

For School Use:

Entry Date: ____/____/____
 Grade Assigned: ____
 Homeroom/Advisement: _____

**FULTON COUNTY SCHOOLS
 STUDENT ENROLLMENT FORM**

SIS-1
 Revised 08/07
 FORM #113

(1)STUDENT INFORMATION **Print All Information Clearly.**

Student's Last Name _____ First Name _____ Middle Name _____ Generation (ex. JR,III) _____
 _____ / ____ / ____
 Preferred Name _____ Month/ Day /Yr of Birth _____ Student's Social Sec. # _____

Home Address: _____
 Street # and Name _____ P.O. Box if App. Apt. # _____ City _____ Zip +4 _____

Home Phone: () _____ Complex/Subdiv.Name: _____

School system of residence if other than Fulton: _____ RESTRICT DIRECTORY INFORMATION? Y N
 County of residence if other than Fulton: _____
 Name of School Serving area in which student lives: _____

Circle One In Each Group:

Sex: M - Male
 F - Female

Race: A - Asian
 B - African-American
 H - Hispanic
 M - Multi-racial
 I - Native Indian/Alaskan
 W - Caucasian

(2)PARENT/GUARDIAN INFORMATION (Complete a box for each parent, step-parent, or guardian; add page if necessary)

Name: _____
 Last First MI Suff.
Home Address & Phone If Different From Student's
 Address: _____
 City/State/Zip+4: _____
 Home Phone: () _____
 Alt/Cell Phone: _____
 Occupation: _____
 Business Name: _____
 Business Address: _____
 City/State/Zip+4: _____
 Business Phone: () _____
 Circle Relation to Student: Mother,Father, Stepmother,
 Stepfather, Legal Guardian,Other
 Contact w/student is allowed? Y N
 Resides with this parent/guardian? Y N
 Parent/guardian is responsible for student? Y N
 Works for federal gov't or on federal property? Y N
 Email _____

Name: _____
 Last First MI Suff.
Home Address & Phone If Different From Student's
 Address: _____
 City/State/Zip+4: _____
 Home Phone: () _____
 Alt/Cell Phone: _____
 Occupation: _____
 Business Name: _____
 Business Address: _____
 City/State/Zip+4: _____
 Business Phone: () _____
 Circle Relation to Student: Mother,Father, Stepmother,
 Stepfather, Legal Guardian,Other
 Contact w/student is allowed? Y N
 Resides with this parent/guardian? Y N
 Parent/guardian is responsible for student? Y N
 Works for federal gov't or on federal property? Y N
 Email _____

Name: _____
 Last First MI Suff.
Home Address & Phone If Different From Student's
 Address: _____
 City/State/Zip+4: _____
 Home Phone: () _____
 Alt/Cell Phone: _____
 Occupation: _____
 Business Name: _____
 Business Address: _____
 City/State/Zip+4: _____
 Business Phone: () _____
 Circle Relation to Student: Mother,Father, Stepmother,
 Stepfather, Legal Guardian, Other
 Contact w/student is allowed? Yes No
 Resides with this parent/guardian? Yes No
 Parent/guardian is responsible for student? Yes No
 Works for federal gov't or on federal property? Yes No
 Email _____

(3)MEDICAL/EMERGENCY INFORMATION

Family Physician

First/Last Name: _____ Physician's Phone: () _____ ext. _____

Insurance/Health Coverage: _____

Note medical problems, medication requirements, life-threatening allergies, and other special instructions:

The persons below have authorization to pick-up my child during school hours and can be reached at the numbers listed.

FirstName,LastName	Phone Number	Ext.	Relationship	Chk out of School?
_____ () _____	_____	_____	_____	Y N
_____ () _____	_____	_____	_____	Y N

List Siblings in THIS school:

(5)FOR SCHOOL USE ONLY

Immunization Code (Circle One)

E - Medical Exemption

N - GA Requirements Not Met

R - Religious Exemption

W - 30-Day, 90-Day, 180-Day Waiver

Follow-up Date: ___/___/___

Y - GA Requirements Met

Student has met the following requirements:

Ear Exam Yes ___ No ___

Eye Exam Yes ___ No ___

Dental Exam Yes ___ No ___

Emer.Sig.Card Yes ___ No ___

Birth Certificate Yes ___ No ___

High School Course of Study/Graduation Track

Circle One:

B - Both College Prep. And Career Tech*

C - College Preparatory

D - College Prep w/Distinction

H - Career Tech Prep.**

M - College Prep & Career Tech Prep w/Distinction

N - College Prep w/Distinction & Career Tech. Prep

Q - College Prep & Career Tech w/Distinction

S - Special Education

U - Career Tech Prep w/Distinction

V - Career Technology*

* Valid only if student entered 9th grade prior to 8/25/97

**Valid only if student entered 9th grade on or after 8/25/97

Date 1st entered 9th grade (mm/dd/yy): ___/___/___

High School Only:
I have received a student handbook.
Student Signature: _____

(4)ENROLLMENT INFORMATION

Has student ever attended a Fulton County School? Yes No

If yes, give name of school(s): _____

Entry Codes: (Circle One)

C Continue in same school

A From a home school

U From within system

N Never attended school

T From another GA public school

S Re-entry after illness

O From another state or country

I Re-entry after incarceration

P From a private school

R Re-entry other

B Previously WD from this school & year

V Admitted under School Choice

W Admitted under SB10

X Admitted under USCO

Prior School Information

Non-Ful.Co. prior school name: _____

City & State of prior school: _____

Enrolled from ___/___/___ to ___/___/___

Country of Birth _____

Date first entered a USA School (mm/dd/yy) _____

What is the first language the student learned

(Primary Language)? _____

What language does the student speak at home

(Home Language)? _____

What language does the student communicate in most often

(Correspondence Language)? _____

Has student ever received services in the following programs?

Gifted Yes No

EIP Yes No

Title I Yes No

ESOL Yes No

Remedial Ed Yes No

Spec. Educ. Yes No If Yes, Area _____

Other Programs (Specify) _____

PreK Program Attended: Circle One

1. GA PK-Public School

5. Private Non-Profit PK

2. Public Sponsored PK (Title1)

6. Private For-Profit PK

3. Head Start

7. Did not attend PK

4. Other Public School

8. GA PK-Private School

Placement Information

Majority to Minority Student _____

ESOL Student _____

NCLB _____

Homeless _____

504 _____

Hardship Student (Circle one)

Childcare, Curriculum, Moving,Employee, Medical, Adm.Placement

Magnet Program Student (Circle one)

Art/Science, Math/Science International Studies,

Visual & Performing Arts, International Studies Tuition

PARENT SIGNATURE: _____