



## **Thank you for your interest in Antelope View Charter School!**

This student enrollment form will help get the registration process underway. Please print it out, fill in all applicable information, and submit it in person at our office.

In addition to the attached form, we'll need:

### **Middle School Students:**

- Report cards (current term & previous year)
- STAR test results

### **High School Students:**

- Unofficial transcript (including work-in-progress)
- STAR test results (grades 9-10)
- CAHSEE test results (grades 11-12 – may appear on transcript)

### **ALL Students:**

- Shot records
- Attendance records
- Discipline records
- Special education (IEP) or 504 information – even if no longer active
- Various additional forms, provided in our office.

Remember that admission to Antelope View is not guaranteed. Please read the enrollment page on our website for complete details!

**All students (except those who have passed both CAHSEE tests) must take a pre-enrollment assessment.**

If you have any questions, please call our office at **339-4690**.

Center Joint Unified School District  
**Antelope View Charter School**  
3243 Center Court Lane, Antelope, CA 95843  
(916) 339-4690

**STUDENT ENROLLMENT FORM**

**Student Legal Name:** \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Other Name: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Birthdate** \_\_\_\_\_ **Birth City/State:** \_\_\_\_\_ **Residence Home Phone ( )** \_\_\_\_\_ - \_\_\_\_\_

**Student Residence Address:** \_\_\_\_\_ Street Apt. City State Zip Code

Gender: **Male** or **Female** **Registering Current Grade Level:** \_\_\_\_\_

**Previous School Information:** \_\_\_\_\_  
Name Address City State Zip Code Phone #

Legal Parents/Guardian Information					Student Lives With				
Father/Step-Father/Grandfather/Guardian/Foster (circle one);					Mother/Step-Mother/Grandmother/Guardian/Foster ( circle one):				
Relationship to Child _____					Relationship to Child _____				
Last Name			First Middle		Last Name			First Middle	
Address: Street City State Zip					Address: Street City State Zip				
Phone (H) ( ) _____					Phone (H) ( ) _____				
Employer _____					Employer _____				
Phone (W) ( ) _____					Phone (W) ( ) _____				
Phone ( C ) ( ) _____					Phone ( C ) ( ) _____				
Email Address _____					Email Address _____				
Driver Lic.# _____					Driver Lic.# _____				
<b>Additional Parent/Guardian to Receive School Mail:</b>									
Name _____					Relationship to Student _____				
Address: _____ Street City State Zip Code									

\*\*\* If foster parent, must list Agency and social worker/foster family worker as an emergency contact on next page \*\*\*

**Emergency Contacts** (other than those above):

<b>Contact 1:</b> Name _____	Relationship _____
Address _____	Home Phone _____
Employer _____	Work Ph# _____ Cell # _____
<b>Contact 2:</b> Name _____	Relationship _____
Address _____	Home Phone _____
Employer _____	Work Ph# _____ Cell # _____

**Home Language Survey:**

***Schools are required by law to determine the languages spoken at home by each student. This is important in order to provide meaningful instruction for all students.***

When your son/daughter first began to speak, did he speak a language other than English? **Yes** **No**

**If “yes”, please answer 1-6:**

- Which language did your son/daughter learn when he/she first began to talk? \_\_\_\_\_
- Which language does your son/daughter most frequently use at home? \_\_\_\_\_
- What language do you most frequently use to speak to your son/daughter? \_\_\_\_\_
- Name the language most often spoken by the adults at home. \_\_\_\_\_
- When did he/she first begin school in the U.S.? **(M/D/Y)** \_\_\_\_\_
- Is your son/daughter a refugee or immigrant to the United States? **Yes** **No**

If “yes”, when did he/she come to the U.S.? **(M/D/Y)** \_\_\_\_\_

**Ethnicity** (for survey purposes only):

**Is this student Hispanic or Latino?** (*Select only one*)

\_\_\_\_ No, not Hispanic or Latino. (*In the list below, write #1 for primary ethnicity and #2 for secondary ethnicity*)

\_\_\_\_ Yes, Hispanic or Latino. (*If there is a secondary ethnicity, please mark it as #2 below*)

____ (100) American Indian or Alaskan	____ (201) Chinese	____ (202) Japanese
____ (203) Korean	____ (204) Vietnamese	____ (205) Asian Indian
____ (206) Laotian	____ (207) Cambodian	____ (299) Other Asian
____ (301) Hawaiian	____ (302) Guamanian	____ (303) Samoan
____ (304) Tahitian	____ (399) Other Pacific Islander	____ (400) Filipino
____ (600) Black or African American	____ (700) White (Not Hispanic)	____ (999) Other or Not Specified

**Special Programs:**

- |  |            |           |
|--|------------|-----------|
| 1. Was your son/daughter a participant in the GATE (Gifted and Talented) Program in a former school? | <b>Yes</b> | <b>No</b> |
| 2. Was your son/daughter retained in a former school?  | <b>Yes</b> | <b>No</b> |
| 3. Did your son/daughter have a 504 plan in a former school?   | <b>Yes</b> | <b>No</b> |
| 4. Did your son/daughter have an IEP and receive Special Education services in a former school?      | <b>Yes</b> | <b>No</b> |
| 5. Has your son/daughter been expelled or does he/she have a pending expulsion in a former school?   | <b>Yes</b> | <b>No</b> |
| 6. Does your child have a Probation Officer?   | <b>Yes</b> | <b>No</b> |
| 7. If "yes" P.O. Name _____ Phone # _____  |            |           |

The Standardized Testing and Reporting (STAR) Program requires all students in grades 2-11 to take a number of tests each year in reading, language, math, science, and history/social science. Student results on STAR are used to rank each public school on the California Academic Performance Index (API) scale. The API score for each school is ranked on a scale from 200 to 800. A score of 800 or higher is considered "exemplary".

Each school's API score is also compared to the API scores of other California Schools with similar demographic characteristics. These include: percentage of students in ethnic/racial groups, percentage of students who are non-English speakers, student mobility and attendance, percentage of students who participate in the free or reduced price meal program, teacher credentials, class size, and the average level of parent education.

Each public school is required to gather information on the highest level of education achieved by either of the parents or guardians of each student. This information is reported only in percentages; all individual data is kept confidential.

Please check the box that describes the highest level of education of either or both parents/guardians. Then sign and date this form. Thank you for your assistance with this state requirement.

**Parent Education Level****Mother/Guardian Education Level (check one):**

1. Not a High School Graduate  
 2. High School Graduate  
 3. Some College  
 4. College Graduate  
 5. Grad School/Post-Graduate Training  
 (Earned a Master's and/or Doctorate Degree)

\_\_\_\_\_  
 Printed name of Mother/Guardian

\_\_\_\_\_  
 Signature of Mother/Guardian

\_\_\_\_\_  
 Date

**Father/Guardian Education Level (check one):**

1. Not a High School Graduate  
 2. High School Graduate  
 3. Some College  
 4. College Graduate  
 5. Grad School/Post-Graduate Training  
 (Earned a Master's and/or Doctorate Degree)

\_\_\_\_\_  
 Printed name of Father/Guardian

\_\_\_\_\_  
 Signature of Father/Guardian

\_\_\_\_\_  
 Date