

Pre-Enrollment: 2024-2025

In order to participate in Denver Public Schools online open enrollment,

families must pre-enroll their student and create a Parent Portal account if the student is new to DPS.

HOW TO PRE-ENROLL IN DPS

1.	New students to DPS					
	☐ Complete the attached Pre-Enrollment form.					
	☐ Collect your required enrollment documents (see Documentation Checklist below).					
	☐ Submit Pre-Enrollment form, with required documents, to any DPS school or Choice Enrollment Center					
	☐ Once your student has been pre-enrolled, you will receive a DPS student ID by email.					
2.	Create a Parent Portal account					
	□Visit https://myportal.dpsk12.org/					
	□Click "Create an Account".					

3. Participate in Round 1 SchoolChoice from Thur., Jan. 11, 10 a.m. thru Mon., Feb. 12 2024, 4 p.m.

□Visit SchoolChoice.dpsk12.org

□Click "Apply" to participate in Round 1 of SchoolChoice.

□Sign in using your Parent Portal credentials.

□Add a new student application.

□ Check for email/text confirmation after submitting your application.

If your student is currently in another district but was enrolled in DPS in previous years, you will need to pre-enroll your student to participate in the Online SchoolChoice Process.

DOCUMENTATION CHECKLIST

Submit the documents indicated for your student's grade level to process your SchoolChoice form.

	REQUIRED DOCUMENTS							
Grade Level In 2024-25	Proof of Age Birth certificate; Baptismal record; Hospital record with official signature; Passport; or I-94	Proof of Address Current utility bill with service address; Valid rental/lease agreement; Warranty deed; Current mortgage statement; Property tax notice; or Signed contract stating your name, closing date and property address	2023 W-2; or letter from employer on company letterhead that states hours					
ECE-3 must be 3 by Oct. 1, 2024	✓	✓	Household income and household size must be stated in SchoolChoice application.					
ECE-4 must be 4 by Oct. 1, 2024	V		✓					
Kindergarten must be 5 by Oct. 1, 2024	Required for students NEW and returning DPS.	Required for students NEW and returning DPS.	Not required.					
Grades 1 st - 12 th	Required for students NEW and returning DPS.	Required for students NEW and returning DPS.	Not required.					
All grades	grades Immunization records will be required for all grades at the time of registration.							



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1. STUDENT INFORMATION											
Student's Name										Mala	
Last F	irst			Middle N	lame	□N	o Middle N	lame		IMale IFemale	
Student's Primary Home Address (this address impacts student placement):											
Street		Apt#		City		State			Zip		
Birthdate: (mm/dd/yyyy)		rrent A	Age:	City			ent Grade	e:	<u> </u>		
ETHNICITY/RACE (new students only) This information is required by federal law. Failure to answer questions will result in use of prior racial/ethnic data or an observer identifying for you.											
Is your student Hispanic or Latino? □Yes □No											
Race (select all that apply): ☐American Indian or Alaskan Native ☐Asian ☐Black or African American ☐Native Hawaiian or Pacific Islander ☐White PREVIOUS SCHOOL INFORMATION											
Where is student currently enrolled? School Name: Grade: City, State:											
Has the student previously attended a DPS school?							-,,				
DPS School:	Grade	e:	Sch	nool Year: _							
2. GRADE IN 2024-25 Please select	t the grade v	ou are	e applyind	a for.							
	12 nd □3 rd	4 ^{ti}		6 th	□7 th	□8 th	9 th	□10 th	□11 th	□12 th	
3. PARENT/ GUARDIAN CONT	ACT INF	ORI	ЛАТТО	N							
First Parent/Guardian's Name	1101 1111		tionship to						Legal Gu	ardian?	
_			•						•	□Yes	
In case of an emergency, contact the person above ☐First Primary Contact Phone Number:	t U Second	ПНог	me □Cell □	Nork						□No	
•				IVVOIR							
*Txt (SMS): *Message and data rates may apply based on your wireles	s carrier's rate nl	E-ma		rt message	as a conta	act prefere	ence volu	consent to	receiving		
recorded automated calls and/or text messages on the mo				it message	as a conc	acc prefere	ince, you	consene to	receiving		
Parent/Guardian's home address, if different than s	student's home	addre	ss								
Street		Apt #	City					State	Zip		
Second Parent/Guardian's Name								Legal Gu			
In case of an emergency, contact the person above □First	Second									□Yes □No	
Primary Contact Phone Number:		□Hor	me 🗆 Cell 🗆	Work							
*Txt (SMS):		E-ma	ail:								
*Message and data rates may apply based on your wireles		an. By	selecting tex	kt message	as a conta	act prefere	nce, you	consent to	receiving		
recorded automated calls and/or text messages on the mobile phone number you provided.											
Parent/Guardian's home address, if different than s	student's home	addre	SS								
Street		Apt #	City	,				State	Zip		
4. SIBLINGS Only list siblings who reside	at the same	addre	ess and at	ttend DPS	<i>S.</i>						
Sibling Name (Last, First MI):	Student ID #:		Gender:	Grade:	School N	Name:					
5. PARENT SIGNATURE Parent/legal guardian signature is required to process this Pre-Enrollment form.											
By signing this Pre-Enrollment form, I affirm that all information submitted on this form is accurate to the best of my knowledge. I understand that DPS reserves the right to attempt to verify information and documents submitted.											
Parent/Guardian Name (please print):											
Parent/Guardian Signature: Date:											