

For School Use:

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

**FULTON COUNTY SCHOOLS
 STUDENT ENROLLMENT FORM**

SIS-1
 Revised 02/09
 FORM #113

(1)STUDENT INFORMATION Print All Information Clearly.

Student's Last Name _____ First Name _____ Middle Name _____ Generation (ex. JR,III) _____

Preferred Name _____ / _____ / _____ Student's Social Sec. # _____
 Month/ Day /Yr of Birth

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 This Group: SEX: M - Male
 F - Female

Is this student Hispanic/Latino? (Choose only one)
 No, not Hispanic/Latino
 Yes, Hispanic/Latino

What is the student's race? (Choose one or more)
 1 - American Indian or Alaska Native
 2 - Asian
 3 - Black or African American
 4 - Native Hawaiian or Other Pacific Islander
 5 - White

(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: () _____
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 Stepfather, Legal Guardian,Other
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 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
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Name: _____
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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. _____

(4)ENROLLMENT INFORMATION

Has student ever attended a Fulton County School? Yes No
 If yes, give name of school(s): _____

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: _____

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 (Title I) 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: _____