



IBERVILLE PARISH SCHOOL BOARD STUDENT COORDINATED ENROLLMENT FORM

58030 Plaquemine Street • Plaquemine, LA 70764 • Phone: 225.687.4341 • Fax: 225-687-5408

School Year _____ - _____

Student's Name _____ Date of Birth _____

Early Childhood Childcare Based Sites: (Please check the box of choice)

- A Garden of Angels Learning Center** ♦ 78045 Wheelock Lane ♦ Maringouin, LA 70757 ♦ 225.625.2245 ♦ **Director: Xavier Anderson**
- Holmes House Child Care Center** ♦ 56511 Breaux Street ♦ Bayou Goula, LA 70788 ♦ 225.545.2527 ♦ **Director: Juanita Williams**
- From Cradles to Classrooms** ♦ 57951 Barrow Street ♦ Plaquemine, La 70764 ♦ 225.687.9250 ♦ **Director: Raymond Smith, Jr.**
- Precious Tots** ♦ 57940 Plaquemine Street ♦ Plaquemine, LA 70764 ♦ 225.687.0998 ♦ **Director: Joann Bosley**
- Toddlers College Learning Center** ♦ 23725 Ephriam Street ♦ Plaquemine, LA 70764 ♦ 225.385.4716 ♦ **Director: Tyiesha Fuertes**
- Bright Star Child Care Center** ♦ 57955 Plaquemine St. Suite C ♦ Plaquemine, LA 70764 ♦ 225.238.2139 ♦ **Director: Rockeisha Walker**
- Honey Bee Child Care Center** ♦ 32850 Bowie Street ♦ White Castle, LA 70788 ♦ 225.716.8066 ♦ **Director: Barbara Batiste**
- True Care Learning Center** ♦ 24915 B, LA-1 ♦ Plaquemine, LA 70764 ♦ 225.386.3200 ♦ **Director: Sharon Stafford**

Elementary School Sites: (Please check the box of choice).

- | | |
|---|---|
| <input type="checkbox"/> Math, Science & Arts Academy West (PK3-12) | <input type="checkbox"/> North Iberville Elementary (PK3-6) |
| <input type="checkbox"/> Math, Science & Arts Academy East (PK3-12) | <input type="checkbox"/> Dorseyville Elementary (PK3-6) |
| <input type="checkbox"/> East Iberville Elementary (PK3-6) | <input type="checkbox"/> Iberville Elementary (PK3-6) |
| <input type="checkbox"/> Crescent Elementary School (PK3-6) | |

High School Sites: (Please check the box of choice).

- Plaquemine High School (7-12)
- White Castle High School (7-12)
- East Iberville High School (7-12)
- Iberville STEM Academy (6-12)

Students are not officially enrolled until ALL required documents are received.

- ✓ **Early Childhood Child Care Based Sites require:** Birth Certificate, Social Security Card, Updated Immunization.
- ✓ **Early Childhood School Based Sites require:** Birth Certificate, Social Security Card, Updated Immunization, copy of insurance card, 3-proofs of residency, proof of income, completed dental & physical forms.
- ✓ **High School sites require:** Birth Certificate, Social Security Card, Updated Immunization, 3-proofs of residency.

Grade Level: (Circle one) Infant age 1 age 2 PK3 PK4 K 1 2 3 4 5 6 7 8 9 10 11 12

Previous School Site: _____ Previous Grade: _____

Student Information:

Student's Name: _____

Last

First

Middle

Age: _____

Sex: Male Female

Student's Date of Birth: _____

Month

Date

Year

Place of Birth _____ Birth Certificate Number _____

Student's Social Security Number: _____ - _____ - _____

Student's Ethnicity: (Check One)

Student's Dominant Language (Check One)

- American Indian
- Asian or Pacific Islander
- Black
- Hispanic
- White
- Latino

- English
 - Non-English
- Does your child speak any other language?
 Yes No If yes, what _____

In case of an Emergency Contact:

Name: _____ Phone Number: _____

Medical Information:

Primary Doctor's Name: _____ Phone Number: _____

Primary Dentist Name: _____ Phone Number: _____

Known Allergies: _____ Insurance Provider: _____

Additional Medical Information:

Education Information:

Has your child repeated a grade?

No Yes _____

Does Your Child have a current evaluation or IEP to receive special needs services?

No
 Yes (check one) _____ Speech _____ OT _____ PT _____ APE _____ Special Instruction

Do you have any concerns regarding your child's development or behavior?

No
 Yes, please explain:

Parent/Guardian Information:

Primary Parent/Guardian Name: _____

Relationship to Child: _____ Ethnicity: _____ Age: _____

Home Phone Number: _____ Alternate Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

Email Address: _____

Highest level of education: 0 1 2 3 4 5 6 7 8 9 10 11 12

High School Graduate GED Some College College Graduate

Currently Employed? Yes No Employment Status: _____ Full-time _____ Part-time

Employer and Phone Number: _____

Secondary Parent/Guardian Name: _____

Relationship to Child _____ Ethnicity: _____ Age: _____

Home Phone Number: _____ Alternate Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

Email Address: _____

Highest level of education: 0 1 2 3 4 5 6 7 8 9 10 11 12

High School Graduate GED Some College College Graduate

Currently Employed? Yes No Employment Status: _____ Full-time _____ Part-time

Employer : _____

Phone Number: _____