



# EXCALIBUR Charter Schools

2011-2012

## Student Enrollment Form

Avalon

Excaltibur

Please COMPLETE all information as it appears on legal documentation required for enrollment

School Use Only:	Received By:	SPED:	Mrkt Source:	
Received Date:	Fee Paid:	Start Date:	Returning	New

Legal Last Name	Legal First Name	Legal Middle Name	Suffix	Age
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Preferred Name:

Gender Female Male	Date of Birth			Birth place (City, State, Country)	Grade Level 2011-2012
	MM	DD	YYYY		

Are there custody agreements regarding this student?      NO      YES      If yes, please provide court documentation.

Student(s) Home Address      Unit/Apt #

City	State	Zip Code	Primary Phone Number for Attendance Calls
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Student Mailing Address (if different from home address)      Unit/Apt #

City	State	Zip Code	Home Phone
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Last School Attended	Date Last Attended	Grade	City, State
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Has your child ever been suspended or expelled?      NO      YES      If yes, please specify:

Has your child ever been retained or held back?      NO      YES      If yes, please specify:

How will your student go home at the end of the school day?      Walking      Pick-Up      Bus

Does your child receive Special Services?      NO      YES

Does your child have an IEP?      NO      YES

Does your child have a 504 Plan?      NO      YES

Is your child certified as having a chronic health problem?      NO      YES      If yes, please specify:

Parent/Guardian Name:      Mother      Father      Stepmother      Stepfather      Relative      Foster      Guardian

Address:      Work Phone:      Cell Phone:      Email:

Parent/Guardian Name:      Mother      Father      Stepmother      Stepfather      Relative      Foster      Guardian

Address:      Work Phone:      Cell Phone:      Email:

Emergency Contact (different from above):      Phone:      Relationship

Emergency Contact (different from above):      Phone:      Relationship

I hereby certify that I am the legal guardian for the above named student and the information that I have provided is accurate and true.

\_\_\_\_\_      \_\_\_\_\_

Signature      Date