| Harmony Elementary KinderLeap [TK]Program  |                                 |                                       | FOR SCHOOL USE ONLY         |  |  |  |
|--|---------------------------------|---------------------------------------|-----------------------------|--|--|--|
| , and a second s | ☐ Harmony Union School District |                                       |                             |  | Enrollment Date:                                     |  |
| SalmonCreekSchool-A CharterSchool (2 <sup>nd</sup> –8 <sup>lh</sup> )  | Q j                             | 1935 Bohemian Hwy                     | • Occiden                   | tal, CA 95465                              | Student ID#:   |  |
| San Landa Nia (I. I.   |                                 |                                       |                             |  | 1300 1500 1500                                       |  |
| Student's Name (legal name)  | First                           | 22.11                                 |                             |  | Birth Date///  |  |
|  | First                           | Middle                                |                             | Last                                       | Mo / Day / Year                                      |  |
| Other Name Known by (aka)  |                                 |                                       |                             |  |  |  |
|  | First                           | Middle                                |                             | Last                                       | 1  |  |
|  |                                 |                                       |                             |  |  |  |
| Student Street Address   |                                 | City                                  |                             | State Zip                                  |  |  |
| Mailing Adduses (if different)   |                                 |                                       |                             |  |  |  |
| Mailing Address (if different)   |                                 |                                       |                             |  |  |  |
| Home Phone ( )   |                                 | Gender                                |                             | Grade Entering                             |  |  |
|  |                                 |                                       |                             | Grade Entering                             | -  |  |
| Ethnicity (check one)  |                                 |                                       |                             | Home Language Survey                       |  |  |
| ☐ Not Hispanic or Latino   | ☐ Hispanic or L                 | atino (A person of Cuban, Mexican.    | ı, Puerto Rican.            | Danguage Survey                            |  |  |
|  | South or Central                | American, or other Spanish culture of | of origin,                  | 1. Which language/dialect d                | id your child learn when he/she first began to talk? |  |
| 220 0 0  | regardless of rac               | ,                                     |                             |  | •  |  |
| Circle the primary race and ch   | eck all others that a           | pply (The first part of the que       | 2. What language/dialect do | es your child most frequently use at home? |  |  |
| about ethnicity, not race. No matter what you selected above please continue to answer the following by marking one or more boxes to indicate what you consider your heritage to be.)  3. What language/dialect do you most frequently speak to your child   |                                 |                                       |                             |  |  |  |
| Jouowing by marking one or mor   | e boxes to indicate w           | vhat you consider your heritag        | ge to be.)                  | 3. What language/dialect do                | you most frequently speak to your child              |  |
| ☐ American Indian or Alaskan   | ☐ Laotian                       | □ Samoan                              |                             | 4 Name the language/dialog                 | et most often spoken by the adults at home:          |  |
| Chinese  | ☐ Cambodian                     | ☐ Tahitian                            |                             | +. Ivaine the language/dialec              | ti most often spoken by the adults at nome;          |  |
| ☐ Japanese   | ☐ Hmong                         | ☐ Other Pacific Islan                 | nder                        |  |  |  |
| □ Korean   | ☐ Other Asian                   | ☐ Filipino/Filipino A                 | I                           |  |  |  |
| □ Vietnamese   | ☐ Hawaijan                      | _ ·pp                                 |                             | Has your child ever been gi                | ven the CELDT Test (Calif. English Language          |  |
| ☐ Asian Indian   | ☐ Guamanian                     | □ White                               | or Black                    | Development Test)?                         | Yes No Don't Know                                    |  |
|  |                                 |                                       |                             |  | S-10-1   |  |
| What special services has your   | child received?                 | □ SDC □ RSP                           | Other Servi                 | ices:   GATE/Gifted                        | ☐ ESL/English Language ☐ Title I                     |  |
|  | _                               |                                       |                             |  | Learner  |  |
| ☐ Current ☐ Exit Date ☐ 504 ☐ Speech ☐ Remedial reading and/or math ☐ Other (specify)  |                                 |                                       |                             |  |  |  |
| Are there psychological or confidential reports available from student's former schools?   |                                 |                                       |                             |  |  |  |
| promote the contract of the co |                                 |                                       |                             |  |  |  |

If yes, in what grade?

Address

☐ English

If yes, when?\_\_\_\_\_

If yes, when?

Name of School\_\_\_\_

City

Spanish

If yes, in which county?

Reason

State

Zip

Reason \_\_\_\_\_

Has student ever repeated a grade?

Is the student on probation?

Most Recent School Attended

Has student ever been suspended from school?

Has student ever been expelled from school?

Yes

Yes

Yes

Yes

School

In which language do you wish to receive written communications from the school?

□No

☐ No

□No

□No

| Student's Name   | Birthdate   |   |  |  |  |
|--|---|---|--|--|--|
| Parent/Guardian Information:   | Father Mother   | Step-Mother Deformed Foster Father Deformed Other:  |  |  |  |
| Name:First   | Middle  | Lives with student?  Receive School Mailings?   |  |  |  |
| Address (if different from student)  | Street  | City  |  |  |  |
| Home Phone:  |   | ·   |  |  |  |
| Home Phone.  | YVOIR   | Phone: E-Mail:  |  |  |  |
| Parent Level of Education:   | <ul><li>□ Not a high school graduate</li><li>□ College graduate</li></ul> | <ul><li>☐ High school graduate</li><li>☐ Graduate school or postgraduate training</li></ul> |  |  |  |
| Parent/Guardian Information:   | Father Mother Step-Father   | Step-Mother  Foster Father  Other:  |  |  |  |
| Name:First   |   | Lives with student? Yes No  |  |  |  |
|  | Middle  | Receive School Mailings? Yes No   |  |  |  |
| Address (if different from student)  | Street  |   |  |  |  |
| Home Phone:  | Cell Phone: Work  | Phone: E-Mail:  |  |  |  |
| Parent Level of Education:   | <ul><li>□ Not a high school graduate</li><li>□ College graduate</li></ul> | ☐ High school graduate ☐ Some College ☐ Graduate school or postgraduate training            |  |  |  |
| Status of Parents: Deceased  | ☐ Married ☐ Divorced  | Other:  |  |  |  |
| Other Children in the Family:  |   |   |  |  |  |
| Last   | Name, First Birthdate   | Birthdate Birthdate   |  |  |  |
| Residence – Where is your child/family currently living? (Federally mandated information) – Please check appropriate box:  |   |   |  |  |  |
|  |   |   |  |  |  |
| My signature below indicates that I have read and understand the registration form. It also certifies that the information on this form is true and correct. My signature affirms that the child resides with me at this address (appropriate verification required). I understand that any change of residency information (address, telephone number, guardianship) must be reported to the school, examined, and verified within 30 days of change. Falsification of information will be grounds for invalidating the student's enrollment. |   |   |  |  |  |
| Signature of Parent/Guardian:  |   | Date:   |  |  |  |