



**Ocean Academy Charter High School
Application - 2025/2026
Grades 9 & 10
April, 2025**



**Applications may be mailed to or hand delivered to:
Ocean Academy Charter High School
678 5th Street
Lakewood, New Jersey 08701**

Student Information: (Please print clearly)

Student's Full Legal Name: _____

Student's Date of Birth: _____ Gender: **Female** _____ **Male** _____

Application for Grade: **9th** _____ **10th** _____

Home Address: _____
Street Address, Apt. # City State, Zip

School Attending this school year (2024/2025): _____

Does the applying Student have sibling(s) attending OACS in grades K-9?: **Yes** **No**

Sibling(s) Name(s) & Grades: _____

Contact Information: (Please print clearly)

Mother's Name: _____ Phone #: _____

Email address: _____

Father's Name: _____ Phone #: _____

Email address: _____

Parent/Guardian Signature: _____ Date: _____