

Comal Independent School District
SMITHSON VALLEY MIDDLE SCHOOL
Certificate to Establish Age, Grade, and Residency
2008 - 2009

Student's Legal Name: Last First Middle

Grade: Hmrm/Cnslr:

Social Security Number: PEIMS State ID.:

School Assigned ID:

Locker #: Sex: Ethnicity:

911 Address: Street

Bus A.M. #: Bus P.M. #:

City State Zip

School Last Attended:

How Long did you stay?:

Mailing Address: (If different than above address) Street

Address of Above School:

School District of Above School:

City State Zip

County of last school attended:

Subdivision Name or Road Name/No. :

The following individuals are authorized to pick up this student from school:

Home Phone: Age as of Sept. 1, 2008: Years

Date of Birth: Place of Birth: Month/Day/Year City/State

Family Information:

Guardian 1's Name: Relationship: Single Married Re-Married Divorced Separated Widow (Circle which applies)

Employer: Work Phone:

Beeper # / Mobile #: Fax# / E-Mail:

Guardian 2's Name: Relationship: Single Married Re-Married Divorced Separated Widow (Circle which applies)

Employer: Work Phone:

Beeper # / Mobile #: Fax# / E-Mail:

STUDENT RESIDES WITH: (Circle All that apply)

Mother Father Step-Mother Step-Father Grandparents Guardian Currently on file as:

PERSON TO CONTACT IN AN EMERGENCY (Other than Parent):

NAME Day Time Phone #: NAME Day Time Phone #:

Student program and school history:

Has your child ever been retained? No Yes If yes, which grade(s) Has your child ever been enrolled in Special Education? (Check only one) Currently Previously Never

Special Program Information: Please circle the one(s) that apply to your child. Has your child ever been in one of these programs? (Gifted/Talented Education, English as a Second Language, At Risk, Bilingual Education, Chapter Program, Limited English Proficiency, Pregnancy Related Services, Pregnancy Education Parenting, Migrant Program, 504 Program)

Has your child ever been enrolled in C.I.S.D.? If yes, when? Where?

Other siblings attending CISD campuses: name/school

Do not fill in, office use only: (Eligibility Code AGR Transfer Ineligible) Enter code O, R, C

Enrolled Withdrawn DATE DATE