

Student's Last Name	First Name	Date of Birth	Age	Gender	Grade in fall of 2016
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="text"/>

Home Address	Apt #	City	Zip	Where is your family currently residing?
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Single family home or Apt <input type="checkbox"/> With more than one family <input type="checkbox"/> Temporary housing

Mother/Parent 1 Last Name	First Name	Home Phone (landline only)	Cell Phone	Work Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father/Parent 2 Last Name	First Name	Home Phone (landline only)	Cell Phone	Work Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Language your child first learned when they began to speak: _____
 Language your child speaks most frequently at home: _____
 Language most frequently used when speaking to your child: _____
 Language most often spoken by adults in the home: _____
 Has your child been identified as an English learner? No Yes If yes, what grade: _____

Highest Parent Education Level
 Not a high school graduate Some college
 High school graduate College graduate
 Graduate school

Health Coverage
 Alliance Health Net Medi-Cal Blue Cross
 Kaiser Healthy Families Medi-Cal Alliance
 None Other: _____

Student's Birth City: _____ State: _____ Country: _____
 When did your child first enroll in a CA school? Date: _____ Grade: _____
 When did your child first enroll in a USA school? Date: _____ Grade: _____
 Is your child Hispanic or Latino? No Yes
 Student's Race (See codes on reverse): 1) _____ 2) _____ 3) _____

Preschool Experience
 BUSD Day Care
 City Rec Head Start
 Private None

Does your child have a current IEP or 504 through Special Education? No Yes
 If yes, which? 504 IEP Date of most current IEP: _____

If you are a BUSD employee, please provide the following:
 Site: _____ Union: _____

Current or previous school's name: _____
 City/State/Country: _____
Has your child been registered or attended a Berkeley public school?
 No Yes, School's name: _____ Grade attended: _____
Does your child have a sibling currently attending a Berkeley public school?
 Sibling's name: _____ Grade: _____ School: _____

Dual Immersion (For students currently attending a Dual Immersion Program)
 ___ Longfellow Dual Immersion (6th graders only)
 You must also list preferences from the regular program below

Magnet Middle School District-wide magnet school (please note this lottery is run first)
 ___ Longfellow
 You must also list preferences from the regular program below

Regular Program
 King zone students may apply to Willard and will be considered only after Willard zone students have been assigned.
 Willard zone students may apply to King and will be considered only after King zone students have been assigned.
 ___King ___Willard

Has your child been suspended/expelled or recommended for expulsion?
 Suspension No Yes, Start date: _____ End date: _____
 Expulsion No Yes, Start date: _____ End date: _____

I verify that the information on this form is complete and true
 Parent/Guardian Signature: _____ Date: _____

Office Use Only: Processed: Entered: Sib# SA CA NU INC MV

Student Race Code

If more than one race, indicate as many codes as needed.

100 Native American. A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

400 Filipino. A person having origins in any of the original peoples of the Philippine Islands.

500 Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central America.

600 Black or African-American. A person having origins in any of the black racial groups of Africa.

700 White. A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Asian.

A person having origins in any of the original peoples of East Asia, Southeast Asia, or the Indian subcontinent

201 Chinese 202 Japanese 203 Korean 204 Vietnamese 205 Indian

206 Laotian 207 Cambodian 208 Hmong 299 Other Asian

Native Hawaiian or Other Pacific Islander.

A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

301 Hawaiian 302 Guamanian 303 Samoan 304 Tahitian 399 Other Pacific Islander

Assignment of Students

Students will be admitted to schools in accordance with six established priority categories. A computer assignment system will assign students on a random basis within a priority for each grade level within each school. Priority requirements are as follows:

1st priority: BUSD students currently attending the school (with the exception of transitional kinder) and living within attendance zone

2nd priority: BUSD students currently attending the school (with the exception of transitional kinder) and living outside the attendance zone

3rd priority: Berkeley residents who are siblings of any student currently attending the school on the basis of the first or second priority and who will continue in attendance for the 2016/17 school year

4th priority: Berkeley residents not currently attending the school and living within the attendance zone

5th priority: Berkeley residents not currently attending the school and living outside the attendance zone

6th priority: All non-Berkeley resident students requesting inter-district transfers

Enrollment Checklist

Read the following carefully:

Incomplete forms are not accepted. Please make sure ALL items are checked off of your list.

Must be submitted in person. We will not accept forms via mail, fax or email

___ **Parent Preference Form** (obtained from our office or printed on legal size paper)

___ **Student's original birth certificate**

___ **Student's recent original report card or transcript**

___ **Parent original, valid governmental picture identification card** (i.e. CA ID, or CA DL)

___ **Declaration of residency** (BUSD form)

___ **Proofs of Berkeley residency** (must submit one from each of the three groups listed below)

All Proofs must be current originals (issued within the last 2 months) imprinted with the name and current Berkeley residential address of the parent/legal guardian. A student can have only one residency for purposes of establishing residency.

Only personal accounts will be accepted (No care of, DBA or Business accounts).

Group A: Utility bill: (Must provide entire bill)

- ___ PG&E
- ___ Landline phone (non-cellular)
- ___ EBMUD
- ___ Internet
- ___ Cable

Group B:

- ___ Current bank statement (checking or savings only)
- ___ Action letter from Social Services or government agency (cannot be property or business)
- ___ Recent paycheck stub or letter from employer on **official** company letterhead Confirming residency address
- ___ Valid automobile registration in combination with valid automobile insurance
- ___ Voter registration for the most recent past election or the most recent upcoming election

Group C:

- ___ Rental property contract or lease, with payment receipt (dated within 45 days)
- ___ Renter's insurance or homeowner's insurance policy for the current year
- ___ Current property tax statement or property deed