



**SAN DIEGO UNIFIED SCHOOL DISTRICT
PK-12 ENROLLMENT FORM 2009-10**

Please print, complete, and sign this form. Please print this page & next as double sided. Return to Station 3.

Complete Sections I-IV and sign page 2. Section V must be completed by office staff. Please print legibly using black or blue pen. For full directions, please refer to *Completing Your Child's Enrollment Form* available at www.sandi.net/enrollment.

OFFICE ONLY 1. Student District ID: _____	OFFICE ONLY 2. Student State ID (SSID): _____
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I. STUDENT INFORMATION

3. Last name (LEGAL NAME ONLY) First Middle Suffix (Jr, II, III)			
4. Nickname:	5. Other name(s) used previously (AKA):	6. Birth date: / /	7. Student Social Security Number: -- --
8. Gender: <input type="checkbox"/> M <input type="checkbox"/> F	9. Is student Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	10. Race (select one or more): <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian Indian <input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Hmong <input type="checkbox"/> Korean <input type="checkbox"/> Other Asian <input type="checkbox"/> Other Pacific Islander <input type="checkbox"/> Tahitian <input type="checkbox"/> Samoan	
11. Home phone: ()	12. Household address: City, State: ZIP Code:		
OFFICE ONLY Home address verified: Date: / /	13. Mailing address: City, State: ZIP Code:		
Birth verification basis: <input type="checkbox"/> Birth certificate <input type="checkbox"/> Affidavit <input type="checkbox"/> Church records <input type="checkbox"/> Passport <input type="checkbox"/> School records <input type="checkbox"/> Unverified	14. City & state of birth:	15. Country of birth:	16. First enrolled in a CA school (K-12 only): Date: / /
17. First enrolled in a US school (K-12 only): Date: / /			
18. Student residential status (check one): <input type="checkbox"/> Parent/legal guardian (home) <input type="checkbox"/> Foster Family Home (FFH) <input type="checkbox"/> Foster Group Home (FGH) (FFA) <input type="checkbox"/> Homelessness-doubling up (living with someone) * <input type="checkbox"/> Homelessness-hotel/motel * <input type="checkbox"/> Homelessness-sheltered * <input type="checkbox"/> Homelessness-unsheltered * <input type="checkbox"/> Hospital (not state hospital) <input type="checkbox"/> Incarcerated institution <input type="checkbox"/> Residential facility <input type="checkbox"/> Other _____ * Temporary Residence due to financial hardship			

II. SIBLING INFORMATION

19. Complete this section only if applicable. Include only siblings who are currently in Grades PK-12 in SDUSD.

Sibling 1 full name:	Grade:	School Name:
Sibling 2 full name:	Grade:	School Name:
Sibling 3 full name:	Grade:	School Name:

III. CONTACT INFORMATION

Please complete this entire section. You must provide information for three contacts. For additional contacts, use the Notes section on the next page.

	20. PARENT/GUARDIAN	21. OTHER PARENT/GUARDIAN	22. EMERGENCY CONTACT (OTHER THAN PARENT)
Contact full name			
Relationship to student			
Lives with student? (circle one)	Yes / No If no, provide address here. _____	Yes / No If no, provide address here. _____	This information is not needed.
Home phone	()	()	()
Work phone	()	()	()
Cell phone	()	()	()
Email address			This information is not needed.
Employer			This information is not needed.
Contact primary language			
Education level (circle one)	NHS / HS / SC / C / G / DEC	NHS / HS / SC / C / G / DEC	This information is not needed.
Flags (circle all that apply)	INT / PC / AM	RC / PR / INT / PC / AM	RC / PR / INT / OK / PC

Education levels: NHS = Not a high school grad HS = High school grad SC = Some college/AA degree C = College grad G = Graduate/Post grad DEC = Decline to state
Flags: RC = Report card copy PR = Progress report copy INT = Interpreter needed OK = OK to release student PC = ParentConnection access AM = Active Military

SIGNATURE REQUIRED ON REVERSE

OFFICE ONLY Student Name:

Grade:

Teacher:

Room #: