RHAM Middle School Inquiry Academy Application

		Student Information			
Legal Nam	e of Student:				
	Last	First	M.I.		
Address:	Street Address	Apartment/Unit#			
	City	State	Zip Code		
Parent/Guardian Email Address:					
Home pho	ne: ()	Date of Birth:			
TO BE COMPLETED BY THE APPLICANT (You may use a separate sheet, typed or handwritten, for your answers. Please write in complete sentences.)					
How would a	a friend or classmate de	escribe you? Include two adjectives they may use and ex	xplain why.		

How do you spend your free time?

What about RHAM Inquiry Academy motivated you to apply?

Turn over to complete the application

ESSAY Please attach a separate sheet for this answer. Students are encouraged to hand write their essay so that we can learn about them in their own words.

At RHAM Inquiry Academy we focus on students as individuals. Please share with us what makes you a unique individual. You may include any hobbies or special interests you have as well as how you learn best.

Students will be selected based on their responses to the application questions, the essay, and teacher recommendations. An interview may also be required to complete a student's application.

Permission to Receive Student Records

I give permission for RHAM Middle School to receive student records for my child from:

Name of Current School:_____

Signature	of Pare	nt/Guardian:
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Date:_____

Applications may be submitted directly to: RHAM Middle School attn.: Dr. Michael Seroussi 25 RHAM Road Hebron CT 06248 michael.seroussi@rhamschools.org by February 16, 2024. Thank you.



RHAM Middle School Inquiry Academy Program 25 RHAM Road, Hebron, CT 06248 Phone: 860-228-9423 Fax: 860-228-5316