

**Aurora City Schools
Enrollment Form**

Date _____

Student Name _____ S.S# _____
(last) (first) (middle) (Required)

Address _____ Birth Date _____
(month) (day) (year)

Home Phone# _____ Cell Phone# _____

Birth Place _____ Male Female
(city) (county) (state)

Ethnicity: Hispanic/Latino Not Hispanic/Latino

Is student presently SUSPENDED/EXPELLED from school last attended? Yes No
Reason _____

Race: *Choose one or more regardless of ethnicity*
 Alaskan Native or American Indian
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

Birth Certificate Yes No
(Required in all cases)

Custodial Papers Yes No
(Required in cases of separated or divorced parents)

Kindergarten: Child Attended: ___ Half-Day; ___ Full Day; ___ No Kindergarten

Previous school attended _____

City/State of Previous School _____

Last date of attendance _____ Grade Completed _____

Is this the first time enrolling in an Ohio School District ___ Yes ___ No

Does student have a current:

IEP ___ Yes ___ No

504 Accommodation Plan ___ Yes ___ No

Gifted/Talented Identification ___ Yes ___ No

Does the student have a primary/home/native language other than English? ___ Yes ___ No

If yes, please answer the following questions:

1. What language did your son/daughter speak when he/she first learned to talk? _____

2. What language does your son/daughter use most frequently at home? _____

3. What language do you use most frequently with your son/daughter? _____

4. What language do the adults at home most often speak? _____

If applicable:

5. When did student first arrive in USA (month and year) _____

6. Date student first entered US schools (month and year) _____

7. Years of ESL outside of USA _____ Years of ESL in USA _____

8. What grade did student complete outside of USA? _____

