



## Charter School for Applied Technologies

### Student Application for the 2025-2026 School Year

Please print clearly. A separate application must be completed for each student applying for enrollment at CSAT.

STUDENT'S LAST NAME:		STUDENT'S FIRST NAME:		
DATE OF BIRTH:		GENDER (optional):		
		Male		Female
STREET ADDRESS:	APT:	CITY:	STATE:	ZIP CODE:
GRADE APPLYING FOR (grade level the student will be in for the <b>2025-2026</b> school year) – circle only <u>one</u> grade:				
K    1    2    3    4    5    6    7    8    9    10    11    12				
Has the applicant attended CSAT before? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>Preference(s) (with required documentation) will be given, <i>in the lottery only</i>, for each 'yes' below:</b> <b>Are there sibling(s) that currently attend CSAT?</b> <input type="checkbox"/> Yes (Applicant's Birth Certificate required) <input type="checkbox"/> No If yes, please list their full name(s) and current grade level(s). "Siblings" are students who share a legal guardian.				
<b>Do you reside in the Kenmore-Tonawanda School District?</b> <input type="checkbox"/> Yes (Proof of residence required) <input type="checkbox"/> No <b>Does the applicant have a parent/legal guardian employed at CSAT?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list employee's name and department: _____				
<b>Does the applicant have an Individualized Education Plan (IEP), and/or receive any special education services (speech, PT, OT, etc.)?</b> <input type="checkbox"/> Yes (Please provide the first page of the applicant's IEP with student information) <input type="checkbox"/> No				
<b>Does the applicant receive English as a New Language (ENL) services?</b> <input type="checkbox"/> Yes (Please identify home language _____) <input type="checkbox"/> No				

**The following information pertains to the parent/guardian the student resides with:**

PARENT/GUARDIAN'S LAST NAME:	PARENT/GUARDIAN'S FIRST NAME:	RELATIONSHIP TO STUDENT:
PRIMARY PHONE NUMBER (home, cell or work):		SECONDARY PHONE NUMBER (home, cell or work):
(       )		(       )
PARENT/GUARDIAN'S SIGNATURE:	DATE:	PARENT/GUARDIAN'S EMAIL ADDRESS <b>(required)</b> :

**Authorization:** I certify that I have legal authority to apply to the Charter School for Applied Technologies on this applicant's behalf. I further acknowledge that any false information provided in this application will result in this application becoming null and void.

**Non-Discrimination Statement:** A charter school shall not discriminate against or limit the admission of any student on any unlawful basis, including the basis of ethnicity, national origin, gender, disability, intellectual ability, measures of achievement or aptitude, athletic ability, race, creed, religion or ancestry. A school may not require any action by a student or family (such as an admission test, interview, essay, attendance at an information session, etc.) in order for an applicant to either receive or submit an application for admission to that school.

*This application conforms to the criteria set by the New York State Education Department in November 2011.*



**Charter School for Applied Technologies**  
**Student Application for the 2025-2026 School Year**  
**Open Enrollment ends April 1, 2025**

- A separate application must be completed for each student applying for admission.
- Kindergarten applicants must be five years old on or before December 1, 2025 to apply for the 2025-2026 school year.
- To be included in the Enrollment Lottery, applications must be received at the Enrollment Office by April 1, 2025.
- Applications received after Open Enrollment ends will not be included in the lottery. Those applicants' names will be placed, in the order of the date and time their applications were received, at the end of the wait list generated by the lottery.
- The generated wait list will be active for the entire 2025-2026 school year only.
- Because CSAT is located within the Kenmore-Town of Tonawanda Union Free School District, applicants from that district receive preference in the lottery. Proof of residence is required at the time of application. Acceptable proofs of residence: Lease or rental agreement, mortgage statement, property tax bill, utility bill (full page showing the "Service Address"), homeowner's or renter's insurance statement.
- Siblings of currently enrolled CSAT students also receive preference in the lottery. Siblings are students who share a legal guardian. The full name and grade of the student(s) currently enrolled at CSAT must be listed on the application, and proof of the sibling relationship (applicant's birth certificate or legal document naming the guardian) must be provided with the application.
- Applicants who have a parent/legal guardian employed at CSAT also receive preference in the lottery. The parent/legal guardian's name and CSAT employment information must be indicated on the application.
- Students that hold an Individualized Education Plan (IEP)/Special Educational Services (Consultant Teacher, Speech, Occupational Therapy, Physical Therapy, etc.) receive a preference in the lottery with proof of the IEP provided.
- ENL (English as a New Language) students receive a preference in the lottery. ENL students need to identify their home language on the application.
- "Preferences" only apply to applications received during the Open Enrollment period. There are no enrollment preferences after the Open Enrollment period has ended.
- All applicants who are included in the lottery are notified by mail in the days following the lottery if they have been selected for enrollment or placed on the wait list (and their number on the wait list).
- Future notification of acceptance (acceptance after the initial results of the lottery) is made by phone call and/or email only (no letters). It is imperative that you inform the Enrollment Office at (716) 871-7400 of any changes to your phone/email contact information.
- Please note the addresses of the 3 buildings:
  - Elementary School: **Grades K - 5:** 2303 Kenmore Avenue, Buffalo, NY 14207
  - Middle School: **Grades 6 - 8:** 24 Shoshone Street, Buffalo, NY 14214
  - High School: **Grades 9 - 12:** 2245 Kenmore Avenue, Buffalo, NY 14207

**Submit completed paper applications in one of the following ways:**

- Hand-deliver to the Enrollment Office at 317 Vulcan St, Buffalo, NY 14207. Office hours are 7:00 am to 3:30 pm Monday through Friday.
- Mail to the Enrollment Office at 317 Vulcan St, Buffalo, NY 14207 via USPS, UPS, FedEx, etc.\*
- E-mail to [enrollment@csat-k12.org](mailto:enrollment@csat-k12.org).\*
- Fax to (716) 303-7216.\*

\*Please note that a verification receipt of paper application submission will only be given for applications submitted in person; receipts will not be mailed.

- Or apply online at [www.csat-k12.org/apply](http://www.csat-k12.org/apply)

Please visit our website at [www.csat-k12.org](http://www.csat-k12.org) for additional information, or contact us at:

CSAT Enrollment Department  
317 Vulcan Street  
Buffalo, New York 14207  
(716) 871-7400  
Email: [enrollment@csat-k12.org](mailto:enrollment@csat-k12.org)