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[School Name]
[School Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]
[Date]
[Parent/Guardian Name]
[Parent/Guardian Address]
[City, State, Zip Code]
Dear [Parent/Guardian Name],
Subject: Enrollment Form for [Student's Name]
We are pleased to inform you that enrollment for the upcoming academic
year at [School Name] is now open. To ensure a smooth enrollment process,
please find the details below regarding the required information and
documents.
**Student Information:**
- Full Name: [Student's First and Last Name]
- Date of Birth: [MM/DD/YYYY]
- Grade Level: [Grade]
- Parent/Guardian Name: [Parent/Guardian's Full Name]
- Address: [Complete Address]
- Phone Number: [Contact Number]
- Email Address: [Email]
**Required Documents:**
1. Copy of Birth Certificate
2. Proof of Residency
3. Immunization Records
4. Previous School Records (if applicable)
Please complete the enclosed enrollment form and return it, along with
the required documents, to the school office by [Deadline Date].
If you have any questions or need further assistance, feel free to
contact us at [Phone Number] or [Email Address].
Thank you for choosing [School Name]. We look forward to welcoming
[Student's Name] to our school community!
Sincerely,
[Your Name]
[Your Title]
[School Name]
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