



Cumberland County Schools Student Enrollment Form

School Use Only
Homeroom _____
State Student Number _____
Enrollment Date _____

Has student ever attended a Cumberland County School? No Yes, Where: _____

Student Legal Last Name		Student Legal First Name		Student Legal Middle Name		Suffix	
Date of Birth ____/____/____		Place of Birth (City, County, State)				Social Security Number ____-____-____	
Student Cell Number			Mother's Maiden Name			Year Entered Ninth Grade (if applicable)	
Grade: PK K 1 2 3 4 5 6 7 8 9 10 11 12			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Will the student be transported by bus?: <input type="checkbox"/> No <input type="checkbox"/> Yes		AM Bus Number: _____
Is a language other than English used in your home?: <input type="checkbox"/> No <input type="checkbox"/> Yes: _____							PM Bus Number: _____
Race: <input type="checkbox"/> Amer. Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Pacific Islander/Hawaiian <input type="checkbox"/> White							Miles Transported: _____
Is this student Hispanic or Latino?: <input type="checkbox"/> No <input type="checkbox"/> Yes		U.S. Entry Date: ____/____/____		First Date in U.S. Schools: ____/____/____			
Has this student ever been evaluated for special education?: <input type="checkbox"/> No <input type="checkbox"/> Yes							
Services Received: <i>Special Education/IEP</i> <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Speech Therapy</i> <input type="checkbox"/> No <input type="checkbox"/> Yes <i>504 Accommodations</i> <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Gifted</i> <input type="checkbox"/> No <input type="checkbox"/> Yes							
This student is a dependent of a: (select all that apply) <input type="checkbox"/> Active Duty Military Personnel <input type="checkbox"/> Reserve Personnel <input type="checkbox"/> National Guard Personnel <input type="checkbox"/> None Apply							
Siblings	School Age Sibling's Legal Name			Age	School Sibling Attends		
	School Age Sibling's Legal Name			Age	School Sibling Attends		
	School Age Sibling's Legal Name			Age	School Sibling Attends		
Student resides with: <input type="checkbox"/> Both Parents in One Residence <input type="checkbox"/> Mother and Father Equally in Separate Residences <input type="checkbox"/> Legal Guardian, Relation _____ (check one) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Mother/Stepfather <input type="checkbox"/> Father/Stepmother <input type="checkbox"/> Other: _____							
Custodial Family #1	Parent/Guardian 1			Relationship			Cell #
	Home Address					Home Phone	
	Email Address			Employer			Work #
	Parent/Guardian 2			Relationship			Cell #
	Email Address			Employer			Work #

If the parents/guardians of this child do not reside in the same location please complete the information for Family #2 below

Family #2	Parent/Guardian 1			Relationship			Cell #
	Home Address					Home Phone	
	Email Address			Employer			Work #
	Parent/Guardian 2			Relationship			Cell #
	Email Address			Employer			Work #

Please complete both sides of this form

Emergency Contacts	Name	Contact Number	Relationship	Pick Up Allowed? <input type="checkbox"/> No <input type="checkbox"/> Yes
	Name	Contact Number	Relationship	Pick Up Allowed? <input type="checkbox"/> No <input type="checkbox"/> Yes
	Name	Contact Number	Relationship	Pick Up Allowed? <input type="checkbox"/> No <input type="checkbox"/> Yes

School Last Attended	School System of Previous School
School Address	Did your child receive Speech Therapy and/or Special Education Services at the last school attended? <input type="checkbox"/> No <input type="checkbox"/> Yes

Student has medical alert: <input type="checkbox"/> No <input type="checkbox"/> Yes: _____	<input type="checkbox"/> Allergies: _____
	<input type="checkbox"/> Medications: _____

Physician's Name	Physician's Office Number
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In case of emergency (accident, injury, illness, etc.) and parent(s) or legal guardian can not be contacted, school personnel are hereby authorized to take whatever action deemed necessary for the health and well being of my child. I will not hold the school district financially responsible for the emergency care and/or transportation for my child.

Parent or Guardian Signature: _____ Date: _____

Complete if student doesn't live with both parents. Parents are: <input type="checkbox"/> Divorced <input type="checkbox"/> Unmarried <input type="checkbox"/> Legally Separated <input type="checkbox"/> N/A	A copy of the court order awarding custody of child is required for student records. Is a copy in the student's file? <input type="checkbox"/> No <input type="checkbox"/> Yes
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If student is not living with either legal parent: Foster Care / Legal Guardian Name: _____

Legal Alert: IMPORTANT!! List all persons with whom your child cannot leave. Note: Proper legal documents must be provided to support this area.

A person who knowingly falsifies on a form required for a student's enrollment in Cumberland County Schools shall be liable to the district if the student is not eligible for enrollment, but is enrolled on the basis of false information. For the period during which the student is enrolled, the person is liable for the maximum tuition fee that the district has in effect at the time, or the amount that the district has budgeted per student as maintenance and operating expenses, whichever is greater.

Having read and understood the above notice, I certify that I am the parent, guardian, or person having lawful control of the student named on this enrollment form. I further certify that we are residents of Cumberland County or the parents of an open enrollment student at the above address and that this student, in my charge, meets all other qualifications for admission.

Parent or Guardian Signature: _____ Date: _____

Due to the potential of child abductions and custody disputes, it is important that the office knows the current legal status of your child's guardianship. If there is a guardianship issue concerning your child, the school requires a copy of the court order that explains the rights of the custodial and noncustodial parent. Any other instructions should be in writing. Thank you for your cooperation in this matter.