



INTENT TO RETURN 2020-2021

In preparation for the lottery, we would appreciate your written verification that your child/children will be returning to PAPA for the 2020-2021 school year. Please fill out the form, and have your child return it to the front office, no later than **Friday, February 14, 2020**. We would love for all our underclassmen to return! Our funding is based on 450 students. Therefore, if the verification is not submitted, your child's place at PAPA will be offered to someone else. Thank you!

DUE BY FRIDAY, FEBRUARY 14, 2020

STUDENT(S) NAME _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

_____ **WILL** be returning for 2020-21 _____ **WILL NOT** be returning for 2020-21

Name/Grade Level of siblings applying for the lottery: _____



INTENT TO RETURN 2020-2021

In preparation for the lottery, we would appreciate your written verification that your child/children will be returning to PAPA for the 2020-2021 school year. Please fill out the form, and have your child return it to the front office, no later than **Friday, February 14, 2020**. We would love for all our underclassmen to return! Our funding is based on 450 students. Therefore, if the verification is not submitted, your child's place at PAPA will be offered to someone else. Thank you!

DUE BY FRIDAY, FEBRUARY 14, 2020

STUDENT(S) NAME _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

_____ **WILL** be returning for 2020-21 _____ **WILL NOT** be returning for 2020-21

Name/Grade Level of siblings applying for the lottery: _____



INTENT TO RETURN 2020-2021

In preparation for the lottery, we would appreciate your written verification that your child/children will be returning to PAPA for the 2020-2021 school year. Please fill out the form, and have your child return it to the front office, no later than **Friday, February 14, 2020**. We would love for all our underclassmen to return! Our funding is based on 450 students. Therefore, if the verification is not submitted, your child's place at PAPA will be offered to someone else. Thank you!

DUE BY FRIDAY, FEBRUARY 14, 2020

STUDENT(S) NAME _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

_____ **WILL** be returning for 2020-21 _____ **WILL NOT** be returning for 2020-21

Name/Grade Level of siblings applying for the lottery: _____