**ORGANIZATION OF FAMILY FILES**

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| **LEFT SIDE OF FAMILY FILE** | **RIGHT SIDE OF FAMILY FILE** |
| **Signature Documents**From***Early Childhood Education Procedures, Guidelines & Information for Parents**** **1. Personal Rights (LIC 613A)**
* **2. Parent’s Rights (LIC 995)**
* **3. Receipt of Annual Notification of Information**

 **for Parents*** **4. Information Release Form**
* **5. Annual Pesticide Use Notification**
* **6. Ethnicity/Race Identification of Students**
* **7. Acknowledgement of Receipt of Licensing**

 **Reports (LIC 9224) if cited.*** **8. Publicity Authorization and Release**
* **9. Causes for Termination**
* **10. Student Residency Questionnaire** (Kept in separate binder “Homeless Education”)
* **11. Migrant Family Questionnaire** (Sent to the Migrant Education Office – 29th Floor LAUSD Beaudry Bldg.)

Family ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of the Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ Entry Date: \_\_\_\_\_\_\_\_\_\_\_\_Please put a checkmark (✓) in the box/circle to indicate that the document is complete.Family File Checked by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. OM or SAA’s Initial & Date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Principal’s Initial & Date | **Initial Enrollment Documents*** **1.** **CD9600 pages 1 & 2** with proper box checked, date & both parent & principal

signatures* **2.** **CD7617 Notice of Action (NOA)** with parent initial or receipt of certified mail

and principal signature* **3.** **Income & Need Information** (as per application):
* Protective Services (83.66)
* **€** A full month’s consecutive pay stubs & other documents to verify employment income

**€** Employment Verification (83.56) **€** Self-Certification of Income if paid cash * Seeking Employment (83.14)
* **€** Training Verification (CD 9605)

**€** Progress report/s (99.1)**€** Study time written statement* Statement of Incapacity (9606) & State Disability Insurance (SDI) or Unemployment Benefits if received
* Verification of Temporary Assistance for Needy Families (TANF) or other cash assistance
* Formal parent request for any change (Signature & Date)
* **4.** **Monthly Income Worksheet** (print from EESIS)
* **5.**  **Verification of California Residence**
* **6.** **Birth Certificates** or other documents for enrolled children & all siblings counted

 in family size* **7.** **Home Language Survey** (83.76)
* **8.**  **Emergency Information**
* **9. Current Health Card, and Physician’s Report (LIC 701)**
* **10.** **CA School Immunization Record** (#9 & #10 Can be kept at Nurse’s station)
* **11.** **Center Eligibility List Form** (If there is a waiting list)

**Recertification:** 1€, 2€, 3€, 4€, 5€ & 8€**Eligibility/Need Change:** 3€, 4€ & 5€ **Termination:** 3€ ***\*Always scan and upload documents #1-7 to EESIS*** |

Rev. 05/25/2018