## 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 disensol from your current school until confirmation from our registrar!

Today's Date:	2023-24 Grade level:				
Student Legal Name:					
(Last)		(First)	(Middle)		
tudent's Physical Address:			City	Zip:	
	Street (No P.O. Box)	)			
tudent's Mailing Address:			City	Zip:	
irth Date:	Gender: Male Female Non-binary		Legal Gender:		
chool District of Residence:			County of resid	dence:	
Has sibling(s) in Charter? Yes / No Name(s):			Grade(s):		
	Previous Sc	hool Inforn	nation_		
revious School:	Address/Registrar Phone # (Requir				
revious Retention? Yes / No	If yes, what grade				
Parent/Guardian #1 (Primary Contact)		t)	Parent/Guardian #2		
ame (Last, First):					
mary Phone # ()		(	_)		
econdary Phone # ()		(	)		
-mail Address:					
arent Education Level: □ No	t a High School Graduate	□High School	Graduate	ollege or AA Degree	
□ College	Graduate 🗆 Graduate De	egree or Highe	er Decline to State	2	
s either parent/guardian on act					

## 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

Required for all applicants:	attached)	Additional for K-1st grades:  □ Heath Exam Form □ Oral Health Exam or Waiver			
□ Proof of Age	Add				
□ Copy of Vaccine Record					
□ □ Caregiver Authorization	C				
Affidavit (If person enrolling					
student is NOT the parent or legal guardian)					
legal guardian)					
	7th/8th C				
		□Proof of 7th grade immunizations			
Additio	onal Student Information	on (optional)			
Special Health Considerations:					
reports. □ I acknowledge that enrollment wi	ith the Sonoma Charter	•			
FOR OFFICE USE ONLY	_				
	ELL Language:				
Homeless:	Medical Issues:				
Medical Forms given: YES / NO					
Custody Issues: YES / NO					
Court Papers received: YES / NO					
SchoolWise					
Enroll new student acct	₋Vax	G Dox Waitlist Other			
State/Province>Calpads Student Info	Special Prog(2)	AddlistReq Cum			
State/Province>Calpads Guardian Info		Enroll Spreadsheet _Prog Roster & Email			
Demographics	Transcript	>By Grade			
Scheduling Set-up	Email (3)	FTE/Prog enroll			
Modify Sched (add Teacher)	_SchoolWise	_			
Transfer Info>date (District)	Access				