

CENTER JOINT UNIFIED SCHOOL DISTRICT
STUDENT ENROLLMENT FORM
8408 Watt Ave, Antelope, CA 95843
Telephone (916) 338-6400

Student Legal Name: _____ Date: _____

Other Name: _____ Last _____ First _____ Middle _____ SSN: _____ - _____ - _____

Birthdate _____ **Birthplace:** _____ **Residence Home Phone ()** _____ - _____

Student Residence Address: _____ Street _____ Apt. _____ City _____ State _____ Zip Code _____

Gender: **Male** or **Female** **Registering Current Grade Level:** _____

Previous School Information: _____

Name _____ Address _____ City _____ State _____ Zip Code _____ Phone # _____

Legal Parents/Guardian Information

Student Lives With

Father/Step-Father/Grandfather/Guardian/Foster (circle one);

Mother/Step-Mother/Grandmother/Guardian/Foster (circle one):

Relationship to Child _____

Relationship to Child _____

Last Name First Middle

Last Name First Middle

Address: Street City State Zip

Address: Street City State Zip

Phone (H) () _____

Phone (H) () _____

Employer _____

Employer _____

Phone (W) () _____

Phone (W) () _____

Phone (C) () _____

Phone (C) () _____

Email Address _____

Email Address _____

Driver Lic.# _____

Driver Lic.# _____

Additional Parent/Guardian to Receive School Mail:

Name _____

Relationship to Student _____

Address: _____
Street City State Zip Code

*** OFFICE USE ONLY ***

Completed by School Personnel:

Received Registration _____

Proof of Residence _____

Shot Records Received _____

Student I.D.# _____

Grade Level _____

Teacher _____

Start Date _____

Name of School Enrolling _____

Cum Folder Requested _____

Program Code _____

Copy of Registration to EL _____

Registered by _____

****If foster parent, must list Agency and social worker/foster family worker as an emergency contact****

Additional Emergency Contacts (other than those above):

Contact 1: Name _____	Relationship _____
Address _____	Home Phone _____
Employer _____	Work Ph# _____ Cell # _____
Contact 2: Name _____	Relationship _____
Address _____	Home Phone _____
Employer _____	Work Ph# _____ Cell # _____

Home Language Survey:

Schools are required by law to determine the languages spoken at home by each student. This is important in order to provide meaningful instruction for all students.

When your son/daughter first began to speak, did he speak a language other than English? **Yes** **No**

If "yes", please answer 1-6:

- Which language did your son/daughter learn when he/she first began to talk? _____
- Which language does your son/daughter most frequently use at home? _____
- What language do you most frequently use to speak to your son/daughter? _____
- Name the language most often spoken by the adults at home. _____
- When did he/she first begin school in the U.S.? **(M/D/Y)** _____
- Is your son/daughter a refugee or immigrant to the United States? **Yes** **No**

If "yes", when did he/she come to the U.S.? **(M/D/Y)** _____

Ethnicity (for survey purposes only):

Is this student Hispanic or Latino? (Select only one)

____ No, not Hispanic or Latino. *(In the list below, write #1 for primary ethnicity and #2 for secondary ethnicity)*

____ Yes, Hispanic or Latino. *(If there is a secondary ethnicity, please mark it as #2 below)*

____ (100) American Indian or Alaskan	____ (201) Chinese	____ (202) Japanese
____ (203) Korean	____ (204) Vietnamese	____ (205) Asian Indian
____ (206) Laotian	____ (207) Cambodian	____ (299) Other Asian
____ (301) Hawaiian	____ (302) Guamanian	____ (303) Samoan
____ (304) Tahitian	____ (399) Other Pacific Islander	____ (400) Filipino
____ (600) Black or African American	____ (700) White (Not Hispanic)	____ (999) Other or Not Specified

Special Programs:

- | | | |
|------------------------------------------------------------------------------------------------------|------------|-----------|
| 1. Was your son/daughter a participant in the GATE (Gifted and Talented) Program in a former school? | Yes | No |
| 2. Was your son/daughter retained in a former school? | Yes | No |
| 3. Did your son/daughter have a 504 plan in a former school? | Yes | No |
| 4. Did your son/daughter have an IEP and receive Special Education services in a former school? | Yes | No |
| 5. Has your son/daughter been expelled or does he/she have a pending expulsion in a former school? | Yes | No |
| 6. Does your child have a Probation Officer? | Yes | No |
| 7. If "yes" P.O. Name _____ Phone # _____ | | |

The Standardized Testing and Reporting (STAR) Program requires all students in grades 2-11 to take a number of tests each year in reading, language, math, science, and history/social science. Student results on STAR are used to rank each public school on the California Academic Performance Index (API) scale. The API score for each school is ranked on a scale from 200 to 800. A score of 800 or higher is considered "exemplary".

Each school's API score is also compared to the API scores of other California Schools with similar demographic characteristics. These include: percentage of students in ethnic/racial groups, percentage of students who are non-English speakers, student mobility and attendance, percentage of students who participate in the free or reduced price meal program, teacher credentials, class size, and the average level of parent education.

Each public school is required to gather information on the highest level of education achieved by either of the parents or guardians of each student. This information is reported only in percentages; all individual data is kept confidential.

Please check the box that describes the highest level of education of either or both parents/guardians. Then sign and date this form. Thank you for your assistance with this state requirement.

Parent Education Level**Mother/Guardian Education Level (check one):**

1. Not a High School Graduate
 2. High School Graduate
 3. Some College
 4. College Graduate
 5. Grad School/Post-Graduate Training
 (Earned a Master's and/or Doctorate Degree)

 Printed name of Mother/Guardian

 Signature of Mother/Guardian

 Date

Father/Guardian Education Level (check one):

1. Not a High School Graduate
 2. High School Graduate
 3. Some College
 4. College Graduate
 5. Grad School/Post-Graduate Training
 (Earned a Master's and/or Doctorate Degree)

 Printed name of Father/Guardian

 Signature of Father/Guardian

 Date

