



# PARENT/GUARDIAN QUESTIONNAIRE FOR NEW STUDENTS

Student Legal Name \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
 Previous School, District, State: \_\_\_\_\_  
 Attended a Central Kitsap School previously?  Yes Year: \_\_\_\_\_  No

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Please complete the information below

1. Support Services	Has your student received any of these services?			Do you feel there is a need for these support		
	Yes	No	Unsure	Yes	No	Unsure
Counseling						
ELD (English Language Development)						
Special Education/Resource Room						
- Current IEP						
Speech Services						
504 Plan						
Highly Capable						

**High School Only**  
 Has your student tested for End of Course Exams/State Exit Exam/Smarter Balanced Assessment?  Yes  No  
 If yes what school? \_\_\_\_\_ State \_\_\_\_\_ Grade \_\_\_\_\_ Date Tested \_\_\_\_\_

**2. Medical:** Does your child have any medical problems that we should be aware of?  Yes  No  
 If yes, please explain and list current medications: \_\_\_\_\_  
*Please note: Additional information and documentation are required before medications can be accepted or administered.*

**3. School Academic Performance:** At the previous school my child was:  
 Reading  experiencing difficulty  average  above average  receiving extra help  
 Math  experiencing difficulty  average  above average  receiving extra help  
 At the previous school my child needed extra attention for:  work completion  behavior  
 Has your child ever repeated a grade in school?  Yes  No If yes, what grade \_\_\_\_\_

**4. Discipline:** Does your child have past, current, or pending discipline action?  Yes  No  
 If yes please explain: \_\_\_\_\_  
 Name of school: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Is there any history with law enforcement or is student currently on probation, or monitored by Juvenile Justice?  Yes  No  
 If yes please explain: \_\_\_\_\_  
 List any violent behavior: \_\_\_\_\_  
 Is your student required to attend school under the BECCA Bill?  Yes  No

**5. Transportation:** How will your child be getting to and from school?  walking  bus  car

**6. Fines:** Any unpaid fines or fees imposed by previous schools? (Districts may withhold records)  Yes  No

**7. Confidential:** Is the student living with his or her parent/guardian?  Yes  No  
 If no, please explain: \_\_\_\_\_

Complete only if it shows (1) your child's current living situation; or (2) your living situation if you are a youth not living with a parent or guardian. Check the appropriate box:  
 in a motel / hotel  with relatives or others due to lack of adequate housing  in a shelter  
 temporary foster care placement  at a park, in a car, abandoned building, camp ground, or other similar situation  
 other: \_\_\_\_\_

**8. Military Family:** Please check the statement below that most accurately describes the military membership of the parents/guardians:  
 No parent or guardian currently serving.  R - Parent or guardian who is a current member of reserves of the U.S. Armed Forces.  
 A - Parent or guardian who is a current member of active duty U.S. Armed Forces.  G - Parent or guardian who is a current member of the Washington National Guard.  
 M - More than one parent or guardian who qualifies for A, R, or G above.  Decline to state.