

**Maricopa County Regional School
District**
3409 W Whitton Ave
Phoenix, AZ 85017
 2016-2017
ENROLLMENT FORM
**** PLEASE PRINT ****

FOR OFFICE ONLY	
School Name:	CTDS 07-01-99 -
Entry Date _____	Entry Code _____
Student Number _____	Teacher Name _____
Grade _____	AZ SAIS ID Number _____
Data Entry Date: _____	By Whom: _____

Student's Legal Last Name (As it appears on legal document) _____ First Name _____ Middle Name _____

Generation (Example Jr, III) _____ Name Child Goes By _____
 (Last) (First)

Gender: Male Female Date of Birth _____

Birth Place _____ City _____ State _____ Country of Birth USA Other _____

Choose one ethnicity: Hispanic/Latino Not Hispanic/Latino

Choose one or more (regardless of ethnicity): Asian American Indian or Alaska Native
 Black or African American White Native Hawaiian or other Pacific Islander

Mother/Father/Guardian Name(s): _____		
Address _____ (Mailing)	City _____	Zip _____
Emergency Contact: _____		Phone: _____
Home Phone (_____) _____	Work Phone (_____) _____	Cell Phone (_____) _____

Last School Student Attended: _____ District _____

City: _____ State: _____ Country: _____

Has the child ever attended a MCRSD school? No Yes School Name _____

Has the child ever received Special Education Services? No Yes If yes, explain: _____
 504

Does the child have any serious illnesses or handicaps? No Yes If yes, specify on the Health Information Sheet.

Has the child ever received Gifted Services? No Yes If yes, explain: _____

Has the child ever been expelled from a school or district? No Yes Date: _____

Has the child ever been suspended for more than 10 days from a school or district? No Yes Date: _____

Has the child ever been considered for expulsion from a school or district? No Yes Date: _____

1. What is the primary language used in the home regardless of the language spoken by the student? _____

2. What is the language most often spoken by the student? _____

3. What is the language that the student first acquired? _____

SIGNATURE OF PARENT/GUARDIAN

DATE

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School Name _____	CTDS 07-01-99 _____
Entry Date _____	Entry Code _____
Student Number _____	Grade _____
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Student's Legal Last Name _____ **First Name** _____ **Birth date** _____
 (As it appears on legal document)
Name Student Goes By: Last: _____ First _____

- Have you worked in agriculture related jobs such as fieldwork, fruit or vegetable? Packing companies, dairies or ranches in the last 3 years? Yes No
- Have you recently moved with the family from another city, state or country to work? In the fields, packing companies, dairies or ranches? Yes No
- Have you left with the family to go to work in the fields, packing companies? Dairies or ranches? Yes No
- Presently, where is the student living?
 - In a shelter
 - With more than one family in a house/apartment that **someone else** rents or owns
 - In a motel, car or campsite
 - With friends or family members other than parent/guardian
 - None of the above
- The student lives with:
 - 1 Parent
 - 2 Parents
 - 1 Parent & another adult
 - A relative, friend(s) or another adult(s)
 - Alone with no adult
 - An adult that is not the parent or legal guardian

6. Is the student under refugee status? Yes No
 Country: _____ I-94 Number _____

7. Was the child **born outside** of the United States? Yes No **If Yes, what country?** _____

8. If child was **born outside** of the United States, are parents in the United States Military? Yes No

9. If the child was **born outside** of the United States, list all schools attended for the **past 3 years**.

School Year	Grade	School Name	City	State	Country

 SIGNATURE OF PARENT OR GUARDIAN DATE

Save and email to: mcrsd.enrollment@mcrsd.org **OR** click the button below