

JENNINGS COMMUNITY SCHOOL
 ENROLLMENT FORM 2022-2023



DATE: _____		
FIRST NAME: _____	LAST NAME: _____	MIDDLE NAME: _____
Are you homeless or living with someone who is NOT a parent or guardian? Yes No		
ADDRESS: _____		
APARTMENT/UNIT#: _____		
CITY/STATE/ZIP CODE: _____		
PARENT CONTACT:	STUDENT CONTACT:	LANGUAGE:
PHONE:		
WORK:	CELL:	LANGUAGE SPOKEN AT HOME:
EMAIL:		
GRADE: 7 8 9 10 11 12	D.O.B.: _____	DO YOU HAVE AN IEP OR 504 PLAN?
ETHNICITY (Check all that apply) 1 AMERICAN INDIAN 2 ASIAN OR PACIFIC ISLANDER 3 HISPANIC 4 BLACK 5 WHITE, NOT HISPANIC		
PREVIOUS SCHOOLS		
SCHOOL NAME & ADDRESS: _____		
DATE OF ENROLLMENT:		
FROM:		To:
SCHOOL NAME & ADDRESS: _____		
DATE OF ENROLLMENT:		
FROM:		To:
SCHOOL NAME & ADDRESS: _____		
DATE OF ENROLLMENT:		
FROM:		To:

Jennings Community School does not discriminate on the basis of race, sex, marital status, national origin, age, color, religion, ancestry, status with respect to public assistance, sexual orientation or disability.

EMERGENCY CONTACT INFORMATION:

FULL NAME:	RELATIONSHIP TO STUDENT:
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HOME PHONE:	CELL PHONE:	WORK PHONE:
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FULL NAME:	RELATIONSHIP TO STUDENT:
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HOME PHONE:	CELL PHONE:	WORK PHONE:
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ADDITIONAL INFORMATION

DOES THIS STUDENT HAVE A PROBATION OFFICER, SOCIAL WORKER, PSYCHOLOGIST ETC.?

NAME:	NAME:
PHONE:	PHONE:
TITLE:	TITLE:

DOES THIS STUDENT HAVE ANY HEALTH CONCERNS WE SHOULD KNOW ABOUT? (I.E. ASTHMA, FOOD ALLERGIES, DIABETES, ETC.)
IF YES PLEASE EXPLAIN:

OTHER INFORMATION

Jennings Community School is an experiential-based high school. We frequently participate in school day trips. By signing this form you are giving permission for Jennings School to take your child/children on school field trips.

AUTHORIZED SIGNATURE

TO THE BEST OF MY KNOWLEDGE, I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE.

PARENT NAME: _____

PARENT SIGNATURE: _____ DATE: _____

STUDENT NAME: _____

STUDENT SIGNATURE: _____ DATE: _____

JENNINGS COMMUNITY SCHOOL	PHONE: 651-649-5403	 JENNINGS COMMUNITY SCHOOL GRADES 7-12
2455 UNIVERSITY AVENUE WEST	FAX: 651-649-5408	
ST. PAUL, MN 55114		

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