



MT. PLEASANT SCHOOL DISTRICT

IN ORDER TO ENROLL A CHILD IN SCHOOL, THE FOLLOWING MUST BE PROVIDED:

1. **PROOF OF BIRTHDATE** - Certified birth certificate, baptismal record or passport - original documents.
Kindergarten: Child turns five years old by September 1
Transitional Kinder: Child five years-old, turns four between September 1 – June 1
2. **IMMUNIZATION RECORD** - Signed or stamped by a doctor.
Doctor's verification of month and year of the following immunizations:
 - a. Poliomyelitis (polio) 4 doses but 3 doses are acceptable if the last dose was given after the age of 4 years.
 - b. Diphtheria, Tetanus, Pertussis (DTP / DTaP/ Tdap or TD) 5 doses, 4 doses are acceptable if the 1 dose given on or after the age of 4 years, 3 doses acceptable if 1 dose given on or after age of 7.
7th Grade requirement- at least 1 dose of Tdap on or after age 7
 - c. Measles, Mumps, Rubella (MMR) (2 doses) Both doses must be given on or after first birthday. One of the doses must be MMR; the other dose may be any measles-containing vaccine.
 - d. Hepatitis B (3 doses) (Not required for 7th grade entry)
 - e. Varicella (chicken pox) 2 doses
7th Grade requirement- 2 doses Varicella
 - f. TB Risk Assessment Form completed by pediatrician or verification of clear Tuberculin Skin Test (TST) or Interferon Gamma or clear x-ray (within 12 months of school registration)

_____ **Kindergarten only** Full-physical examination (completed after March 1, before start Kinder).
_____ **Kindergarten only** - Dental examination (completed after August 1, start of kinder).
3. **PROOF OF RESIDENCE** –
One of the following must be provided clearly indicating the name of the parent/guardian of the child AND the address within the Mt. Pleasant School District boundaries. (*Before submitting documentation please cross out all listed dollar amounts and account numbers to maintain privacy*)
 - Property tax payment receipts,
 - Rental property contract,
 - Lease or Rental payment receipts,
Utility service contract, statement or payment receipts (PG&E, Water, Trash) Phone bills are not acceptable.
 - Pay stubs;
 - Voter registration,
 - Correspondence from a government agency,

If you are unable to obtain proof of residency and reside with another family whose name appears on the above documents, please submit a signed Verification of Residency form with one of the above Proof of Residence forms.

Special Circumstances:

 - *If you cannot provide proof of residence in your name and can not obtain a Verification of Residency please contact the school secretary to discuss the requirements for completing a Declaration of Residency Form.*
 - *If you have become homeless or do not have permanent housing please contact the School Secretary regarding enrollment.*
4. **EMERGENCY CONTACT INFORMATION-** Names, addresses, phone numbers of individuals who are authorized to pick up your child from school in an emergency.
5. As needed: Copy of Health Plan, Restraining Order, or Authorization to Administer Medication

ONLY THE PARENT OR LEGAL GUARDIAN MAY ENROLL A STUDENT. AN INDIVIDUAL REPRESENTING A PARENT MUST HAVE A COMPLETED CAREGIVERS AFFIDAVIT. The District will require the parent or legal guardian to show a valid California Driver's license or picture identification at the time of enrollment.



Mt. Pleasant School District Enrollment Form.

School Year: 20__ - 20__

Today's Date: Home School
Student ID #: Teacher

Grade Legal Last Name Legal First Name Legal Middle Name Male Female

Birthdate (MM/DD/YYYY) Birth State/ Province Birth Country Date Entered U.S. (MM/YYYY) Start Date at 1st CA School. (MM/YYYY) Start Date at 1st US School (MM/YYYY)

Student Ethnicity Is student Hispanic/Latino What is Student's Race: If the student is Hispanic/Latino, this section is not required; if the student is NOT Hispanic/Latino please select all that apply: American Indian/Alaskan - 100 Vietnamese - 204 Hmong - 208 Samoan - 303 Other Pacific Islander - 399 Chinese - 201 Asian Indian - 205 Other Asian - 299 Tahitian -304 Black African/American - 600 Japanese - 202 Laotian - 206 Hawaiian - 301 Filipino- 400 White - 700 Korean - 203 Cambodian - 207 Guamanian - 302

Parent/Guardian 1 Last Name Parent/Guardian First Name Relationship to Student Living with Student Parent/ Guardian 1 Contact Phone

Parent/ Guardian 1 Email Address Parent/ Guardian 1 Employer Parent/Guardian 1 Work Phone

Residential Address (Number, Street, Tag, Apartment #) Mailing Address? City Zip Code

Parent/Guardian 2 Last Name Parent/Guardian 2 First Name Relationship to Student Living with Student Parent/ Guardian 2 Contact Phone

Parent/ Guardian 2 Email Address Parent/ Guardian 2 Employer Parent/Guardian 2 Work Phone

Secondary Address (Number, Street, Tag, Apartment #) Same as above Mailing Address? City Zip Code

Is there a Restraining Order on File? Please explain: Is Mother or Father on active duty in the U.S. Armed Forces of National Guard? Branch

Highest Education Level- Mother Graduate Degree or Higher. College Graduate with BS/BA. Some College Classes or Associate's Degree High School Graduate. Not A High School Graduate Decline to State

Highest Education Level-Father Graduate Degree or Higher. College Graduate with BS/BA. Some College Classes or Associate's Degree High School Graduate. Not A High School Graduate Decline to State

Home Language Survey Pursuant to California Law all students with a Home Language other than English will be tested for English Proficiency

1 Which Language did the student learn when they began to talk? (Primary Language). 2 What Language does the student use most at home? (Home Language) 3 Which Language do you most frequently speak to the student? (Language spoken to the student) 4 What Language do the adults speak most often in the home? (Language spoken by Adults) Which Language would you like to receive Communications? English Spanish Vietnamese

Sibling 1 Age Current School Sibling 3 Age Current School Sibling 2 Age Current School Sibling 4 Age Current School

Previous School Enrolled: Previous District Date Attended:

Programs your student has been enrolled in: None Special Education (IEP) Speech Retained English Learner (ELD) Counseling Adapted Physical Education 504 Plan Migrant Gifted & Talented Preschool

Health Concerns. None Seizures Vision/ Wears glasses Asthma Diabetes Hearing loss Serious Allergies: Heart Condition ADD/ADHD Other: Head injury Other: Health Support Needed Has Epi-Pen Needs Health Plan Inhaler Takes Medication at School

I have reviewed this document and to the best of my knowledge, the information contained herein is true and complete. The undersigned declares under penalty of perjury that they are the parents or legal guardians of the above-named student and grant the above authorizations.

Parent/ Guardian Signature: Date:

Office Use Form reviewed by staff initials: Birth Certificate/ Passport Proof of Residency Residency (Homeless) Survey Completed Immunizations Complete TB Assessment CHDP Completed Oral Health Completed Lunch Application Approved Inter-district



Housing Questionnaire

Mt. Pleasant School District

Student Last Name	First	Middle

Name of School:

The information provided below will help the LEA 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



Housing Questionnaire

Mt. Pleasant School District

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 your LEA's Homeless Liaison:

Name: Laurie A. Breton

Email: lbreton@mpesd.org

Phone: 408 223-3740