Your future. Our focus.
DAVIDSON COUNTY SCHOOLS

OFFICE USE ONLY
Student ID # _____
Grade_____ Entry Date/Code _____
Homeroom/Team _____
School _____

New Student Enrollment Form

Revised April 2026

Welcome to Davidson County Schools! The parent or legal guardian must appear in person with this completed form and the following items to enroll a student in school:

- Identification
- Two Proofs of Residency
- Certified Birth Certificate
- Custody Order, *if relevant*
- Immunization Records
- NC Health Assessment

STUDENT INFORMATION

LEGAL LAST NAME	FIRST NAME	MIDDLE NAME
DATE OF BIRTH (MM/DD/YYYY)	GENDER ◯ MALE ◯ FEMALE	IS THIS STUDENT HISPANIC/LATINO? ◯ YES ◯ NO
RACE (CHECK ALL THAT APPLY) ◯ AMERICAN INDIAN/NATIVE ALASKAN ◯ ASIAN ◯ BLACK/AFRICAN AMERICAN ◯ NATIVE HAWAIIAN/PACIFIC ISLANDER ◯ WHITE		
HOME PHONE NUMBER ( )	LAST SCHOOL ATTENDED (NAME/LOCATION/PHONE NUMBER)	
SPECIAL PROGRAMS (PLEASE CHECK IF YOUR CHILD HAS BEEN SERVED IN ANY OF THE FOLLOWING PROGRAMS) ◯ EXCEPTIONAL CHILDREN-IEP ◯ SECTION 504 ◯ AIG/GIFTED ◯ ESL ◯ TITLE I READING ◯ OTHER (PLEASE SPECIFY)		

FAMILY'S DOMICILE ADDRESS		FAMILY'S MAILING ADDRESS (IF DIFFERENT)	
STREET	APT/SUITE#	STREET	APT/SUITE#
CITY	STATE/ZIP	CITY	STATE/ZIP
PROOF OF RESIDENCY (TWO REQUIRED) ◯ UTILITY STATEMENT ◯ MORTGAGE STATEMENT ◯ VEHICLE REGISTRATION ◯ LEASE/RENTAL AGREEMENT/DEED ◯ OTHER		DATE VERIFIED WITH TRANSPORTATION/INITIALS	

PARENT/GUARDIAN INFORMATION	PARENT/GUARDIAN INFORMATION
FULL NAME	FULL NAME
RELATIONSHIP TO STUDENT ◯ MOTHER ◯ FATHER ◯ GUARDIAN	RELATIONSHIP TO STUDENT ◯ MOTHER ◯ FATHER ◯ GUARDIAN
STUDENTS LIVES WITH ◯ YES ◯ NO	STUDENTS LIVES WITH ◯ YES ◯ NO
ADDRESS	ADDRESS
HOME PHONE ( ) MOBILE PHONE ( ) WORK PHONE ( )	HOME PHONE ( ) MOBILE PHONE ( ) WORK PHONE ( )
EMPLOYER/OCCUPATION	EMPLOYER/OCCUPATION
LANGUAGE OF PARENT	LANGUAGE OF PARENT
EMAIL ADDRESS	EMAIL ADDRESS
STEPPARENT INFORMATION	**STEPPARENT INFORMATION**
FULL NAME	FULL NAME
MOBILE PHONE ( ) WORK PHONE ( )	MOBILE PHONE ( ) WORK PHONE ( )

Only a custodial parent or legal guardian can enroll a student in Davidson County Schools.

PARENTS MARITAL STATUS
◯ MARRIED ◯ SEPARATED
◯ DIVORCED ◯ WIDOWED
◯ SINGLE

IF SEPARATED/DIVORCED, HAS THE COURT ISSUED A CUSTODY ORDER SIGNED BY A JUDGE?
◯ YES ◯ NO

IF SEPARATED/DIVORCED, WHO HAS *PRIMARY* CUSTODY?
◯ MOTHER ◯ FATHER
◯ JOINT

Unless otherwise determined by court order, both natural parents have equal rights to make educational decisions and to access educational records for their child. If COURT ORDERED CUSTODY paperwork exists, it must be provided to the school upon enrollment. ***Notarized statements regarding custody/guardianship are not acceptable for enrollment.***

EMERGENCY CONTACTS (OTHER THAN PARENTS-ANYONE NOT LISTED WILL BE UNABLE TO PICK CHILD UP FROM SCHOOL WITHOUT WRITTEN CONSENT FROM THE PARENT)

FULL NAME	RELATIONSHIP TO STUDENT	HOME PHONE ( )	MOBILE PHONE ( )
FULL NAME	RELATIONSHIP TO STUDENT	HOME PHONE ( )	MOBILE PHONE ( )
FULL NAME	RELATIONSHIP TO STUDENT	HOME PHONE ( )	MOBILE PHONE ( )
FULL NAME	RELATIONSHIP TO STUDENT	HOME PHONE ( )	MOBILE PHONE ( )

MEDICAL INFORMATION

PHYSICIAN NAME/PHONE NUMBER ( )	DENTIST NAME/PHONE NUMBER ( )	MEDICAL CONDITIONS/ALLERGIES (LIST)
HAS YOUR CHILD EXPERIENCED A HEAD INJURY WITHIN THE LAST YEAR? ◯ YES ◯ NO IF SO, WHEN?		LIFE THREATENING ◯ YES ◯ NO

DOES YOUR CHILD REQUIRE ANY OF THE FOLLOWING SELF CARRY MEDICATION? ◯ EPIPEN ◯ INHALER ◯ OTHER (PLEASE SPECIFY)

HOME LANGUAGE SURVEY

If the answer to any of these questions reveals that a student/family speaks a language other than English, the student must take an English language assessment in order to determine if academic support will be provided for acquisition of English language skills. Parents may waive ESL pull out services. Do not include foreign languages studied in school or solely learned through media (TV, tape, CDs, toys).

Date of entry into US public schools?	What is the first language this student learned to speak?	What language is most often spoken in the home?
Country of Birth?	What language does the student use most often?	Please list any language(s) other than English your student speaks **on a regular basis**.

SAFE SCHOOLS DECLARATION *(Please do not sign until directed to do so by a Notary Public.)*

NC General Statute 115C-366 (a4) requires that parents, guardians, and legal custodians of all students who transfer into a NC public school provide a statement as to whether the child is under suspension of expulsion from attendance at a private or public school in this or any other state or has been convicted of a felony in this or any other state.

SUSPENSIONS AND EXPULSIONS

◯ My child **IS NOT** currently suspended or expelled nor has a pending suspension or expulsion from any school.
◯ My child **IS** currently under a short-term (less than 10 days) suspension.
School _____ Offense _____
◯ My child **IS** currently under a long-term (more than 10 days) suspension.
School _____ Offense _____

FELONY CONVICTIONS

◯ My child **HAS NOT** been convicted of a felony in this or any other state.
◯ My child **HAS** been convicted of the following felony/felonies.
Charge(s) convicted of _____ City/State _____ Date of conviction _____

PARENT/LEGAL GUARDIAN ATTESTATION

I, _____ (Parent/Legal Guardian) hereby swear and affirm that the above information is true and accurate.

To be completed by Notary Public:
Dated this _____ day of _____, 20_____, _____personally appeared before me, is personally known by me or has proved their identity by providing adequate documentation to me, and in my presence signed the Safe Schools Declaration above. This person made an oath or affirmed to me that the information given is true.
Witness my hand and official seal this _____ day of _____, 20_____.
Notary Public _____ My commission expires _____

CERTIFICATION STATEMENT

I, _____ (Printed name) certify that all information provided is true and accurate.

Signed _____ Date _____

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DAVIDSON COUNTY SCHOOLS

Student Records Request

The following student has enrolled in Davidson County Schools:

DATE

NAME		DATE OF BIRTH
SCHOOL PREVIOUSLY ATTENDED		GRADE
ADDRESS		
ATTENTION	FAX NUMBER	PHONE NUMBER

At your earliest convenience, please send cumulative records.

Complete cumulative record including:

- ☐ Date of entrance and date of withdrawal
- ☐ Attendance records, including current quarter, semester, and year.
- ☐ Report Cards/Transcript
- ☐ If the student left prior to final grades for the current term, please include the subjects/courses in which the student was enrolled and the current academic average in each.
- ☐ *Health and Immunization records (required by North Carolina state law)
- ☐ Standardized test results
- ☐ Driver education certificate or record
- ☐ IEP or Section 504 records, if applicable
- ☐ Other _____

_____

Please send records to:

SCHOOL NAME	
ADDRESS	
CITY	STATE/ZIP
PHONE NUMBER	FAX NUMBER

_____
SCHOOL OFFICIAL

_____
PARENT/GUARDIAN/STUDENT (IF OVER 18 YOA)

Your signature on this form authorizes Davidson County Schools to obtain educational records for the above named student from previous schools of attendance.

**North Carolina law requires a complete immunization record showing actual dates of required immunizations within 30 calendar days of enrollment in school. Failure to provide said records within 30 days will result in the student being excluded from school attendance until the complete records are received by the school.*

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New Enrollment Checklist

Revised April 2026

Welcome to Davidson County Schools!

The following provides you with information you will need to enroll your student in our district.

FOR ASSISTANCE…	
…to determine school assignment, please contact Transportation or a school in your area	(336) 249-8977
…with questions about residency or domicile determination, please contact Communications	(336) 242-5548
…with students in transition/foster care	(336) 242-5604
…finding needed forms identified on this checklist	www.davidson.k12.nc.us >Parents | Students >Enroll Your Student

CHECKLIST		
☐	Photo Identification of Parent/Legal Guardian	***Only*** a parent or legal guardian can enroll a student.
☐	Certified Copy of Child's Birth Certificate	Office Staff: Contact Student Support Services if questions arise regarding Birth Certificates.
☐	Proof of Custody/Guardianship *(required for all children not living with a biological parent)*	May include: • Birth certificate • Court order for custody/guardianship *(notarized statements are not acceptable for enrollment)* • Kinship order from social services • Foster care placement paperwork
☐	Two Proofs of Residency in the DCS District	• Utility statement: electricity, water, gas, cable, internet • Current mortgage statement, deed, or rental/lease agreement • Vehicle registration • Voter registration
☐	Current Immunization Records *(within 30 days of enrollment)*	Additional information about immunizations can be provided by the school nurse
☐	NC Health Assessment *(within 30 days of enrollment)*	Required for all Kindergarten students and any student who is enrolling in a **NC Public school** for the first time. The form can be found here https://bit.ly/2TpeNIi or you can obtain a copy from the school or your child's pediatrician.
☐	Previous School Information *(Helpful but not required)*	• Name, address, telephone number of prior school • Most recent report card or transcript • Copy of the student's current schedule/grades at previous school
☐	DCS Enrollment Form	Can be found on the DCS website under Parents/Students > Enroll Your Student > DCS Enrollment Form: https://bit.ly/2H9YAjR
☐	Medication Use Form	Must be completed by you (over-the-counter) or your child's doctor (prescription) for medication student will be given at school. The forms can be found here: https://bit.ly/2H9YAjR or you can obtain a copy from the school.