

## **Bay District Schools**

## **2023-2024 New Student Enrollment Form**

*Student Name		
(First)	(Middle)	(Last)
Student Birthdate (MM/DD/YYYY)		nrolled with Bay District schools before?
FI act School Attended:		t due to change in student custody
Gender *Ethnicity: Is the stude		
•	ent of Hispanic/ Latino Origin: 16	S 110
Race: (Check all races that apply): American Indian/Alaskan Native Asian	Black/African American Native H	Iawaiian/Pacific Islander White
*Country of Birth *Date Entered United States School:		
*(a) Is a language other than English used in the hor	ne? If yes, what language	
*(b) Did the student have a first language other than	English? If yes, what language	
*(c) Does the student most frequently speak a langua	age other than English? If yes, what	t language
Student's Residence:		
(City)	Is this due to financial handship on loss	(Zip code)
*Is the above address temporary?	Is this due to financial hardship or loss	·
*Mailing Address:(City)		(Zip code)
*Parent/Guardian Name (First, Middle, Last): _		
		Relationship:
* Email: Ho	ome Phone ()	Cell phone ()
	No) or 504 (Yes No r mental health services by a prior scho	)?
<del>-</del>	om a prior school district? Yes Nresulting in a criminal charge? Yes	
	any juvenile justice actions? Yes	
	y military family? YesNo l on federal property this year? Yes	
	l work within the last 3 years? Yes	
	shing (e.g., field work, canneries, lumbe	<u>-</u> :
Is work in agriculture or fishing a maj	jor source of income for your family? Y	esNo
lecision concerning any and all educational issu	es, including but not limited to, enrolling	% of the time. The enrolling parent has the final g and withdrawing the student from school and
providing updates to the parent portal information	_	D'A'AGA A MARANA A A A A A A A A
		ay District Schools will contact my student's previous thorize the previous school(s) to release them pursuant
-	008), whoever knowingly makes a false	statement in writing with the intent to mislead a publ
ervant in the performance of his or her official		
Enrolling Parent/Guardian:		Date:
(Printed	Name) (Signature)	
o be completed by School Staff:		H. J. G. D.
udent ID#: Enrollment Date:	// Grade: Parent Port	
Parent ID	□ Physical □ 2 Proofs of address □ □	Bus Reg. Zoned School: Military OrderFirst Arriving? Y
ompleted Placement: In-Zone (Z)/ School Choice/H	ardship (A)/ OSP (F)/ Special Program	