

Sibling/Military Preference Seat Assignment Form 2025-2026 School Year

STUDENT INFORMATION:

Name

Phone Number _____

2025-26 Grade _____

_____ Date of Birth _____

SCHOOL PREFERENCE:

ELIGIBILITY FOR PREFERENCE: (Please check whichever box applies.)				
Sibling Currently Enrolled in the Oasis Charter School System				
Nam	e of sibling(s)	and Grade level:		
Name of sibling(s) and Grade level:				
Siblin	g's school(s):	Oasis Elementary North	Oasis Elementary South	
		Oasis Middle School	Oasis High School	
Military Dependent Preference				
The following documentation must be submitted to ensure your child remains eligible for a seat				
 assignment with preference in our system: 1. Student Registration form, this can be found on the Oasis Elementary South Website. 				
2.				
3.	3. Florida Certificate of Immunization (Blue) DH680			
4.				
5.		•	hat you legally reside in SW Florida. <i>This can be</i>	
6.	an electric or water bill, signed lease agreement or a homestead exemption. Proof of Custody must be provided if the student does not live with both natural parents.			
7.	Copies of Both Parent(s) I.D.'s / Guardian(s) I.D.'s			
8.				
9.		cuments: If applicable		

Please be aware that submission of this form does not guarantee your student a seat in the City of Cape Coral Oasis Charter School System, it is only used for determining the order of preference when assigning available seats.