



2026-2027 Kindergarten Wait List

Oasis Elementary South
Phone: (239) 542-1577
Fax: (239) 549-7662

Oasis Elementary North
Phone: (239) 283-4511
Fax: (239) 282-0376

Thank you for your interest in our school system! Our enrollment process and requirements are outlined below.

ENROLLMENT (06/01/2025– 09/30/2025)

Applications will be accepted during this time. If the number of applicants exceeds the number of available seats, a lottery will be conducted to fill all seats. All unassigned requests for seats will be placed on a waitlist based on the date the application was received.

WAITLIST

Applications accepted after the enrollment window closes on **09/30/2025** will be placed on a waitlist based on the date the application is received. Once a seat is available, the applicant is notified and given **1 business day** to respond. If a response is not received the applicant is removed from the waitlist. If a seat is offered and declined, a new application must be completed to be placed back on the waitlist. *Students' positions on the wait list may change at any time due to Enrollment Preference (see below).*

ENROLLMENT PREFERENCE Military and Siblings of students currently enrolled in our Oasis Charter School System are given first preference. Please request a Seat Preference Form when submitting your paperwork and submit it with the below documents in order to bypass the lottery. Sibling documents after the **September 30** cutoff will receive preference on the waitlist but will **NOT** be guaranteed a seat.

APPLICATION DOCUMENTS In order to finalize your child's application for our enrollment process, the following documents must be submitted on the Oasis Elementary South or North Website. **You may apply to only one Oasis Charter Elementary School for Kindergarten 2026-2027.**

Student Registration form completed and accurate (please be sure to answer all questions and fill in all areas). If your address and/or phone number change it is your responsibility to contact the school with updates. Inaccurate contact information will result in the loss of your seat, should one become available.

- ☐ **Proof of Florida Residency** must be submitted. *This can be any one of the following: electric, water, cable bill, signed lease agreement, title statement or a homestead exemption.* If you are residing with a relative or friend, a notarized letter, signed by that individual, must be submitted stating that you are residing in their home. Your name and your child's name must be included, and you must have a copy, in their name, of one of the proof of residence documents listed above.
- ☐ **Parent(s)/Guardian(s) Driver's License** must be photocopied for your student's file to ensure that you are the parent/guardian legally able to enroll your student in school. (Copies of both parent's)
- ☐ **Copy of your child's IEP** (Individual Education Plan) must also be provided if your child is in an Exceptional Student Education (ESE) Program (this includes Speech, OT, etc.).
- ☐ **Proof of Custody** must be provided if the student does not live with both natural parents or marriage is dissolved.
- ☐ **Birth Certificate**
- ☐ **Form DH-680 Florida Certificate of Immunization** must be submitted and current.
- ☐ **School Entry Health Exam** (within 12 months) must be submitted and current.

Submission of these documents does not guarantee your student a seat in our system. It allows your child to participate in our enrollment process to determine seats for the 2026-2027 school year. Acceptance letters will be mailed USPS around the end of October. **A response is required by December 10, 2025, or the seat offer is forfeited.**

Please ensure your contact information is always up to date. Failure to do so, may result in loss of seat.



Oasis Elementary North: 239-283-4511
Oasis Elementary South: 239-542-1577
Oasis Middle School: 239-945-1999
Oasis High School: 239-541-1167
Jacquelin Collins, Superintendent

Sibling/Military Preference Seat Assignment Form

STUDENT INFORMATION:

Name _____ Grade _____

Phone Number _____ Date of Birth _____

SCHOOL PREFERENCE:

ELIGIBILITY FOR PREFERENCE: (Please check whichever box applies.)

☐ Sibling Currently Enrolled in the Oasis Charter School System

Name of sibling(s) and Grade level: _____

Name of sibling(s) and Grade level: _____

Sibling'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. **Birth Certificate**
3. **Florida Certificate of Immunization** (Blue) DH680
4. **Health Examination** (Gold) must be submitted and current. DH3040
5. **Proof of Residency** must be submitted to verify that you legally reside in SW Florida. *This can be an electric or water bill, signed lease agreement or a homestead exemption.*
6. **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. **Military Dependent information:** If applicable
9. **IEP/Gifted Documents:** 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.



OASIS CHARTER SCHOOLS
CITY OF CAPE CORAL CHARTER SCHOOL AUTHORITY
STUDENT REGISTRATION

Application for (if submitting a Lottery Enrollment Application *only one elementary school* may be selected):

☐ Oasis Elementary North ☐ Oasis Elementary South ☐ Oasis Middle ☐ Oasis High
School Year: 20 -20 Grade: ☐ KG ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th
☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th

STUDENT'S NAME AS IT APPEARS ON BIRTH CERTIFICATE:

Last First Middle

AKA/NICKNAME

☐ First time in Lee County Public School ☐ First Time in Florida Public School ☐ First Time in school in the United States

STUDENT'S
SOCIAL SECURITY #

SEX

☐ MALE

☐ FEMALE

STUDENT'S ETHNICITY

☐ Hispanic or Latino

☐ Not Hispanic or Latino

WHAT IS THE STUDENT'S RACE? (Mark one or more races to indicate what you consider the student to be)

☐ White

☐ Indian (American) or Alaskan Native

☐ Black or African American

☐ Pacific Islander or Hawaiian

☐ Asian

BIRTHDATE (M) ____/(D) ____/(Y) ____

BIRTHPLACE: CITY

STATE

COUNTRY

Expelled from Previous School ☐ YES ☐ NO

Date _____ School _____

Arrested Resulting in Charge ☐ YES ☐ NO

Juvenile Justice Action ☐ YES ☐ NO

Previous District Referral to Mental Health Services ☐ YES ☐ NO

Life Threatening Allergies ☐ YES ☐ NO

If YES, Explain: _____

Medical Condition with Special Care ☐ YES ☐ NO

If YES, Explain: _____

ADDRESS WHERE STUDENT LIVES

MAILING ADDRESS (IF DIFFERENT)

STREET

STREET

CITY/STATE

CITY/STATE

ZIP CODE

ZIP CODE

MAIN CONTACT #:

EMERGENCY PHONE #:

With whom does the student reside? ☐ Both Natural Parents ☐ Mother ☐ Father ☐ Legal Guardian ☐ Other _____

INFORMATION FOR: ☐ Mother ☐ Guardian ☐ Other _____

Name: _____

Address: _____

Main Contact #: _____ Home #: _____

Wk. Phone: _____ Occupation: _____

E-mail Address: _____

INFORMATION FOR: ☐ Father ☐ Guardian ☐ Other _____

Name: _____

Address: _____

Main Contact #: _____ Home #: _____

Wk. Phone: _____ Occupation: _____

E-mail Address: _____

Is a language other than English used in the home?

☐ YES ☐ NO

What language? _____

Does the student have a first language other than English?

☐ YES ☐ NO

What language? _____

Does the student most frequently speak a language other than English?

☐ YES ☐ NO

What language? _____

Has your child attended a United States school for less than 3 full years?

☐ YES ☐ NO

Date entered in U.S. school (M) ____/(D) ____/(Y) ____

Preferred language to be contacted: ☐ English

☐ Spanish

☐ Creole

☐ Other _____

Is either parent a current or former member of the U. S. military? ☐ YES ☐ NO

NAME OF LAST SCHOOL ATTENDED:

CITY STATE COUNTY

ZIP CODE COUNTRY

☐ PUBLIC
☐ PRIVATE
☐ ALTERNATIVE SCHOOL
☐ HOME SCHOOL
☐ CHARTER SCHOOL

Have you moved recently due to working in agriculture or the fishing industry?
☐ YES ☐ NO

SIGNATURE OF PARENT

PLEASE PRINT YOUR NAME

DATE

THIS BOX FOR OFFICE USE ONLY

STUDENT # _____ SCHOOL NAME _____

ENROLLMENT CODE _____ ENROLLMENT DATE ____/____/____

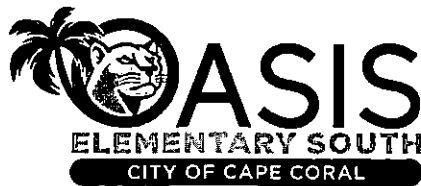
☐ NEW ENROLLMENT ☐ TRANSFER FROM SCHOOL

ALTERNATIVE SCHOOL _____

PRIOR SCHOOL DISTRICT _____ PRIOR STATE _____

☐ RE-ENROLLMENT TO LEE COUNTY

PRIOR COUNTRY _____ Yrs Intrp _____



PARENT COMMITMENT AGREEMENT

By choosing Oasis Elementary South, you are choosing for your child to attend a RIGOROUS ACADEMIC PROGRAM within a STRUCTURED and DISCIPLINED ENVIRONMENT. Please carefully read the following commitment statements and initial each one that is in agreement with your philosophy for your child's education.

If you hesitate to sign any of the following items, please carefully reconsider whether Oasis Elementary South is the right choice for your student. Your child's opportunity for success is greatest if your educational beliefs are aligned with those of our school.

- _____ 1. I understand that the curriculum is intended to be "hard". I will help my child welcome and revel in the challenge, beginning in Kindergarten.
- _____ 2. I understand the school's grading scale, and that "average" work earns a "C", while "A's" are reserved for excellence.
- _____ 3. It is my responsibility to hold my child accountable for his or her actions, and I will not tolerate any behavior that distracts from the learning of others.
- _____ 4. I understand the specifics of the Oasis Elementary South uniform policy and will dress my child accordingly.
- _____ 5. I will provide time and a quiet, distraction-free environment in my home for studying. I will see that my child's assignments are completed on a daily basis, using the student planner for current information.
- _____ 6. I understand that it is my responsibility to consider the retention of my child if he or she cannot perform on grade level.
- _____ 7. I understand that the Oasis Elementary South program succeeds only through excellent attendance and that frequent absences are unacceptable. Therefore, I agree, whenever possible, to schedule family vacations and appointments outside of school hours, and to remove my child from school only for health reasons.
- _____ 8. I will read newsletters from teachers and the office, check the school calendar online, and be responsible for knowing the information contained in them.
- _____ 9. I will expect exemplary behavior from my child on the bus and will support the discipline policies needed to keep our children safe.
- _____ 10. I will readily be involved in my child's education as a member of our PTO, school committees, or in other roles that utilize my strengths.
- _____ 11. I understand that, by choosing Oasis Elementary South, I have made a commitment to assist and support the school in order to provide the best possible education for all children. If the time comes that I am unable to honor that commitment and offer that support, I will carefully reconsider whether Oasis Elementary South is the right program for my child.

Please direct any questions to our principal at (239) 542-1577.

Student's Name: _____

Parent Signature: _____ Date _____



MaryBeth Grecsek, Principal
3415 Oasis Boulevard
Cape Coral, FL 33914

Phone: 239-542-1577
Fax: 239-549-7662

Parent Volunteer Policy

Student success improves with parent participation. Parent/Guardian Volunteer Hours are required for all families in our school system. **Each family must participate in a minimum of 12 volunteer hours each school year to maintain their child's seat in our system.** Parents/Guardians can volunteer in any of the four schools, regardless of the location in which their child attends. The City of Cape Coral Charter Authority will not accept monetary or material donations in place of volunteer hours. Parents must volunteer their time and/or expertise to receive volunteer hours. Families can only receive a maximum of two volunteer hours for PTO Meetings. The Superintendent shall have discretion for the assignment of volunteer hours as long as not expressively prohibited in this policy.

Each volunteer must have a background clearance on file at one of the City of Cape Charter Schools. **An updated electronic application must be completed each year to renew your clearance.** Parents will not be allowed in the classroom building if their clearance is not complete. We strongly recommend each parent complete an application, so no one misses out on classroom parties, awards, or activities.

All volunteers must check in at the front office each time they come on campus. **It is the parent's responsibility to sign in and out in the front office to ensure the accuracy of the time recorded.** If a volunteer assists off site or after hours, the teacher will complete an Off-site Hours Form and have those hours approved by an administrator.

Parents can volunteer in their child's classroom at the teacher's discretion. Our school policy allows for parents to volunteer up to one hour per week in your own child's classroom. If you have multiple children, you may be in each classroom up to one hour.

Guidelines for School Volunteers:

1. Be dependable and reliable.
2. Be a role model for students.
3. Dress appropriately.
4. Keep every student's schoolwork and behavior in confidence.
5. **Never** administer corporal punishment or determine punishment.
6. **Never** remove a student from campus.
7. **Never** contact a student's parent regarding performance or behavior of a student.
8. Confidentiality is expected.
9. Follow the directions and guidelines of staff during emergency situations.