

SOUTH CENTRAL MICHIGAN VIRTUAL ENROLLMENT



UIC# _____ Student # _____ (Office Use Only)

STUDENT INFORMATION	
Student Name: (As it appears on the birth certificate- first name, middle name, last name)	
Gender: Male Female	Date of Birth: (mm/dd/yr)
Grade:	
Ethnicity: (If more than one, circle all that apply) Hispanic/Latino American Indian/Alaskan Native Native Hawaiian/Pacific Islander Asian White Black or African American	
Student Home Phone:	Student Cell Phone:
Name of Parent or Guardian Student Lives With: (Name and relationship)	
Student E-Mail Address:	
Name and Address of Last School Attended:	
Special Education Information: Does your child currently receive special education services? Yes/No If yes, does your child have an active IEP? Yes/No If yes, what is your child's certification?	
Student Address Information: Home Street Address: _____ Apt. No. _____ City: _____ State: _____ Zip: _____	
Residency Information: Resident of JPS District _____ Non-resident _____ District of Residency _____ County of Residency _____ School of Choice Yes/No Has student attended JPS in the past? Yes/No If yes, when _____	

Contact Info	Female Head of Household	Male Head of Household
Name/Relationship		
Home Phone		
Cell Phone		
E-Mail		
Mailing Address		
Mailing City, State, Zip		

Certification of Truthfulness- I certify that all statements on this student registration form are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false, will be sufficient reason for possible removal of this student from enrollment in the Jackson Public School District and may result in legal action.

Parent/Legal Guardian Signature

Date

It is the policy of the Jackson Public School District that no discriminatory practices based on sex, race, color, national origin, religion, height, weight, marital status, handicap, age, political affiliation, sexual orientation or disability or any other status covered by federal, state or local law be allowed in providing instructional opportunities, programs, services, job placement assistance, employment or in policies governing student conduct and attendance. Any person suspecting a discriminatory practice should contact the Human Resource Office at Jackson Public Schools, 522 Wildwood Avenue, Jackson, Michigan 49201 or call (517) 841-2155 or (517) 841-2153