

Section 504

New Enrollment Form

When a student who is new or currently receiving a 504 Plan, please complete this form, scan and send to Wendy Andrews wandrews@cgresd.net.



Student's Last Name	Student's First Name	Middle Initial	Birthdate	Gender
Student's UIC	Student's Native Language	Student's Ethnic Group		Grade
Student's Home Address	City	Zip Code	Home Telephone ()	
Parent/Guardian Last Name	First Name	Native Language	Parent/Guardian Home Telephone (if different) ()	
Parent/Guardian Address (if different)	City	Zip Code	Parent/Guardian Work Telephone ()	
Resident District	Operating District	Attending District		

Resident District Administrator/Designee _____ Date: _____