



M-DCPS Student ID information Packet

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: _____
4. Date Entered School: _____
5. Gender: _____
6. Ethnicity: _____
7. Parents Name & Relationship to the Student: _____
8. Residential Address: _____
9. Phone: _____
10. Scanned Copy of the Birth Certificate: _____
11. Scanned FPL bill or Lease Agreement: _____
12. Scanned Copy of Parent's Driver's License: _____
13. Email Address: _____

Any questions be addressed by contacting Jorge Mendez, LEA Representative, at M-DCPS IDEA Private Schools Obligations Office, or (305) 274-8889.