



County Collaborative Charter School 1782  
 La Costa Meadows Drive, Suite 102 San  
 Marcos, CA 92078  
 Phone: (760) 494-9646  
 Fax: (760) 798-9630  
 admissions@cccs.education

## County Collaborative Charter School 2018-2019 Application Packet

- Thank you for your interest in County Collaborative Charter School.
- Complete all parts of the attached application.
- You will also need to provide all applicable documents listed below.
- If you have questions about any part of the application, please contact the County Collaborative team member you have been working with or our Student Services Department at (760) 494-9646 or admissions@cccs.education

### CHECKLIST

for all students



check off as you complete

**Completed Application** (pgs 2-6)

**Proof of Residency** (copy of SDGE bill, utility bill, rent/lease/mortgage agreement, etc)

**Most Recent Immunization Records** - Tdap required for entry to 7th grade (copy of all shot records)  
 • *or a completed Non Immunization Confirmation*

**Proof of Age** (copy of birth certificate, baptismal certificate, passport, etc)

**Withdrawal Slip** from previous school

**If Applicable** (a copy of the most recent IEP or 504 plan)

### ADDITIONAL DOCUMENTS

9th, 10th, 11th, 12th graders only

**Transcripts of academic work** (copy of unofficial transcript is sufficient)

Please submit all completed required paperwork directly to your the County Collaborative team member you have been working with or our Student Services Department: (contact information above).

# COUNTY COLLABORATIVE CHARTER

Admissions Application 2018-2019



<b>I. STUDENT REGISTRATION FORM</b>										
Last Name:				First:				Middle:		
Other/ AKA Last:				AKA First:				AKA Middle:		
Birth Date:				Birth City & State:				Birth Country:		
Gender:			Grade Level 17-18:			Preferred Nickname:				
Physical Address:							Apartment/Unit #			
City:				State:			ZIP:			
Mailing Address:							Apartment/Unit #			
City:				State:			ZIP:			
County of Residence:				School District of Residence:						
<p><i>Where is your child/family currently living? (federally mandated by NCLB) – Please check appropriate box:</i></p>										
<input type="checkbox"/> Permanent Housing (House, apartment, condo or mobile home) <input type="checkbox"/> Foster Family Home or Kinship Placement <input type="checkbox"/> Health Institution <input type="checkbox"/> Incarceration Institution <input type="checkbox"/> Licensed Children’s Institution (i.e. Group Home) <input type="checkbox"/> State Hospital					<input type="checkbox"/> Temporarily Doubled Up (Shared housing due to economic hardship or loss) <input type="checkbox"/> Temporarily Unsheltered <input type="checkbox"/> Temporary Shelters <input type="checkbox"/> Hotels/Motels <input type="checkbox"/> Unknown <input type="checkbox"/> Other (please specify)_____					
Home Phone:					Parent Cell Phone:					
Student Cell Phone:					Student Email:					

**II. ETHNICITY/RACE (PLEASE ANSWER BOTH SECTIONS)**

**Part A: Ethnicity** – Is the student Hispanic or Latino?

(A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin)

- Yes, Hispanic or Latino**
- No, Not Hispanic or Latino**

**Part B: Race** – (Please check up to **two** racial categories) No matter what you selected above, please mark one or two boxes to indicate what you consider the student’s race to be:

<input type="checkbox"/> African American or Black  <input type="checkbox"/> American Indian or Alaskan Native (Persons having origins in any of the original people of North and South America, including Central America)	<input type="checkbox"/> Asian Indian <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Hmong <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian	<input type="checkbox"/> Argentinean <input type="checkbox"/> Colombian <input type="checkbox"/> Cuban <input type="checkbox"/> Dominican <input type="checkbox"/> Mexican - American <input type="checkbox"/> Nicaraguan <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Salvadoran <input type="checkbox"/> Spaniard <input type="checkbox"/> Other Hispanic / Latino	<input type="checkbox"/> Guamanian <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Tahitian <input type="checkbox"/> Other Pacific Islander  <input type="checkbox"/> Middle Eastern <input type="checkbox"/> White
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\*\*\*Check here if student was born outside the U.S. but granted U.S. citizenship at time of birth: \_\_\_\_\_

**III. PREVIOUS SCHOOL / ENROLLMENT DETAILS**

Name of Previous School:		Date of Withdrawal:	
Address of Previous School:		School District of Previous School:	

**Type of School last attended:**

- Public school
- Private, non-religiously-affiliated school
- Private, religiously-affiliated school
- School outside of USA
- Institution (example: correctional facility)
- Independent study charter school
- Site-based charter school
- Home schooling (R-4 or PSA)
- Other \_\_\_\_\_

**Please list name(s) of any other school(s) attended in the last four years here:**

If student was born outside the U.S. and its territories: (disregard this box if not applicable)

Has student been enrolled less than 3 cumulative years in the U.S.? **Yes:** \_\_\_\_\_ **No:** \_\_\_\_\_

**If Yes** - Date first enrolled in the U.S.: \_\_\_\_\_ Date first enrolled in California: \_\_\_\_\_

<b>IV. FAMILY INFORMATION</b>			
	<b>Parent/Guardian 1</b>	<b>Parent/Guardian 2</b>	<b>Emergency Contact / Other Adult</b>
<b>Last Name</b>			
<b>First Name</b>			
<b>Relationship to student</b>			
<b>Lives with student?</b>	Yes / No If no, provide address below	Yes / No If no, provide address below	
<b>Mailing Street Address</b>			
<b>City, State, Zip</b>			
<b>Home Phone</b>			
<b>Work Phone</b>			
<b>Cell Phone</b>			
<b>Email Address</b>			
<b>Employer</b>			
<b>Occupation</b>			
<b>Work Address</b>			
<b>Active Military?</b>	Yes / No If Yes, List Branch & Duty Station:	Yes / No If Yes, List Branch & Duty Station:	
<b>Please describe any custody agreements here:</b>	<i>Please include legal documentation regarding custody agreement with application, if applicable.</i>		
<b>Highest Level of Education:</b>	<input type="checkbox"/> Not a high school graduate <input type="checkbox"/> High School Graduate <input type="checkbox"/> Some College - Holds AA <i>or</i> has completed 2 full years at a 4-year university <input type="checkbox"/> College Graduate - Holds BA or BS <input type="checkbox"/> Graduate Degree - Holds MA, MS, PhD or EdD <input type="checkbox"/> Decline to State	<input type="checkbox"/> Not a high school graduate <input type="checkbox"/> High School Graduate <input type="checkbox"/> Some College - Holds AA <i>or</i> has completed 2 full years at a 4-year university <input type="checkbox"/> College Graduate - Holds BA or BS <input type="checkbox"/> Graduate Degree - Holds MA, MS, PhD or EdD <input type="checkbox"/> Decline to State	

**V. LANGUAGE SURVEY**

*California Education Code (Ed Code 62002) requires schools to determine the language spoken at home by each student. This information is essential in order for the school to provide meaningful instruction for all students. Further assessment will be given to students with languages other than English.*

- Which language did your child first learn to speak? \_\_\_\_\_
- Which language does your child most frequently read/speak at home? \_\_\_\_\_
- Which language do the parents/guardians most frequently speak to the student? \_\_\_\_\_
- Which language is most often spoken by the adults in the home? \_\_\_\_\_
- Is your child fluent in English? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**VI. SUPPLEMENTARY QUESTIONS**

**Household Questions:**

- How many times has the student’s family moved in the last 12 months? \_\_\_\_\_
- Is parent/guardian employed in one or more agricultural or fishing activities on a seasonal or other temporary basis?  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_ If yes, please list Migrant ID Number here: \_\_\_\_\_

**Student Questions:**

- Has this student ever been expelled or is this student facing expulsion from another school?  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_ (If yes, please provide documentation)
- Has this student ever been suspended or is this student pending suspension from another school?  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_ (If yes, please provide documentation)
- Is this student currently on probation?  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_ (If yes, please provide documentation)

**VII. ACCOMODATIONS / RELEASES**

**Parent/Guardian Releases**

<i>Please select "Yes" or "No" for each question.</i>	<b>YES</b>	<b>NO</b>
Permission for school directory information to be made available to institutions of higher learning?		
Permission for school directory information to be made available to military recruiters?		
Permission for student to sign self in and out of the school?		
Parent agrees to Open Campus Policy (High School)?		
Student is allowed to use computers at school?		
Student is allowed to access the Internet at school?		
Permission to include student information in school directory?		
Permission to use pictures of this student for school purposes?		
Permission to use student work produced by this student for school purposes?		
Permission to use pictures of the student in Yearbook ONLY?		
Permission to use student audio/video for school purpose?		
Parent wishes to opt-out of Cal-Grant GPA Submissions (AB2160)?		
Permission to text Student?		
Permission to text Parent/Guardian?		
Permission to use Student's Name in school publications?		
Permission for the school to use student pictures, audio, video, and student work on social media?		

**VIII. DISCLAIMER AND SIGNATURE**

*If my child has received Special Education services in the past, I understand that I **must** submit all of the Special Education documentation, and/or 504 Plan (including exit IEP/504) with their enrollment paperwork. I understand that without it, there may be some delays in enrolling with this charter school.*

*I concur and agree that this enrollment constitutes my child's complete educational program, and they are not enrolled in any other public or private school. I have read and understood the above information.*

*By signing, you certify that your answers on this application are true and complete to the best of your knowledge.*

**X** \_\_\_\_\_ Date: **X** \_\_\_\_\_