



Registration Hours are Mon –Thurs 8AM–12:30PM.

There are no appointments necessary between these hours

UNIFIEDSCHOOLDISTRICT

Procedures for Student Registration

Please provide the following documents to register your student in a Lincoln Unified school:

- Completed** and signed Student Information Sheet
- Student's birth certificate, passport, or Parent Affidavit of Student Age (signed under penalty of perjury)
- Student's complete and up-to-date immunization record
- Parent/Guardian's photo ID
- Proof of residence within Lincoln Unified boundaries in parent/guardian's name
Original statements required; accepted documentation includes:
 - *Two bills dated within 30 days, or*
 - *Rental agreement dated within 30 days or rental agreement and one piece of current mail dated within 30 days (Lincoln USD staff may ask for additional documentation or call to confirm residency), or*
 - *Two pieces of correspondence from a government agency dated within 30 days*
- Student's previous school records. ***Students must bring an unofficial transcript*** and withdrawal release from their previous school. Lincoln High School will request official records from the previous school AFTER enrollment. The unofficial record is necessary for scheduling classes. Incoming 9th graders should provide their final 8th grade report card.
- Students who receive Special Education services must bring a copy of their current IEP (Individualized Education Program).

When proof of residence is in another person's name, they must be available in person to provide the following:

1. Any of the above options for proof of residence
2. Photo ID
3. Signature for a Residence Verification Letter, that is provided at time of registration, which includes the following information:
 - Address
 - Name of the individuals now claiming residence at that address
 - Acknowledgement that Lincoln Unified School District staff may conduct periodic home visits
 - Acknowledgement that the Residence Verification Letter is signed under penalty of perjury
Letter must be signed in front of a Lincoln USD employee (who will sign as a witness)

Parent/Guardian: Please be aware that you will be required to provide one of the listed options for proof of residence in your name within 45 days of signing a Residence Verification Letter. In addition, please be advised Lincoln Unified School District representatives may do a home visit to verify residence.

****Please contact the Registrar, 209.953.8915 if you have additional questions**

• FOR OFFICE USE •

ID# _____ Grade ____ Area ____ Birth Ver ____ Immun ____ Tdap ____ Res Verif ____ Photo ID ____ Spec Svcs _____

Reg Date/Initial _____ / _____ Counselor _____ Caregiver _____ Court Docs _____ Med Acc _____ Email to: SPED InsSrvs CWA HlthSrvs

Lincoln High School • 6844 Alexandria Pl • Stockton, CA 95207

STUDENT INFORMATION SHEET for Grades 9th-12th

Student's Legal Name _____ Birth Date ____/____/____ Grade ____
As identified on birth certificate Last First Middle Suffix (Jr., Sr., III) Month Day Year 2023-24

Home Address _____ Apt _____ City _____ Zip _____

Home Phone () _____ Male ____ Female ____ Nonbinary ____ Student's Email _____

PARENT/GUARDIAN INFORMATION

Mother's Name _____ Student Resides With: Yes No

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Home Address _____ Email _____

Parent ED Level Not a high school graduate High school grad Some college College grad Post grad/grad school

Father's Name _____ Student Resides With: Yes No

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Home Address _____ Email _____

Parent ED Level Not a high school graduate High school grad Some college College grad Post grad/grad school

Guardian's Name _____ Student Resides With: Yes No

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Home Address _____ Email _____

Guardian ED Level Not a high school graduate High school grad Some college College grad Post grad/grad school

EMERGENCY INFORMATION (other than parent/guardian)

Emergency Contact Name _____ Relationship _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Emergency Contact Name _____ Relationship _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Emergency Contact Name _____ Relationship _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

STUDENT'S MEDICAL INFORMATION

Describe any physical, health, or medical information we should be aware of including medications required during school:

Doctor's Name _____ Phone () _____ Hospital Preference _____

NOTE: Lincoln Unified School District *does not* carry health insurance for students. In the event of an emergency, all medical and associated costs are the responsibility of the parent/guardian. You may purchase student accident insurance if you wish. Applications are available in the school office.

MEDI-CAL ELIGIBILITY

If my child is or may become eligible for public benefits (Medi-Cal); I authorize the LEA/District to release student information for the limited purpose of billing Medi-Cal/Medicaid and to access Medi-Cal health insurance benefits for applicable services.

Yes No

SPECIAL EDUCATION

Has your child been served in a special program? If so, please specify: Special Education GATE Title I

What Service: Special Day Class Resource Specialist Program Behavior Support Plan Language, Speech & Hearing

Does your child have an IEP or 504 Plan?

RACE/ETHNICITY INFORMATION

(Providing this information is voluntary and will only be used for reporting student statistics to the California Department of Education as required.)

Is your child Hispanic or Latino? (Choose only one response.) No, not Hispanic or Latino Yes, Hispanic or Latino

Please continue to answer by marking one or more of the following boxes to indicate your child's race.

- Black/African American
 - Asian/Asian American
 - Pacific Islander
 - American Indian/Alaskan Native
 - White
- } *Circle one:* Chinese Japanese Filipino Korean Vietnamese Asian Indian Laotian Cambodian
- Hawaiian Samoan Guamanian Tahitian Other Asian Other Pacific Islander

Student's Birthplace _____
City State Country

Date student first enrolled in a USA school (if previously attended out-of-state or was born in another country) _____
Month / Day / Year

Has your child previously attended school in California? Yes No Date first enrolled in CA schools _____
/ /

Is either parent/guardian currently an active member of any branch of the US Armed Forces? Yes No

CORRESPONDENCE LANGUAGE PREFERECE

What language would you like us to use when *speaking* with you? _____ . . . when *writing* to you? _____

Previous School Attended _____
Name of School School District Phone Date Last Attended

Has your child previously attended a Lincoln Unified School? Yes No If so, list name of school(s) and year(s) attended:



Parent/Guardian Signature _____

Date _____ / _____ / _____

It is the policy of the Lincoln Unified School District not to unlawfully discriminate on the basis of sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, color, religion, marital status, age, or mental or physical disability in the educational programs or activities which it operates.

LINCOLN UNIFIED SCHOOL DISTRICT
LINCOLN HIGH SCHOOL

Student's Name: _____

Student's Date of Birth: _____ Last School Attended: _____
(if 8th grade: High School assigned to)

Please check whether or not you give permission for your child to be interviewed/photographed by the media (newspaper, radio, or TV).

- Yes, I give my permission
 No, I do NOT give permission

Please check whether or not you give permission to share your child's information with the military.

- Yes, I give my permission
 No, I do NOT give permission

California Education Code 49079 requires that teacher(s) be informed of each student who has violated a school's discipline code within the previous three (3) years. This requirement includes information the school receives from law enforcement agencies.

Pursuant to the California Education Code, please answer the following questions and provide appropriate information.

Has this student been SUSPENDED from school in the past three (3) years?
(Removed from school for one to five days)

YES REASON(S) FOR SUSPENSION(S): _____
NO _____

Has this student been RECOMMENDED FOR EXPULSION in the past three (3) years?

YES REASON(S) FOR RECOMMENDATION(S): _____
NO _____

Has this student been EXPELLED from school?
(Removed from school for one or two semesters)

YES DATE AND REASON(S) FOR EXPULSION(S): _____
NO _____

Is this student currently on Juvenile probation for violation(s) of the California Penal Code?

YES DATE AND REASON(S) FOR PROBATION: _____
NO _____

Parent/Guardian Signature: _____ Date: _____

HOME LANGUAGE SURVEY

Name of Student: _____
Last First Middle

Age of Student: _____ Grade: _____ [Office Staff – Stu ID: _____]

Directions to Parents and Guardians:

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 programs and services.

As parents or guardians, your cooperation is requested in complying with these requirements. Please respond to each of the four questions listed below 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.

1. Which language did your child learn when he/she first began to talk? _____
2. Which language does your child most frequently speak at home? _____
3. Which language do you (the parents or guardians) most frequently use when speaking with your child? _____
4. Which language is most often spoken by adults in the home? (parents, guardians, grandparents, or any other adults) _____

Please sign and date this form in the spaces provided below, then return this form to your child's teacher. Thank you for your cooperation.

Signature of Parent or Guardian Date



Lincoln Unified School District Housing Questionnaire

Student Last Name	First	Middle

Name of School: _____

The information provided below will help the District determine what services you and/or your child may be eligible to receive. This could include additional educational services through Title I, Part A and/or the federal McKinney-Vento Assistance Act. The information provided on this form will be kept confidential and only shared with appropriate school district and site staff.

Presently, are you and/or your family living in any of the following situations?

- Staying in a shelter (family shelter, domestic violence shelter, youth shelter) or Federal Emergency Management Agency (FEMA) trailer
- Sharing housing with other(s) due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason
- Living in a car, park, campground, abandoned building, or other inadequate accommodations (i.e. lack of water, electricity, or heat)
- Temporarily living in a motel or hotel due to loss of housing, economic hardship, natural disaster, or similar reason
- Living in a single-home residence that is permanent

I am a student under the age of 18 and living apart from parent(s) or guardian.

- Yes No

The undersigned parent/guardian certifies that the information provided above is correct and accurate.

Print Parent/Guardian Name	Signature	Date

Phone Number	Street Address	City	State	Zip

Your child or children may have the right to:

- Immediate enrollment in the school they last attended (school of origin) or the local school where you are currently staying, even if you do not have all the documents normally required at the time of enrollment.
- Continue to attend their school of origin, if requested by you and it is in the best interest.
- Receive transportation to and from their school of origin, the same special programs and services, if needed, as provided to all other children, including free meals and Title I.
- Receive the full protections and services provided under all federal and state laws, as it relates to homeless children, youth, and their families.

Please list all children currently living with you.

Name	Gender	Birthdate	Grade	School

If you have any questions about these rights, please contact the District's Homeless Liaison:

Suzanne Fagundes, Director of Child Welfare and Enrollment

(209) 953-8989

sfagundes@lUSD.net

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sfagundes@lUSD.net

**Lincoln High School 2023 - 2024
9th Grade Course Offering Sheet**

ENGLISH

- 1010 (P)English 9
- 1013 (P)Journalism
- 1057 (P)Oral Interpretation

MATH

- 5604 (P)Computer Science Principles, AP
- 2082A/2092A (P)Math 1A
- 2082 (P)Math I
- 2083 (P)Math I Integrated, Honors
- 2084 (P)Math I Theoretical, Honors
- 2087 (P)Math II
- 2088 (P)Math II Integrated, Honors
- 2089 (P)Math II Theoretical, Honors
- 2090 (P)Math III

PHYSICAL EDUCATION

- 2535 PE 9

SCIENCE

- 3009 (P)Biology NGSS
- 3100 (P)Biology NGSS, Advanced
- 3102 (P)Chemistry NGSS
- 3105 (P)Chemistry NGSS, Advanced
- 3107 (P)Chemistry NGSS, Advanced, Honors
- 3108 (P)Physics NGSS
- 3111 (P)Physics NGSS, Advanced

SOCIAL SCIENCE

- 1519 (P)Human Geography, AP
- 1505/1536 (P)World Geography / Health
- 1511/1536 (P)Ethnic Studies / Health

WORLD LANGUAGES

- 4002 (P)French 1
- 4105 (P)Italian 1
- 4028 (P)Spanish 1 for Spanish Speakers
- 4018 (P)Spanish 1

CAREER & TECHNICAL EDUCATION

- 5900 Building and Construction, Intro
- 5918 (P)Cabinetry, Millwork and Wood, Intro
- 5908 Child Dev and Family Services, Intro
- 5821 *(P)Computer Survey
- 5902 (P)Engineering and Architecture, Intro
- 5912 (P)Fashion/Interior Design and Merch, Intro
- 5947 *(P)Culinary Arts 1
- 5852 (P)Internet Engineering 1

VISUAL & PERFORMING ARTS

- 6010 (P)Art 1
- 7090 *(P)Band, Beginning
- 7003 (P)Concert Band (*Concurrent enrollment in Trojan Marching Band required.*)
- 7100 (P)Concert Choir
- 6050 (P)Digital Video Production
- 7310 (P)Drama, Beginning
- 7034 (P)Electronic Music
- 7038 (P)Guitar 1
- 7015 (P)Jazz Band B (*Concurrent enrollment in one of either Symphonic, Concert or Wind Ensemble bands.*)
- 7012 (P)Lincoln Orchestra
- 6018 (P)Mixed Media
- 7331 (P)Musical Theater
- 7010 (P)Piano, Beginning
- 6012 (P)Sculpture/Ceramics 1
- 7313 Stage Craft/Theater Production 1 (*Must be concurrently enrolled in Beginning Drama or teacher recommendation.*)
- 7013 Trojan Marching Band
- 7014 (P)Wind Ensemble

ELECTIVES

- 8800 NNDCC Naval Science 1
- 8621 *(P)Student Government - US Student Body

9565 Dual Enrollment

(P) = UC/CSU Approved Courses
*UC/CSU Approval Pending

Student name: _____

Last

First

9th Grade Course Selection Sheet 2023-2024

Schedule Preference – NOT GUARANTEED

Parent Phone Number: _____

Student Phone Number: _____

Student/Parent Email: _____

All students are entitled to a 7-period day.

I wish to select a 6-period day. Check one: 1-6 (8:30-2:42) Under **Other Elective**, enter **8550** (No 7th).
 2-7 (9:27-3:39) Under **Other Elective**, enter **8545** (No 1st).

Instructions:

- Using the 2022-2023 course catalog, select what classes you wish to take for 9th grade.
- Fill in each row on the primary choice columns.
- For each elective you select as a primary choice, you need to include an alternative selection.**
- Students intending to meet NCAA eligibility standards please initial here. ___ / ___

SUBJECT (graduation requirements)	PRIMARY CHOICES		ALTERNATIVES (where applicable)	
	COURSE #	COURSE NAME	COURSE #	COURSE NAME
English (4 years required)	1010	English 9		
Math (2 years required)				
Physical Education (2 years required)	2535	PE 9		
Science (1 year of Biology/1 year of Physical Science required)				
Social Science (3 years required) Please choose ONE option →	<small>If choosing the first option, please select which Social Science Class below</small> <input type="checkbox"/> Health (1 semester) AND <input type="checkbox"/> World Geo OR <input type="checkbox"/> Ethnic Studies <small>(1 semester)</small> OR <input type="checkbox"/> AP Human Geography (1 full year course)			
Visual/Performing Arts, World Language, Career & Technical Education or other elective (1 year required)				
Other Elective				

Student Signature _____ Parent Signature _____