



Please select one (1):

- Envision High School**, 351 W. Prince Rd., Tucson, AZ, 85705 Phone (520) 887-0045 Fax (520) 887-5723
- Toltecalli High School**, 251 W. Irvington Rd., Tucson, AZ, 85714 Phone (520) 807-7923 Fax (520) 807-7923

STUDENT INFORMATION

Legal Last Name: _____ First: _____ Middle: _____ DOB: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Telephone: () _____ Work Telephone: () _____
 Are you Hispanic or Latino? Yes No Sex: Female Male
 Race: White African American Asian Native Hawaiian/ Pacific Islander
 American Indian/ Alaskan Native-Tribal Affiliation:

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____ Telephone: _____
 Mailing Address: _____ Cell Telephone: _____
 Parent/Guardian Employer: _____ Bus. Telephone: _____
 Email Address: _____

Parent/Guardian Name: _____ Telephone: _____
 Mailing Address: _____ Cell Telephone: _____
 Parent/Guardian Employer: _____ Bus. Telephone: _____
 Email Address: _____

LANGUAGE SURVEY

What is the primary language used in the home regardless of the language spoken by the student? English Spanish Other: _____
 What is the language most often spoken by the student? English Spanish Other: _____
 What is the language that the student first acquired? English Spanish Other: _____

TRANSPORTATION INFORMATION

Do you have a low-income Sun Tran bus I.D.? Yes No
 Please check the mode of transportation you plan to utilize. Bus Own Vehicle Walking Parent will transport Bicycle Other: _____

ADDITIONAL INFORMATION

Have you been expelled within the last 12 months from another district? Yes No
 How did you hear about our school? Please mark all that apply.
 Parents/ Guardian Flyer/ Brochure Family Member Passing By School Sun Tran Other:

AUTHORIZATION

We certify that the information provided is true and correct to the best of our knowledge. Our signatures acknowledge that we have been informed of the expectations of Chicanos Por La Causa Community Schools; a copy of the Student/Parent Handbook policies and procedures will be given to us during the parent/student orientation. We agree to read all of the contents of the Student/Parent Handbook. As a student of CPLC Community Schools, I agree to abide by the school policies and procedures. Failure to do so may result in loss of my enrollment privileges.

PARENT/ GUARDIAN SIGNATURE/ STUDENT (18 YEARS OR OLDER)

PARENT/ GUARDIAN SIGNATURE/ STUDENT (18 YEARS OR OLDER)

DATE

FOR OFFICE USE ONLY:

SAIS: _____ GRADE LEVEL: _____ FRESHMAN YEAR: _____ COHORT: _____

ENTRY DATE:	WITHDRAWAL DATE:	RE-ENTRY DATE:	WITHDRAWAL DATE:
ENTRY CODE:	WITHDRAWAL CODE:	RE-ENTRY DATE:	WITHDRAWAL CODE:
DATE ENTERED:	DATE ENTERED:	DATE ENTERED:	DATE ENTERED:
ENTERED BY:	ENTERED BY:	ENTERED BY:	ENTERED BY: