



Location: Freedom Farmers Summer 2024 Application

Muirhead Farm: Yelm Hwy SE at Siskiyou St SE
Olympia, WA 98501

Please turn in application to a Freedom Farmers staff member.

Date Received	_____
Approved	_____
Start	_____
School 53	_____
#FTE	_____
SSID	_____

High School: _____

Legal Name _____ Grade _____ Gender _____ Birth Date ____/____/____
Last First MI

Student Email _____ Student Cell _____

Student Lives With Father _____ Mother _____ Both _____ Guardian _____ On Own _____ Student's Place of Birth (City, State, Country) _____

Parent/Guardian Full Name _____	Email _____
Street Address _____	City _____ Zip _____
Mailing Address (if different than above) _____	City _____ Zip _____
Parent/Guardian (1) Home Phone _____	Work _____ Cell _____
Parent/Guardian (2) Home Phone _____	Work _____ Cell _____
Emergency Contact Person #1 _____	Relationship _____ Phone _____
Emergency Contact Person #2 _____	Relationship _____ Phone _____

DOES YOUR STUDENT HAVE A LIFE-THREATENING OR OTHER MEDICAL CONDITION THAT REQUIRES MEDICATION AT SCHOOL OR A SCHOOL HEALTH PLAN? YES___ NO___

DOES YOUR STUDENT CARRY AN EPIPEN? YES___ NO___ **DOES YOUR STUDENT CARRY AN INHALER? YES___ NO___**

If yes to any of the above, please describe _____

Please note: The medication & treatment order must address the life threatening medical condition & must be on file with the school prior to the first day of attendance.

Reference RCW 28A.210.320

DOES YOUR STUDENT HAVE AN IEP?
YES___ NO___

DOES YOUR STUDENT HAVE A 504?
YES___ NO___

Required for Federal and State Reporting:

Student Ethnicity Not Hispanic _____ Hispanic _____

Student Race (select all that apply) American Indian _____ Asian _____ Black _____ Pacific Islander _____ White _____

Has the student previously attended New Market Skills Center? YES___ NO___

I authorize New Market to have access to all of my student's school records. I understand that completing this application does not assure my student's enrollment at New Market Skills Center.

Parent/Guardian Signature _____ **Date** _____

Student Signature _____ **Date** _____

Tumwater School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employee(s) has been designated to handle questions and complaints of alleged discrimination: Civil Rights Coordinator: Shawn Batstone, 360-709-7030, shawn.batstone@tumwater.k12.wa.us , Title IX Coordinator: Wendy Bromley, 360-709-7020, wendy.bromley@tumwater.k12.wa.us and Section 504 Coordinator: Chris Burgmeier, 360-709-7040, Chris.Burgmeier@tumwater.k12.wa.us Address: 621 Linwood Avenue SW, Tumwater, WA 98512