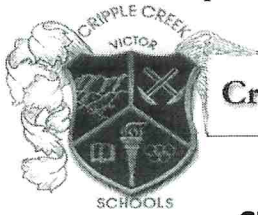


Prepared

Positive

Productive



Cripple Creek - Victor School District RE-1

STUDENT ENROLLMENT FORM

Section 1: Student Information			
Student Name (Last, First, Middle -- <u>all are required</u>)			Today's Date
Social Security Number	Sex Male Female	Grade	
Date of Birth (mm/dd/yyyy)	State of Birth		
Street Address		Home Phone ()	
City	State	ZIP Code	
Mailing Address (if different from above)		Neighborhood	
City	State	ZIP Code	
Section 2: Parent/Guardian Information			
Please circle one: Mother Father Grandmother Grandfather Guardian Other _____		Please circle one: Mother Father Grandmother Grandfather Guardian Other _____	
Parent/Guardian Name (Last, First)		Other Parent/Guardian Name (Last, First)	
Occupation & Name of Employer		Occupation & Name of Employer	
Work Phone		Work Phone	
Cell Phone		Cell Phone	
Email		Email	
Married	Single	Divorced*	*If Divorced, please provide court document as to whom is custodial parent.
If the student is not living with natural parents, does guardian have legal custody? (If YES, please provide documentation.)			YES NO
Will the student be a year-round resident of the legal guardian? If NO, please explain:			YES NO
Has the child been enrolled in the Cripple Creek-Victor School District previously?			YES NO
Section 3: Ethnic Origin			
Do you consider yourself to be of Hispanic/Latino ethnicity?			YES NO
Please circle the number of one or more of the groups below that best describe(s) your national origin or ancestry.			
1. American Indian/Alaska Native		4. White	
2. Asian		5. Native Hawaiian/Other Pacific Islander	
3. Black/African American			