



M-DCPS Student ID information Packet 2020-2021

Please fill out this form and submit the additional requested information below.

1. Last, First, and Middle Name of child: _____
2. Date of Birth: _____
3. Grade Level **(Current)**: _____
4. Date Entered Kindergarten for the 1st Time (Public or Private school) School: _____
5. Gender: _____ Ethnicity: _____
6. Current School Child Attends: _____
7. Parents Name & Relationship to the Student: _____
8. Residential Address: _____
9. Phone: _____
10. Scanned Copy of the Birth Certificate: **ATTACHED WITH E-MAIL** _____
11. Scanned FPL bill or Lease Agreement: **ATTACHED WITH E-MAIL** _____
12. Scanned Copy of Parent's Driver's License: **ATTACHED WITH E-MAIL** _____
13. Email Address: _____

If you have any questions be please contact the M-DCPS IDEA Private Schools Obligations Office

(305) 274-8889