

CHERAW SCHOOL DISTRICT - #31

P.O. Box 160
Cheraw, CO 81030-0160

(719) 853-6655

FAX / (719) 853-6322

Enrollment Checklist

School Year: _____

Students Name: _____

Grade: _____

Date Received	Form	Routing
	Birth Certificate (Copy)	School Secretary
	Social Security Card (Copy)	School Secretary
	Enrollment Form*	School Secretary
	Emergency Medical Consent*	School Secretary
	Student Release Form*	School Secretary
	Use of Internet Agreement*	School Secretary
	Bus Conduct Agreement*	School Secretary
	Language Questionnaire*	School Secretary
	Permission to Leave at Lunch (Jr/Sr High Only)*	School Secretary

(*These forms will be given to you in your enrollment packet)

Last School Attended:

Name of School: _____

Address: _____

Phone Number: _____

Date Last Attended: _____

Have you been continuously living in the United States for 3 years?

Have you been continuously living in Colorado for 3 years?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Most Recent Date into the United States: _____

Most Recent Date Into the State of Colorado: _____

The above listed information must be completed before a student will be allowed to enroll in classes.

Student Signature

Date

Parent Signature

Date

School Official

Date

