

Student Admission Interest Form 2016-17

Admission to the school shall be open to any resident of California, regardless of ethnicity, national origin, gender, or disability. [Ref. California Education Code 47605(b) (5) (G)]

Expected Grade		Desired Date of Entrance				
Student's Name:					Gender:	
	Last	First		Middle		
Address:			City:		Zip:	
Primary Telephone: ()						
Birth Date://	Birthplace:			Ethnicity:		
Mother/Guardian:			Father/C	Guardian:		
Phone: ()			Phone: ()		
Email:			Email:			
Education Level of Parents (circle highest level comple	eted):				
Not a High School Graduate	High School Graduate	e A.A.	Degree	4 year Degree	Graduate School Graduate	
School District in which you	reside:					
Current/last school attended:			Dates attended:			
SPECIAL EDUCATION What current special services ☐ IEP ☐ 504 Accommodation	☐ Resource (RSP)		ecial Day C	es that apply) llass (SDC)	☐ Speech/Language	
Has your child been suspende Yes $\ \square$ No $\ \square$	ed, expelled or is the stude	ent in the p	rocess of b	eing suspended or	expelled from any school?	
Primary Language: ☐ English	n □ other language:					
Check all that apply:						
	a Blue Oak School Charte nus Elementary attendand Unified School District		1ember			
I CERTIFY THAT I AM THE PAI SUPPLIED ON THIS FORM IS C				ED ABOVE AND THA	AT ALL INFORMATION	
Parent/Guardian Signature			Date			