

NEW STUDENT REGISTRATION INFORMATION

Central
 Harper
 McKenzie
 Romona – K 1 2 3 4
 Highcrest - 5 6
 WJHS- 7 8

StudentName: _____ M
Last
First
Middle F

Nickname: _____ **Date of Birth:** _____
M
D
Y

Ethnicity: (Select one) No, not Hispanic/Latino Yes, Hispanic/Latino

Race: (Select one or more, regardless of ethnicity status selected above)
 American Indian or Alaska Native,
 Asian,
 Black or African American,
 Native Hawaiian or Other Pacific Islander,
 White

Has your child ever received special services? No Yes Please circle the services your child received: IEP, 504, RESPONSE TO INTERVENTION, READING SUPPORT, PRIVATE OT / PT / SPEECH.

Last School/District Attended: _____

Family E-Mail Address: _____

Home Address: _____
Street Address
City/Zip
Home Telephone

2nd Address: _____
(If parents have different residences)
Street Address
City/Zip
Home Telephone

Family Data: Mother Guardian Other
_____ _____
Cell Phone Work Phone

Name: _____

Family Data: Father Guardian Other
_____ _____
Cell Phone Work Phone

Name: _____

Student resides with: Both Parents Father Mother Guardian Other _____
Custody of student is with: Both Parents Father Mother Guardian Other _____

CHILDREN IN THE FAMILY:

<u>Name</u>	<u>Date of Birth</u>	<u>Name</u>	<u>Date of Birth</u>