Towle Institute Information Form FULL-TIME STUDENTS ONLY

Parents'	Names
Address	(Street)
	(City/State/Zip)
Phone N	umber
E-mail Address Please provide the following information for each student you would like to enroll: Name (including last name if different from parents' last name), grade entering in September, name of school child is presently attending.	
Have you	home schooled before? Yes / No
If yes, for	how long?
Will there	e be a parent home full-time to supervise schoolwork? Yes / No
If yes, wh	no?
What chu	rch are you presently attending?
Have you	signed up for an interview?
Could y	ou please tell us how you heard about Towle Institute?
	Internet website
	Trí-State Homeschool Network
	WXHL (Reach FM) or WDAC (The Voice) radio
	A friend or relative
	Other?