



Registration Check-Off List 2018-19

Registration Packet for: _____
Last name First Name Middle Name

School of Residence: _____ Grade: _____

Completed Student Enrollment Packet includes:

	Parent Check Off	School Check Off
I. Student Registration Form	_____	_____
a. Birth Certificate or Passport (Date entered country) Kindergarten must be born on or before September 1, 2013 Transitional kindergarten must be born between September 2, 2013 and December 31, 2013	_____	_____
b. Residency Verification	_____	_____
• Current PG&E Utility bill []		
• Copy of your lease/rental agreement []		
• Escrow papers []		
• Other (Approved by Director)[]		
c. Student Residency Questionnaire/Affidavit	_____	_____
d. Photo I.D. of Parent or Legal Guardian	_____	_____
e. Signed Memorandum of Understanding	_____	_____
f. Migrant Survey.....	_____	_____
g. If student is receiving Special Ed. (Please attach a full copy of IEP)	_____	_____
II. Proof of Immunizations	_____	_____
a. TB (PPD) Test (if necessary)	_____	_____
b. Heath Physical Completed (Dated 2/20/18 or later for Kindergarten or 2/20/17 or later for 1st grade)	_____	_____
c. Oral Health Assessment/Waiver Request Form.....	_____	_____

For Office Use Only.....

- School of Residence: _____ Overflow School: _____
- Aeries ID # _____ ELL [] SPEC ED []
- Entered into Aeries: _____
(Date) (Signature)
- Assigned to School _____
- Transfer (if previously enrolled) [] Prior Year _____ Prior School _____
- Notified School: Fax/Email [] _____ Phone [] _____
Date/Time Date/Time