

**PRE-ENROLLMENT DATA FORM**  
**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT**  
**MIRA COSTA HIGH SCHOOL**

**PLEASE PRINT**

Returning Student     YES  
                                   NO

Male  Female

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↑ STUDENT LAST NAME                      LEGAL FIRST NAME                      MIDDLE NAME                      GRADE LEVEL IN FALL

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Address (Number, Street)                      Apt. No.                      City                      Zip Code                      Home Phone

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Birth Date                      Place of Birth (city, state, country)                      **Parent E-mail Address**

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Father's Name                      Address/City/Zip                      Home Phone                      Cell Phone                      Business Phone

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Mother's Name                      Address/City/Zip                      Home Phone                      Cell Phone                      Business Phone

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Step/Guardian's Name                      Address/City/Zip                      Home Phone                      Cell Phone                      Business Phone

Name of brothers or sisters who currently attend Mira Costa: \_\_\_\_\_

CSIS # (10 digits) \_\_\_\_\_

**MANDATORY**

(Obtain from student's previous Calif. public school – Not required if student is coming from private school or out-of-state school)

**Parent Education:** Each year, school districts are required by state standardized testing to report the parent education level of their student population. Individual students are not identified. Mark the response that best describes the education level of the student's most educated parent/guardian.

- |   |   |
|---|---|
| <input type="checkbox"/> Graduate School/Post Graduate Training | <input type="checkbox"/> High School Graduate       |
| <input type="checkbox"/> College Graduate                       | <input type="checkbox"/> Not a High School Graduate |
| <input type="checkbox"/> Some College (includes AA degree)      | <input type="checkbox"/> Decline to State/Unknown   |

**School History:** During the school year, withdrawal papers from the previous school are required prior to enrollment.

Last School Attended: \_\_\_\_\_ Date Left: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Is your student under an expulsion order, or recommended for expulsion from another school district?

- Yes    If yes, name of school district \_\_\_\_\_  
 No

**Other Information:** If your child has a 504 Plan or IEP, please attach. Check boxes if they apply:

- IEP  
 504 PLAN  
 NONE OF THE ABOVE

OVER →→→

**Demographic Information:**

**Ethnicity:** Each year, school districts are required by state and federal agencies to report the ethnicity of their student population. Districts are required to categorize the population by using only these specific categories, individual students are not identified.

If the student's primary language is not English, has he/she received instruction in California for English Language Learners?

- Yes
- No

Is this student Hispanic or Latino?

- Yes, Hispanic or Latino
- No, not Hispanic or Latino

**Race:** The above question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your race to be.

- |  |  |
|--|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Other Asian               |
| <input type="checkbox"/> Chinese                           | <input type="checkbox"/> Hawaiian                  |
| <input type="checkbox"/> Japanese                          | <input type="checkbox"/> Guamanian                 |
| <input type="checkbox"/> Korean                            | <input type="checkbox"/> Samoan                    |
| <input type="checkbox"/> Vietnamese                        | <input type="checkbox"/> Tahitian                  |
| <input type="checkbox"/> Asian Indian                      | <input type="checkbox"/> Other Pacific Islander    |
| <input type="checkbox"/> Laotian                           | <input type="checkbox"/> Filipino                  |
| <input type="checkbox"/> Cambodian                         | <input type="checkbox"/> Black or African American |
| <input type="checkbox"/> Hmong                             | <input type="checkbox"/> White                     |

**Home Language Survey:**

**Student's primary language** \_\_\_\_\_

What language did your child learn when he/she first began to speak? \_\_\_\_\_

Which language does your child most frequently use at home? \_\_\_\_\_

Which language do you use most frequently to speak to your child? \_\_\_\_\_

Which language is most often spoken by adults in the home? \_\_\_\_\_

I AM AWARE THAT THE FALSIFICATION OF INFORMATION WILL INVALIDATE FUTURE CONSIDERATION FOR ATTENDANCE IN THE MANHATTAN BEACH UNIFIED SCHOOL DISTRICT.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_