



**Instructions:** The items marked with an asterisk (\*) are required to be submitted in order to apply to this charter school. Any items not marked by an (\*) are optional. If you choose not to respond to the optional items, that fact alone will not disqualify the applicant from admission to the school.

Signed applications must be received by 4:00 p.m., Monday, April 1, 2024 to be eligible for the lottery. Applications received after 4:00 p.m. on April 1, 2024 will be placed on the waiting list in the order in which they were received.

**Deadline:**  
**To be included in our lottery, all applications must be submitted by April 1, 2024.**

**All DREAM Charter School lotteries will be held on Wednesday, April 3, 2024.**

**1 Please choose the school(s) to which you are applying. You may apply to more than one location.**

- DREAM East Harlem (Grades PreK - 8) 1991 2nd Avenue, New York, NY 10029
- DREAM Mott Haven (Grades K - 8) 20 Bruckner Boulevard, Bronx, NY 10454
- DREAM Charter High School (Grades 9 - 10) 20 Bruckner Boulevard, New York, NY 10029
- DREAM Highbridge\* (Grades K-2 & 6) 1162 River Ave, Bronx, NY 10452  
\*DREAM Highbridge will each grow by one grade per year
- DREAM Charter Schools is still accepting applications for all campuses for the current school year. Please check this box ONLY if you wish to be considered for the current school year (2023-24).

**2 Student Information**  
A separate application must be submitted for each applying student.

Child's name\* \_\_\_\_\_  
Date of birth\* \_\_\_\_/\_\_\_\_/\_\_\_\_  
Gender:  Male  Female  Nonbinary  
 Other gender identity  Prefer not to answer  
Home address\* \_\_\_\_\_  
Apt # \_\_\_\_\_ City\* \_\_\_\_\_  
State\* \_\_\_\_\_ Zip\* \_\_\_\_\_

Grade entering in Fall 2024:

<input type="checkbox"/> Pre-K	<input type="checkbox"/> 3	<input type="checkbox"/> 7
<input type="checkbox"/> K	<input type="checkbox"/> 4	<input type="checkbox"/> 8
<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 9
<input type="checkbox"/> 2	<input type="checkbox"/> 6	<input type="checkbox"/> 10

Children must turn four (4) by December 31, 2024 to be eligible for Pre-K.  
Children must turn five (5) by December 31, 2024 to be eligible for K.

**3 Parent/Guardian Information**

First name\* \_\_\_\_\_ Last name\* \_\_\_\_\_  
Primary phone (xxx-xxx-xxxx) \_\_\_\_\_ Additional phone (xxx-xxx-xxxx) \_\_\_\_\_  
Email address (xxxx@xxx.xxx) \_\_\_\_\_  
Additional email address (xxxx@xxx.xxx) \_\_\_\_\_  
Relationship to child:\*  Mother  Father  Legal Guardian  Other \_\_\_\_\_

**4 Application Preferences**  
At all DREAM locations, lottery preferences are offered for returning students, siblings of current students, and children of current staff, as well as for students covered under the McKinney-Vento Act. Location-specific preferences are as follows:

- **DREAM East Harlem and High School:** Special preference will be given to incoming students who live in NYCHA housing in Community School District (CSD) 4. Preference will be given to incoming students residing in New York City's CSD 4.
- **DREAM Mott Haven:** Special preference will be given to incoming students who live in NYCHA housing in Community School District (CSD) 7. Preference will be given to incoming students who reside in New York City's CSD 7.
- **DREAM Highbridge:** Special preference will be given to incoming students who live in NYCHA housing in CSD 9. Preference will be given to incoming students who live in CSD 9.

**Sibling Preference**

Does the applicant have a sibling who CURRENTLY ATTENDS DREAM?  Yes  No  
Sibling name \_\_\_\_\_ Sibling grade \_\_\_\_\_ Current school \_\_\_\_\_  
Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Does the applicant have a sibling who is APPLYING to DREAM?  Yes  No  
Sibling name \_\_\_\_\_ Sibling grade \_\_\_\_\_ Current school \_\_\_\_\_  
Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

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**NYCHA Preference:** Do you live in a NYCHA development?  Yes  No

Name of NYCHA development \_\_\_\_\_

**Children of Staff Preference:** Does the student have a parent currently working at any DREAM location?  Yes  No

Parent name \_\_\_\_\_ Work location \_\_\_\_\_

**McKinney-Vento Preference:** Does the applicant currently live in a shelter, temporarily live with family/friends due to lack of adequate housing or economic hardship, etc.?  Yes  No

**DREAM Program Participant Preference:** Is the applicant a current DREAM program participant?  Yes  No

**5 If your child is currently attending another school, what grade and what school are they in?**

Current grade, if applicable: \_\_\_\_\_

Current school, if applicable: \_\_\_\_\_

**6 Additional Information**  
Answers to the following questions are optional and will not affect your child's chances in DREAM's lottery.

How did you hear about DREAM? Check all that apply.

- Internet search results (Google, Yahoo, etc.)
- Referral by DREAM staff member
- Referral by current DREAM family
- DREAM afterschool or summer programming
- Received a postcard in the mail
- Social media (Facebook, Instagram, Twitter)
- Bus shelter / outdoor ads
- Flyer in community/housing development/business
- Community event/school fair

**7 Non-discrimination Statement and Parent Signature**

Statement of non-discrimination: A charter school shall not discriminate against any student or limit the admission of any student on the basis of ethnicity, national origin, gender, disability, intellectual ability, measures of achievement or aptitude, athletic ability, race, creed, religion or ancestry or any other ground that would be unlawful if done by a school. A school may not require any action by a student or family (such as an admissions 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.

Signature: I agree that the school records of the student for whom I am submitting this application may be used for studies of this charter school. In these studies, only aggregate outcomes, not individual students' outcomes, will be reported.

**Parent/guardian name** \_\_\_\_\_

**Parent/guardian signature** \_\_\_\_\_

How to Submit Your Application

You can drop off this application at any DREAM location.

If you prefer to apply online, visit [www.wearedream.org/enroll](http://www.wearedream.org/enroll).

For more information, call (646) 750-7041 or email [enrollment@wearedream.org](mailto:enrollment@wearedream.org).



For office use only

Received by \_\_\_\_\_ Date received \_\_\_\_\_ (mm/dd/yyyy)