

Centennial BOCES High School

Student Agreement/Registration Form

PLEASE USE LEGAL NAME

Last Name: _____

First Name: _____

Middle Name: _____

Date of Birth: ___/___/___ (mm/dd/yy) Age: ___ Gender: Male or Female

Ethnicity: Hispanic or Latino Non-Hispanic or Latino

Race: American Indian/Alaska Native Black/African American
 Native Hawaiian/Pacific Islander White Asian

Country of Birth: _____ Number of Years in US: _____

Number of Years in Colorado Schools: _____

Student Cell: _____ Home Phone: _____

Student Address: _____

City: _____ County: _____ State: ___ Zip: _____

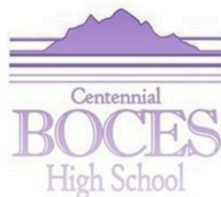
Student Email: _____

Home School District: _____

Referring Counselor: _____ Referring School: _____

Most Recent School Attended: _____

Why didn't your last school(s) work for you?



Father's Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Cell: _____ Home: _____

Work: _____ Email: _____

Mother's Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Cell: _____ Home: _____

Work: _____ Email: _____

This is a contractual agreement between CBOCES High School and the registered student: _____

Important Points for CBHS Enrollment:

- *To earn a diploma, you must be attending regularly and making progress.*
- *If we do not hear from you for a two week period, you will be contacted about your intentions to prioritize and participate in Centennial BOCES High School.*
- *You are expected to participate and show progress each week. You can do this by: studying for tests, taking/retaking tests, project research, etc.*

Access to Records by Parent(s):

A parent/guardian and any student 18 years old or older, has the right to inspect and review the student's educational records. If a student is 18 years of age or older, the parent/guardian may not inspect or review the student records without written permission from the student. However, if an eligible student is dependent for income tax purposes, parents/guardians are entitled along with the student to access student educational records.

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| ● <i>Have you received special education services or 504 services?</i> | Yes | No |
| ● <i>Have you or are currently receiving ELL services?</i> | Yes | No |
| ● <i>Do we have permission to communicate with your parents?</i> | Yes | No |
| ● <i>Have you read and agreed to the requirements of CBHS?</i> | Yes | No |
| ● <i>Have you paid your \$75 student registration fee?</i> | Yes | No |

By signing this contract you agree to follow the rules of CBHS as stated in the Student Code of Conduct Police as outlined in the CBHS Handbook.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ *Date:* _____