



Instructions for Completing Enrollment Form  
Carroll County Public Schools

Welcome to Carroll County Public Schools! Please read the information below in order to accurately complete the enrollment form for your child. The enrollment form must be completed for all students new to Carroll County Public Schools, as well as for students transferring from one school to another school.

- **STUDENT INFORMATION:** Complete all information on the enrollment form – student’s legal name, date of birth, gender and current grade.
  - **RACE/ETHNICITY:** Select one of the race codes listed in this section.
  - **ADDITIONAL RACE CODE/ETHNICITY INFORMATION:**
    - The federal government requires state education departments to implement new race and ethnicity codes during 2009-2010. The school system is also responsible for collecting race/ethnicity information using the current system. Please complete both sections of the enrollment form:
    - Answer the question: Are you Hispanic or Latino?
      - Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race
    - Select one or more of the races listed.(See descriptions below)

1	American Indian or Alaskan Native	A person having origins in any of the original peoples of North & South America (including Central America) and who maintains a tribal affiliation or community involvement.
2	Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
3	Black or African American	A person having origins in any of the black racial groups of Africa
4	White	A person having origins in any of the original peoples of Europe, the Middle East or North Asia.
5	Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

- **RESIDENCY:** Fill in your current home address and your mailing address, if different from your residence address. Fill in your primary phone number – this could be your home number or a cell phone.
- **PARENT/LEGAL GUARDIAN INFORMATION**
  - Identify the adult(s) who is responsible for the child at the current address
  - Indicate the relationship to the child
  - If you are the custodial parent, please provide a copy of the current court order
  - If you are the non-custodial parent, you must have a notarized statement from the custodial parent granting permission for you to enroll the child in school.
- **SCHOOL AGE SIBLINGS –** List any school age siblings and their current school. If more room is needed, an additional sheet can be used.
- **TRANSPORTATION INFORMATION:** If your child will be leaving from somewhere other than home in the morning, or returning to somewhere other than home in the afternoon, please provide the address, phone number and name of the responsible adult at that location(s).
- **PRIOR SCHOOL EXPERIENCE:** Fill in the name of the last school your child attended either in Carroll County or another district or state. Answer yes or no for the remaining questions.
- **VERIFY THAT ALL INFORMATION IS ACCURATE AND CORRECT.** THE COMPLETED ENROLLMENT FORM ALONG WITH ALL REQUIRED DOCUMENTS MUST BE PRESENTED TO A SCHOOL OFFICIAL TO COMPLETE THE ENROLLMENT PROCESS.
- **SIGNATURE AND DATE:** The enrollment form will be signed and dated when the form and documents have been reviewed and accepted by the school.

INSTRUCTIONS: This form is to be completed by the parent or legal guardian. Maryland State regulations require verification of the following at the time of enrollment (unless homeless): proof of Carroll County residency, proof of birth and age requirements, and proof of immunizations. Enrollment is not complete, and the student may not attend classes, until these documents are provided and verified. **The biological or adoptive parent or legal guardian must personally appear and provide the required documents. The form must be signed in the presence of the school official accepting the documents.**

PLEASE COMPLETE BOTH PAGES OF THIS FORM. PLEASE TYPE OR PRINT ALL INFORMATION.

SCHOOL \_\_\_\_\_

TODAY'S DATE \_\_\_\_\_

STUDENT INFORMATION

Student's Legal Last Name \_\_\_\_\_ Student's Legal First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Male  Female  Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_

Race/Ethnicity: PLEASE NOTE: The federal government provides only these categories and requires this information. If not completed, school personnel are required to make a selection. Select only one choice below.

American Indian(1)  Asian/Pacific Islander(2)  African American(3)  White(4)  Hispanic(5)

Additional Race Code/Ethnicity Information: During 2009-2010 we are required to collect additional race and ethnicity information. If not completed, school personnel are required to make a selection. MULTIPLE RACES MAY BE CHOSEN. Select one or more choices below.

American Indian/Alaskan Native(1)  Asian(2)  Black or African American(3)  White(4)  Native Hawaiian or Other Pacific Islander(5)

Are you Hispanic or Latino? Yes  No  (Please check regardless of the race(s) you have selected)

Primary Language Spoken at Home (if other than English) \_\_\_\_\_

RESIDENCY

Current Residence Address \_\_\_\_\_  
Street City State Zip Code

Mailing Address \_\_\_\_\_  
(If different from residence address) Street/P.O.Box City State Zip Code

Phone # \_\_\_\_\_

Is your current address a temporary living arrangement: Yes  No  If yes, is this due to lack of housing or economic hardship: Yes  No  N/A

PARENT/LEGAL GUARDIAN INFORMATION

Adult #1 with whom student is residing \_\_\_\_\_ Relationship: Mother  Father  Step-parent  Legal Guardian  Other   
Legal First Name and Last Name

Primary Phone \_\_\_\_\_ Phone #2 \_\_\_\_\_ Phone #3 \_\_\_\_\_

Email Address \_\_\_\_\_

Adult #2 with whom student is residing \_\_\_\_\_ Relationship: Mother  Father  Step-parent  Legal Guardian  Other   
Legal First Name and Last Name

Primary Phone \_\_\_\_\_ Phone #2 \_\_\_\_\_ Phone #3 \_\_\_\_\_

Email Address \_\_\_\_\_

Who has legal custody of this student? Mother  Father  Both  Legal Guardian  (Legal guardian must provide court documentation.)

Parent/Guardian NOT residing with student \_\_\_\_\_ Relationship: Mother  Father  Legal Guardian   
Legal First Name and Last Name

Home Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Non-custodial parent (if applicable) \_\_\_\_\_  
Name Address City State Zip

Is there a current custody order? Yes  No  N/A  If yes, please provide the school with current legal documentation.

Is there a current "No Contact" order? Yes  No  N/A  If yes, please provide the school with current legal documentation.

COMPLETE PAGE 2

RETAIN THIS FORM FOR 3 YEARS BEYOND THE YEAR TO WHICH IT APPLIES

SCHOOL AGE SIBLINGS

Name Birth Date Current School
Name Birth Date Current School
Name Birth Date Current School

TRANSPORTATION INFORMATION

A.M. Bus Address Name of Responsible Adult, if other than parent
P.M. Bus Address Name of Responsible Adult, if other than parent

PRIOR SCHOOL EXPERIENCE AND OTHER INFORMATION

Name of Last School Attended prior to this enrollment Grade Dates of Attendance
Address City State Zip Code Phone
Has the student ever attended a Carroll County Public School?
Does the student have an IEP (Special Education Services)?
Does the student have a 504 plan?
Has the student participated in an ESOL program?
Does the parent need an interpreter?
Is the student currently suspended from school?
Effective dates of suspension/expulsion

Parent/Guardian Signature: Date:

The information as submitted on this form and on any attachments is accurate, complete and true to the best of my knowledge. I understand that enrollment will be complete upon receipt of all records and information. I also understand that any information that is misrepresented or falsified may result in tuition charges, or denial of enrollment. Form must be signed in the presence of the school official completing enrollment.

FOR SCHOOL USE ONLY

Proof of Birth (Initial next to document received):
Birth Certificate Birth Registration Physician's Certificate Hospital Certificate Passport/Visa
Baptismal/Church Certificate Parent's Affidavit (PPW approved) Official School Record Official Court Document
Other (PPW approved)

Residence Verification (Initial next to document received) \*Indicates document must be dated within 60 days of enrollment
Recent Bill for Services to the Home\* Signed Contract on a Home Signed Rental/Lease Agreement
Signed Settlement Document\* Property Tax Bill (current) Rent Receipt (current) Mortgage Statement/Bill\*
Deed (with owner's name and street address) Residence Verification Form (notarized) with POR
Student Services Approved (attach documentation)

Proof of Immunization Compliance: (Initial next to document received)
DHMH Certificate 896 Computer Generated Printout from Dr.'s Office Other (with nurse approval)

Start Date Entry Code A.M. Bus P.M. Bus Student I.D. # State I.D. #
POD # Out of District Non-Resident Homeless Kinship Care Immigrant FaRMs SPED 504 Title I
Birth Country (if other than United States) Date of 1st US School Entry
Other

Signature/Title of School Official(s) Receiving Enrollment Documents:

Proof of Birth Signature/Title/Date Proof of Residence Signature/Title/Date

Immunizations Signature/Title/Date Signature/Title/Completion Date of School Official Updating SASI