Gateway Community Charters Enrollment Form 202 - 202 School Year

CCCS COA Elem COA Middle EPIC FUTURES GIS HLA SAVA: EGUSD SAVA: SCUSD SAVA: TRUSD GCC VA Please check one

| Birth Date:       / / Birth Place:         Verified       Method of Verification :         Residence Address: Street       City       County       Zip         Mailing Address:       City       County       Zip         Mailing Address:       City       County       Zip         Primary phone number including area code:       Primary phone number including area code:       City       County       Zip  |   |  |  |  |                                     |                                 |  |
|---|---|--|--|--|-------------------------------------|---------------------------------|--|
| Reidence Address: Street       City       County       Zip         Mailing Address:       City       County       Zip         Mailing Address:       City       County       Zip         Prinacy phone number including area code:       Statemento       other:       Zip         Age:       Gender:       M       Non-binary       Student's cell phone number including area code:   | Student Legal Name: Last                                | First                                    | Middle   | Birth Date:  | / / Birt                            | h Place:                        |  |
| Residence Address: Street       City       County       Zip         Mailing Address:       City       County       Zip         Mailing Address:       Staramento □ other:       County       Zip         Primary phone number including area code:       Staramento □ other:       County       Zip         Age:       Gender:       M       F       Non-binary       Student's cell phone number including area code:  |   |  |  |  |                                     |                                 |  |
| If different from mailing address)  | Residence Address: Street                               |  |  |  | County                              | Zip                             |  |
| App:       Gender:       M       F       Non-binary         Student's preferred name (fd (ifferent):       Student's cell phone number including area code:   | Mailing Address:<br>(If different from mailing address) |  |  | acramento 🗆 other:   | County                              | Zip                             |  |
| Student's cell phone number including area code:  | Primary phone number including are                      | a code:                                  |  |  |                                     |                                 |  |
| Student's email address:         District of Residence: Please provide the name of the District and School of Residence that reflects the student's current home address. This may be different than the school your child attended.         DISTRICT:  | Age:  |  | Non-binary   | Student's cell phone   | number including area code:         |                                 |  |
| DISTRICT:       SCHOOL:         RACE/ETHNICITY       Parent/Guardian Name:       Home Phone:         (California Government Code Section 8310.5 requires that we collect this data.)       Parent/Guardian Name:       Home Phone:         Part A. What is this student's Ethnicity?       Batterian of the spanish culture or origin, regardless of race)       OK to send text msg /Work Phone:       Work phone Emerg. only         Part A. What is this student's race? (Select one or more)       Finall:       City       State       Zip         Parent/Guardian Name:       Home Phone:       City       State       Zip         Parent/Guardian Name:       City       State       Zip         Parent/Guardian Name:       Home Phone:       City       More phone Emerg. only         If address/more/home phone is the same as the student (above) then check here and do not enter)       Address       City       State       Zip         Parent/Guardian Highest Education Level:       DNot a High School Graduate       Some College Degree Degree Degree       Graduate Degree         Parent/Guardian Name:       Laotian       Cambodian       City       State       Zip         Guamanian       Other Asian       Home Phone:       City       State       Zip         Home Phone:       City       State       Zip       City <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td></t<> |   |  |  |  |                                     |                                 |  |
| DISTRICT:       SCHOOL:         RACE/ETHNICITY       Parent/Guardian Name:       Home Phone:         (California Government Code Section 8310.5 requires that we collect this data.)       Parent/Guardian Name:       Home Phone:         Part A. What is this student's Ethnicity?       Batterian of Code Section 8310.5 requires that we collect this data.)       Parent/Guardian Name:       Batterian Obstance         Part A. What is this student's Ethnicity?       Call Fone:       Obstance       Obstance       Obstance         Merican, or other Spanish culture or origin, regardless of race)       Modress       Obstance  |   |  |  |  |                                     |                                 |  |
| RACE/ETHNICITY         (California Government Code Section 8310.5 requires that we collect this data.)       Parent/Guardian Name:Home Phone:   | <b>District of Residence:</b> Please provide            | the name of the District and School of F | Residence that reflects the st   | tudent's current home ad-  | dress. This may be different than   | the school your child attended. |  |
| (California Government Code Section 8310.5 requires that we collect this data.)       Parent/Guardian Name:   | DISTRICT: SCHOOL:                                       |  |  |  |                                     |                                 |  |
| Part A. What is this student's Ethnicity?   Hispanic or Latino (   American, or other Spanish culture or origin, regardless of race)   Not Hispanic or Latino   Not Hispanic or Latino   Part B. What is this student's race? (Select one or more)   American Indian or Alaskan Native   Chinese   Laotian   Japanese   Cambodian   Korean   Filipino/Filipino American   Vietnamese   Hmong   Kaiain Indian   Other Asian   Guamanian   Samoan   Guamanian   Tabitian   Other Pacific Islander   Hispanic or Latino    Relationship to Student:   Father   Step-Pather   Mother   Step-Mother   Legal Guardian   Other Cell Phone:   OK to send text msg / Work phone Emerg. only Marent/Guardian Name:   OK to send text msg / Work phone Emerg. only Marent/Guardian Name:   OK to send text msg / Work phone Emerg. only   Parent/Guardian Name:   OK to send text msg / Work phone Emerg. only Marent/Guardian Name:   OK to send text msg / Work phone Emerg. only Marent/Guardian Name:   OK to send text msg / Work phone Emerg. only Marent/Guardian Name:   | RACE/ET   | HNICITY                                  |  |  |                                     |                                 |  |
| Part A. What is this student's Ethnicity?   | (California Government Code Section 8                   |  |  |  |                                     |                                 |  |
| American, or other Spanish culture or origin, regardless of race)       Imain:  |   | Relationship to Student:                 | Relationship to Student:  Father  Step-Father  Mother  Step-Mother  Legal Guardian  Other            |  |                                     |                                 |  |
| American, or other Spanish culture or origin, regardless of race)       Imain:  |   | Cell Phone:                              | Cell Phone: OK to send text msg /Work Phone:   |  |                                     |                                 |  |
| Image: Not Hispanic or Latino If address/home phone is the same as the student (above) then check here and do not enter)   Address  |   | Email:                                   |  |  | Work phone Emerg. only              |                                 |  |
| Parent/Guardian Highest Education Level:   Date:   Parent/Guardian Highest Education Level:   Date:   Parent/Guardian Name:   Parent/Guardi   |   | If address/home phone is                 | If address/home phone is the same as the student (above) then check here and do not enter)           |  |                                     |                                 |  |
| Part B. What is this student's race? (Select one or more)   |   |  | Address  |  | City                                | State Zip                       |  |
| Part B. What is this student's race? (Select one or more)       Parent/Guardian Name:   |   |  |  |  |                                     |                                 |  |
| Chinese       Laotian       Relationship to Student: □Father □Step-Father □Mother □Step-Mother □Legal Guardian □Other         Japanese       Cambodian       Cell Phone: □ OK to send text msg /Work Phone: □Work phone Emerg. only         Vietnamese       Hmong       Email: I address/home phone is the same as the student (above) then check here and do not enter)         Hawaiian       Other Asian       Address City State Zip         Guamanian       Tahitian       Parent/Guardian Highest Education Level:         Not a High School Graduate □ High School Graduate □ Some College □ College Degree □ Graduate Degree   | Part B. What is this student's race? (Se                | □Not a High School Gra                   | □Not a High School Graduate □ High School Graduate □ Some College □ College Degree □ Graduate Degree |  |                                     |                                 |  |
| Chinese       Laotian       Relationship to Student: □Father □Step-Father □Mother □Step-Mother □Legal Guardian □Other         Japanese       Cambodian       Cell Phone: □ OK to send text msg /Work Phone: □Work phone Emerg. only         Vietnamese       Hmong       Email: I address/home phone is the same as the student (above) then check here and do not enter)         Hawaiian       Other Asian       Address City State Zip         Guamanian       Tahitian       Parent/Guardian Highest Education Level:         Not a High School Graduate □ High School Graduate □ Some College □ College Degree □ Graduate Degree   | American Indian or Alaskan Native                       | Parent/Guardian Na                       | uardian Name:Home Phone:   |  |                                     |                                 |  |
| Japanese       Cambodian         Korean       Filipino/Filipino American         Vietnamese       Hmong         Other Asian       Other Asian         Samoan       If address/home phone is the same as the student (above) then check here and do not enter)         Hawaiian       Samoan         Guamanian       Tahitian         Other Pacific Islander       Hispanic or Latino  |   |  | Relationship to Student:   | Relationship to Student:  ☐Father □Step-Father □Mother □Step-Mother □Legal Guardian □Other |                                     |                                 |  |
| Vietnamese       Image       Hinong       Linan         Asian Indian       Other Asian       If address/home phone is the same as the student (above) then check hereand do not enter)         Hawaiian       Samoan       Address  | □ Japanese  | Cambodian                                | Call Phone:  |  | OK to cond toxt mag (Work Phone:    |                                 |  |
| Vietnamese       Image       Hinong       Linan         Asian Indian       Other Asian       If address/home phone is the same as the student (above) then check hereand do not enter)         Hawaiian       Samoan       Address  |   |  |  | LJ   | OK to send text msg / work Phone: _ | Work phone Emerg. only          |  |
| Image: Hawaiian       Image: Samoan       Address       City       State       Zip         Image: Guamanian       Image: Tahitian       Parent/Guardian Highest Education Level:       Parent/Guardian Highest Education Level:         Image: Other Pacific Islander       Image: Hispanic or Latino       Image: Not a High School Graduate Image: High School Graduate Image: Some College Image: Graduate Degree  |   | 0  | Eman.  |  |                                     |                                 |  |
| Guamanian       Tahitian       Parent/Guardian Highest Education Level:       State   |   |  | · ·  |  |                                     |                                 |  |
| Other Pacific Islander       Hispanic or Latino       Not a High School Graduate       Some College       College Degree       Graduate Degree  |   |  | Address  | about Education Laval  | C1ty                                | StateZip                        |  |
|   |   |  |  |  |                                     |                                 |  |
|   | □ Black or African American                             | □ White                                  | -  | -  |                                     | -                               |  |

