

Roland Park K-8 Magnet School
1510 N Manhattan Ave. Tampa, FL 33607 Phone 813-872-5212

Instructions for Westshore Alliance Verification

Thank you for your interest in Roland Park K-8 Magnet School a Westshore Business Alliance Partnership School.

Parents wishing to claim membership in the Westshore Alliance must complete this form in addition to the Hillsborough County Magnet Application.

Once membership to the Westshore Alliance has been verified, the Magnet Application will be processed.

There are 2 steps to complete this application:

Step 1a: Complete the online application for students currently enrolled in HCPS.

Step 2: Complete the Westshore Alliance Verification Form with proof of membership attached and return them to Roland Park K-8 Magnet School.

You must attach one of the following:

Letter from your business supervisor on company letterhead,

Copy of recent paycheck stub with the business name and address

Business Cards will not be accepted as proof.

****Your application is not complete and WILL NOT BE PROCESSED without your proof of employment****

Out of county applicants must contact Magnet Office at 813-272-4692 to verify enrollment eligibility.

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Westshore Alliance Verification Form

Proof of Westshore Alliance Membership is required. Please attach one of the following documents to verify this information:

- Letter from your business supervisor on company letterhead
- Copy of recent paycheck stub with the business name and address

Please list the names of the students currently applying:

(1)					
	First Name	Middle Name	Last Name	Student ID#	Grade
(2)					
	First Name	Middle Name	Last Name	Student ID#	Grade
(3)					
	First Name	Middle Name	Last Name	Student ID#	Grade

Please list the names of students who already attend Roland Park K-8 Magnet School:

(1)					
	First Name	Middle Name	Last Name	Student ID#	Grade
(2)					
	First Name	Middle Name	Last Name	Student ID#	Grade
(3)					
	First Name	Middle Name	Last Name	Student ID#	Grade

Names and Phone Numbers of Parent(s) or Legal Guardian(s)

Mother: _____ Daytime Phone: _____ Cell: _____

Father: _____ Daytime Phone: _____ Cell: _____

Preferred Evening Phone Number: _____ Parental Email Address: _____

Present Street Address: _____
House # Street Name
City
Zip Code
County

Please provide information on the Westshore Alliance Employee. This must be a parent or legal guardian.

Name of Parent Employed at a Westshore Alliance Business _____ Preferred Daytime Phone _____

Address of Westshore Alliance Business _____