

Student Enrollment Form

LINCOLN PARK PUBLIC SCHOOLS



Date		U.I.C.	
School		Student No.	
S.O.C.		Grade	

STUDENT INFORMATION (PLEASE PRINT) Enter student's full name as it appears on his or her birth certificate.

1st Day Present _____

Student's Legal Last Name		First Name		Middle Name / Suffix (Jr, III)	
Address Number and Street Name		City		Zip Code	
Date of Birth	Gender M/F	Birthplace (City, State, Country)			
Phone Number	Have you ever been enrolled in Lincoln Park schools? Yes <input type="checkbox"/> No <input type="checkbox"/>		Office Use Only Special Ed Survey Given <input type="checkbox"/> Affirmation of Prior Discipline Record <input type="checkbox"/>		

STUDENT'S ETHNIC GROUP

Part A: Is the student of Hispanic / Latino descent? Yes No
(A person of Cuban, Mexican, Puerto Rican, South or Central America or other Spanish culture or origin, regardless of race.) **If Hispanic you may skip Part B.**

Part B: Student's Race: Choose one or more

1. American Indian or Alaskan 4. Asian
 2. Caucasian 5. Native Hawaiian / Pacific Islander
 3. African American / Black

Note: Both parts A and B must be completed if you do not select Hispanic in Part A. We encourage you to select an answer for both parts. If either part A or B is not answered, the US Department of Education requires the school district to supply an answer on your behalf.

PREVIOUS SCHOOL ATTENDED (Include Preschool through 12th Grade)

School Name	City, State, Zip Code
School Mailing Address	Phone Number Fax Number

Has the student had a 10-day suspension or expulsion from another school and/or district?
 Yes No If yes, please complete the Affirmation of Prior Discipline Record.

Has the student received any IEPC/IFSP/IEP/MET Special Education Services or 504 Plan?
 Yes No If yes, please complete the Special Education Survey.

Is your child's first language a language other than English? Yes No
 What is the language? _____

Is the primary language used in your child's home or environment a language other than English? Yes No
 What is the language? _____

Note: "Primary language" means the dominant language used by a person for communication.

If yes to the above 2 questions, please answer below.

Is this the first time your child has enrolled in a school in the United States?
 Yes No

If NO, when did your child first enroll in a school in the United States?
 Month _____ Year _____

Current Living Situation:

Own / rent / lease: house / apartment / trailer, etc.
 Temporarily sharing a house with another person due to loss of housing or economic hardship
 In a motel, hotel, or campground due to a lack of alternative accommodations
 In an emergency or transitional shelter or hospital
 Awaiting foster care placement
 In a living arrangement not described above that is not fixed, regular, and adequate
 Unaccompanied youth and/or runaway
 None of the above

PARENT / GUARDIAN INFORMATION

(1) Parent/Guardian Last Name, First Name		Cell Phone
Relationship to Student	Work Phone Number	Email Address
Does the student reside with the person? YES <input type="checkbox"/> NO <input type="checkbox"/>	Is the person a custodial parent? YES <input type="checkbox"/> NO <input type="checkbox"/>	
(2) Parent/Guardian Last Name, First Name		Cell Phone
Relationship to Student	Work Phone Number	Email Address
Does the student reside with the person? YES <input type="checkbox"/> NO <input type="checkbox"/>	Is the person a custodial parent? YES <input type="checkbox"/> NO <input type="checkbox"/>	

(3) SIBLING INFORMATION

Student Last Name, First Name	Grade	School	Date of Birth
Student Last Name, First Name	Grade	School	Date of Birth
Student Last Name, First Name	Grade	School	Date of Birth

Birth Certificate _____ Immunization _____ Custody Papers _____
 Residency _____ Secretary Signature _____

I acknowledge all information is accurate

Parent Signature _____