



For Office Use Only

Student #

Entry Date:

Entry Code:

Grade:

PreK Code

SSN Copy: YES/NO

Birth Certificate: YES/NO

Health Card: YES/NO

Country Code:

Language Code:

Language Minority?

ESL notified? YES/NO

Proof of address? YES/NO

Lunch Code

Legal document: YES/NO

If Yes, Type

School Name _____ Year 20____ — 20_____

Student Information (Please print)

Legal Name

LastFirstMiddle

Nickname

Gender: MaleFemale

Birth Date:

mmddyy

Birthplace:

CityStateCountry

Primary Ethnicity

WhiteBlackHispanicAsianNative American/AlaskanHawaiian/Pacific Islander

(Check only one)

Secondary Ethnicity

WhiteBlackHispanicAsianNative American/AlaskanHawaiian/Pacific Islander

(Check all applicable secondary ethnicities)

Mailing Address

(No PO Boxes)

StreetApt/Unit/LotCity/StatePostal Code

Physical Address

(If different from Mailing)

StreetApt/Unit/LotCity/StatePostal Code

Phone Number:

Student's Social Security Number:

If born outside of USA, first entry date into USA to establish residency:

mmddyy

Home Language Survey

First language learned by student

Language student uses most often at home

Language student uses most often with other students

Language parents use most often at home

Previous School History (Please print)

Last school attended

(If not in Caddo)

GradeExit Date

AddressCityParish/CountyState

Private? YES / NO

Did student receive special services at last school?

504SpeechOther

If other, list services

If last school was not in Caddo, has student ever attended a Caddo school?

Year

Name of Caddo school attended

Has student ever been retained?

If Yes, what grade level(s)?

FOR KINDERGARTENERS ONLY:

Did your child attend a PreK program last year?

YesNo

If yes, select one option below:

Public School PreKNonpublic PreKLicensed ChildcareFamily Day CareHead StartTribal SchoolHome (No PreK)

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Records requested?

Date

Parent/Guardian Information (Please print)

Legal Father

Last

First

Middle

Lives With? YES / NO

Address

Street

Apt/Unit/Lot

City

State

Postal Code

Home Phone:

Work Phone:

Cell Phone:

Email:

JCall notifications:

__Tardy

__Absentee

__Discipline referral

__Grades(I, F or new assignments)

__School Events

(Place a check next to all of the above listed areas in which you **DO NOT** approve computer generated phone notification)

Place of Employment:

Occupation:

Military? YES / NO

If yes, Branch

Unit:

Rank:

Legal Mother

Last

First

Middle

Lives With? YES / NO

Address

Street

Apt/Unit/Lot

City

State

Postal Code

Home Phone:

Work Phone:

Cell Phone:

Email:

JCall notifications:

__Tardy

__Absentee

__Discipline referral

__Grades(I, F or new assignments)

__School Events

(Place a check next to all of the above listed areas in which you **DO NOT** approve computer generated phone notification)

Place of Employment:

Occupation:

Military? YES / NO

If yes, Branch

Unit:

Rank:

Legal Guardian

Last

First

Middle

Lives With? YES / NO

Address

Street

Apt/Unit/Lot

City

State

Postal Code

Home Phone:

Work Phone:

Cell Phone:

Email:

JCall notifications:

__Tardy

__Absentee

__Discipline referral

__Grades(I, F or new assignments)

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(Place a check next to all of the above listed areas in which you **DO NOT** approve computer generated phone notification)

Place of Employment:

Occupation:

Military? YES / NO

If yes, Branch

Unit:

Rank:

Emergency Information / Check Out Authorization (Please print)

Person(s) to notify other than parent/guardian in emergency:

Name

Name

Relationship

Phone

Relationship

Phone

Doctor

Hospital

List any medical concerns (conditions, medications, allergies etc.) or specific food allergies

In the event of an emergency, if the parents or the above named persons cannot be reached, the school has my permission to transport the student to:

above Hospital

nearest facility

Persons who have permission to check the student out of school (If different than above):

Name(s)

Relationship

School Transportation (Please print)

Morning Transportation

Caddo Parish School Bus

car rider

walk

Daycare bus

(name of Daycare)

Afternoon Transportation (If different from morning)

Caddo Parish School Bus

car rider

walk

Daycare bus

(name of Daycare)

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CPPS am bus#

CPPS pm bus#

I, as custodial parent/guardian, verify that the information supplied is correct.

Signature

Date