

**ONLY FOR USE WITH STUDENTS  
PREVIOUSLY ENROLLED IN DJUSD**

**Davis Joint Unified School District  
REGISTRATION FORM**

Today's Date \_\_\_\_\_ Entering Grade \_\_\_\_\_ School \_\_\_\_\_

Student's Legal Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
(Please print) Last First Middle

Student's PRIMARY Address \_\_\_\_\_  
Street City Zip

PRIMARY Phone # \_\_\_\_\_ (  Landline  Cell Phone ) Birthdate \_\_\_\_\_

Birth City \_\_\_\_\_ Birth State \_\_\_\_\_ Birth Country \_\_\_\_\_

My child has participated in:  Special Education (RSP, SDC, Inclusion, Speech Therapy)

Reading Support  Math Support

Is there any health, educational, or emotional information that is pertinent to your child's welfare at school? For example, he/she has experienced serious illness /injury or significant life change. Explanation: \_\_\_\_\_

Office Use Only	
Student Number: _____	
Proof of Residence Verified by:	
<input type="checkbox"/> Escrow papers	
<input type="checkbox"/> Rental Agreement	
<input type="checkbox"/> P.G. & E. Statement	
<input type="checkbox"/> City of Davis Utility	
Birthdate Verified by:	
<input type="checkbox"/> Birth Certificate	
<input type="checkbox"/> Other	
Immunizations: _____	
Transcripts provided: _____	
Guardianship forms: _____	
Parent/Guardian ID Verified:	
Drivers Lic: _____ Other _____	
*****	
Date Enrolled: _____	
Scheduled: _____	
Records Requested: _____	
Name of school employee: _____	

Previous School Attended (include preschool)	School District	City & County	State/Zip	Phone	Dates of Attendance	Public School? Yes /No

Has student ever been expelled and when? \_\_\_\_\_ (If yes, attach expulsion order) Has student ever been retained and when? \_\_\_\_\_

Student lives with: (check all that apply)

Father  Mother  Step Father  Step Mother  Foster Parent(s)  Legal Guardian(s)\*\*  Other \_\_\_\_\_

\*\*If relationship is not parent, a notarized statement from parent(s) giving custodial rights to the guardian(s) must be on file in the school record.

Parent/Guardian Active duty in Armed Forces or Full time with the National Guard

**Student is homeless:** lacks a fixed, regular, and/or adequate nighttime residence (this includes students sharing the housing of other persons due to loss of housing, economic hardship, and/or students living in shelters, or awaiting foster care placement)

<b>Parent/Guardians at Student's Primary Address</b>			
1) Parent/Guardian #1 Name:	Legal Relationship:	Cell phone: Text Messages OK?	
Employer:	Work phone:	e-mail address:	
<b>By typing your name in the box you are accepting the typed name as your electronic signature.</b>		➔ <b>Signature of Parent/Guardian: <u>LEGAL</u> Parent/Guardian? Y ___ N ___</b>	
Educational Level of Parent/Guardian #1	Not a high school grad High school graduate	College graduate Graduate school/post grad training	Some college (includes AA degree) Declined to state or unknown
2) Parent/Guardian #2 Name:	Legal Relationship:	Cell phone: Text Messages OK?	
Employer:	Work phone:	e-mail address:	
<b>By typing your name in the box you are accepting the typed name as your electronic signature.</b>		➔ <b>Signature of Parent/Guardian: <u>LEGAL</u> Parent/Guardian Y ___ N ___</b>	
Educational Level of Parent/Guardian #2	Not a high school grad High school graduate	College graduate Graduate school/post grad training	Some college (includes AA degree) Declined to state or unknown
<b>Other Parent/Guardian Information- if different than student's primary address</b>			
<input type="checkbox"/> Check if LEGAL Parent/Guardian is to receive copies of report card, PTA newsletters, etc.			
3) OTHER Parent/Guardian's Name:	Legal Relationship:	Employer:	
Address:	Work phone:	Cell phone: Text Messages OK?	e-mail address:

**Other Children Living at Home:**

Name	Relationship (i.e. Brother/Sister/Cousin)	Birthdate	School They Attend

# Demographic Information

We are requesting your assistance in obtaining demographic information required by federal and state regulation for the California Assessment of Student Performance and Progress (CAASPP) Assessment System. CAASPP is a State required academic assessment given to students on an annual basis. The information required is used to compare and rank schools across the State through the Academic Performance Index and is reported only in percentage groupings. In order to provide information that is accurate, we need your help with each of the areas listed below.

Please answer the following questions by placing a check mark in the following boxes

## I. IS YOUR CHILD HISPANIC or LATINO?

- Yes  
 No

No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider the student's race to be:

- American Indian or Alaskan Native Native  
 Hawaiian or Other Pacific Islander\*  
 Asian \*  
 White  
 African American or Black

\*If you have indicated "Asian" or "Pacific Islander," please check/circle one:

Chinese	Asian Indian	Native Hawaiian	Other Asian
Japanese	Laotian	Guamanian	Other Pacific Islander
Korean	Cambodian	Samoan	
Vietnamese	Filipino	Tahitian	

## II. WHAT LANGUAGE IS MOST FREQUENTLY SPOKEN IN THE HOME? (Please circle one)

English	Farsi (Persian)	Japanese	Pashto	Taiwanese
Albanian	Filipino (Pilipino, Tagalog)	Kannada	Polish	Tamil
Arabic	French	Khmer (Cambodian)	Portuguese	Telugu
Armenian	German	Khmu	Punjabi	Thai
Assyrian	Greek	Korean	Rumanian	Tigrinya
Bengali	Gujarati	Kurdish (Kurdi, Kurmanji)	Russian	Toishanese
Burmese	Hebrew	Lahu	Samoan	Tongan
Cantonese	Hindi	Lao	Serbo-Croatian	Turkish
Cebuano (Visayan)	Hmong	Mandarin (Putonghua)	(Bosnian, Croatian, Serbian)	Ukrainian
Chaldean	Hungarian	Marathi	Sign Language	Urdu
Chamorro (Guamanian)	Ilocano	Marshallese	Somali	Vietnamese
Chaozhou (Chaochow)	Indonesian	Mien (Yao)	Spanish	Other non English – please circle & state below
Dutch	Italian	Mixteco		

## III. PLEASE CHECK THE FOLLOWING LIVING SITUATION THAT CURRENTLY APPLIES TO THE STUDENT:

- Living in home, rented home, or apartment (one family)  
 Due to economic hardship, loss of housing, or similar reason, living with friends or relatives. Please explain \_\_\_\_\_  
\_\_\_\_\_  
 Living in a shelter or transitional housing  
 Living in a hotel or motel  
 Living in a campground, park, or car  
 Living in a foster care placement  
 Living in other circumstances. Please explain: \_\_\_\_\_

IV. PLEASE INDICATE IF YOU ARE AWARE OF OR POSSESS LEGALLY BINDING DOCUMENTS FILED THROUGH A COURT WHICH COULD BE ENFORCED BY A JUDGE OR OFFICER RELATED TO YOUR CHILD. Including but not limited to a lawfully issued subpoena, a temporary restraining order, an injunction, a custody order or a court approved parenting agreement. Please provide a copy of any legally binding documents related to your child."

V. PLEASE INDICATE NAME STUDENT GOES BY IF OTHER THAN LEGAL NAME (such as nickname like Bobby for Robert or Jenny for Jennifer)