

Chesapeake Public Schools – Student Enrollment Form
Please Print Legibly

Student Information:

Name: _____
Last First Middle

Grade Level Entering: _____ Date of Birth: _____ Birth State: _____ Male Female
(Month / Day / Year)

Currently living with: Both Parents Mother Father
 Court Appointed Guardian (provide documentation) Foster Parent: _____
 Foster Family Placement Social Worker Name (if applicable): _____

Student's Home Address: _____ Zip: _____

Has there ever been a court order awarding custody for this child? Yes No (If **Yes**, provide documentation.)

For Office Use Only

Enrollment Date: _____ Records Requested: _____ Affirmation of School Status: _____
Entry Code: _____ Custodian Verification: _____ Transportation AM: _____
Birth Certification #: _____ Report Card/Withdrawal: _____ Transportation PM: _____
Address Verification: _____ Student Schedule Completed: _____ Homeroom Teacher: _____
Immunization: _____ Physical Exam (K-6): _____ Transportation Services Required: _____
Home Language Survey Completed: _____

School Information:

School Entering:

Last School Attended: _____ Grade Completed: _____
Name / City / State / Zip

Has child ever attended a Virginia school? Yes No (If **Yes**, name of last Virginia School: _____)
(City: _____)

Has child ever repeated a grade? Yes No (If **Yes**, which grade _____)

Has child ever attended a Chesapeake Public Schools? Yes No
(If **Yes**, name of Last Chesapeake Public School: _____ Grade Completed: _____)

Services:

Does the student have an IEP? Yes No (If **Yes**, specify below)

LD ID ED Visually Impaired Hearing Impaired AUT Speech and Language Impaired
 Orthopedically Impaired OHI Other: _____

Has the student attended Chesapeake SECEP Program? Yes No (If **Yes**, please choose one) RE-ED Autistic EBICS

Does the student have a 504 plan? Yes No

Physical Condition: Allergies Asthma Poor Vision Diabetes Heart Condition
 Seizures Speech Defect Other: _____

Was English the first language the student learned to speak? Yes No (If **No**, please complete the enclosed home language survey.)

Please complete the other side

Parent/Guardian Contact Information:

Currently in Military Service Yes No

Mother/Stepmother/Legal Guardian's Name: _____ Place of Employment: _____
(Circle title that applies)

Home Address: _____ Zip: _____

Currently in Military Service Yes No

Father/Stepfather/Legal Guardian's Name: _____ Place of Employment: _____
(Circle title that applies)

Home Address: _____ Zip: _____

Other Emergency Contact Name: _____ Relationship to Student: _____

Home Address: _____ Zip: _____

Contact Numbers: Example: Phone #1: (757) 547-0153 Description: Mom at Home - Numbers 1-3 will be used for our Parent Alert System.

Phone #1 () _____ Description: _____ Phone #2 () _____ Description: _____

Phone #3 () _____ Description: _____ Phone #4 () _____ Description: _____

Phone #5 () _____ Description: _____ Phone #6 () _____ Description: _____

E-mail #1 _____ E-mail #2 _____

Does the student attend before or after school day care? Yes No (If Yes, please complete the provider information below).

Before School Care Provider: _____ Phone: _____
(Local day care name/address)

After School Care Provider: _____ Phone: _____
(Local day care name/address)

List Other Children in Family:

Name	Gender	Age	School Where Enrolled

List Persons who **LEGALLY MAY NOT** pick up your child from school (parent must provide copy of court order):

Name of Person	Relationship to Student

List Persons who **MAY** pick up your child from school: **NOTE – Prior notification to school required**

Name of Person	Relationship to Student

Signature of Parent/Guardian completing form: _____ Date: _____

Relationship to Student: _____ Phone: _____

IMPORTANT LEGAL NOTICE: Your signature certifies that all information on this form is correct. According to the Code of Virginia, section 22.1-254.1, any person making a false statement concerning the residency of a child in a particular school division or school attendance zone, for the purpose of enrollment in a school outside the attendance zone in which the student resides, shall be guilty of a class 4 misdemeanor.