ገዛ ትበጽሕ?</b> <input type="checkbox"/> Metro (I know how) ሜትሮ ኣጠቓቕማ ይፈልጥ <input type="checkbox"/> Metro (I <b>DO NOT</b> know how) ሜትሮ ኣጠቓቕማ ኣይፈልጥን <input type="checkbox"/> Walk/ ብእግሪ <input type="checkbox"/> Family pick up/ ስድራ ይወስዱኒ <input type="checkbox"/> Drive/ ማኪና ይዝውር <input type="checkbox"/> Other/ ካልእ _____	

Please complete both sides  
→→→→

# Guardian Information ሓላዊ ሓበሬታ

<b>Guardian's Name: ሽም ሓላዊ</b> _____	<b>Guardian's Phone Number: ሓላዊ ቁጽሪ ቴሌፎን</b> _____
<b>Emergency Contact: ህጹጽ ኩነታት መራኸብ</b> <input type="checkbox"/> Same as above ሓደ ዓይነት እዩ ከም ላዕላዋይ <input type="checkbox"/> If different - ፍልይ እንተኾይኑ Name: ሽም _____ Phone number: ቁጽሪ ቴሌፎን _____	

**Parent/Guardian's Permission: ስድራ/ ሓላዊ ፍቻድ**  
 I support my child's interest in the Extended Day Program and give him/her permission to participate.  
 ናይ ደቀይ ድልየት ንምድጋፍ ንግሉ/ንግሉ ከሳተፉ ፍቻድ ይህብ

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
 ፊርማ ስድራ/ሓላዊ ሰለት

Signature of Student (if 18 or older): \_\_\_\_\_ Date: \_\_\_\_\_  
 ፊርማ ተማሃራይ (18 ዕድመ ንላዕሊ) ሰለት

**Medical Release: ሕክምና ፍቻድ**  
 ከም ስድራን ከም ሓላዊን ናይዚ ተማሃራይ ኣነ ክርኽብ እንተዘይከላልኩ ሕክምናዊ መጥባሕታዊ ፍወሳ ስርዓት ክግበረሉ ንሽቡ ናይ ግድን እንተኣሚኑ እንድህር ብሓኪም ተማሃራ ናይ ደቀይ ጥዕና ክኸላኸል ስልጣንን ፍቻድን ይህብ።

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
 ፊርማ ስድራ/ሓላዊ ሰለት

Signature of Student (if 18 or older): \_\_\_\_\_ Date: \_\_\_\_\_  
 ፊርማ ተማሃራይ (18 ዕድመ ንላዕሊ) ሰለት

**Photo Release: መፋኑዊ ስእሊ**  
 ንሲያትል ወርልድ ስኩል ቪዲዮ ኮንፌረንስ ከምኡውን ንብጻይ ድርጅታት ስእሊን ቪዲዮን ከምኡውን ነቲ ናይ ደቀይ ስእሊን ቪዲዮን ክሓትሙን ኣብ ዌብሳይትን ኣብ ካልእ ሕታም (ሓጺር ናይ ጽሑፍ መግለጺ, ዓውደ ኣዋርሕ) ክሓትሙ ፍቻድ ይህብ እዩ።

Please choose one: ሓደ ምረጹ  
 YES, I give permission (sign below)  
 እወ ፍቻድ ይህብ እየ (ኣብ ታሕቲ ይፈርሙ)  
 NO, I do not give permission (do not sign)  
 ኣይፋል ፍቻድ ኣይህብን እየ (ኣይትፈርሙ)

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
 ፊርማ ስድራ/ሓላዊ ሰለት

Signature of Student (if 18 or older): \_\_\_\_\_ Date: \_\_\_\_\_  
 ፊርማ ተማሃራይ (18 ዕድመ ንላዕሊ) ሰለት

Please complete both sides  
 →→→→