



## SAN DIEGO UNIFIED SCHOOL DISTRICT PK-12 ENROLLMENT FORM 2011-12

Complete Sections I-III and sign page 2. Section IV must be completed by office staff. Please print legibly using black or blue pen.  
For full directions, please refer to *Completing Your Child's Enrollment Form* available at [www.sandi.net/enrollment](http://www.sandi.net/enrollment).

<b>OFFICE ONLY</b>		<b>OFFICE ONLY</b>	
1. Student District ID: _____		2. Student State ID (SSID): _____	
I. STUDENT INFORMATION			
3. Last name (LEGAL NAME ONLY)		First	Middle
		Suffix (Jr, II, III)	
4. Nickname:	5. Other name(s) used previously (AKA):	6. Birth date:	7. Social Security Number (optional):
		/ /	-- --
8. Gender	9. Is student Hispanic or Latino?	10. Race (select one or more):	
<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian Indian <input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Hmong <input type="checkbox"/> Korean <input type="checkbox"/> Other Asian <input type="checkbox"/> Other Pacific Islander <input type="checkbox"/> Tahitian <input type="checkbox"/> Samoan	
11. Your address /phone number may be shared with District-approved school-related organizations that are authorized to receive this directory-type information. If you do <b>not</b> want your information to be shared, you must select 'Opt Out'. <input type="checkbox"/> Opt Out			12. Student email address (optional):
<b>OFFICE ONLY</b> Address Verified		13. Date: / /	
14. Household address:		City, State:	ZIP Code:
15. Home phone ( )	16. Mailing address (if different from household):		City, State: ZIP Code:
17. City, State of birth:	18. Country of birth:	19. First enrolled in a CA school (K-12):	20. First enrolled in a US school (K-12):
		Date: / /	Date: / /
21. Student residential status (check one):			
<input type="checkbox"/> Foster Group Home (FGH) (FFA) <input type="checkbox"/> Parent/legal guardian (home) <input type="checkbox"/> Foster Family Home (FFH) <input type="checkbox"/> Homelessness-hotel/motel* <input type="checkbox"/> Homelessness-doubling up (living with someone)* <input type="checkbox"/> Hospital (not state hospital) <input type="checkbox"/> Homelessness-sheltered* <input type="checkbox"/> Homelessness-unsheltered* <input type="checkbox"/> Other _____ <input type="checkbox"/> Foreign exchange student <input type="checkbox"/> Residential facility <span style="float: right;">*Temporary residence due to financial hardship</span>			
22. Only if applicable complete and include siblings who are currently in Grades PK-12 in SDUSD.			
Sibling 1 full name:		Grade:	School name:
Sibling 2 full name:		Grade:	School name:
Sibling 3 full name:		Grade:	School name:
II. CONTACT INFORMATION Provide at least three contacts—if additional space is needed use Notes on back of form.			
	23. CONTACT	24. OTHER CONTACT	25. EMERGENCY CONTACTS (OTHER THAN PARENTS)
Contact full name			Full name:
Relationship to student			Relationship to student:
Lives with student?	Yes <input type="checkbox"/> No <input type="checkbox"/> If no, provide address here: _____ _____	Yes <input type="checkbox"/> No <input type="checkbox"/> If no, provide address here: _____ _____	Home phone ( ) Work phone ( ) Cell Phone ( )
Home phone	( )	( )	<input type="checkbox"/> Interpreter required <input type="checkbox"/> OK to release student
Work phone	( )	( )	Full name:
Cell phone	( )	( )	Relationship to student:
Email address (optional)			Home phone ( )
Employer			Work phone ( )
Active duty military	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Cell phone ( )
Contact primary language			<input type="checkbox"/> Interpreter required <input type="checkbox"/> OK to release student
Education level (select one)	<input type="checkbox"/> Not a High School Graduate <input type="checkbox"/> High School Graduate <input type="checkbox"/> Some College/AA Degree <input type="checkbox"/> College Graduate <input type="checkbox"/> Graduate School/Post-Graduate <input type="checkbox"/> Decline to state	<input type="checkbox"/> Not a High School Graduate <input type="checkbox"/> High School Graduate <input type="checkbox"/> Some College/AA Degree <input type="checkbox"/> College Graduate <input type="checkbox"/> Graduate School/Post-Graduate <input type="checkbox"/> Decline to state	
Select one or more for each contact.	<input type="checkbox"/> Interpreter required <input type="checkbox"/> Parent online access	<input type="checkbox"/> Report card <input type="checkbox"/> Progress report <input type="checkbox"/> Interpreter required <input type="checkbox"/> Parent online access	

**SIGNATURE REQUIRED ON REVERSE**

OFFICE ONLY Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Teacher: \_\_\_\_\_

Room #: \_\_\_\_\_

### III. QUESTIONS FOR PARENT/GUARDIAN

The following questions provide important information for the school staff. Parents must answer the following questions. Check 'Yes' or 'No' for each question where appropriate. Questions 29 and 30 are for high school students only. Question number 29 requires that you check 'Opt Out' or leave it blank if you agree to release your child's information.

<b>26.</b> Has your child ever received <b>Special Education</b> services? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>27.</b> Are you now engaged in migrant work, or have you been engaged in migrant work (moved and worked seasonally in agricultural, lumber or fishery related jobs) in the last three years? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>28.</b> Name, city, and state of last school attended: _____ _____ _____ Last grade level completed: _____	<b>29. (For high school students only)</b> Federal law requires release of student information to military recruiters. If you do <b>NOT</b> want this information released for your child, you must select 'opt out'. <a href="http://www2.ed.gov/policy/gen/guid/fpco/hottopics/ht-10-09-02a.html">http://www2.ed.gov/policy/gen/guid/fpco/hottopics/ht-10-09-02a.html</a> <input type="checkbox"/> Opt Out
<b>30. (For high school students only)</b> Has your child ever played interscholastic athletics? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>31. (For students born outside the U.S.—see #18)</b> Was this student born in a foreign country to diplomatic, military personnel or other U.S. citizen and granted U.S. citizenship? <input type="checkbox"/> Yes <input type="checkbox"/> No

The information provided in Sections I-III is true to the best of my knowledge.

**X**

\_\_\_\_\_  
 Parent/Guardian signature (required)

\_\_\_\_\_  
 Date

### IV. DISTRICT ADMINISTRATIVE INFORMATION – FOR OFFICE USE ONLY

<b>32.</b> Address verification document: _____	<b>LEGAL BINDINGS</b>
<b>33.</b> Birth verification documents: <input type="checkbox"/> Birth certificate <input type="checkbox"/> Affidavit <input type="checkbox"/> Church records <input type="checkbox"/> Passport <input type="checkbox"/> School records <input type="checkbox"/> Unverified	
<b>34.</b> School of residence: _____	
<b>35.</b> District of residence: _____ <input type="checkbox"/> Interdistrict attendance permit <input type="checkbox"/> InterSELPA agreement	
<b>36.</b> Boundary exception for non-resident student Type: _____ Reason: _____	
<b>ENTRY INFORMATION</b>	
<b>37.</b> Previously enrolled in SDUSD? <input type="checkbox"/> Yes* <input type="checkbox"/> No *If Yes: Last year _____ School _____ Grade _____	
<b>38.</b> Entry date: ____ / ____ / ____	<b>NOTES/ADDITIONAL INFORMATION</b>
<b>39.</b> Entry reason (check one): <input type="checkbox"/> Enter from within SDUSD <input type="checkbox"/> Enter from Out of District <input type="checkbox"/> Enter from Out of State <input type="checkbox"/> Initial Enrollment K-12 <input type="checkbox"/> Enter from Charter School within SDUSD	
<b>40.</b> For students new to SDUSD entering from <b>within</b> California: Student State ID (SSID) (if known): _____ Previous CA district: _____ Previous CA school name: _____	
<b>41.</b> For students new to SDUSD entering from <b>outside</b> of California: Previous school: _____ City, State: _____	
<b>EXIT INFORMATION</b>	
<b>42.</b> Exit date: ____ / ____ / ____	<b>44a.</b> Immunization status: <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete <input type="checkbox"/> Exempt
<b>43.</b> Exit reason (check one): <input type="checkbox"/> Grades PK-6 transfer within SDUSD <input type="checkbox"/> Grades PK-6 transfer out of SDUSD <input type="checkbox"/> Grades 7-12 transfer within SDUSD <input type="checkbox"/> Grades 7-12 transfer out of SDUSD <input type="checkbox"/> No Show-Enrollment Dropped <input type="checkbox"/> Withdrew Grades PK-6 <input type="checkbox"/> Other: _____	<b>44b.</b> Dental Exam ( <b>K only</b> )? <input type="checkbox"/> Yes <input type="checkbox"/> No