

Student Enrollment Application

Mail or fax to: IEM Enrollment, 1166 Broadway, Suite Q, Placerville, CA 95667
Phone (800)979-4436 or Fax (530)295-3583

Required:

School Requested:

- South Sutter
- Ocean Grove
- Sky Mountain

Fall

Spring

Year : 20__

Do not disenroll from your current school until you have met with your assigned Education Specialist
The submission of this application does not constitute enrollment.

| | | | | |
|--|---------------------|-------------------------|----------------------|---------------|
| Student Last Name | First Name | MI | Gender | Current Grade |
| Legal Alias(s) (Adopted/Maiden/Married/other) | Nickname or other | | | |
| Birth Date () | Birth City () | Birth State | Birth Country () | |
| Home Phone | Cell Phone | Emergency Contact: Name | | Phone number |
| School District of Residence | County of Residence | | | |

Adult Student / Parent / Guardian Information

| | |
|--|--|
| (Circle one) Mother/ Guardian / Adult Student / Spouse | Father / Guardian / Adult Student / Spouse |
| Name (Last, First): | |
| Work Phone: () | () |
| Home phone: () | () |
| E-mail Address: @ . | @ . |
| <input type="checkbox"/> Check if you <u>do not</u> wish to be a part of the school listserv | <input type="checkbox"/> Check if you <u>do not</u> wish to be a part of the school listserv |

| | | |
|----------------------|-------|------|
| Mailing Address: | City: | Zip: |
| Residential Address: | City: | Zip: |

Residence – Where is your child/family currently living? (federally mandated by NCLB) – Please check the appropriate box:

- in a single family permanent residence (house, apartment, condo, mobile home)
- in a motel/hotel
- Doubled-up (sharing housing with other families/individuals due to economic hardship or loss)
- Unsheltered (car/campsite)
- in a shelter or transitional housing program
- Other (please specify)

Previous School(s) Information

| | |
|------------------------------|----------------|
| 1. School Name (Most Recent) | 2. School Name |
| Address | Address |
| City State Zip | City State Zip |
| Phone | Phone |

Ethnicity: Hispanic/Latino: __Y__N Choose All that Apply:

- 100 – American Indian/Alaska Native
- 201 – Chinese
- 204 – Vietnamese
- 299 – Other Asian
- 304 – Tahitian
- 500 – Hispanic or Latino
- 202 – Japanese
- 205 – Asian Indian
- 301 – Hawaiian
- 399 – Other Pacific Islander
- 600 – Black or African American (not Hispanic)
- 206 – Laotian
- 302 – Guamanian
- 400 – Filipino
- 700 – white (not Hispanic)
- 203 – Korean
- 207 – Cambodian
- 303 – Samoan

See code lists on page 3 to answer these required questions. Enter the code only on this form:

Education Level: Parent 1 Parent 2 Overall Household Income(enter Code): Overall Household Size:

Language Survey (Use 2 digit code from Page 4)

What Language did your child first learn to speak: Which language does your child most frequently use at home:

Which language do you most frequently speak to your child: Which language is spoken most often to your child:

Additional Student Information:

Has your child ever been expelled or pending an expulsion from a school? Yes No School Name:

If Foreign-born: Did you enroll for the first time in a US school within the last 3 years ? Date 1st Enrolled:

Student Name: _____

ALL Applicants must complete A. & B. questions below: Special Education Section

Please call the Special Education Department directly with any questions: (619)562-7328

A. Has your child ever been referred and/or evaluated to receive special education services?

Yes No

B. Has your child ever attended a Special Education Class?

Yes No

If YES to either question, complete questions 1-5 below.

1. Does your child have a current/active IEP? YES/NO (If NO, what was the date of his/her last IEP _____)

2. Which type of class or service did your child attend? Check all that apply

Speech RSP SDC Adaptive PE OT PT

Other (please name) _____

3. What was the last date your child was in a special education class or received services?

Month of service: _____ Year of service: _____

4. School name and address where special education referral, assessment, or IEP was

developed*: _____

5. Date of most recent IEP*: _____

*** Enclose a copy of your child's most recent IEP with this application. If your child does not have an IEP, but was evaluated for special education, enclose a copy of all assessment reports.**

No Child Left Behind Opt Out Request—Check if you wish to **opt out**, otherwise your information will be released when requested as required by Section 9528 of the NCLB regulations.

I wish to opt out from having my private information released to Military Recruiters by this school.

IMPORTANT ENROLLMENT INFORMATION: Please read carefully then sign and return these **first 2 pages** to request enrollment in our school. Remember, the student is not enrolled or committed to enrollment by completing this application, but is requesting an enrollment appointment with one of our Education Specialists where enrollment decisions and start dates will be discussed. **Do not disenroll from your current school until you have met with your assigned Education Specialist!**

Documents required for completion of the enrollment process: *(Please attach/fax required documents to/with this application. Applications received without this required documentation will delay the enrollment process)*

Check if included:

Birth Certificate (please send a copy only)

Immunization card (please send a copy only)

Report of Health Exam for School Entry (For K and 1st grade)

Report of Oral Health Exam for School Entry (For K and 1st grade students who did not attend K)

Transcript copy (if high school level)

CAHSEE scores (11th to 12th grade only)

Caregiver Authorization Affidavit (if person enrolling student is NOT the parent or legal guardian)

Optional Information:

Requested ES: _____ Requested Co-op/Program: _____

How Did You Hear About Us?

Radio Ad Printed Flyer Newspaper Ad Friend Referral Other _____

I attest that the above statements are true to the best of my knowledge. I understand that falsification of any of the information on this enrollment application may result in the student being dropped from the charter school.

Parent/Guardian/AdultStudent/Signature

Date

IEM Student Enrollment Application- Page 3

Codes to use on page 1 of the Enrollment Application

(This page is for your usage—do not fax or mail back)

Ethnicity

Enter the 3 digit code below on page 1 that corresponds to this student's ethnicity.

100 American Indian or Alaska Native. *A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.*

Asian—Select from below *A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent.*

201 Chinese

202 Japanese

203 Korean

204 Vietnamese

205 Asian Indian

206 Laotian

207 Cambodian

299 Other Asian

Native Hawaiian or Other Pacific Islander--Select from below. *A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.*

301 Hawaiian

302 Guamanian

303 Samoan

304 Tahitian

399 Other Pacific Islander

400 Filipino. *A person having origins in any of the original peoples of the Philippine Islands.*

500 Hispanic or Latino. *A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.*

600 Black or African American (not Hispanic). *A person having origins in any of the black racial groups of Africa.*

700 White (not Hispanic). *A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.*

Parent Education Level

Enter the 2 digit code of the highest level of education for each parent/guardian

10 Graduate school/post graduate training

11 College graduate

12 Some college (includes AA degree)

13 High school graduate

14 Not a high school graduate

Overall Household Size

Enter the total number of people who reside in your household, including other dependents

Overall Household Income--annual

Enter the 1 digit code that corresponds to the income level of this student's household:

| Code to use | Income Level | Code to use | Income Level |
|-------------|----------------------|-------------|----------------------|
| AA | Less than \$9,800 | GG | \$26,801 to \$30,200 |
| BB | \$9,801 to \$13,200 | HH | \$30,201 to \$33,600 |
| CC | \$13,201 to \$16,600 | II | \$33,601 to \$37,000 |
| DD | \$16,601 to \$20,000 | JJ | \$37,001 to \$40,400 |
| EE | \$20,001 to \$23,400 | KK | \$40,401 to \$43,800 |
| FF | \$23,401 to \$26,800 | LL | More than \$43,801 |

IEM Student Enrollment Application- Page 4
Codes to use on page 1 of the Enrollment Application

(This page is for your usage—do not fax or mail back)

Languages

Enter the 2 digit code listed below to answer the 4 language questions on page 1

| | |
|-----------------------------------|--|
| 56 Albanian | 50 Khmu |
| 37 American Sign Language | 04 Korean |
| 11 Arabic | 51 Kurdish (Kurdi, Kurmanji) |
| 12 Armenian | 47 Lahu |
| 42 Assyrian | 10 Lao |
| 61 Bengali | 07 Mandarin (Putonghua) |
| 13 Burmese | 48 Marshallese |
| 03 Cantonese | 44 Mien (Yao) |
| 36 Cebuano (Visayan) | 49 Mixteco |
| 54 Chaldean | 99 Other Non-English language |
| 20 Chamorro (Guamanian) | 40 Pashto |
| 39 Chaozhou (Chaochow) | 41 Polish |
| 15 Dutch | 06 Portuguese |
| <u>00 English</u> | 28 Punjabi |
| 16 Farsi (Persian) | 45 Rumanian |
| 05 Filipino (Tagalog or Pilipino) | 29 Russian |
| 17 French | 30 Samoan |
| 18 German | 52 Serbo-Croatian (Bosnian, Croatian, Serbian) |
| 19 Greek | 60 Somali |
| 43 Gujarati | 01 Spanish |
| 21 Hebrew | 46 Taiwanese |
| 22 Hindi | 32 Thai |
| 23 Hmong | 57 Tigrinya |
| 24 Hungarian | 53 Toishanese |
| 25 Ilocano | 34 Tongan |
| 26 Indonesian | 33 Turkish |
| 27 Italian | 38 Ukrainian |
| 08 Japanese | 35 Urdu |
| 09 Khmer (Cambodian) | 02 Vietnamese |