

Boulder Valley School District Student Enrollment Form

Household Information

School Year: _____

Today's Date: _____

Custodial Parent(s)/Guardian(s): Household Information

Telephone Number for Primary Residence: _____

Residence Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if different): _____ City: _____ State: _____ Zip: _____

County: _____ School District: _____

Parent/Guardian 1

Last Name: _____

First Name: _____ Middle Name: _____

Gender: Female Male

Work Phone (w/ Ext): _____

Employer: _____

Cell Phone: _____ Pager: _____

E-mail address: _____

Parent/Guardian 2

Last Name: _____

First Name: _____ Middle Name: _____

Gender: Female Male

Work Phone (w/ Ext): _____

Employer: _____

Cell Phone: _____ Pager: _____

E-mail address: _____

Translation and Interpretation Needs for Above Household

Do you need help understanding school documents that are written in English? Yes No

Do you need the help of an interpreter for meetings with school personnel? Yes No

If you answered "Yes" to either of the questions above, please check either A, B, or C:

A _____ We prefer a relative, friend or neighbor to act as our interpreter. Because of confidentiality, BVSD does not allow children or students to act as interpreters. Name of interpreter _____ Home Phone Number _____
Address _____

B _____ We prefer that the school provide an interpreter who speaks _____ (language best understood by the household)

C _____ We want written information sent to our household in Spanish.

Parent(s)/Guardian(s) at Second Residence: Mailings are sent to the Mailing Address listed above for the custodial parent(s)/guardian(s).

Do you want an additional mailing to go to this address? Yes No Home Telephone Number: _____

Residence Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if different): _____ City: _____ State: _____ Zip: _____

County: _____ School District: _____

Parent/Guardian 3

Last Name: _____

First Name: _____ Middle Name: _____

Gender: Female Male

Work Phone (w/ Ext): _____

Employer: _____

Cell Phone: _____ Pager: _____

E-mail address: _____

Parent/Guardian 4

Last Name: _____

First Name: _____ Middle Name: _____

Gender: Female Male

Work Phone (w/ Ext): _____

Employer: _____

Cell Phone: _____ Pager: _____

E-mail address: _____

Translation and Interpretation Needs for Above Household

Do you need help understanding school documents that are written in English? Yes No

Do you need the help of an interpreter for meetings with school personnel? Yes No

If you answered "Yes" to either of the questions above, please check either A, B, or C:

A _____ We prefer a relative, friend or neighbor to act as our interpreter. Because of confidentiality, BVSD does not allow children or students to act as interpreters. Name of interpreter _____ Home Phone Number _____
Address _____

B _____ We prefer that the school provide an interpreter who speaks _____ (language best understood by the household)

C _____ We want written information sent to our household in Spanish.

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ALL CHILDREN LIVING IN THE HOUSEHOLD

Telephone Number for the Primary Residence: _____

Please list all children living in the household (even those who are not attending school or are attending a different school):

*NOTE: At this time, public schools are required by state and federal regulation to report one, and only one, ethnicity. Ethnic identification is provided by the parent/guardian or the emancipated student.

Child 1

Legal Last Name: _____ Legal First Name: _____ Legal Middle Name: _____

Nickname: _____ Birth Date: _____ Gender: Female Male

Ethnicity: **(Check one)*** American Indian Asian Black Caucasian Hispanic

Child lives with: Both Parents Mother Only Father Only Joint Custody Other (specify) _____

Relationship to Parent/Guardian 1: _____ Relationship to Parent/Guardian 2: _____

Relationship to Parent/Guardian 3: _____ Relationship to Parent/Guardian 4: _____

Child 2

Legal Last Name: _____ Legal First Name: _____ Legal Middle Name: _____

Nickname: _____ Birth Date: _____ Gender: Female Male

Ethnicity: **(Check one)*** American Indian Asian Black Caucasian Hispanic

Child lives with: Both Parents Mother Only Father Only Joint Custody Other (specify) _____

Relationship to Parent/Guardian 1: _____ Relationship to Parent/Guardian 2: _____

Relationship to Parent/Guardian 3: _____ Relationship to Parent/Guardian 4: _____

Child 3

Legal Last Name: _____ Legal First Name: _____ Legal Middle Name: _____

Nickname: _____ Birth Date: _____ Gender: Female Male

Ethnicity: **(Check one)*** American Indian Asian Black Caucasian Hispanic

Child lives with: Both Parents Mother Only Father Only Joint Custody Other (specify) _____

Relationship to Parent/Guardian 1: _____ Relationship to Parent/Guardian 2: _____

Relationship to Parent/Guardian 3: _____ Relationship to Parent/Guardian 4: _____

Child 4

Legal Last Name: _____ Legal First Name: _____ Legal Middle Name: _____

Nickname: _____ Birth Date: _____ Gender: Female Male

Ethnicity: **(Check one)*** American Indian Asian Black Caucasian Hispanic

Child lives with: Both Parents Mother Only Father Only Joint Custody Other (specify) _____

Relationship to Parent/Guardian 1: _____ Relationship to Parent/Guardian 2: _____

Relationship to Parent/Guardian 3: _____ Relationship to Parent/Guardian 4: _____

Child 5

Legal Last Name: _____ Legal First Name: _____ Legal Middle Name: _____

Nickname: _____ Birth Date: _____ Gender: Female Male

Ethnicity: **(Check one)*** American Indian Asian Black Caucasian Hispanic

Child lives with: Both Parents Mother Only Father Only Joint Custody Other (specify) _____

Relationship to Parent/Guardian 1: _____ Relationship to Parent/Guardian 2: _____

Relationship to Parent/Guardian 3: _____ Relationship to Parent/Guardian 4: _____

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School and Student Specific Information

(PLEASE FILL OUT THIS PAGE FOR EACH STUDENT YOU ARE ENROLLING IN BVSD)

Telephone Number for Primary Residence: _____

Student: Legal Last Name: _____ Legal First Name: _____

Legal Middle Name: _____ Nick Name (if applicable): _____

School _____ School Year: _____

Is this student **Open Enrolling**? No Yes

If Yes, what school is this student's Designated Neighborhood School/District? _____

Enrollment History

Current School _____ Current District _____ Current Grade Level _____

Has this student ever attended BVSD? No Yes If Yes, When? _____ At what school? _____

Name and Address of Most Recent School: _____

This student has continuously attended a public school in the USA since _____ (mm/dd/yy)
(Enter today's date if student has never attended in the USA or the most recent entry date if the student left the USA at any time.)

This student has continuously attended a public school in Colorado since _____ (mm/dd/yy)
(Enter today's date if student has never attended in Colorado or the most recent entry date if the student left Colorado at any time.)

Additional Information

Student may be picked up by: Mother Father Step-Mother Step-Father Other, name: _____
(Check all of the above that apply)

May we include this student's address in the Student Directory? Yes No Phone Number? Yes No

May we release this student's photograph for any media coverage? Yes No

Do you grant permission to release information about this student to military recruiting officers (HS only)? Yes No

Does this student have any prior or pending criminal charges? Yes No

If yes, provide the charge(s), court(s) of jurisdiction, and probation officer's name, if any. _____

Is this student on a current or pending expulsion? Yes No

If "Yes", from what school/district? _____ Dates of Expulsion _____

Reason for expulsion _____

Has this student graduated from any secondary educational institution (high school)? Yes No

The McKinney-Vento Act provides additional services to students living in transitional/temporary housing. Please answer the following question.

Where is this student presently living? *Check one box:*

- in a shelter
- with another family in a house or apartment
- in a motel, car or campsite
- with friends or family members (other than parent/guardian) (with or without parent/guardian permission)
- none of the above

Parent/Guardian Signature _____ Relationship: _____

Print Name _____ Date: _____