

**CLAYTON COUNTY PUBLIC SCHOOLS
STUDENT ENROLLMENT QUESTIONNAIRE (SEQ)**

Date: _____ School: _____

Name of Student: _____ Grade _____

Adult Registering Student: _____

Relationship to Student: _____ Contact phone _____

Welcome to Clayton County Public Schools. Our mission is to provide a quality education for all students. We will provide support services to ensure that all students are able to succeed.

**Please answer the following questions to begin the enrollment process.
Do you currently have the following enrollment materials?**

- __ Yes __ No Verification of Residency (two proofs)
- __ Yes __ No Birth Certificate
- __ Yes __ No Student Social Security Card
- __ Yes __ No Verification of Guardianship
- __ Yes __ No Georgia Immunization Certificate (Form 3231)
- __ Yes __ No Georgia Eye, Ear and Dental Certificate (Form 3300)
- __ Yes __ No School records / grades / transcripts
- __ Yes __ No Discipline Information (grades 7 to 12)
- __ Yes __ No Parent ID

Please check any situations apply:

- 1. **Doubled-up:** Share housing temporarily with relatives or others because I have lost my housing or cannot afford housing.
- 2. **Unsheltered:** Live in a campground, car, abandoned building, or other inadequate housing.
- 3. **Shelter:** Do not have a permanent address and /or permanent housing.
- 4. **Unsheltered:** Live on the street.
- 5. **Awaiting foster care:** Live in temporary foster care.
- 6. **Motel:** Lack of stable and safe living environment
- 7. **Unaccompanied Youth:** Homeless student (under 21) enrolling without a parent or guardian.

I certify that the above information is accurate and true.

Parent/Guardian Signature

Date

(PLEASE RETURN THIS FORM TO THE REGISTRATION PERSONNEL)

Reviewed By:

Name

Title

Date