

8.3

CDS Enrollment Form

Student Name _____ DOB _____ Grade _____

Mother's Phone _____ Father's Phone _____



Student is allowed District transportation **YES** NO

CDS contract **YES** NO

Counseling through North Star **YES** NO



Does the student have an active IEP YES NO
If yes, Case Manager (name) _____



Full-time students in CDS do not attend extracurricular functions such as assemblies, field trips, dances, sporting events, etc. unless it is a function of the CDS class itself. The CDS classroom may be videotaped due to aberrant student behaviors.

An Individual Behavioral & Academic Plan will be developed by the teacher upon entry into CDS.

Parent Signature _____ Date _____

Administrator _____ Date _____

First date of enrollment in CDS _____