

ROP ENROLLMENT APPLICATION

For Students Enrolled in High School



All information is kept confidential

Class will be taught in: Summer Fall Spring Year-Round Year: 2008

ROP COURSE INFORMATION

Web Author Training (Actually Computer Graphics 2) NP0903
 Official Course Title (from ROP schedule) Section Code #

Dawn Pedersen Natomas High School K202 8/11/08 7:55 AM
 Teacher Class Location Start Date Start Time

STUDENT INFORMATION

PEDERSEN DAWN R 03/22/07
 Last Name First Name Middle Initial Date of Birth

123 SUBURBAN ST. SACRAMENTO CA (916) 555-1234
 Street Address City Zip Home Phone

555-22-3333 _____ Natomas High School
 Social Security # Student ID # (optional) Name of your own school

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

F Gender Select Gender Enter your AGE at the time you will start this class 41 Select Age Enter your GRADE at the time you will start this class 12 Select Grade

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

Select one of the following which best describes your ethnicity Select Ethnicity CAUCASIAN

EMERGENCY INFORMATION:

ALAN PEDERSEN FATHER (916) 555-4321
 Emergency Contact Name Relationship Emergency Phone

UNDER-AGE STUDENT AUTHORIZATION: If the student is under the age of 16 and not in the 11th or 12th grade when they will attend ROP, the School Principal must provide prior authorization to enroll that student in an ROP course. The referring school official must write a statement below or attach a statement explaining why the student's educational goals cannot be met without ROP enrollment.

There is a high probability that this student will leave school prior to graduation, therefore, he/she has been enrolled in a career path sequence.
 This student has an active IEP that includes participation in ROP.
 Other: _____

 Principal's or Designee's Signature Date County ROP Administrator's Signature Date

SIGNATURES:

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

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.