

**PENSACOLA BEACH ELEMENTARY SCHOOL**

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**ENROLLMENT RENEWAL APPLICATION 20\_\_ -20\_\_ SCHOOL YEAR**

*Please complete a separate application for each student and return to the school prior to the third week in May.*

Student's Name \_\_\_\_\_

Currently enrolled in Grade \_\_\_\_\_ Grade Student will be Entering \_\_\_\_\_

Please mark the appropriate response(s):

\_\_\_\_ I am currently a permanent resident of Pensacola Beach.  
Yes No

\_\_\_\_ I am not a permanent resident of Pensacola Beach.  
Yes No

\_\_\_\_ I would like my child to attend Pensacola Beach Elementary School  
Yes No in the next school year.

My child has attended Pensacola Beach Elementary School since \_\_\_\_\_.  
Date of Enrollment

**Parent/Guardian Signature**

**Date**

\_\_\_\_\_

\_\_\_\_\_