

POLK COUNTY PUBLIC SCHOOLS STUDENT ENTRY FORM 2017-2018
PLEASE PRINT
(Please also complete Emergency and Contact Information Form on Page 2)

School: STUDENT ID (IF KNOWN): Date:

Section I - To be Completed by Parent/Guardian

Student's Legal Name - Last Jr., III, etc. First Middle Name or Initial

Male Female

Grade Birth Date (mm/dd/yyyy) Home Phone

Residential Address - Street Apartment # City Zip Code

Mailing Address (if different from above) Apartment # City Zip Code

Ethnicity: Are you Hispanic/Latino? Language spoken at home:

Race: Check at least one. (Note: Hispanic/Latino is not a race)

White African American/Black American Indian/Native Alaskan Asian Native Hawaiian or Pacific Islander

Birthplace - City State County Country

How will the student get home from school? Walk Car Bus Other:

Student lives with: Documentation required: Has student ever been expelled from any school...

Both Parents Surrogate Parents Parent & Step Parent Legal Guardian Mother Only (P) Guardian Ad Litem Father Only (P) Other: In Foster Care Other:

Migrant/Farm Worker: If yes, do you travel in FL or to other states to find farm work? Florida Statute 837.06 provides that whoever knowingly makes a false statement...

Mother's Name on Birth Certificate

Father's Name on Birth Certificate

Brothers/sisters attending school: Grade Student ID (If known) School

Has student been in an exceptional student education (ESE) or any other special education program?

Has student been determined eligible under Section 504 and/or has a Section 504 plan?

Has student been in any ESOL or ELL program or class?

Is your family residing in any of the following situations:

- 1. Sharing the housing of others due to loss of housing or economic hardship.
2. Living in a motel or hotel due to loss of housing or economic hardship.
3. Staying in a shelter (Name of shelter)
4. Substandard housing; without electricity, running water, health code violations, etc.
5. Sleeping in a car, campground, park or public space.

Are you the legal parent or guardian of the student?

Has child repeated any grades? If yes, which grades?

Has student ever attended a Florida/Polk County school (PreK-12)? If yes, give the following information:

County School Name Street School Year Last Attended

Give the name, complete address and phone number of the last school attended. School Name

Street City State Zip Phone

For Elementary (K-5) Students Only

Did student complete kindergarten? Years in school, including kindergarten prior to current year.
Did the child complete a VPK Program? Where: Name:

Enrolling Parent/Guardian (Print Name) Enrolling Parent/Guardian (Signature) Date

Section II - To be Completed by School Personnel

Grade Teacher Student ID# Assigned Bus Entry Date Entry Code

Birth Certificate Physical Immunizations Emergency Contacts

Address Verification 1) 2)

Lunch Form E.S.E. Release Medical Inf. Form Language Survey

Social Security Verification: PreK Experience Hand Carried Records:

Admitting Personnel Date Records Request Date

The Mission of Polk County Public Schools is to provide a high quality education for all students.

The School Board of Polk County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, homelessness, or disability or other basis prohibited by law in any of its programs, services, activities or employment.

How to Request Accommodations: If you require any type of accommodation to complete the application process due to a disability, please call the Human Resource Services Division at (863) 534-0781. If you are deaf or hard of hearing, please contact the Polk County School District by calling Florida Relay Service at 1-800-955-8771.

**POLK COUNTY PUBLIC SCHOOLS EMERGENCY AND CONTACT INFORMATION FORM 2017-2018  
PLEASE PRINT**

Student's Legal Name – Last

Jr., III, Etc.

First

Middle name or initial

At which telephone number would you like to be contacted if your student is absent? ( \_\_\_\_\_ ) ( \_\_\_\_\_ - \_\_\_\_\_ )  
This phone number MUST be a phone number for Contact 1 or Contact 2 below.

Contact 1 Must be Parent or Guardian	<u>Contact 1</u> Parent/Guardian	<u>Contact 2</u>	<u>Contact 3</u>	<u>Contact 4</u>
Relation to Student: -Circle One-	Mother          Father Guardian	Mother          Father Guardian	Mother          Father Guardian	Mother          Father Guardian
	Other: _____	Other: _____	Other: _____	Other: _____
First Name:				
Last Name:				
Home Phone:				
Cell Phone:				
Work Phone:				
<u>Preferred Number to Call:</u> -Circle One-	Home / Cell / Work	Home / Cell / Work	Home / Cell / Work	Home / Cell / Work
Email:				
Notify in Emergency*	Y or N	Y or N	Y or N	Y or N
Pick Up Allowed*	Y or N	Y or N	Y or N	Y or N
Records Access Allowed*	Y or N	Y or N	Y or N	Y or N
Lives With	Y or N	Y or N	Y or N	Y or N
Personal Contact Allowed At School*	Y or N	Y or N	Y or N	Y or N

	<u>Contact 5</u>	<u>Contact 6</u>	<u>Contact 7</u>	<u>Contact 8</u>
Relation to Student: -Circle One-	Mother          Father Guardian	Mother          Father Guardian	Mother          Father Guardian	Mother          Father Guardian
	Other: _____	Other: _____	Other: _____	Other: _____
First Name:				
Last Name:				
Home Phone:				
Cell Phone:				
Work Phone:				
<u>Preferred Number to Call:</u> -Circle One-	Home / Cell / Work	Home / Cell / Work	Home / Cell / Work	Home / Cell / Work
Email:				
Notify in Emergency*	Y or N	Y or N	Y or N	Y or N
Pick Up Allowed*	Y or N	Y or N	Y or N	Y or N
Records Access Allowed*	Y or N	Y or N	Y or N	Y or N
Lives With	Y or N	Y or N	Y or N	Y or N
Personal Contact Allowed At School*	Y or N	Y or N	Y or N	Y or N

\*Each parent has the right to pick-up, visit, and meet with his/her student at school, without interference of or the need for consent from the other parent, unless the school has received a certified copy of an enforceable court order that provides to the contrary. In addition, a court order is necessary to deny records access to parents/guardians.

NOTICE: You are required to complete the Emergency and Contact Information Form and update information annually or any time the information changes. School personnel will contact you to pick up your child if he/she is unable to remain at school due to illness or accident. If school personnel are unable to reach you, one of the adults listed on the Emergency and Contact Information Form designated to pick up your child will be contacted. School personnel will contact Emergency Medical Services in an emergency situation to take whatever action is deemed necessary for the health and safety of your child. Parents are financially responsible for any emergency care and/or transportation your child needs. Also it is your responsibility to notify your child's school of any changes in the information recorded on this form and to provide the school with information if there are any custody restrictions involving your child. Forms must accurately reflect your child's court order, if applicable.

*I certify that the information provided on this Student Entry Form/Emergency and Contact Information Form is accurate, true, and correct.*

Date

Enrolling Parent/Guardian Signature

Relationship to Student