

Los Angeles Unified School District
 Planning Assessment and Research Division
 WELLIGENT SUPPORT SECTION (213)241-4174

REQUEST TO ADD A NON-LAUSD STUDENT RECORD TO WELLIGENT

Fax to: IEP Support Section (213) 241-8455		* = REQUIRED TO PROCESS
* From:	* Title:	*Emp #:
*School/Office:	* Phone #:	* Fax #:
Comments/Reason for request:		

STUDENT INFORMATION									
SCHOOL ASSIGNMENT									
FIRST NAME (Verify Birth Cert.)				MIDDLE INITIAL			LAST NAME (Verify Birth Cert.)		
DATE OF BIRTH				STUDENT ID (LAUSD SIS#)					
ADDRESS							APT #		
CITY				ZIP			HOME PHONE		
GENDER	<input type="checkbox"/> M	<input type="checkbox"/> F	ETHNICITY				PRIMARY LANGUAGE		
GRADE							TRACK (A if Learn Calendar)		
PARENT /CONTACT INFORMATION									
Parent/Guardian's First Name					Last Name				
Relationship to student					Address same as Student?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Address (If not same as student)							Apt #		
City					Zip				
Home Phone				Cell Phone			Work Phone		
COMPLETE THIS SECTION IF STUDENTA HAS A SPECIAL ED HISTORY									
Initial IEP date (best guess of when it occurred)									
Current IEP Meeting Date					Type of IEP				
Last 3yr/Re-evaluation IEP Meeting Date									
Primary Disability									
NOTES:									