

Capistrano Unified School District
New to CUSD- Additional Student Data

If your student is new to CUSD this year, please complete this form and return it to school as soon as possible along with any applicable forms in the packet.

This supporting data is needed for our California State Student Information System as well as for Federal Programs and Funding.

Student Name: _____ Student School: _____

Student Place of birth:

City _____ State _____ Country _____

US Entry Date If born outside of the United States (MM/DD/YYYY): _____

Preschool Information (If applicable)

Please list date student first began attending **Preschool** (Age 3 and Up) _____

Prior School Information (If applicable)

*Please list date student first began attending a **US School** (Grade K-12):* _____

School Name/District Name _____ City/State _____

*Please list date student first began attending a **California School** (Grade K-12):* _____

School Name/District Name _____ City/State _____