

School Name: _____		Complex Area: _____		
<b>STUDENT ENROLLMENT FORM</b> SIS-10W (Revised)		Student ID No. _____	Entry Date _____	Entry Code _____
		For school use only		
<b>INSTRUCTIONS: PRINT YOUR ENTRIES LEGIBLY</b>		Ethnicity/Race Observed: _____ Initial _____ Date _____		
<b>STUDENT PERSONAL DATA</b>				
Last Name: _____		Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Grade Level: _____	
First Name: _____		Birth Date: _____		
Middle Initial: _____	Lineage: (Jr, II, III, etc): _____		Verification of DOB: _____	
Home Phone: _____		Unlisted: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residence (Identifiable location required)			Mailing Address (if different from home address)	
Number _____	Street _____	Apt. # _____	Number/P.O. Box # _____	Street _____
City _____	State _____	Zip code _____	City _____	State _____
<input type="checkbox"/> Not Homeless		<input type="checkbox"/> Homeless*		<input type="checkbox"/> Completed MVA Packet
_____ DOE Representative Signature			_____ Parent/Legal Guardian Signature	
<p>*"Homeless" means individuals who lack a fixed, regular and adequate nighttime residence (within the meaning of section 42 USCS §11302(a)(1)) and includes:</p> <p>(i) children and youth who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement.</p> <p>(ii) children and youth who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of 42 USCS §11302(a)(2)(C));</p> <p>(iii) children and youth who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations or similar settings; and</p> <p>(iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle.</p> <p style="text-align: center;">If you have any questions regarding the above, please call 1-866-927-7095</p>				
<b>PRESCHOOL EXPERIENCE</b>			<b>LAST HAWAII PUBLIC SCHOOL ATTENDED</b>	
Preschool Experience <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" – attended: <input type="checkbox"/> less than 6 months <input type="checkbox"/> between 6 and 12 months <input type="checkbox"/> more than 1 year			Name: _____ Last Grade Attended: _____ Year: _____	
<b>PRIOR SCHOOL ATTENDED (If not Hawaii Public School)</b>				
Name: _____				
Address: _____				
<b>CITIZENSHIP</b>				
Country of Birth: _____		If Country of Birth is other than US, give year of arrival: _____		
US Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		If not US Citizen, indicate status: Refugee _____ Immigrant _____ Non-Immigrant _____		

**LANGUAGE INFORMATION**

Language Codes: (Select a letter from the list and fill in the blanks below)

_____ Student's First Acquired Language	_____ Language Most Often Spoken at Home	_____ Language Most Often Used by Student
<b>A</b> – English	<b>F</b> – Cebuano/Visayan	<b>K</b> – Vietnamese
<b>B</b> – Cantonese	<b>G</b> – Hawaiian	<b>M</b> – Chuukese
<b>C</b> – Mandarin	<b>H</b> – Japanese	<b>N</b> – Pohnpeian
<b>D</b> – Ilocano	<b>I</b> – Korean	<b>O</b> – Cambodian
<b>E</b> – Tagalog	<b>J</b> – Samoan	<b>P</b> – Chamorro
		<b>Q</b> – Fijian
		<b>R</b> – Hmong
		<b>S</b> – Lao
		<b>T</b> – Marshallese
		<b>U</b> – Pampango
		<b>V</b> – Pangasinan
		<b>W</b> – Portuguese
		<b>X</b> – Spanish
		<b>Y</b> – Thai
		<b>Z</b> – Tongan
		<b>L</b> – Other (Specify): _____
		Refer to long list of languages

**Please complete ETHNICITY INFORMATION, RACE INFORMATION, and PRIMARY RACE INFORMATION**

**ETHNICITY INFORMATION**

Is the student Hispanic (Ex. Cuban, Mexican, Puerto Rican, Spanish, Other Hispanic)?  Yes  No

**RACE INFORMATION**

Check ONE or more:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> <b>A</b> – American Indian or Alaska Native | <input type="checkbox"/> <b>E</b> – Native Hawaiian | <input type="checkbox"/> <b>K</b> – Samoan   | <input type="checkbox"/> <b>P</b> – Tongan                 |
| <input type="checkbox"/> <b>B</b> – Black                            | <input type="checkbox"/> <b>G</b> – Japanese        | <input type="checkbox"/> <b>L</b> – White  | <input type="checkbox"/> <b>Q</b> – Guamanian/Chamorro     |
| <input type="checkbox"/> <b>C</b> – Chinese                          | <input type="checkbox"/> <b>H</b> – Korean          | <input type="checkbox"/> <b>N</b> – Indo-Chinese (Ex. Cambodian, Laotian, Vietnamese)  | <input type="checkbox"/> <b>R</b> – Other Asian            |
| <input type="checkbox"/> <b>D</b> – Filipino                         | <input type="checkbox"/> <b>I</b> – Portuguese      | <input type="checkbox"/> <b>O</b> – Micronesian (Ex. Chuukese, Marshallese Pohnpeian,) | <input type="checkbox"/> <b>S</b> – Other Pacific Islander |

**PRIMARY RACE INFORMATION**

What is the student's primary race? (Select only ONE letter from the Race Information section and fill in the blank) \_\_\_\_\_

I decline to provide ethnicity and/or race information. I understand that if I do not provide this information, a school representative will designate the ethnicity and race categories for my child.

**PARENT/GUARDIAN CONTACT INFORMATION**

<b>F I R S T  P A R E N T  /  G U A R D I A N</b>	Check one: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other (specify): _____	Relation: _____	
	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single		
	_____ Last Name	_____ First Name	_____ Employer's Name
	_____ Home Phone #	_____ Cellular Phone #	_____ Pager #
	_____ Address (if different from student's)		_____ Email Address
	Custody of Child: <input type="checkbox"/> Yes <input type="checkbox"/> No	Child lives with this contact: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Is this parent/guardian a member of the Armed Services, National Guard or Reserves? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Military Status (check one): <input type="checkbox"/> Traditional Reservist / M-Day <input type="checkbox"/> Active Duty (Title 10) <input type="checkbox"/> Federal Technician (Title 32)		
	Deployed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Branch of Service (check one):		
<input type="checkbox"/> Army	<input type="checkbox"/> Marine	<input type="checkbox"/> Air National Guard	
<input type="checkbox"/> Air Force	<input type="checkbox"/> Coast Guard	<input type="checkbox"/> Army Reserves	
<input type="checkbox"/> Navy	<input type="checkbox"/> Army National Guard	<input type="checkbox"/> Air Force Reserves	
		<input type="checkbox"/> Navy Reserves	
		<input type="checkbox"/> Marine Reserves	
		<input type="checkbox"/> Coast Guard Reserves	

**PARENT/GUARDIAN CONTACT INFORMATION**

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Check one:  Mr.  Mrs.  Ms.  Other (specify): \_\_\_\_\_ Relation: \_\_\_\_\_

Marital Status:  Married  Divorced  Separated  Single

\_\_\_\_\_  
Last Name First Name Employer's Name

\_\_\_\_\_  
Home Phone # Cellular Phone # Pager # Work Phone # (include ext.)

\_\_\_\_\_  
Address (if different from student's) Email Address

Custody of Child:  Yes  No Child lives with this contact:  Yes  No

Is this parent/guardian a member of the Armed Services, National Guard or Reserves?  Yes  No

Military Status (check one):  Traditional Reservist / M-Day  Active Duty (Title 10)  Federal Technician (Title 32)

Deployed?  Yes  No

Branch of Service (check one):

<input type="checkbox"/> Army	<input type="checkbox"/> Marine	<input type="checkbox"/> Air National Guard	<input type="checkbox"/> Navy Reserves
<input type="checkbox"/> Air Force	<input type="checkbox"/> Coast Guard	<input type="checkbox"/> Army Reserves	<input type="checkbox"/> Marine Reserves
<input type="checkbox"/> Navy	<input type="checkbox"/> Army National Guard	<input type="checkbox"/> Air Force Reserves	<input type="checkbox"/> Coast Guard Reserves

**MISCELLANEOUS INFORMATION**

Does student's father, mother, or guardian work for the Federal Government or work on Federal Property?  Yes  No

**EMERGENCY CONTACT INFORMATION**

**F  
I  
R  
S  
T**

(Person To Notify In Case Of Emergency Other than First or Second Parent/Guardian Contact)

Check one:  Mr.  Mrs.  Ms.  Other (specify): \_\_\_\_\_ Relation: \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Employer's Name

\_\_\_\_\_  
Home Phone # Cellular Phone # Pager # Work Phone # (include ext.)

**S  
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(Person To Notify In Case Of Emergency Other than First or Second Parent/Guardian Contact)

Check one:  Mr.  Mrs.  Ms.  Other (specify): \_\_\_\_\_ Relation: \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Employer's Name

\_\_\_\_\_  
Home Phone # Cellular Phone # Pager # Work Phone # (include ext.)

\_\_\_\_\_  
Doctor's Name or Clinic Name Office Phone #

**SCHOOL SUPPLEMENTARY INFORMATION**

	Name	Age	Name	Age
Other Children In The Family:	1. _____	_____	4. _____	_____
	2. _____	_____	5. _____	_____
	3. _____	_____	6. _____	_____

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_