

SAN DIEGO UNIFIED SCHOOL DISTRICT

Directions for Completing the PreK-Grade 12 Enrollment Form

Please complete the blank San Diego Unified PreK-Grade 12 Enrollment Form by printing using black or blue ink. Complete each box in Sections I-III and sign the form on page 2. Note that verification is needed for the information you provide in Boxes 3, 6, and 12 for a new enrollment at the school.

If completing a pre-filled form, please note that information on this form in Sections I-III reflects responses in a previous enrollment form received from you. Please make corrections to Sections I-III, sign and date the back of the form (even if no corrections are needed) and return to your student's school.

SECTION I: Student Information		
Boxes 1-2.	These are for OFFICE use ONLY. Do not enter any information in these boxes.	
Box 3. Legal Name	Enter your student's Legal Name (as printed on the birth certificate or other legal document): Last Name, First Name, Middle Name/Initial, and Suffix (Jr, II, III). NOTE: The student's legal name and birthdate must be verified by the office staff. Forms of verification include a birth certificate, affidavit, church records, or passport.	
Box 4. First Name on teacher rosters	Enter a name (first name, middle name) your student uses if they do not use the Legal Name in Box 3. The name indicated in Box 4 will appear on a teacher's roster. For this name to appear on additional school documents, please reference the Student Information Change Request form at your student's school. For a preferred name/gender change, click on this link: "SDUSD Name/Gender Change Google Form."	
Box 5. Former Legal Name(s) (optional):	Enter a name your student may have used or is known by that is different than the Legal Name in Box 3. If no other legal name, leave blank.	
Box 6. Birthdate	Enter your student's birthdate using mm/dd/yyyy.	
Box 7. Gender	Check Male (M), Female (F) or Nonbinary (X) Understanding Nonbinary Identities: https://www.sandiegounified.org/nonbinary.	
Box 8. Hispanic or Latino/a/x	Check a single box indicating yes or no if the student is Hispanic or Latino/a/x. Latinx is the gender-neutral alternative to Latino and/or Latina.	
Box 9. Race	Select one or more race categories from listed races. (See "RACE/ETHNIC DEFINITIONS FOR PreK-Grade 12 ENROLLMENT FORM.")	
Box 10. Release of Information	Check "Opt Out" only if you do not want addresses and phone numbers of your student released to school organizations or groups. (See the district's Facts for Parents.)	
Box 11a. Student Email (optional)	Enter your STUDENT'S email address or, if no email address, leave blank.	
Box 11b. Student Phone (optional)	Enter your STUDENT'S phone number or, if no phone number, leave blank.	
Box 12. Household Address	Enter the address where the student lives including the city, state, and zip code. If you are living somewhere on a temporary basis due to financial hardship, you may use your school's address as a household address.	
Box 13. Primary Phone	Preferred phone number for communication purposes. Include the area code.	
Box 14. Mailing Address	If you receive mail at an address other than the household address in Box 12, enter that address here.	
Box 15. City, State, and Country of Birth	Enter the city, state, and country of birth where your student was born.	
Box 16. First enrolled in U.S. Preschool	Enter the date your student was first enrolled in a U.S. preschool. If your student is entering preschool, enter the first day of school.	
Box 17a. First Enrolled in a California School (UTK/Kinder)	Enter the date your student was first enrolled in a California school for Transitional Kindergarten or Kindergarten (UTK/Kinder). If your student is entering Kindergarten, enter the first day of school.	
Box 17b. First Enrolled in a U.S. School (UTK/Kinder)	Enter the date your student was first enrolled in a U.S. school for Transitional Kindergarten or Kindergarten (UTK/Kinder). If your student is entering Kindergarten, enter the first day of school.	
Box 18. Current Caregiver	Check either "Parent/Legal Guardian" or "Other Adult"-If "Other Adult" fill out Caregiver Affidavit. English Spanish	
Box 19a. Foster Care Living Situation	If student is a foster youth, please check ONE box that best describes where the student lives. Please provide your school with the contact information for your student's education rights holder, attorney, county social worker and tribal social worker (if applicable). Please contact cyt@sandi.net if your student is placed from out of county, out of state, or with any questions. 1. Family Maintenance, 2. Foster Family Home – includes Foster Family Home or FFA- Foster Family Agency, 3. Group Home – Group Home Short-Term Residential Therapeutic Program (GH), Short	
	Term Residential Therapeutic Program (STRTP), Polinsky Children's Center (PCC), 4. Formal Kinship Care –Non-Related Extended Family Member, Relative, Kin, Small Family Home (NREFM) 5. Tribal Foster Care .	
Box 19b. Temporary/inadequate residence due to financial hardship:	If the student lacks a fixed, regular, and adequate nighttime residence, check the appropriate situation (doubling up —sharing the housing of other persons due to loss of housing, economic hardship or similar reason; hotel/motel ; residing in a shelter ; or unsheltered —public or private place not designated for or ordinarily used as a regular sleeping accommodation) vehicle, outdoors, substandard housing, bus or train station. Check the Unaccompanied Youth box if student has been identified as homeless and is not in	
	the direct care of their parents or court-appointed guardian. Check the Runaway Youth box if the student is less than 18 years of age, has left home without parental/caregiver permission, and has stayed away from home for one or more nights. If Runaway Youth is checked, a homeless living situation box and Unaccompanied Youth should also be checked.	

Box 20. Other Living Situation	Check only one box if any of the other living situations apply.
Box 21. Minors under 18 years of age who live in the same household	Please list all minors under 18 years of age who live in the same household (siblings and non-siblings), even if not enrolled in San Diego Unified. If additional space is needed use "Notes" in Section IV on back of form.
PART II: Contact Informat	ion
Box 22. Contact Information	Enter information for the parent/guardian/contact to provide contact information for the school. This is the primary contact. Contact full name: Enter your full name. Relationship to the student: (Mother, Father, Legal Guardian, Step Parent, Agency Representative, Brother or Sister, Brother/Sister-in-law, Cousin, Emancipated Minor, Father/ Mother-in-law, Friend, Grandparent, Law Officer, etc.). Lives with student?: Check yes or no. If your address is different than the student's household address entered in Box 12, write it here. Home, Work, Cell phones: Enter your home, work and cell (optional) numbers. Include any extensions, if necessary. Email address: Enter your home email address. Employer: Enter the name of your employer or business. Military: Check all that apply. Preferred Language: Enter YOUR preferred language. Education Level: Check the highest level of education you completed in any school. Must select one. Not a High School Graduate. Some College/AA Degree. College Graduate. Graduate School/Post-Graduate. Decline to state. Additional Information: Check all that apply. Interpreter required: You will need an interpreter to communicate with the school and your student's teachers. Access to student information online: If you would like to be able to access the student's attendance and grade information online using PowerSchool Parent Portal and/or Xello.
Box 23. Additional Other Contact Information	 Enter information for a second parent/guardian/contact. Complete the sections as for Box 22. Additional Information: Check all that apply to the listed Other Contact. - This contact needs a copy of the student's report card.* - This contact needs a copy of the student's progress report.* - Interpreter required (see box 22 above). - Access to student information online (see box 22 above). * Note: By default, the contact named in box 22 above receives this.
Box 24. Emergency Contacts (other than already listed)	Enter information for one or two emergency contacts who can be reached by phone in case the parent/guardians cannot be reached. Provide the contact's full name, relationship to student, and phone numbers. NOTE: If you need to enter additional contacts, use the Notes/Additional Information/Legal Bindings box in Section IV. • Additional Information: Check all that apply to the listed Emergency Contacts. - Interpreter required (see box 22 above). - OK to release student: The school is authorized to release the student to the emergency contact. - OK to send school message.
SECTION III: Questions for	<u> </u>
Boxes 25-32	Please complete Questions 25-32. For questions in boxes 30a and 30b, refer to https://www.csac.ca.gov/financial-aid-programs and for box 31 visit https://studentprivacy.ed.gov/resources/access-high-school-students-and-information-students-military-recruiters for more information.
Box 33	Consenting to the Medi-Cal billing program provides reimbursement for student services. Refer to the link provided for details. Details on LEA Medi-Cal (see <i>Facts for Parents</i> Section F).
Signature and Date	You must sign and date this form.
SECTION IV: District Admi	nistrative Information—FOR OFFICE USE ONLY
Boxes 34-46	These are for OFFICE USE ONLY (unless you use the Notes/Additional Information/Legal Bindings section to list additional information from Sections I or II).