THE SCHOOL DISTRICT OF ESCAMBIA COUNTY

Enrollment Checklist

STUDENT:_____ dob: ___/___/___ GRADE:_____

Today's date___/___/____

ALL INCOMING NEW STUDENTS

___PROOF OF RESIDENCE

___BIRTH CERTIFICATE

___VERIFICATION OF SOCIAL SECURITY NUMBER

___IMMUNIZATION RECORD

___PHYSICAL

__COMPLETED ONLINE ENROLLMENT FORM OR PDF ENROLLMENT FORM

ADDITIONAL FORM FOR VPK STUDENTS
___ CERTIFICATE OF ELIGIBILITY (COE) WITH PARENT SIGNATURE

TRANSFERS WITHIN DISTRICT OR STUDENTS RETURNING TO DISTRICT

___PROOF OF RESIDENCE

___WITHDRAWAL FORM FROM PRIOR SCHOOL (secondary only)

___COMPLETED DATA VERIFICATION AND HEALTH INFORMATION FORM