

| Student Registration Form | | | | | | Form # |
|--|--------|--------------------|-------------|--------------------------------------|--------------|------------------------------|
| | | | | | | Tracking # |
| First Name: | | Middle Name: | | Last Name: | | Suffix: |
| Other/aka First Name: | | Middle Name: | | Last Name: | | Suffix: |
| Gender: | Grade: | 10-Digit State ID: | Birth Date: | Birth City: | Birth State: | Birth Country: |
| Physical Address | | | | | | |
| Street Address | | | City | State | Zip | |
| Mailing Address | | | | | | |
| Mailing Address | | | City | State | Zip | |
| <input type="checkbox"/> Check here if foreign student temporarily schooling in the U.S. | | | | | | |
| <input type="checkbox"/> Check here if student was born outside of the U.S. citizenship at birth. | | | | | | |
| <input type="checkbox"/> Check here if student is foreign and has been enrolled less than 3 cumulative years in the U.S. | | | | | | |
| Home Phone | | Cell Phone | | County of Residence | | School District of Residence |
| Student Email Address: | | | | | | |
| Previous School & Enrollment Details | | | | | | |
| Name of Previous School: | | | | | | |
| Address of Previous School: | | | | | | |
| Previous School Type (Please select one): <ul style="list-style-type: none"> <input type="radio"/> Public school in the same district <input type="radio"/> Public school in a different district same state <input type="radio"/> Public school in a different state <input type="radio"/> Private, non-religiously-affiliated school in the same district <input type="radio"/> Private, non-religiously-affiliated school in a different district same state <input type="radio"/> Private, non-religiously-affiliated school in a different state <input type="radio"/> Private, religiously-affiliated school in the same district <input type="radio"/> Private, religiously-affiliated school in a different district same state <input type="radio"/> Private, religiously-affiliated schooling a different state <input type="radio"/> School outside of the country <input type="radio"/> Institution (example: correctional facility) <input type="radio"/> Charter school <input type="radio"/> Home schooling <input type="radio"/> Matriculated from another school, i.e., successfully completed the highest grade level offered by the previous school <input type="radio"/> Original Entry into US school (enrolling in school for the first time ever, i.e., no previous school) <input type="radio"/> Original Entry to US school from a foreign country w/no schooling interruption <input type="radio"/> Original Entry into US school from a foreign country w/schooling interruption | | | | | | |
| DATE first enrolled in the U.S.: | | | | DATE first enrolled in this State: | | |
| DATE first enrolled in this district: | | | | DATE first enrolled in this school: | | |
| GRADE first enrolled this district: | | | | GRADE first enrolled in this school: | | |

Home Language Survey

Which language did your child first learn to speak? _____

Which language does your child most frequently read/speak at home? _____

Which language do the parents/guardians most frequently speak to the student? _____

Which language is most often spoken by the adults in the home? _____

Is your child fluent in English? ___Yes ___No

Parent/Guardian Information

| Parent/Guardian 1 | | | Parent/Guardian 2 | | |
|--|--------|------|--|--------|------|
| Name: First | Middle | Last | Name: First | Middle | Last |
| Relationship to Student: | | | Relationship to Student: | | |
| Street Address: | | | Street Address: | | |
| City: | | | City: | | |
| State: | | Zip: | State: | | Zip: |
| Mailing Address: | | | Mailing Address: | | |
| City: | | | City: | | |
| State: | | Zip: | State: | | Zip: |
| Employer: | | | Employer: | | |
| Home Phone: | | | Home Phone: | | |
| Work Phone: | | | Work Phone: | | |
| Cell Phone: | | | Cell Phone: | | |
| Email Address: | | | Email Address: | | |
| Lives with Student: ___ Yes ___ No | | | Lives with Student: ___ Yes ___ No | | |
| Send Student Mailings: ___ Yes ___ No | | | Send Student Mailings: ___ Yes ___ No | | |

** Note: If physical address does not represent permanent housing, please briefly describe what type of temporary housing the physical address represents:

| | | | |
|---|--|---------|--------|
| <p>Parent/Guardian 1- Highest Level of Education (Check appropriate answer.)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Graduate Degree –Holds MA, MS, PhD, or EdD (10) <input type="checkbox"/> First-Professional Degree – Holds D.C., D.D.S., J.D., M.D., or Ordination (10) <input type="checkbox"/> College Graduate – Holds BA or BS (11) <input type="checkbox"/> Some College –Holds AA or has completed 2 full years at a 4-year university (12) <input type="checkbox"/> Vocational Certificate (12) <input type="checkbox"/> High School Graduate – Holds diploma or GED (13) <input type="checkbox"/> Not a high school graduate (14) <input type="checkbox"/> Decline to state (15) | <p>Parent/Guardian 2 - Highest Level of Education (Check appropriate answer.)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Graduate Degree –Holds MA, MS, PhD, or EdD (10) <input type="checkbox"/> First-Professional Degree – Holds D.C., D.D.S., J.D., M.D., or Ordination (10) <input type="checkbox"/> College Graduate – Holds BA or BS (11) <input type="checkbox"/> Some College –Holds AA or has completed 2 full years at a 4-year university (12) <input type="checkbox"/> Vocational Certificate (12) <input type="checkbox"/> High School Graduate – Holds diploma or GED (13) <input type="checkbox"/> Not a high school graduate (14) <input type="checkbox"/> Decline to state (15) | | |
| Is parent/guardian employed in agricultural or fishing activities on a seasonal or other temporary basis? | | ___ Yes | ___ No |
| Is immunization information included with this enrollment information? | | ___ Yes | ___ No |
| Is birth certificate included with this enrollment information? | | ___ Yes | ___ No |

Ethnicity *New federal race and ethnicity data collection/reporting requirements beginning in 2009-2010 require all students to identify their ethnicity from the 2 choices below.

| |
|--|
| <p><u>Is this student Hispanic or Latino?</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> No, not Hispanic or Latino <input type="checkbox"/> Yes Hispanic or Latino |
|--|

(Continued on next page)

Race *In addition to answering the ethnicity question on the previous page, at least one race must also be selected below.

| | |
|--|---|
| <input type="checkbox"/> American Indian or Alaskan Native A person having origins in any of the original people of North and South America (including Central America), and who maintains tribal affiliation or community attachment. | <input type="checkbox"/> Black or African American A person having origins in any of the Black racial groups of Africa. |
| <input type="checkbox"/> Asian A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian Subcontinent including: Asian Indian, Cambodian, Chinese, Filipino, Hmong, Japanese, Korean, Laotian, Vietnamese. | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. Guamanian, Hawaiian, Samoan, Tahitian, other Pacific Islander. |
| <input type="checkbox"/> Other Asian | <input type="checkbox"/> Hispanic or Latino |
| <input type="checkbox"/> Caucasian or White | |

Parent/Guardian Release Survey

| | | |
|--|---------|--------|
| Student is allowed to use computers at school | ___ Yes | ___ No |
| Grants the student permission to sign themselves in and out of the school | ___ Yes | ___ No |
| Student allowed to access the Internet at school | ___ Yes | ___ No |
| Agree to the "Open Campus" Policy (For High School) | ___ Yes | ___ No |
| Parent grants permission to use pictures of this student for school purposes | ___ Yes | ___ No |
| Permission to include student information in the school directory | ___ Yes | ___ No |
| Parent grants permission to use student work produced by this student for school purposes. | ___ Yes | ___ No |

APLUS+ Schools Survey

| | | |
|--|---------|--------|
| Does the student have access to a computer at home? | ___ Yes | ___ No |
| If YES, is the computer connected to the Internet? | ___ Yes | ___ No |
| How many times has the student's family moved in the past 12 months? _____ | | |

APLUS Schools Program Survey

| | | |
|--|---------|--------|
| Student receives School Supplemental Services | ___ Yes | ___ No |
| Student receives Vendor Supplemental Services | ___ Yes | ___ No |
| Participates in Before-School Academic Program | ___ Yes | ___ No |
| Participates in Before-School Enrichment Program | ___ Yes | ___ No |
| Participates in After-School Academic Program | ___ Yes | ___ No |
| Participates in After-School Enrichment Program | ___ Yes | ___ No |
| Participates in Saturday-School Academic Program | ___ Yes | ___ No |
| Participates in Saturday-School Enrichment Program | ___ Yes | ___ No |
| Participates in Summer-School Academic Program | ___ Yes | ___ No |
| Participates in Summer-School Enrichment Program | ___ Yes | ___ No |
| Maximum Hours Per Week Attending | ___ Yes | ___ No |

Estimated Annual Household Income

Please use the table below to calculate if you are eligible for free or reduced price lunches.

| Household Size | Annual Income | Annual Income | Annual Income | Annual Income |
|----------------|---|---|---|------------------------------------|
| 1 | <input type="checkbox"/> \$0 to \$ 10,830 | <input type="checkbox"/> \$10,831 to \$14,079 | <input type="checkbox"/> \$14,080 to \$20,036 | <input type="checkbox"/> \$20,037+ |
| 2 | <input type="checkbox"/> \$0 to \$14,570 | <input type="checkbox"/> \$14,571 to \$18,941 | <input type="checkbox"/> \$18,942 to \$26,955 | <input type="checkbox"/> \$26,956+ |
| 3 | <input type="checkbox"/> \$0 to \$18,310 | <input type="checkbox"/> \$18,311 to \$23,803 | <input type="checkbox"/> \$23,804 to \$33,874 | <input type="checkbox"/> \$33,875+ |
| 4 | <input type="checkbox"/> \$0 to \$22,050 | <input type="checkbox"/> \$22,051 to \$28,665 | <input type="checkbox"/> \$28,666 to \$40,793 | <input type="checkbox"/> \$40,794+ |
| 5 | <input type="checkbox"/> \$0 to \$25,790 | <input type="checkbox"/> \$25,791 to \$33,527 | <input type="checkbox"/> \$33,528 to \$47,712 | <input type="checkbox"/> \$47,713+ |
| 6 | <input type="checkbox"/> \$0 to \$29,530 | <input type="checkbox"/> \$29,531 to \$38,389 | <input type="checkbox"/> \$38,390 to \$54,631 | <input type="checkbox"/> \$54,632+ |
| 7 | <input type="checkbox"/> \$0 to \$33,270 | <input type="checkbox"/> \$33,271 to \$43,251 | <input type="checkbox"/> \$43,252 to \$61,550 | <input type="checkbox"/> \$61,551+ |
| 8 | <input type="checkbox"/> \$0 to \$37,010 | <input type="checkbox"/> \$37,011 to \$48,113 | <input type="checkbox"/> \$48,114 to \$68,469 | <input type="checkbox"/> \$68,470+ |

Should the fields checked and circled above indicate that my student is eligible/qualified for the National School Lunch Program, I choose to NOT-PARTICIPATE

Office Use Only: Eligibility

| | | | | |
|------------------------------|-------------------------------|----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> FPL | <input type="checkbox"/> Free | <input type="checkbox"/> Reduced | <input type="checkbox"/> Eligible but choosing Non-Participation | <input type="checkbox"/> Not Eligible |
|------------------------------|-------------------------------|----------------------------------|--|---------------------------------------|

Has your child ever received any Special Education services of any kind? ___Yes ___No

If NO: Sign and date here.

I certify that my student has never received Special Education services of any kind. I further Certify that my student does not have a 504 Plan.

Parent/Guardian: X _____ Date: X _____

If YES: Sign here and provide a copy of the IEP, including an exit IEP.

I understand I must submit all Special Education documentation, and/or 504 plan with my child's enrollment paperwork, and that without it, my child can not be enrolled with this Charter School. I certify that all statements are true and correct to the best of my knowledge.

Parent/Guardian: X _____ Date: _____

I certify that all of the statements and information given above are true and correct to the best of my knowledge.

Parent/Guardian Signature

Date

**** By typing your name, and submitting this form online, you agree that this is your electronic signature.**

Office Only: Pre-Enrollment Information

| | | | |
|---|--------------------|--|--------------------------------|
| Program Placement-Circle one: | General Ed. | Special Ed. | Anticipated Start Date: |
| Anticipated Education Program: (Circle one.) | | | |
| a. Classroom Based – Herlong | | b. Independent Study – Susanville, Alturas, Herlong | |
| Assigned Teacher's Name: _____ | | | |