

## DIPLOMA APPLICATION

\_\_\_\_\_ Flower Mound High School  
\_\_\_\_\_ Hebron High School  
\_\_\_\_\_ Lewisville High School  
\_\_\_\_\_ Marcus High School  
\_\_\_\_\_ The Colony High School

**PLEASE PRINT ALL INFORMATION LEGIBLY.  
Supply your full legal name – no initials or nicknames  
will be used since this is a formal presentation.**

_____	_____	_____
Legal Last Name	Legal First Name	Legal Middle Name
_____		
Parents(s) or Guardian(s) Name		
_____		
_____	_____	_____
Street Address	City	Zip Code
_____		
_____	_____	
Home Phone Number	Student or Parent Cell Phone No.	
_____		
_____	_____	
School ID Number	Social Security Number	
_____		
_____	_____	
Student Signature	Parent Signature	
_____		
Date		