School Name: Complex Area:

STUDENT ENROLLMENT FORM SIS-10W *(Revised)*

Student ID No.	Entry Date	Entry Code	Room
	For school use only		

INSTRUCTIONS: PRINT YOUR ENTRIES LEGIBLY

Ethnicity/Race Observed: _____ Initial _____ Date

STUDENT PERSONAL DATA

Legal Last Name: _____ Gender: ☐ M ☐ F Grade Level: _____

Legal First Name: _____ Birth Date: _____

Middle Initial: _____ Suffix: (Jr, II, III, etc): _____ Verification of DOB: _____

☐ Not Homeless ☐ Homeless* ☐ Completed MVA Packet

_____ _____
DOE Representative Signature Parent/Legal Guardian Signature

*"Homeless" means individuals who lack a fixed, regular and adequate nighttime residence (within the meaning of section 42 USCS §11302(a)(1)) and includes:

(i) children and youth who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement.

(ii) children and youth who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of 42 USCS §11302(a)(2)(C));

(iii) children and youth who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations or similar settings; and

(iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle.

If you have any questions regarding the above, please call 1-866-927-7095

PRESCHOOL EXPERIENCE

Preschool Experience ☐ Yes ☐ No

If "Yes" – attended:
☐ less than 6 months
☐ between 6 and 12 months
☐ more than 1 year

Pre-School Program: (if applicable)
☐ EOEL
☐ KALO
☐ PDG

LAST HAWAII PUBLIC SCHOOL ATTENDED

Name: _____

Last Grade Attended: _____ Year: _____

PRIOR SCHOOL ATTENDED (If not Hawaii Public School)

Name: _____ U.S. Phone: _____

Address: _____ U.S. Fax: _____

CITIZENSHIP

Country of Birth: _____ If Country of Birth is other than US, give year of arrival: _____

US Citizen: ☐ Yes ☐ No If not US Citizen, indicate status: Refugee _____ Immigrant _____ Non-Immigrant _____

LANGUAGE INFORMATION

Language Codes: (Select a letter from the list and fill in the blanks below)

_____ Language (Spoken) at Home _____ First (Acquired) Language _____ Language Most Used

A – English	**F** – Cebuano/Visayan	**K** – Vietnamese	**Q** – Fijian	**V** – Pangasinan	**L** – Other (Specify):
B – Cantonese	**G** – Hawaiian	**M** – Chuukese	**R** – Hmong	**W** – Portuguese	_____
C – Mandarin	**H** – Japanese	**N** – Pohnpeian	**S** – Lao	**X** – Spanish	
D – Ilocano	**I** – Korean	**O** – Cambodian	**T** – Marshallese	**Y** – Thai	
E – Tagalog	**J** – Samoan	**P** – Chamorro	**U** – Pampango	**Z** - Tongan	

Received Paperwork: **Health:** [TB__ & Immun__ & Phy Appt__], **Custody Docs:** [BC__ OR Passport__] Legals__ PoA__,
Prev School Docs: W/D Pckt__, **Ilima Docs:** [MV1__ & TRUF__ & PAV__ & Emerg Cd__ & Reg Cd__,]
Proof of res: [Mortgage__ OR Prop Tax__ OR Rental/Lease__] & [Utility__] Notarized letter__

Continue on next page

Please complete ETHNICITY INFORMATION, RACE INFORMATION, and PRIMARY ETHNICITY/RACE INFORMATION

ETHNICITY INFORMATION

Are you **(J)** Hispanic (Ex. Cuban, Mexican, Puerto Rican, Spanish, Other Hispanic)? ☐ Yes ☐ No

RACE INFORMATION

Check all that apply:

- ☐ **A** – American Indian or Alaska Native
- ☐ **B** – Black
- ☐ **C** – Chinese
- ☐ **D** – Filipino
- ☐ **E** – Native Hawaiian
- ☐ **G** – Japanese
- ☐ **H** – Korean
- ☐ **I** – Portuguese
- ☐ **K** – Samoan
- ☐ **L** – White
- ☐ **N** – Indo-Chinese (Ex. Cambodian, Laotian, Vietnamese)
- ☐ **O** – Micronesian (Ex. Chuukese, Marshallese Pohnpeian,)
- ☐ **P** – Tongan
- ☐ **Q** – Guamanian/Chamorro
- ☐ **R** – Other Asian
- ☐ **S** – Other Pacific Islander

PRIMARY ETHNICITY/RACE INFORMATION

What is the student's primary race? (Select only ONE letter from either the ethnicity or race list and fill in the blank) _____

☐ I decline to provide ethnicity and race information. I understand that if I do not provide this information, a school representative will designate the ethnicity and race categories for my child.

LEGAL PARENT/GUARDIAN LIVING IN THE HOUSEHOLD WITH STUDENT

FIRST PARENT/GUARDIAN

Check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other (specify): _____ Relation: _____

Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Single Custody of Child: ☐ Yes ☐ No

Custody Documentation Submitted: ☐ Yes ☐ No Custody Type: ☐ Sole Custody ☐ Physical Custody ☐ Joint Legal

_____ _____
Legal Last Name Legal First Name

Home Address: _____ APT# _____ City _____ Zip _____

Mailing Address (if different from Home Address): _____

_____ _____ _____ _____
Home Phone # Cellular Phone # Pager # Work Phone # (include ext.)

Email Address: _____

Allow this person access to: *(circle all that apply)* mailing / portal (if applicable) / messenger

EMERGENCY CONTACT: *(circle one)* Call Sequence 1 2

Is this parent/guardian a member of the Armed Services, National Guard or Reserves? ☐ Yes ☐ No

Military Status (check one): ☐ Traditional Reservist / M-Day ☐ Active Duty (Title 10) ☐ Federal Technician (Title 32)

Deployed? ☐ Yes ☐ No

Branch of Service (check one):

- ☐ Army
- ☐ Air Force
- ☐ Navy
- ☐ Marine
- ☐ Coast Guard
- ☐ Army National Guard
- ☐ Air National Guard
- ☐ Army Reserves
- ☐ Air Force Reserves
- ☐ Navy Reserves
- ☐ Marine Reserves
- ☐ Coast Guard Reserves

Does this person work for the Federal Government or work on Federal Property? ☐ Yes ☐ No

Continue on next page

LEGAL PARENT/GUARDIAN LIVING IN THE HOUSEHOLD WITH STUDENT

SECOND PARENT/GUARDIAN

Check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other (specify): _____ Relation: _____

Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Single Custody of Child: ☐ Yes ☐ No

Custody Documentation Submitted: ☐ Yes ☐ No Custody Type: ☐ Sole Custody ☐ Physical Custody ☐ Joint Legal

_____ _____
Legal Last Name Legal First Name

Home Address: _____ APT# _____ City _____ Zip _____

Mailing Address (if different from Home Address): _____

_____ _____ _____ _____
Home Phone # Cellular Phone # Pager # Work Phone # (include ext.)

Email Address: _____

Allow this person access to: *(circle all that apply)* mailing / portal (if applicable) / messenger

EMERGENCY CONTACT: *(circle one)* Call Sequence 1 2

Is this parent/guardian a member of the Armed Services, National Guard or Reserves? ☐ Yes ☐ No

Military Status (check one): ☐ Traditional Reservist / M-Day ☐ Active Duty (Title 10) ☐ Federal Technician (Title 32)

Deployed? ☐ Yes ☐ No

Branch of Service (check one):

☐ Army	☐ Marine	☐ Air National Guard	☐ Navy Reserves
☐ Air Force	☐ Coast Guard	☐ Army Reserves	☐ Marine Reserves
☐ Navy	☐ Army National Guard	☐ Air Force Reserves	☐ Coast Guard Reserves

Does this person work for the Federal Government or work on Federal Property? ☐ Yes ☐ No

PARENT/GUARDIAN NOT LIVING WITH STUDENT

PARENT/GUARDIAN

Check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other (specify): _____ Relation: _____

Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Single Custody of Child: ☐ Yes ☐ No

_____ _____
Legal Last Name Legal First Name

Home Address: _____ APT# _____ City _____ Zip _____

Mailing Address (if different from Home Address): _____

_____ _____ _____ _____
Home Phone # Cellular Phone # Pager # Work Phone # (include ext.)

Email Address: _____

Allow this person access to: *(circle all that apply)* mailing / portal (if applicable) / messenger

EMERGENCY CONTACT: *(circle one)* Sequence 1 2 3

Continue on next page

LEGAL PARENT/GUARDIAN NOT LIVING WITH STUDENT (cont.)

GUARDIAN

Is this parent/guardian a member of the Armed Services, National Guard or Reserves? ☐ Yes ☐ No

Military Status (check one): ☐ Traditional Reservist / M-Day ☐ Active Duty (Title 10) ☐ Federal Technician (Title 32)

Deployed? ☐ Yes ☐ No

Branch of Service (check one):

☐ Army	☐ Marine	☐ Air National Guard	☐ Navy Reserves
☐ Air Force	☐ Coast Guard	☐ Army Reserves	☐ Marine Reserves
☐ Navy	☐ Army National Guard	☐ Air Force Reserves	☐ Coast Guard Reserves

Does this person work for the Federal Government or work on Federal Property? ☐ Yes ☐ No

EMERGENCY CONTACT INFORMATION

FIRST

(Person To Notify In Case Of Emergency Other than First or Second Parent/Guardian Contact)

Check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other (specify): _____ Relation: _____

Last Name _____ First Name _____ Email Address _____

Home Phone # _____ Cellular Phone # _____ Pager # _____ Work Phone # (include ext.) _____

EMERGENCY CONTACT: *(circle one)* Call Sequence 1 2 3 4 5

SECOND

(Person To Notify In Case Of Emergency Other than First or Second Parent/Guardian Contact)

Check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other (specify): _____ Relation: _____

Last Name _____ First Name _____ Email Address _____

Home Phone # _____ Cellular Phone # _____ Pager # _____ Work Phone # (include ext.) _____

EMERGENCY CONTACT: *(circle one)* Call Sequence 1 2 3 4 5

SCHOOL SUPPLEMENTARY INFORMATION

Other Children In HIDOE Schools:

	Legal First, Middle Initial & Last Name	HIDOE School Attending	DOB	Grade	Relationship
1.					
2.					
3.					
4.					

Parent/Legal Guardian Signature: _____ **Date:** _____

FOR SCHOOL USE: