

**ENROLLMENT APPLICATION – TRANSFER STUDENT ADDITIONAL FORM**

Student Name		Current School	Current Grade
What grade are you applying for?	When would you like to start? <input type="checkbox"/> Immediately <input type="checkbox"/> Beginning in January <input type="checkbox"/> Beginning in August  Of what academic year?  201 ____ - 201 ____	To be considered, transfer students must submit copies of their transcript. Please indicate below whether these have been requested and/or submitted:  <input type="checkbox"/> Not yet requested of student's current school. Will be requested no later than: _____ <input type="checkbox"/> Requested from the student's current school on: _____ <input type="checkbox"/> Submitted to Leadership on _____	

**TRANSFER STUDENT PERSONAL STATEMENT**

In the space below or by attaching a separate piece of paper please answer the following:

*Tell us about yourself, your recent school history, and why you believe Leadership would be a good school for you.*