

Student Enrollment Form

School:		Student Start Date:				
Student's Legal Last Name, Suffix	Stude	Student's Legal First Name			Student's Legal Middle Name	
Preferred Name (If requested):				3		
Gender: Date of Birth: (mm/dd/yyyy)				Grade:		
Home Language						
Please answer the questions below about				used for determining	whether a student	
needs English language support services						
If a language other than English is indicated support services. Additional criteria for testing			estions below, the stud	dent will be assessed	for English language	
1. What language(s) did the student first lea	rn to speak?					
2. What language does the student use mos	st often to commun	nicate?				
3. What language(s) are spoken in your hor	ne?					
Country of Birth:	If other the	nan United Stat	es, first United States	school entry date:		
		Residency				
Current Address:						
Current Address:Street			City	State	Zip	
Mailing Address:						
	Street		City	State	Zip	
Primary Phone #	Is this a cell phor	ne? □ Yes □	No If yes, to whom	does the # belong?		
☐ Single-family, detached home Is your current address a temporary living arran Is this a court-ordered Foster Care placement?	2 74 mayaya — a 19 mayaya	□ No If yes,	is this due to lack of ho	Condo ☐ Mobile using or economic hards at home? ☐ Yes ☐ N	ship? ☐ Yes ☐ No	
	Documenta	tion Required	for Enrollment			
Do you have verification of residency? (Mus ☐ Gas, Electric, Water, Oil, Sewer Bill		- Automotive and a second	Yes □ No □ Property Tax Bill/Sta	tement		
Do you have verification of age? ☐ Yes ☐	☐ No (Birth Certific	ate Preferred)				
Do you have the following Health Related D Documentation of "Age-Appropriate Imr If any box is marked "no," please reque	munizations" Ph	ysical Examinat				
information before a child may attend/e	nroll in school.			endered all alla		
Is there legal documentation concerning cus	tody? □ Yes □	No If yes	copy of documentation	on must be provided pr	ior to enrollment.	
		Ethnicity/Ra	ce			
Data requested by the Maryland State Department of Latino? ☐ Yes ☐ No		on, please chec	k:			
The Maryland State Department of Educatio	n requires identific	ation of one or	more racial categories	Please check one or i	more race categories	
☐ American Indian or Alaska Native☐ Asian	е	□ N:	ative Hawaiian or Othe hite	er Pacific Islander		
☐ Black or African American	Cibling to	rmatica	THE RESERVE OF STREET		Resides with	
Name of Sibling	Sibling Info	D.O.B	School	Grade	registering student (yes/no)	

Is either parent/legal guardian active or reserve U.S. Military? Yes □ No □ Did you move within the past 3 years for employment as a migratory agricultural worker or migratory fisher? Yes □ No □ Parent/Guardian Information Mother/Female Legal Guardian Telephone Number Work Number Relationship Address Cell Number E-mail Apt. # or P.O. Box Zip Employer □ Lives With Student □ Has Custody □ Contact Allowed □ Educational Rights □ Mailings Allowed □ Release To Father/Male Legal Guardian Telephone Number Work Number Relationship Address Cell Number Apt. # or P.O. Box City Zip Employer ☐ Lives With Student ☐ Has Custody ☐ Contact Allowed ☐ Educational Rights ☐ Mailings Allowed ☐ Release To Additional Parent/Guardian Information Name Telephone Number Relationship Work Number Address Cell Number Apt. # or P.O. Box Zip Employer □ Lives With Student □ Has Custody □ Contact Allowed □ Educational Rights □ Mailings Allowed □ Release To Prior School Experience and Other Information Name of last school attended prior to enrollment? _____ Grade ____ Attendance Address _____ City ____ State __ Zip __ Phone Has the student ever attended a Washington County Public School? Yes No If ves. name of last school? Has the student earned any Student Service Learning Hours (SSL)? ☐ Yes ☐ No If yes, how many hours? Has the student ever attended another Maryland School (other than Washington County)? ☐ Yes ☐ No If yes, name of last school? Does the student receive special services? Special Education 504 Plan ☐ EL Is the student presently suspended from school? ☐ Yes ☐ No Has the student ever been expelled from school? ☐ Yes ☐ No If yes, name of last school Address Effective dates of suspension/expulsion Disclaimer: Your child has been enrolled on the basis of available information. Upon receipt of all records and information, formal enrollment will be completed. Any person who willfully makes misrepresentation shall be subject to a penalty payable to WCPS for three times the pro rate of tuition for the time the student fraudulently attends a Washington County Public School.

Parent/guardian must be physically present to enroll a student. The above disclaimer must be signed at time of enrollment.

Signature of Parent/Guardian

Individual Enrolling Student

Date