



### Student Application

Return to Ms. Mallari, **LEAD** Counselor  
(Narbonne High School Counseling office)

**LEAD** Small Learning Community  
at the Narbonne Educational Complex  
24300 S. Western Avenue  
Harbor City, CA 90710  
310-326-0920 x2597

Date of Application \_\_\_\_\_

Name of applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Current grade level (circle) 8 9 10 11 12

If you are an 8<sup>th</sup> grader, what is your current Middle School? \_\_\_\_\_

What's your favorite subject so far at school? \_\_\_\_\_

Why? \_\_\_\_\_

Most recent GPA: \_\_\_\_\_ number of "U"s on last report card: (circle) 0 1 2 3 more than 3

Name of your current math teacher: \_\_\_\_\_

Name of your current English teacher \_\_\_\_\_

**Signature of Student** \_\_\_\_\_

Are you interested in the AVID program? (circle one)

- a) Already in AVID.
- b) Interested in AVID, how do I sign up?
- c) Not sure, need more info on AVID.
- d) Not interested in AVID.

### Parent(s)/Guardian Information

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

**Staff Office Use Only:** \_\_\_\_\_ approved \_\_\_\_\_ denied Date \_\_\_\_\_

Assistant Principal \_\_\_\_\_ Director \_\_\_\_\_

Notes: \_\_\_\_\_