

Zephyrhills High School Student Registration

Welcome to Zephyrhills High School – Home of the Bulldogs

In order to complete the registration process, all documents in this folder must be completed.

All items required to complete registration must accompany the paperwork in this folder.

This will include but not limited to: Driver's License, 3 Proofs of Residency (deed, rental agreement, utilities bill),

Birth Certificate (if student has never been a Pasco County student before), transcripts from previous school (coming from outside Pasco County), Custody Papers (if this applies), any Legal Documentation (if this applies to the student), Copy of 504 or IEP (Must have a copy of the IEP to be enrolled) and If you are currently residing with another family, an Affidavit of Residency will be required.

Student that has never been in a Florida school, is required to have: Florida Physical, Florida Shot Record Card

If there are custody issues, all supporting court and/or legal documents must be available at time of registration.

Student's Full Legal Name (as on Birth Certificate):

First _____ Middle _____ Last _____ Suffix _____

Gender: _____ Date of Birth: _____ Current Grade: _____ What year did you enter 9th Grade? _____

Has this student ever attended a Pasco County School? If yes, what was your student # _____

Physical Address:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Contact (Custodial Parent): _____ Phone Number: _____

Primary Contact Email Address: _____

Is the student a child of a military family or will be a child of a military family at any time during this school year? _____

Are there any custody issues or legal proceedings involving this student? _____

(copy of documentation must accompany the enrollment paperwork)

Student Information:

Birth Country: _____ First Language: _____ Race: _____

What was the last day of attendance at your previous school? _____

Were you on a block schedule? _____

Was the last school you attended an alternative school? _____ Name of school: _____

Name of the last school you attended? _____

Are you behind in credits? _____ Do you have below a 2.0 GPA? _____

Does the student currently have a 504 Plan? _____ If yes, do you have a copy of the 504 with you? _____

Does the student have a current IEP? _____ If yes, do you have a copy of the IEP with you? _____

Did the student receive ESOL Services? _____

*By signing below, you understand providing accurate and pertinent educational information is necessary in order to produce an appropriate schedule, course selection, and grad plan year for the student.

Parent/Guardian Signature: _____ Date: _____