



Folsom Cordova Unified School District Secondary Pre-Enrollment Information 23-24

Please mark grade for school year of enrollment: 6 7 8 9 10 11 12

*** Circle any supports your child receives: 504 Plan IEP/Special Education GATE/Gifted Speech ***

Student's Legal Name: _____
Last First Middle

Legal Sex: M/F/Nonbinary: _____ Birthdate: _____

**You will have the opportunity to add a preferred name and or gender for your student when you complete the online registration process*

Student's Home Address: _____
Street City Zip Code

Place of Birth: _____
City/State/Province

Parent I/Guardian Name: _____ Cell Phone: (____) _____

Parent I/Guardian Email Address: _____

Parent II/Guardian Name: _____ Cell Phone: (____) _____

Parent II/Guardian Email Address: _____

With whom does the student reside? _____ Are there custody papers on file? Yes No

School Student Last Attended: _____
Name Address School Phone Number

Verification of Age as Defined by Ed Code:

- Birth Certificate
- Baptism Certificate duly attested
- Passport
- Affidavit of the parent, guardian, or custodian of the minor

Verification of Residency as Defined by Ed Code:

- Utility Statement
- Government Document
- Driver's License
- Non-Government Issued Photo ID
- Voter Registration
- Property Tax
- Pay Stub
- Correspondence from a Government Agency
- Affidavit of Residency (to be signed in person at home boundary school office)

For Office Use Only:
Received Date: _____
Student ID: _____
Snap Code: _____
Immunizations: _____
Verified by: _____

In accordance with Folsom Cordova Unified School District Policy 5117, I hereby declare that I reside with my student at the address shown above. *Falsifying this address will result in immediate disenrollment of my student. My signature below verifies all of the information on this form to be true under penalty of perjury.*

Parent/Guardian Signature: _____ Date: _____