

# PLEASANTON UNIFIED SCHOOL DISTRICT ENROLLMENT FORM

Entry Date	Student ID No.	School	Grade	Teacher/Counselor
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**FILL OUT FORM COMPLETELY - BOLD HEADINGS ARE REQUIRED BY THE STATE AND MUST BE FILLED OUT**

STUDENT NAME <b>First</b>	<b>Middle</b>	<b>Last</b>
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STUDENT ALSO KNOWN AS <b>First</b>	<b>Middle</b>	<b>Last</b>
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RESIDENT ADDRESS <b>Street</b>	City	Zip Code	VERIFICATION	Move-in Date
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MAILING ADDRESS (if different)	City	Zip Code
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**Residence - where is your child/family currently living? (federally mandated by NCLB) - Please check appropriate box:**

In a single family permanent residence (house, apartment, condo, mobile home)       In a motel/hotel (09)  
 Doubled-up (sharing housing with other families/individuals due to economic hardship or loss) (11)       Unsheltered (car/campsite) (12)  
 In a shelter or transitional housing program (10)       Other (15) (please specify) \_\_\_\_\_

DATE OF BIRTH	VERIFICATION	PLACE OF BIRTH / CITY / STATE / COUNTRY	HOME/CELL PHONE	SEX	GRADE
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<p><b>WHAT IS YOUR CHILD'S ETHNICITY? (Please check one):</b>  <input type="checkbox"/> Hispanic or Latino    <input type="checkbox"/> Not Hispanic or Latino</p> <p><b>WHAT IS YOUR CHILD'S RACE? (Please check up to five racial categories):</b>  <i>The above part of the question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your race to be.</i></p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> American Indian or Alaskan Native (100)</td> <td><input type="checkbox"/> Laotian (206)</td> <td><input type="checkbox"/> Samoan (303)</td> </tr> <tr> <td><input type="checkbox"/> Chinese (201)</td> <td><input type="checkbox"/> Cambodian (207)</td> <td><input type="checkbox"/> Tahitian (304)</td> </tr> <tr> <td><input type="checkbox"/> Japanese (202)</td> <td><input type="checkbox"/> Hmong (208)</td> <td><input type="checkbox"/> Other Pacific Islander (399)</td> </tr> <tr> <td><input type="checkbox"/> Korean (203)</td> <td><input type="checkbox"/> Other Asian (299)</td> <td><input type="checkbox"/> Filipino/Filipino American (400)</td> </tr> <tr> <td><input type="checkbox"/> Vietnamese (204)</td> <td><input type="checkbox"/> Hawaiian (301)</td> <td><input type="checkbox"/> African American or Black (600)</td> </tr> <tr> <td><input type="checkbox"/> Asian Indian (205)</td> <td><input type="checkbox"/> Guamanian (302)</td> <td><input type="checkbox"/> White (700)</td> </tr> </table>	<input type="checkbox"/> American Indian or Alaskan Native (100)	<input type="checkbox"/> Laotian (206)	<input type="checkbox"/> Samoan (303)	<input type="checkbox"/> Chinese (201)	<input type="checkbox"/> Cambodian (207)	<input type="checkbox"/> Tahitian (304)	<input type="checkbox"/> Japanese (202)	<input type="checkbox"/> Hmong (208)	<input type="checkbox"/> Other Pacific Islander (399)	<input type="checkbox"/> Korean (203)	<input type="checkbox"/> Other Asian (299)	<input type="checkbox"/> Filipino/Filipino American (400)	<input type="checkbox"/> Vietnamese (204)	<input type="checkbox"/> Hawaiian (301)	<input type="checkbox"/> African American or Black (600)	<input type="checkbox"/> Asian Indian (205)	<input type="checkbox"/> Guamanian (302)	<input type="checkbox"/> White (700)	<p style="text-align: center;"><b>HOME LANGUAGE SURVEY</b></p> <p>The California Education Code requires schools to determine the language(s) spoken at home by each student.</p> <ol style="list-style-type: none"> <li>Which language did your son/daughter learn when he/she first began to talk? _____</li> <li>What language does your son/daughter most frequently use at home? _____</li> <li>What language do you most frequently speak to your son/daughter? _____</li> <li>Name the language most often spoken by the adults at home. _____</li> </ol>
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SCHOOL STUDENT LAST ATTENDED	DATE LEFT	DATE FIRST ENTERED A PUBLIC CALIFORNIA SCHOOL	DATE FIRST ENTERED U.S. SCHOOL
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SCHOOL ADDRESS (Street, P.O. Box)	City	State	Zip Code
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HAS YOUR CHILD EVER ATTENDED SCHOOL IN THIS DISTRICT BEFORE? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, WHICH SCHOOL: WHEN:	DOES YOUR CHILD HAVE A MEDICAL CONDITION? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, PLEASE SPECIFY
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DOES YOUR CHILD HAVE A CURRENT IEP (INDIVIDUAL EDUCATION PLAN)? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, PLEASE SPECIFY <input type="checkbox"/> Special Day Class <input type="checkbox"/> Speech/Language <input type="checkbox"/> Resource <input type="checkbox"/> Other	IS YOUR CHILD ENROLLED IN ANY OF THESE PROGRAMS/CLASSES? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, PLEASE SPECIFY <input type="checkbox"/> Reading Specialist <input type="checkbox"/> 504 Plan <input type="checkbox"/> English Lang. Dev. (ELD) <input type="checkbox"/> Gifted
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STUDENT RESIDES WITH: (Check One) <input type="checkbox"/> Both Parents <input type="checkbox"/> Father only <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Father/Stepmother <input type="checkbox"/> Non-relative <input type="checkbox"/> Mother only <input type="checkbox"/> Foster Parent <input type="checkbox"/> Mother/Stepfather <input type="checkbox"/> Relative Joint Custody <input type="checkbox"/> Yes <input type="checkbox"/> No    Is there a restraining order in effect? <input type="checkbox"/> Yes <input type="checkbox"/> No	PARENT EDUCATION LEVEL (Check the response that describes the education level of the most educated parent) <input type="checkbox"/> Not a high school graduate <input type="checkbox"/> College graduate <input type="checkbox"/> High school graduate <input type="checkbox"/> Graduate school/post graduate training <input type="checkbox"/> Some college (includes AA Degree) <input type="checkbox"/> Declined to state or unknown
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FATHER/GUARDIAN (full name) that student resides with	MOTHER/GUARDIAN (full name) that student resides with
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RELATIONSHIP (if other than parent)	RELATIONSHIP (if other than parent)
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EMPLOYER/BUSINESS NAME	PHONE	EMPLOYER/BUSINESS NAME	PHONE
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EMPLOYER/BUSINESS ADDRESS	EMPLOYER/BUSINESS ADDRESS
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OTHER CHILDREN LIVING AT HOME			OTHER CHILDREN LIVING AT HOME		
Name	Birthdate	School	Name	Birthdate	School

I UNDERSTAND THAT DUE TO ENROLLMENT CHANGES, MY CHILD MAY NOT BE ABLE TO ATTEND THE NEIGHBORHOOD SCHOOL, OR CLASS ASSIGNMENTS MAY NEED TO BE ADJUSTED. I hereby authorize Pleasanton Unified School District personnel to arrange for the doctor, dentist named on the emergency card and/or nearest hospital emergency facility to treat my child in case of emergency accident or illness in the event that I cannot be contacted to receive or give information concerning my child.

**FALSIFICATION OF REGISTRATION INFORMATION JEOPARDIZES ENROLLMENT IN PLEASANTON UNIFIED SCHOOL DISTRICT**  
 FOR SCHOOL USE ONLY

I verify all the above to be true and accurate.

RECORDS REQUEST (Date)

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

PLEASANTON UNIFIED SCHOOL DISTRICT ENROLLMENT FORM

Student's Name: \_\_\_\_\_

School: \_\_\_\_\_

1. Enrollment:

I understand that due to enrollment changes, my child may not be able to attend the neighborhood school, and/or class assignments may need to be adjusted.

2. Immunization:

The California Health and Safety Code, division 105, part 2, chapter 1, sections 120325-120380, title 17, division 1, chapter 4, sections 6000-6075, requires that every child entering a California school be immunized against polio, diphtheria, tetanus, pertussis, measles, mumps, rubella (MMR), hepatitis B, and chicken pox vaccine (varicella) or a health care provider-documented varicella disease or proof of immunity.

- I. If student is transferring from one public school within California to another public school in California, you have 30 days to provide the proof of immunization. After 30 days with no valid immunization, you will receive a "Notice of Exclusion from School Attendance".
II. If student is entering TK/Kindergarten, transferring from a private school, transferring from out-of state or out of county, you must present the immunization record before entry into a California school. All immunization must be up to date before the student can start school.

3. Discipline:

Please answer the following YES or NO:

- Has your child ever been recommended for an expulsion?
Is your child in the process of being expelled?
Has your child been expelled?

If yes, please answer the following:

Name of school district: \_\_\_\_\_

School year of expulsion: \_\_\_\_\_

Was your child readmitted to the district? Yes No

4. Home Language Survey - The California Education Code contains legal requirements, which direct schools to assess the English language proficiency of students. The process begins with determining the language(s) spoken in the home of each student. The responses to the home language survey will assist in determining if a student's proficiency in English should be tested. This information is essential in order for the school to provide adequate instructional program and services. As parents or guardians, your cooperation is requested in complying with these requirements. Please respond to each of the four questions listed in the Home Language Survey as accurately as possible. For each question, write the name(s) of the language(s) that apply in the space provided. Please do not leave any question unanswered. If an error is made completing this home language survey, you may request correction before your student's English proficiency is assessed.

Is either parent/guardian on active duty in the U.S. armed forces (Army, Navy, Air Force, Marine Corps or Coast Guard) or on full-time National Guard duty? Yes NO

I have read and fully understand the above.

Signature of Parent/Guardian

Date

FALSIFICATION OF ENROLLMENT INFORMATION JEOPARDIZES ENROLLMENT IN THE PLEASANTON UNIFIED SCHOOL DISTRICT.