

## **The da Vinci Institute Enrollment Procedures**

In order to be considered for enrollment, and/or put on a waiting list to attend da Vinci, the following must be submitted in completion:

- 1) Completed enrollment and emergency form (attached) with social security number.
- 2) High School Transcript (or last report card if entering ninth grade).
- 3) Attendance and Discipline report from previous school.
- 4) Birth Certificate.
- 5) Current IEP (if certified for special needs).

All forms can be turned in or mailed to: da Vinci High School, 2255 Emmons Rd., Jackson, MI 49201; or faxed to (517)796-0320; or emailed to [Sandy.Maxson@davinciinstitute.org](mailto:Sandy.Maxson@davinciinstitute.org).

Other documents that will be required:

- 6) Immunization records.
- 7) Health information form.
- 8) Free and Reduced Lunch form, with salary stub or W2 for proof of income.
- 9) Technology Use Agreement.

**Da Vinci Institute**  
**STUDENT ENROLLMENT & EMERGENCY FORM**

Date \_\_\_\_\_

**STUDENT INFORMATION**

**LEGAL NAME** (first) \_\_\_\_\_ (middle) \_\_\_\_\_ (last) \_\_\_\_\_

Address (including PO Box) \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (517) \_\_\_\_\_ County of Residence \_\_\_\_\_ District of Residence \_\_\_\_\_ Gender (M/F) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birth Date \_\_\_\_\_ City & State of Birth \_\_\_\_\_

Last School Attended \_\_\_\_\_ Grade Last Completed \_\_\_\_\_ Special Education Services? Yes No

Suspensions in the last year? Yes No Expulsions? Yes No If yes, date and length of expulsion \_\_\_\_\_

**Ethnicity:** Is the student Hispanic/Latino? No Yes **-Hispanic/Latino** (Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race).

**Race:** \_\_\_\_\_ **Asian** (Any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam)

\_\_\_\_\_ **Black or African American** (Any of the black racial groups of Africa),

\_\_\_\_\_ **American Indian or Alaska Native** (Any of the original peoples of North and South America, including Central America),

\_\_\_\_\_ **White** (Any of the original peoples of Europe, the Middle East or North Africa),

\_\_\_\_\_ **Native Hawaiian or Other Pacific Islander** (Any of the original people of Hawaii, Guam, Samoa or other Pacific Islands).

**PARENT/STEP-PARENT/LEGAL GUARDIAN INFORMATION** (List in emergency contact order.)

Language spoken in the home \_\_\_\_\_

**(#1) Name** (first) \_\_\_\_\_ (last) \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Does student live with? Yes/No Send information to this person? Yes/No Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ E-mail Address \_\_\_\_\_

**(#2) Name** (first) \_\_\_\_\_ (last) \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Does student live with? Yes/No Send information to this person? Yes/No Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ E-mail Address \_\_\_\_\_

**(#3) Name** (first) \_\_\_\_\_ (last) \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Does student live with? Yes/No Send information to this person? Yes/No Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ E-mail Address \_\_\_\_\_

**ADDITIONAL EMERGENCY CONTACTS** (*other than those from above*)

Contact (first and last name) \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Contact (first and last name) \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**STUDENT PASSENGER - DRIVER** (Circle All That Apply) Your Student:

DOES DOES NOT Have permission to ride with another student driver to school sponsored activities.

DOES DOES NOT Have permission to drive a private vehicle to school.

MAKE, MODEL, YEAR OF VEHICLE \_\_\_\_\_ LICENSE # \_\_\_\_\_

Parent/Guardian Initials \_\_\_\_\_

**FIELD TRIP PERMISSION**

I understand that da Vinci Institute will sponsor a variety of field trips throughout Jackson and the surrounding area. School bus or adult driven vehicles will provide transportation. I understand that my automobile insurance is the primary carrier under Michigan No-Fault Insurance, and I will not hold the da Vinci Institute, Board of Directors or any employees liable in case of accident, injury or other mishaps. All trips will be chaperoned by school employees. I give permission for my child to take part in school sponsored activities. This approval is considered to be permanent until further notice.

Parent/Guardian Initials \_\_\_\_\_

**FAMILY INVOLVEMENT**

In order to help families become more involved in their child's education, The da Vinci Institute is adopting a policy that requires da Vinci families to commit to at least **40 hours** of school participation and/or service per year. Single parent families may commit to at least 20 hours of school participation per year. Participation by any member of the student's immediate or extended family will be counted toward the required hours. I agree that my family will complete the required hours of participation at The da Vinci Institute during the current school year. I understand that it is my responsibility to sign in at all events and/or submit a school provided form for all participation hours to be recorded and completed.

Parent/Guardian Initials \_\_\_\_\_

**PHOTO RELEASE**

I give permission for photos and/or original work to be used for display and marketing purposes on school mailings, brochures, or the school website.

Parent/Guardian Initials \_\_\_\_\_

\_\_\_\_\_  
(Student Signature)  
(Date)

\_\_\_\_\_  
(Parent/Guardian Signature)

Can be turned in or mailed to 2255 Emmons Rd., Jackson, MI 49201; faxed to (517)796-0320; or emailed to High School Principal, [Sandy.Maxson@davinciinstitute.org](mailto:Sandy.Maxson@davinciinstitute.org).