ROP ENROLLMENT APPLICATION

For Students 16 and above enrolled in high school
Students under 16 complete an Underage Enrollment Application)
All information is kept confidential

Class will be taught in: ☐Summer ☐Fall ☐Spring ☐Year-Round Year:

ROP COURSE INFORMATION

Official Course Title (from ROP schedule) _____ Section Code # _____

Teacher _____ Class Location _____ Start Date _____ Start Time _____

STUDENT INFORMATION

Last Name _____ First Name _____ Middle Initial _____ Date of Birth _____

Street Address _____ City _____ Zip _____ ( ) Home Phone _____

Social Security # _____ Student ID # (optional) _____ Name of your own school _____

You MUST fill in the requested information or check one box in each section

Gender	Enter your AGE at the time you will start this class	Enter your GRADE at the time you will start this class

Check ALL of the items that apply to you (all information is confidential)

☐ Limited English ☐ Migrant ☐ Family receives public assistance ☐ Foster Youth
☐ Have active IEP ☐ Have active 504 plan ☐ Family eligible for free/reduced lunch ☐ None Apply

Please mark the ETHNICITY with which the student most closely identifies:

☐Hispanic or Latino *(A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin.)*
☐Not Hispanic or Latino

***The above question is about ETHNICITY, not race. No matter what you selected above,* check up to five races that best describe you:**

☐Caucasian or White ☐African American or Black ☐Asian ☐ Asian Indian
☐Native Hawaiian or other Pacific Islander ☐American Indian or Alaskan Native ☐ Other _____

EMERGENCY INFORMATION:

Emergency Contact Name _____ Relationship _____ ( ) Emergency Phone _____

SIGNATURES:

Student _____ Parent or Guardian Date _____ School Representative Date _____
(Only required if student leaves campus) (Required) (Required)

SCOE Administrator Date _____

Sacramento County ROP Career Center • P.O. Box 269003 • Sacramento, CA 95826-9003 • (916) 228-2721
Training opportunities open to all regardless of race, color, ancestry, religion, age, gender or disability.
If you feel you have been discriminated against, call the Title IX Coordinator at (916) 228-2550.
COPY AND DISTRIBUTE EACH TO: ROP Attendance, Teacher, School District, Student **(Rev. 6/09)**