

School District 25 Admissions Schedule

Pre Admission

Student's Name: _____	Placement Address: _____
Date of Birth: _____	School Boundary: _____
Academic Grade: _____	Enrollment Completion Date: _____
Previous School: _____	City/State: _____ School District: _____

Required Intake Documents checklist:

Most recent <u>IEP</u>	Most recent <u>School Eligibility Report</u>	Current <u>Immunization Record</u>	Copy of <u>Birth Certificate</u> :	School Nursing Evaluation:	504 Education Plan
Document Date: _____	_____	_____	_____	_____	_____
Other School Documents: _____					

Admission

	<u>Date Scheduled</u>	<u>Date completed</u>
<u>Meeting with School District Special Services Administrator:</u>		
<u>Complete and submit Transportation Services application:</u>		
<u>Complete and submit Food Services application</u>		
<u>Obtain acknowledgment from school for admission date:</u>		

