



Department of School Support
7905 S. Redwood Road, West Jordan, UT 84088
(801) 567-8088

Registration

Entry Date _____
 Exit Date _____
 Birth Date _____

Student Name _____ SSID # _____ JSD ID # _____ M/F Grade _____
 Street _____ City _____ Zip _____
 Parent/Guardian _____ Cell Phone # _____ Student Cell # _____
 Parent Email _____ Student Email _____
 Internet Access Yes No Laptop Yes No Desktop Yes No Desktop Location _____
 Boundary School _____ Projected length of H & H services _____
 Reason for referral _____

- Short Term Illness (student requires H & H services between **10 to 45 consecutive school days**)
- Long Term Illness (student or requires H&H services for **46 consecutive school days or longer**)
- At Risk (District Exclusion – weapons/violent acts)
- High Risk (District Exclusion – drugs/alcohol)
- Youth Services (Day Treatment Program)
- Other _____

Home & Hospital Teacher assigned: _____

Date Civics Test Passed: _____

SPECIAL CONSIDERATIONS

ELL Yes No

WIDA Level _____

IEP Yes No

If student has an IEP, please contact
 Brian King 801-567-8208

504 Yes No

Accommodations Needed

STUDENT SCHEDULE & GRADE INFORMATION										
Schedule Changes	Course Description		Content Units (A,B,C,D)				Quarter Grades			
	Number	Name	Q1	Q2	Q3	Q4	1 st	2 nd	3 rd	4 th

Notes: _____
