



ACADEMY OF AMERICAN STUDIES

SANDRA DAY O'CONNOR HIGH SCHOOL

STUDENT APPLICATION SCHOOL YEAR 2019-2020

Principal: Dr. Lynn Miller
Academy Director: Darrell Hudson

STUDENT _____
LAST NAME FIRST NAME

ADDRESS _____
CITY ZIP PHONE

STUDENT School ID # _____

STUDENT EMAIL _____

Current GPA _____
Active Membership in NJHS _____ No _____ Yes. If Yes, Sponsor's Name _____
Advanced Classes attended in grades 7 & 8: _____
Description of community service work _____

PARENT'S/GUARDIAN'S NAME(S) _____
PARENT'S/GUARDIAN'S EMAILS _____
FATHER'S WORK PHONE _____ MOTHER'S WORK PHONE _____
HOME HIGH SCHOOL _____ SOHS or OTHER: _____
PREVIOUS SCHOOL (MOST RECENT) _____
DATE OF BIRTH _____ CURRENT GRADE LEVEL _____

Along with this application and open enrollment requirements (if applicable), the student is required to answer the short answer questions found on the website under the application link. Please attach that to the application and return or email to Mr. Hudson @ Darrell.hudson@dvusd.org
I understand this is a 4-year program that I will stay committed to and follow through my high school career at SDOHS.

STUDENT SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

*Please return completed form and essay with Open Enrollment Form (if not within O'Connor area) to:
Counseling Department @ O'Connor High or Email: Darrell.hudson@dvusd.org or FAX: 623-445-7180*



Deer Valley Unified School District No. 97

Superintendent : Dr. Curtis Finch, Ed.D.