

## 1626 West Orange Blossom Trail#1053 Apopka, Florida 32712

www.dreamlighthighschool.com info@dreamlighthighschool.com finance@dreamlighthighschool.com

Office: (407) 850-8245 Mobile: (407) 415-5821 WhatsApp 24/7 (407) 468-2099

## **ADMISSION APPLICATION COST \$50.00**

Dreamlight High School admits students and makes available to them its advantages, privileges and courses of study without regard to race, color, sex, religion, national origin, sexual orientation or disability. **Dreamlight** has a published admission policy that is made available to all applicants and parent(s)/guardian(s) as part of the admission process. The policy gives the admission criteria, as well as a description of the entire admission process. This application form must be completed and submitted to the Dreamlight Admission Office by the date specified.

	APPLICATION SECTION			
Applicant Name: Last:	First:		DOB:	
Social Security No:				
Home Address: Street and Number				
City/Town:	State:	_ Zip Code:		
Home Phone:				
Email:		_		
	SIGNATURE SECTIO	N		
Signature of Student:	Date:			
Record the referral's name:	Date:			
Signature of Current Guidance Counselor:		Date:		
PERSONAL INFORM	MATION SECTION BU	UT MUST BE	FILLED	
Gender: Female Male. Race: America	can Indian or Alaskan Na	ative Asian	or Pacific Islander	Black
White Hispanic				

## **CANCELLATION**

Students have 72 hours to cancel the program and get refunded within a 30-day period but \$50.00 will retain for application fee. Please email it to <a href="mailto:finance@dreamlighthighschool.com">finance@dreamlighthighschool.com</a>