

SOUTHWEST LICKING LOCAL SCHOOLS
FOSTER/COURT PLACED CHILD ENROLLMENT FORM

TO BE USED FOR ANY CHILD WHO ENROLLS IN OUR SCHOOLS AS A RESULT OF A COURT ORDER, FOSTER PLACEMENT BY A CHILDREN'S SERVICES AGENCY, OR DIRECTED PLACEMENT BY ANY SIMILAR AGENCY.

*** IF ALL THE INFORMATION BELOW IS NOT AVAILABLE UPON REGISTRATION***
PLEASE CONTACT THE PLACING AGENCY TO SECURE THAT INFORMATION

SCHOOL _____
STUDENT'S NAME _____
DATE ENROLLED _____ GRADE _____ DATE OF BIRTH _____
NAME OF FOSTER PARENT OR COURT APPOINTED GUARDIAN _____
ADDRESS _____
STUDENT'S SCHOOL DISTRICT OF ATTENDANCE AT TIME OF COMMITMENT _____
SCHOOL DISTRICT WHERE PARENTS RESIDED AT TIME OF COMMITMENT IF DIFFERENT THAN ABOVE _____

IF CHILD IS BEING PLACED BY CHILDREN SERVICES COMPLETE THIS PORTION:

COUNTY _____ DATE STUDENT COMMITTED BY AGENCY _____
NAME & PHONE NUMBER OF CASEWORKER _____
JOURNAL ENTRY NUMBER _____
IF CHILD RECEIVES SPECIAL EDUCATION SERVICES —
PARENT(S) NAME _____
CURRENT ADDRESS _____
IF CHILD DOES NOT RECEIVE SPECIAL EDUCATION SERVICES —
PARENT(S) NAME _____
ADDRESS AT TIME OF INITIAL PLACEMENT _____

IF CHILD IS BEING PLACED BY A COURT ORDER COMPLETE THIS PORTION: (ATTACH COPY OF COURT ORDER)

NAME OF COURT COMMITTING STUDENT _____
COURT JOURNAL - ENTRY NUMBER _____
SCHOOL DISTRICT OF RESPONSIBILITY ASSIGNED BY COURT (IF APPLICABLE) _____
IF CHILD RECEIVES SPECIAL EDUCATION SERVICES —
PARENT(S) NAME _____
CURRENT ADDRESS _____
IF CHILD DOES NOT RECEIVE SPECIAL EDUCATION SERVICES —
PARENT(S) NAME _____
ADDRESS AT TIME OF INITIAL PLACEMENT _____

SIGNATURE OF PERSON REGISTERING STUDENT DATE _____

PLEASE COMPLETE IMMEDIATELY UPON STUDENT'S ENTRANCE AND SEND TO PUPIL PERSONNEL OFFICE FOR TUITION PURPOSES.