

## Preliminary Application – Step 1

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ Rising Grade \_\_\_\_\_  
Parent(s) Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
\_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Student's Current School for 2018-19 \_\_\_\_\_  
\_\_\_\_\_  
Student's School for 2018-2019 \_\_\_\_\_  
General description of learning difficulties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please mail to The Trilogy School 3810 Merton Drive Raleigh NC 27609 or call 919-781-7804

*\*Applications will be numbered and considered in order they are received.*

## The Trilogy School Summer School



3810 Merton Drive  
Raleigh NC 27609  
(919)781-7804

[www.trilogyschool.com](http://www.trilogyschool.com)

