

**2023-2024 PRE-ENROLLMENT APPLICATION FORM**

Mail or fax to: Sonoma Charter School, 17202 Sonoma Hwy., Sonoma, CA 95476

Phone (707) 935-4232 or Fax (707) 935-4207

Email to: kbounds@scs.k12.ca.us

If you have any questions, please call (707) 935-4232

**IMPORTANT INFORMATION:** Submission of this application does not constitute enrollment. It is an application for enrollment pending space available and/or lottery results. Do not disenroll from your current school until confirmation from our registrar!

Today's Date: \_\_\_\_\_

2023-24 Grade level: \_\_\_\_\_

Student Legal Name: \_\_\_\_\_  
(Last) (First) (Middle)

Student's Physical Address: \_\_\_\_\_ City \_\_\_\_\_ Zip: \_\_\_\_\_  
Street (No P.O. Box)

Student's Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip: \_\_\_\_\_  
(Preferred Name)

Birth Date: \_\_\_\_\_ Gender: Male Female Non-binary Legal Gender: \_\_\_\_\_

School District of Residence: \_\_\_\_\_ County of residence: \_\_\_\_\_

Has sibling(s) in Charter? Yes / No Name(s): \_\_\_\_\_ Grade(s): \_\_\_\_\_

**Previous School Information**

Previous School: \_\_\_\_\_ Address/Registrar Phone # (Required): \_\_\_\_\_

Previous Retention? Yes / No If yes, what grade \_\_\_\_\_

**Parent/Guardian #1 (Primary Contact)**

**Parent/Guardian #2**

Name (Last, First): \_\_\_\_\_

Primary Phone # (\_\_\_\_) \_\_\_\_\_

Secondary Phone # (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Parent Education Level:  Not a High School Graduate  High School Graduate  Some College or AA Degree  
 College Graduate  Graduate Degree or Higher  Decline to State

Is either parent/guardian on active duty in the US armed forces?  Army  Navy  Air Force  Marine Corps

**PLEASE COMPLETE FORM ON BACK**

**DOCUMENTS required to be submitted along with the Pre-Enrollment Application form:**

**(Please attach/fax required documents with this application. If received without will be returned and must be resubmitted.)**

(Check all attached)

**Required for all applicants:**

- Proof of Age
- Copy of Vaccine Record
- Copy of IEP or 504, if applicable
- Caregiver Authorization Affidavit (If person enrolling student is NOT the parent or legal guardian)

**Additional for K-1st grades:**

- Heath Exam Form
- Oral Health Exam or Waiver

**7th/8th Grade:**

- Proof of 7th grade immunizations

**Additional Student Information**

Special Health Considerations: \_\_\_\_\_

Does Student have an active IEP or 504? \_\_\_\_\_ *(If YES, please provide copy of IEP or 504)*  
*If your child does not have an IEP, but was evaluated for special education, enclose a copy of all assessment reports.*

I acknowledge that enrollment with the Sonoma Charter School is voluntary.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Proof of Age ELL Language: \_\_\_\_\_

Homeless: \_\_\_\_\_ Medical Issues: \_\_\_\_\_

Medical Forms given: YES / NO

Custody Issues: YES / NO

Court Papers received: YES / NO

**SchoolWise**

\_\_ Enroll new student acct

\_\_ State/Province>Calpads Student Info

\_\_ State/Province>Calpads Guardian Info

\_\_ Demographics

\_\_ Scheduling Set-up

\_\_ Modify Sched (add Teacher)

\_\_ Transfer Info>date (District)

\_\_ Vax

\_\_ Special Prog(2)

\_\_(SpED)

\_\_ Transcript

\_\_ Email (3)

\_\_ SchoolWise

Access

**G Dox**

\_\_ Waitlist

\_\_ Addlist

\_\_ Enroll Spreadsheet

\_\_ >By Grade

\_\_ FTE/Prog enroll

**Other**

\_\_ Req Cum

\_\_ Prog Roster & Email