

Physician _____ Phone number _____ Dentist _____ Phone number _____

If school personnel are unable to reach you in the event of a serious accident or illness, do you consent to the school calling an emergency medical service? Yes No **If NO, list alternatives here.**

Please describe any special **medical/physical conditions** of which the school staff should be aware.

(Please contact the school nurse if there is a serious/sensitive health issue.)

List **medications** taken regularly. _____

(Use form CUSD #304 for medications given at school.) Please notify the school office of medication changes.

Last school attended _____

For students new to this school: Was your child involved in any special programs in previous schools?
 Special Education Gifted and Talented English as a Second Language Other (specify) _____

Other school-age children in the home	School	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____

Optional (helpful to school for State and Federal reports)

Ethnic Information: White, not Hispanic origin Black, not Hispanic origin Hispanic
 Asian or Pacific Islander American Indian or Alaskan Native Other

If Asian or Pacific Islander, please list nationality _____

Parent education level (check response that describes the level of the most educated parent).

Not a high school graduate High school graduate Some college (includes AA degree)
 College graduate Graduate school/post graduate training Declines to state

Library

I give permission for my child to borrow books and materials from the school library, and I agree to pay for any damage or loss. Yes No

Residency Requirements

Children attending public school are required to attend school in their district of residency. Enrollment of students who do not reside in the school district reduces educational resources available for resident students and increases class size.

It is therefore the district's policy to require valid proof of residency for all students and to be vigilant in discovering and terminating unauthorized enrollment. Home visitation and/or residence verification is part of the process when the district has reason to believe false information has been provided. Investigations that reveal that students have been enrolled on the basis of providing false information will lead to immediate withdrawal from the district.

ZERO TOLERANCE

There are four behaviors for which the Principal of the school must recommend expulsion even though the behavior may be the first incident. (Expulsion means: complete exclusion from all schools within the Carmel Unified School District for a maximum of two semesters.)

- A. Causing serious bodily injury to another person.
- B. Possession of a dangerous object including, but not limited to, knives (pocket knives are included no matter what size), firearms, brass knuckles, fighting sticks, etc.
- C. Furnishing and/or sale to another student, any controlled substance as listed in Section 11053 of the California Health and Safety Code. This includes marijuana and LSD, among others.
- D. Robbery and/or extortion.

Parent/Guardian signatures required:

We have read and discussed the Code of Conduct, Attendance Policy, Residency Requirements, Student Use of Technology Regulation, and the Zero Tolerance Policy. Our signatures below affirm our understanding of these policies and confirm the accuracy of all information submitted hereby.

Mother (Guardian) _____ Father (Guardian) _____
Date _____

Directory information including student name, parent names, phone numbers and addresses will be made available to parent club organizations.

If you do not wish this information released, please initial here _____