

Child/Student Information

Legal Last Name:		Legal First Name:		Middle Name:	Nickname:
Birthdate:	Birth Country:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Migratory Child? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please the Migrant Form)		Current Grade Level:
Home Primary Language: <input type="checkbox"/> English <input type="checkbox"/> Other (if other, please complete the Home Language Questionnaire)					
Racial/Ethnic Information					
Part A: Is the child Hispanic/Latino: <input type="checkbox"/> YES, Hispanic/Latino (please indicate Hispanic/Latino Subcategory below) <input type="checkbox"/> Columbian <input type="checkbox"/> Decline to indicate <input type="checkbox"/> Ecuadorian <input type="checkbox"/> Guatemalan <input type="checkbox"/> Mexican <input type="checkbox"/> Other Hispanic/Latino <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Saladoran <input type="checkbox"/> Spaniard/Spanish/Spanish-American <input type="checkbox"/> Unkonwn <input type="checkbox"/> NO, not Hispanic/Latino					
Part B: What is the child's race? (please check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White					
Has this child/student received or is receiving the following services? (Please check all that apply.)					
<input type="checkbox"/> Help Me Grow (Birth-3 Special Education) <input type="checkbox"/> Speech <input type="checkbox"/> Title I <input type="checkbox"/> ESL/ELL <input type="checkbox"/> Gifted/Talented <input type="checkbox"/> Special Education (IEP) <input type="checkbox"/> 504					
Physical Custody of Child/Student (*please provide documentation if other than parent)					
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian (by court)* <input type="checkbox"/> Foster Parent* <input type="checkbox"/> Other* (Please Specify):					
Legal Signing Authority for Child/Student (*please provide documentation if other than parent)					
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian (by court)* <input type="checkbox"/> Foster Parent* <input type="checkbox"/> Other* (Please Specify):					

School Specific Information

Birth-pre-kindergarten child	
Has child had early childhood screening? <input type="checkbox"/> Yes (If yes, where? _____) <input type="checkbox"/> No	
Do you have any developmental concerns about this child? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Elementary School student	
Early Release Contact Name:	Cell Phone Number:
Home Phone Number:	Work Phone Number:
Relation to Student(s): <input type="checkbox"/> Aunt/Uncle <input type="checkbox"/> Family Friend <input type="checkbox"/> Grandparent <input type="checkbox"/> Neighbor <input type="checkbox"/> Step-parent <input type="checkbox"/> Sibling <input type="checkbox"/> Other:	
Daycare Contact Name/Address:	Phone Number:
Middle School student	
Band Student? <input type="checkbox"/> No <input type="checkbox"/> Yes, Instrument:	

Additional information (if applicable)

Social Worker Name:		Cell Phone Number:	
Mailing address:	City:	State:	Zip Code:
Email Address:			
Probation Officer Name:		Cell Phone Number:	
Mailing address:	City:	State:	Zip Code:
Email Address:			

Verification of Information

I certify that all information on this form is correct to the best of my knowledge.	
Parent/Guardian Signature: _____	Date: _____

Federal Race/Enthnicity Categories Explained

Part B: What is the child's race?

American Indian or Alaska Native: a person having original in any of the original people of North or South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including: Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Office Use Only

Paperwork Turned in? (if applicable)

	Open Enrollment (send to Superintendent in District Office)
	Transportation Request (send to Transportation Coordinator)
	Health Emergency Form (send to District Nurse if Health/Medication Info is filled out)
	Lunch application (send to Food Service Secretary)
	Records Request
	Sped Form (send to SPED Secretary)

Enrollment Checklist (if applicable):

	Student Number:
	Locker Assignment
	Upload picture
	Help Desk Ticket to add student
	Add to Enrollment spreadsheet or email team
	SPED/Focus: Add team members
	Set up Parent/Guardian for Campus Portal
	Home Language Survey to be sent to EL Teacher (if applicable)
	Add to paper copies requested (if applicable)