

**EL DORADO UNION HIGH SCHOOL DISTRICT  
OAK RIDGE HIGH SCHOOL  
REGISTRATION FORM**

<b>FOR OFFICE USE ONLY</b>	
Student Number	_____
Enrollment forms complete	_____
SDT complete	_____

STATE LAW REQUIRES PROOF OF IMMUNIZATION

LAST NAME		FIRST NAME		MIDDLE NAME		GENDER <input type="checkbox"/> M <input type="checkbox"/> F		GRADE	TODAY'S DATE
DOES THE STUDENT USE ANY NAME OTHER THAN LEGAL NAME? IF SO, INDICATE HERE:						BIRTH (MO – DAY – YR)			
RESIDENCE ADDRESS			STREET			CITY		STATE	ZIP CODE
MAILING ADDRESS, IF DIFFERENT FROM RESIDENCE ABOVE			STREET / P.O. BOX			CITY		STATE	ZIP CODE
HOME PHONE		EMERGENCY CONTACTS (OTHER THAN PARENTS, INDICATE RELATIONSHIP)		CONTACT #1		PHONE CONTACT #1			
PARENT'S CELL PHONE				CONTACT #2		PHONE CONTACT #2			
PARENT'S EMAIL ADDRESS				STUDENT'S CELL PHONE		STUDENT'S EMAIL ADDRESS			
LIVING WITH (LIST ALL ADULTS AND SIBLINGS)		RELATIONSHIP TO STUDENT	OCCUPATION/ SCHOOL (IF STUDENT)	PLACE OF EMPLOYMENT	PARENTS' E-MAIL ADDRESS		AREA CODE / WORK PHONE	LEVEL OF MOST EDUCATED PARENT	
								<input type="checkbox"/> Not a H.S. graduate <input type="checkbox"/> H.S. graduate <input type="checkbox"/> Some college (includes AA, AS) <input type="checkbox"/> College graduate <input type="checkbox"/> Grad school or post-grad	
OTHER PARENT NOT LIVING WITH STUDENT:									
SCHOOLS PREVIOUSLY ATTENDED (START WITH MOST RECENT)			ADDRESS			CITY / STATE		DATES ATTENDED	

**ETHNICITY:**

CHECK ONE ETHNICITY

- HISPANIC OR LATINO       NOT HISPANIC OR LATINO

**RACE:**

CHECK ONE OR MORE RACE TO INDICATE WHAT YOU CONSIDER YOURSELF TO BE.

- AMERICAN INDIAN OR ALASKAN NATIVE  
 ASIAN:     Asian Indian     Cambodian     Chinese     Filipino     Hmong  
                    Japanese     Korean     Laotian     Vietnamese     Other Asian (specify):

**NOTE**—SCHOOL PERSONNEL WILL BE REQUIRED TO SELECT ONE OF THESE CATEGORIES FOR A STUDENT WHO DOES NOT IDENTIFY ONE OR MORE CATEGORIES FOR THEMSELVES.

- BLACK OR AFRICAN AMERICAN  
 NATIVE HAWAIIAN OR PACIFIC ISLANDER:     Guamanian     Hawaiian     Samoan     Tahitian     Other Pacific Islander (specify):  
 WHITE

Has the student been enrolled in Special Programs?     No     Yes    If so, which programs?     English Learner     504  
 Does the student have a current Special Ed IEP?     No     Yes  
 Does the student have any Health Concerns?     No     Yes    If yes, please provide details  
 Immunization / Shot records provided?     No     Yes

HOME CONTACT LANGUAGE: \_\_\_\_\_

PARENT / GUARDIAN SIGNATURE:   X  \_\_\_\_\_