

THE SCHOOL DISTRICT OF ESCAMBIA COUNTY

ENROLLMENT CHECKLIST

Stu	udent Name:		
Incoming Grade:		Date of Birth: Today's Date:	
Enrollment Start Date:			
REQUIRE	D FOR ALL <u>INCOMING</u> NEW S	TUDENTS_	
	F OF RESIDENCE		
		our name. For a list of other acceptable forms of proof of residence, see <u>student transfers</u> of e attempting to enroll is NOT your residentially zoned school, you must also have School	
	oproval prior to enrolling at the school. Foster	Care and Homeless Students have additional rights; for more information call Title I at (850	
☐ PHYSIC	CAL		
requirem		fessionals outside of Florida are acceptable as long as the documented exam meets minimur First day the student will attend school. The school nurse will review all out of state physicals	
	NIZATION RECORDS		
☐ VERIFIC	□ VERIFICATION OF AGE		
a duly aa duly aswornan insu	attested transcript of the child's birth record for attested transcript of a certificate of baptism so to by the parent(s); or urance policy on the child's life which has been		
a passpa transan afficephysiciin the aChildre	port, a certificate of arrival in the United States script record of age shown in the child's school davit of age sworn to by the parent and accom ian designated by the School Board, stating tha affidavit is substantially correct (only if other e en who are experiencing homelessness as defin	birth accompanied by an affidavit sworn to by the parent(s); or s, or a naturalization certificate showing the age of the child; or record of at least four (4) years prior to application, stating date of birth; or apanied by a certificate of age, signed by a public health officer or by a licensed practicing at the health officer or physician has examined the child and believes that the age as stated evidence cannot be produced). Indeed in 39.0016, F.S., shall be given temporary exemption from this section for thirty (30)	
school SOCIAL	L SECURITY NUMBER (optional)		
The Socia to provid	The Social Security Number is NOT required to register a student. You are only required to ask if they have one. The person enrolling does not have to provide it. If it is provided, do NOT make a copy of it, you are only verifying the number.		
	COMPLETED ONLINE ENROLLMENT FORM Ensure you have a signed DATA VERIFICATION FORM and STUDENT HEALTH VERIFICATION FORM during registration.		
	NAL FORM FOR VPK STUDEN		
	from the Title I Office is Required. Visit Title I		
REQUIRE	D FOR ALL TRANSFERS WITH	N DISTRICT OR STUDENTS RETURNING TO DISTRICT	
□ PROOF	OF RESIDENCE		
		hts; for more information call Title I at (850) 595-6915.	
□ WITHDRAWAL FORM FROM PRIOR SCHOOL (High School Only)			
	LETED DATA VERIFICATION FORM A NT PHOTO (Taken at the school during to	AND STUDENT HEALTH VERIFICATION FORM (Completed at the school.) registration; Photo Guidelines)	

Escambia County Public Schools has the right to verify any information provided by the student and/or parent(s). Whoever knowingly makes a false statement in writing with intent to mislead a public servant in the performance of his or her official duty, shall be guilty of a misdemeanor of the second

degree, punishable by law (F.S. 837.06) or guilty of perjury by false written declaration, a felony of the third degree (F.S. 92.525).