

General Enrollment Forms:

The following forms must be downloaded and returned to school:

The forms below are found here: <https://www.cps.edu/sites/back-to-school/preparing-for-school/registration-enrollment/>

- ★ School Enrollment Form
- ★ Request for Emergency and Health Information
- ★ School Messaging Consent Form
- ★ Media Consent Form and Release

These forms are found here: <https://www.cps.edu/sites/back-to-school/preparing-for-school/packets/>

- ★ Student Rights & Responsibilities (formerly the Student Code of Conduct) - Page 9
- ★ Directory and Recruiter Opt-Out Information Sheet/Form

Income Information Form

The following form can be found here:

<https://www.cps.edu/sites/back-to-school/preparing-for-school/health-wellness-requirements/>

Students must turn in the following forms:

- ★ Family Income Information Forms
- ★ Student Medical Information Form
- ★ Dental Examination Consent Form
- ★ Vision Exam Consent Form
- ★ Proof of Dental Examination
- ★ Vision Examination Report

SY School Forms can be returned to your student's homeroom teacher

PAGE 31 is really important!
Family Income form--sometimes called School Lunch Forms→

FORMS LINK ON THE RAY WEBSITE TOO

CPS Family Income Information Form 2021-2022

The purpose of this form is for CPS to obtain information about families' income to determine school funding. CPS and your school may receive additional funding based on the number of low-income families enrolled. Please complete this form and return it to the school's main office.

Parents-- Please return form to school by **October 29, 2021.**
Schools-- Please enter into ODA by **November 18, 2021.**

please print or type:

SCHOOL NAME _____

DOES YOUR FAMILY HAVE INTERNET SERVICES AT HOME? YES NO

PART 1: Household Information— List all members of your household living with you.
**Foster Children (legal responsibility of welfare agency or court)*

FOSTER CHILD?	CPS STUDENT?	ALL HOUSEHOLD MEMBER NAMES			DATE OF BIRTH	DHS SNAP OR TANF CASE NUMBER (LAST 9 DIGITS)
		Last	First	M.I.		
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					

PART 2: SNAP/TANF number of any member of your household (go to part 6)

PART 3: Homeless, Migrant, Runaway Child, or child enrolled in Head Start

HOMELESS
 MIGRANT
 RUNAWAY
 HEAD START

Homeless, Migrant, Runaway or Head Start Liaison Signature _____ Date _____

PART 4: List Household Members With Income (SKIP THIS if you answered any of parts 2 or 3)
Enter the amount of income and how often it is received for each household member.
Frequency: Weekly, Every 2 Weeks, Twice Monthly, Monthly, Annually

OTHER INCOME can be but not limited to Welfare, Child Support, Retirement, Social Security, Worker's Comp. and Unemployment.

HOUSEHOLD MEMBER NAMES WITH INCOME			GROSS INCOME (before deductions)	OTHER INCOME
First	Last	M.I.		