



Enrollment Application - Demographics

Office Use: Enrollment Date: _____ **Applying for Grade:** _____

Student Information

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Date of Birth: _____ **City of Birth:** _____

Gender: Male / Female

Last 4-Digits of Social Security Number: _____

Gender: Male / Female

Previous Enrollment: _____

Ethnicity:

_____ American Indian _____ African American

_____ Asian/Pacific Islander _____ Caucasian (White)

_____ Hispanic/Latino Other: _____

How did you hear about us? _____



Enrollment Application - Demographics

Parent/Guardian 1 Information

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Relationship: _____

Occupation/Location: _____

Daytime Phone Number: _____

Mobile Phone Number: _____

Home Phone Number: _____

Email Address: _____

I give consent to receive text messages, emails, phone calls, and other digital communications from Della School of Coding and Design, its staff, and teachers.

I give consent for my contact information to be shared with other parents of Della School of Coding and Design, upon their request, or within the school directory.



Enrollment Application - Demographics

Parent/Guardian 2 Information

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Relationship: _____

Occupation/Location: _____

Daytime Phone Number: _____

Mobile Phone Number: _____

Home Phone Number: _____

Email Address: _____

I give consent to receive text messages, emails, phone calls, and other digital communications from Della School of Coding and Design, its staff, and teachers.

I give consent for my contact information to be shared with other parents of Della School of Coding and Design, upon their request, or within the school directory.



Enrollment Application - Demographics

Residence and Custodial Information

Student resides with (Please circle all that apply):

Both Parents Mother Father Legal Guardian

If the student resides with a legal guardian, please specify their relationship: _____

Parents are (Please circle one):

Married Divorced Single-Parent Household

Please specify the custodial parent (if divorced):

Please detail any custody, visitation, or other legal orders that would limit access to this child. If there are none, please leave blank.

Please note that DSOCD is legally required to have a copy of any/all court orders pertaining to child custody and visitation. It is the parents' responsibility to inform the school immediately of any changes and provide updated records. Please include any court orders with your application for enrollment.



Enrollment Application - Demographics

Sibling Information

Does your child have any siblings who are or will be enrolled at DSOC? Yes / No

Name: _____ Grade: _____
Name: _____ Grade: _____
Name: _____ Grade: _____
Name: _____ Grade: _____
Name: _____ Grade: _____

Please note, an enrollment application must be filled out for each student enrolled with Della School of Coding and Design.

Previous School Information

School District of Residence: _____

Name of Previous School (other than preschool):

Address of Previous School:

Previous Grade Level: _____

Date of Withdrawal: _____

Reason for Withdrawal: _____



Enrollment Application - Demographics

Previous School Information

If your child was forced to withdraw from their previous school due to disciplinary measures, please provide us with more information on the events or discipline.

Enrollment Application - Academics & Accommodations

ETR/IEP Services

Does your child have an IEP for academics, speech, occupational, or physical therapy? Yes / No Parent/Guardian Initials: _____

If yes, please provide a copy of the ETR and IEP or fill out and sign a records release form so that we can request a copy from your child's previous school. Please note that your child will not receive any of these services until we receive a copy of his/her IEP.



Enrollment Application - Emergency Contact and School Release

Emergency Contact 1

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Relationship: _____

Daytime Phone Number: _____

Mobile Phone Number: _____

Home Phone Number: _____

Email Address: _____

I give consent for this person to pick my child up from school on my behalf.



Enrollment Application - Emergency Contact and School Release

Emergency Contact 2

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Relationship: _____

Daytime Phone Number: _____

Mobile Phone Number: _____

Home Phone Number: _____

Email Address: _____

I give consent for this person to pick my child up from school on my behalf.



Enrollment Application - Emergency Contact and School Release

Emergency Contact 3

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Relationship: _____

Daytime Phone Number: _____

Mobile Phone Number: _____

Home Phone Number: _____

Email Address: _____

I give consent for this person to pick my child up from school on my behalf.



Enrollment Application - Emergency Contact and School Release

Emergency Instructions

_____ I permit Della School of Coding and Design to secure emergency medical and/or surgical treatment for the above named minor child while in its care.

_____ I do not permit Della School of Coding and Design to secure emergency medical and/or surgical treatment for the above named minor child while in its care.

Child's Primary Care Physician: _____

Phone Number: _____

Preferred Hospital (in case of emergency):

Approved Release

All individuals removing a child from DSOCd location(s) are required to show identification and be on the approved release list. If your child will be picked up by someone outside of a parent/legal guardian, an approved release form must be filled out. These forms are available upon request at the front desk or at dsocd.org under "Family Resources." Individuals picking up a child must be 18 years of age or older.



Enrollment Application - Student Health Information

Health History

Important information obtained from this health history will be included on a confidential health condition list, if appropriate.

Full Name (Last, First M.I):

Home Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Child's Primary Care Physician: _____

Phone Number: _____

Physician Address:

Address Line 1: _____

Address Line 2: _____

City, State Zip Code: _____

Allergies (Please list all allergies and describe their reactions):



Enrollment Application - Student Health Information

Health History

Allergies (Please describe a course of treatment if the allergy is severe):

Health Conditions (Please list all health conditions):

Recent Hospitalizations (Please list dates and descriptions):



Enrollment Application - Student Health Information

Health History

Medication: If your child will require medication while at school, then all medication received by Della School of Coding and Design must be in the proper prescription container, with your child's current prescription date and dosage listed on the bottle.

Authorization for the Administration of Medicine must be on file (Please request from the front desk). Please list all medications, dosages, and hour(s) given below:

Parent Signature



Enrollment Application - Policies and Procedures

Information Verification

Due to the Missing Child Law (O.R.C. Sec. 3313.672), a copy of every student's birth certificate or other acceptable substitute must be on file. If documentation is not presented within 14 days of enrollment we are required by law to notify our local law enforcement agency. This is for the protection of your child; If this student is court placed into the care of a legal guardian, a copy of the court document must accompany this enrollment application and is good for only one school year or the terms of the court papers or if address changes, whichever comes first. If a divorce situation exists, certified full copy of the order or decree is required. Only court ordered custody documents are accepted. I certify, that the above stated information is correct and further understand that parts of it will be used to retrieve a State Wide Identification Number required by House Bill 282 for my student.

- I state that the information provided is true and correct. I am aware that Della School of Coding & Design may use any**
- legal means to verify my residence: I understand that falsification of information may be cause for immediate withdraw-calof my student from:Della School of Coding & Design and subject me to applicable criminal and civil penalties.**

Signature of Parent/Guardian

Date



Enrollment Application - Policies and Procedures

Family Educational Rights and Privacy Act

Family Educational Rights and Privacy Act of 1974, also known as FERPA, was established to protect the privacy of students' education records. Under the Act, Della School of Coding & Design cannot make public any student records without the consent of the parent(s)/guardian(s). It is the practice of Della School of Coding & Design, NOT to release any personal student information or Directory Information* to the public. Directory Information is intended solely for school use by the Della School of Coding & Design and Staff, and will not be distributed to any person(s) or organization(s).

Della School of Coding & Design request all parents)/guardian(s) to complete the below acknowledgement and consent form and should be returned to the Parent Liaison/Parent Liaison Assistant no later than September 31st of each school year. If the form is not completed and returned as requested, Della School of Coding & Design will assume that the parents)/guardian(s) does not wish to have their child's Directory Information released to the public.

*Directory Information is defined by FERPA as: The student's name, address and telephone number; student's participation in recognized activities and sports; weight and height of members of athletic teams; dates of attendance; degree and awards received; and most recent school attended.

I hereby request, Della School of Coding & Design and their representatives do make available, my student's Directory Information to any person(s) or organization(s), unless prior written consent is given.

Signature of Parent/Guardian

Date



Enrollment Application - Policies and Procedures

Media Release Form

Please initial the items you would like to allow your child to participate in and sign below.

News information release

There may be times during the school year when the school, news media or others wish to photograph or videotape your child at Della School of Coding & Design for use in print, video, internet or other communications methods.

_____ I give my permission to Della School of Coding & Design to provide information concerning school activities with my child to the general news media. I also give my permission for my child's name, portrait, picture or voice to be used for display or in promotional material in a variety of mediums for the school and/or in local media coverage of school events.

Communication release

There may be times during the school year when their school or others wish to identify your student by name and grade in newsletters, publications or yearbooks.

_____ I give my permission to Della School of Coding & Design School, to identify my child by name and grade in newsletters, publications or yearbooks.

Artwork release

There may, be times during the school year when the school sponsor, news media or others wish to use artwork created by your child at the academy for use in print, video, internet or other communications methods.

_____ I give my permission to Della School of Coding & Design to provide information concerning school activities with my child to the general-news media. I also give my permission for my child's name, portrait, picture or voice to be used (both now and in: future) for display or in promotional material in a variety of mediums for the school or its sponsor and/or in local media covers: age of school events.

_____ I agree to participate in these projects without financial remuneration and I understand that this releases Della School of Coding & Design from: any future claims as well as from any liability arising from the use of said items/materials.

_____ I acknowledge that subsequent the date my child ceases to be enrolled at Della School of Coding & Design, I may revoke the forgoing grant of permission by providing Della School of Coding & Design, with specific written notice of such revocation:

*Leave blank if you do not want your student to participate

Signature of Parent/Guardian

Date



Enrollment Application - Policies and Procedures

Internet Acceptable Use Policy

Prior to receiving authorization to use the Internet, students and their parents/guardians must sign the following permission and contract document.

I give permission for my child to participate in the use of the Internet, a worldwide telecommunications network. I realize that (s)he will be able to access major networks throughout the world using the Internet. I understand that this access is designed and intended for educational purposes only. I also understand that the student will receive instruction in the appropriate use of this resource.

I realize the Internet contains material that is inappropriate for school purposes. I support the school's position that students are responsible for not accessing such material. such unacceptable use of the network wil result in the suspension of all privileges. I will not hold Della School of Coding & Design accountable for unsuitable materials acquired by the student through Internet usage for school.

I acknowledge that I have read the Internet Acceptable Use Policy.

Signature of Parent/Guardian

Date



Enrollment Application - Policies and Procedures

Cell Phone Policy

Students are not permitted to carry pagers and/or cellular phones at the Della School of Coding & Design. Such devices are not required in the educational environment. If students bring these items to school, a Della School of Coding & Design staff member will confiscate them. The staff member will turn the item into the office. The pager and/or cell phone will not be released to the student. To retrieve the device, a parent, guardian, or caregiver must come to the school. The parent, guardian, or caregiver must also describe the item. Upon a description match, the device will be released. We do understand that parents/guardian(s) give their children pagers and/or cellular devices for certain occasions. Devices are not to be used at any point of the day, unless it is an emergency, with permission. Della School of Coding & Design is not responsible if any devices are misplaced, lost, or stolen. I acknowledge that I have read the Cell Phone Policy.

Signature of Parent/Guardian

Date