



**Social Services Program
School Enrollment Verification Form**

1. Student Information

School Seal/Stamp

- Full Name of Student: _____
- Date of Birth: _____
- Grade Level: _____

School Official Use Only

- School Name: _____
 - Verified By (Name): _____
 - Verified By (Signature): _____
 - Date of Verification: _____
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2. Student Information

School Seal/Stamp

- Full Name of Student: _____
- Date of Birth: _____
- Grade Level: _____

School Official Use Only

- School Name: _____
 - Verified By (Name): _____
 - Verified By (Signature): _____
 - Date of Verification: _____
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3. Student Information

School Seal/Stamp

- Full Name of Student: _____
- Date of Birth: _____
- Grade Level: _____

School Official Use Only

- School Name: _____
 - Verified By (Name): _____
 - Verified By (Signature): _____
 - Date of Verification: _____
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4. Student Information

School Seal/Stamp

- Full Name of Student: _____
- Date of Birth: _____
- Grade Level: _____

School Official Use Only

- School Name: _____
 - Verified By (Name): _____
 - Verified By (Signature): _____
 - Date of Verification: _____
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5. Student Information

School Seal/Stamp

- Full Name of Student: _____
- Date of Birth: _____
- Grade Level: _____

School Official Use Only

- School Name: _____
 - Verified By (Name): _____
 - Verified By (Signature): _____
 - Date of Verification: _____
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Parent/Guardian Information

- Full Name of Parent/Guardian: _____
- Relationship to Student(s): _____
- Phone Number: _____
- Address: _____

Parent/Guardian Consent

I, the undersigned, hereby confirm that the information provided above is accurate and true to the best of my knowledge. I also give permission for the school to verify the provided details.

Parent/Guardian Signature: _____

Date: _____