



2018-2019 Enrollment Checklist

Welcome to Wharton Independent School District! We appreciate the opportunity to serve your child. Please provide the following information and complete the forms to insure that we are able to properly serve your child. If you have any questions or need additional information contact the campus office.

Information Required at Time of Initial Enrollment:

2 Proofs of Residency (Unless student residency form indicates homeless status):

- a) Current signed lease, deed or contract, or most recent tax receipt AND
- b) Current phone or utility for the property in the parent/guardian's name

Social Security Card (if no social security card, please communicate to Registrar at time of enrollment)

Birth Certificate

Immunization Record

Immunizations must be up-to-date. Documentation must include month, day & year for each vaccine and a physician signature or clinic stamp. Exemptions may be claimed for medical contraindications and reasons of conscience with the proper documentation. See [http:// www.dshs.state.tx.us/immunize/school](http://www.dshs.state.tx.us/immunize/school) for further information.

Photo ID of parent/guardian

Must provide a driver's license that has the same address as your proof of residency. You have 30 days from date of registration to provide this to the Registrar's office.

Unofficial Copy of Transcript/most recently completed Report Card and Standardized Test Scores

(3 years, including most recent year completed is requested).

Special Education/504 records if applicable

Home Language Survey (Only completed on initial enrollment)

Support Services Form

Previous Schools Attended

Forms to be Completed:

Wharton ISD Enrollment Form

Wharton ISD Family Survey

Employment Survey (if applicable)

Texas Public School Student/Staff Ethnicity and Race Data Questionnaire

Student Residency Questionnaire

Eating and Feeding Evaluation

Wharton ISD Health Information (Card provided by nurse)

Allergy (Anaphylaxis) Emergency Action Plan (if necessary)

Must be completed by a physician for any child who has a severe allergy with risk of anaphylaxis. Severe allergies may include foods, insect bites and stings, etc. Medications required for treatment should be brought to the school nurse prior to the first day of school.

Free and Reduced Lunch Application

Family Access Form

Technology Survey

Photo Release

Student and Parent Summary Signature Form

Required Documents once School Year Has Begun:

Withdrawal forms and transcript/report card from previous school

Wharton ISD 2018-2019 Student Enrollment Information

Grade _____ Entry Date _____

SS# _____ Male Female Date of Birth _____

Student Name: _____
(First) (Middle) (Last)

Mailing Address _____
(if different than physical address)

Physical Address _____
(Street) (Apt or Unit #) (City/State) (Zip)

Hispanic _____

(MUST PICK ONE) W ___ Black/African American ___ Asian ___ Am. Indian ___ Hawaiian/PacIsl ___

Has the student repeated a grade level? Yes ___ No ___ If yes, which one(s): _____

Has the student attended school in Wharton ISD before? Yes ___ No ___

ENROLLING Parent/Guardian Copy of ID _____ Father Mother Other

Name _____
(First) (Middle) (Last)

Address (if different from student)

(Street) (Apt or Unit #) (City/State) (Zip)

Cell Phone: _____ Work Phone: _____

Home Phone: _____ E-mail: _____

Parent/Guardian _____ Father Mother Other

Name _____
(First) (Last)

Address (if different from student):

(Street) (Apt or Unit #) (City/State) (Zip)

Cell Phone: _____ Work Phone: _____

Home Phone: _____ E-mail: _____

(for office use only) Eligibility Code: 0 1 2 3 4 5 Entry Code: O R C Attendance: Half Day or Full Day