

**Student Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Gender:** Male Female

Has your child ever attended school in another country other than the United States? Yes No

**Is students Ethic Background Hispanic/Latino? (Select One)** Yes No

**Race (Select one or more):** Caucasian/White Asian Pacific Island/Native Hawaiian  
Black/African American

**PRIMARY HOUSEHOLD:** (where student(s) resides majority of the time)

**Residence Address:** \_\_\_\_\_

**Mailing Address (if different from above):** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship to Student:** \_\_\_\_\_

**Cell Number:** \_\_\_\_\_ **Home Number:** \_\_\_\_\_ **Work Number:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship to Student:** \_\_\_\_\_

**Cell Number:** \_\_\_\_\_ **Home Number:** \_\_\_\_\_ **Work Number:** \_\_\_\_\_

**Primary Email:** (This will get weekly updates & other important information) \_\_\_\_\_

**Secondary Email:** \_\_\_\_\_

**Secondary Household:** (if none leave blank)

**Residence Address:** \_\_\_\_\_

**Mailing Address (if different from above):** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship to Student:** \_\_\_\_\_

**Cell Number:** \_\_\_\_\_ **Home Number:** \_\_\_\_\_ **Work Number:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship to Student:** \_\_\_\_\_

**Cell Number:** \_\_\_\_\_ **Home Number:** \_\_\_\_\_ **Work Number:** \_\_\_\_\_

**Primary Email:** (This will get weekly updates & other important information) \_\_\_\_\_

**Secondary Email:** \_\_\_\_\_

**Emergency Contacts:**

Name: \_\_\_\_\_ Relationship to student \_\_\_\_\_

Phone: \_\_\_\_\_ Is this person authorized to pick up child? Yes No

Name: \_\_\_\_\_ Relationship to student \_\_\_\_\_

Phone: \_\_\_\_\_ Is this person authorized to pick up child? Yes No

Name: \_\_\_\_\_ Relationship to student \_\_\_\_\_

Phone: \_\_\_\_\_ Is this person authorized to pick up child? Yes No

What is the student's primary language? English Spanish Other-

Will this student require (ELL) English as a Second Language Service? Yes No

Does your student have: \_\_\_ Section 504 Plan (ensures a qualified child with a disability has equal access to education)

\_\_\_ Active IEP (Individualized Education Plan)

Is there any serious medical conditions that Prairie School should be aware of? Yes No If yes please explain.

\_\_\_\_\_  
\_\_\_\_\_

**Authority to Deny Admission** Colorado law (C.R.S. 22-33-106.3) authorizes school districts to deny admission to students seeking enrollment under specific conditions.

**Information Release-** I give permission for \_\_\_\_\_ to have name, photo, and other information published to the media or Prairie School website.

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_