

VISTA VERDE MIDDLE SCHOOL
INTERNATIONAL BACCALAUREATE MIDDLE YEARS PROGRAM APPLICATION

Please print all information

Date _____
Current Grade _____

Student Name _____

Student Mailing Address (include zip code) _____

Current School Attending _____

Home Middle School _____

Do you currently live in the Paradise Valley School District boundaries? Yes No

Do you currently live in VVMS boundaries? Yes No

Parent Email address _____

Parent(s)/Guardian(s) Contact Information:

Name _____

Name _____

Relationship to student _____

Relationship to student _____

Address _____

Address _____

City _____ State _____

City _____ State _____

Zip Code _____

Zip Code _____

Phone (H) _____

Phone (H) _____

Phone (W) _____

Phone (W) _____

Phone (Cell) _____

Phone (Cell) _____

Please indicate below the names and schools from which we can expect your letters of recommendation just in case we have to follow up.

1. Name _____ School _____

2. Name _____ School _____

STUDENT SIGNATURE _____

PARENT SIGNATURE _____

_____ Yes, I am interested in car pool information. I give VVMS permission to share my name, home address, telephone number and email address with other parents who are interested in arranging a car pool.

Please mail the completed application to:

**Elaine Jacobs, Principal
Vista Verde Middle School
2826 E. Grovers Ave.
Phoenix, AZ 85032
Attn: IB Coordinator**

You may certainly bring the application directly to Vista Verde Middle School.