

NEW STUDENT REGISTRATION INFORMATION

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

StudentName: _____
Last
First
Middle

M
 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>

--	--