

PLEASE RETURN TODAY!

Towle Institute Information Form FULL-TIME STUDENTS ONLY

Parents' Names _____

Address (Street) _____

(City/State/Zip) _____

Phone Number _____

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 be a parent home full-time to supervise schoolwork? **Yes / No**

If yes, who?

What church are you presently attending? _____

Have you signed up for an interview?

Could you please tell us how you heard about Towle Institute?

_____	Internet website
_____	Tri-State Homeschool Network
_____	A friend or relative
_____	Other? _____