

Student Registration Form

	For Office Use Only R
School Name:	Teacher:
Student#:	Effective Date:
Transportation:	\square W \square R \square E \square OE Bus#:

Student Legal LAST Name		St	Student Legal FIRST			T Name Student			Full MIDDLE Name			D.O.B (mm/dd/yyyy)	
Has this child ever attended school in our district?			ľ	Military Connected Youth			Gend	der G	Grade Enrolling in			udent Cell Phone	
□ No				☐ Yes				□м	1				
	If yes, When				□No			□F					
Does th	ne student re	ceive any other serv	ces? [□ Speci	al Ed	d □ ESL/ELD			04 Plan ☐ Title				☐ Gifted
Please I	Explain:			T		-							
Has your child received bus safety training this year?					□ Yes [□No							
STUDENT'S PRIMARY Household – All information and mailings will be sent to the Primary Household													
Note: Please notify the school office and provide legal documentation if there is a custodial issue.													
Student lives with (check ALL that apply): Address											ı		
☐ Mo	ther	☐ Step-Parent	City							State		Zip	
☐ Fath	her	☐ Foster Family		Hom	e Phon	е							
☐ Rela	ative/Other	(Please List):											
Primary Household Parent/Guardian 1 Primary Household Parent/Guardian 2													
Name (Last, First, N	II)				Name (Last, First, MI)							
□ M	Email						Email	Email					
	Cell Phone				□м	Cell Pho	Cell Phone						
шг	Work Phor					□F	Work Phone						
Please list all Additional members of the Primary Household (adults and children)													
Full Legal Name (Last, First, Middle)							der or F)		Relationship to Student		ade	School (If Attending)	
STUDENT'S SECONDARY Household													
Note: Request that school information NOT be sent to this household, legal documentation is required.													
		· ·											
Studen	t lives with (check ALL that apply	r): Add	ress									
Studen		· ·	r): Add City	ress						State		Zip	
	ther	check ALL that apply	·		e Phon	e				State		Zip	
☐ Mo	ther	check ALL that apply	·		e Phon	e				State		Zip	
☐ Mo	ther her ative/Other	check ALL that apply Step-Parent Foster Family	City	Hom	e Phon	e	Secon	dary I	louseh	State	ent/G		ian 2
☐ Mo	ther her ative/Other	Check ALL that apply Step-Parent Foster Family (Please List): Household Paren	City	Hom	e Phon		Secon Last, First	-	louseh		ent/G		ian 2
☐ Mo	ther her ative/Other Secondary	Check ALL that apply Step-Parent Foster Family (Please List): Household Paren	City	Hom	e Phon	Name (-	louseh		ent/G		ian 2
☐ Mo	ther her ative/Other Secondary Last, First, M	Check ALL that apply Step-Parent Foster Family (Please List): Household Paren	City	Hom	e Phon		Last, First	., MI)	louseh		ent/G		ian 2

Please list all Additi	onal me	mbers o	f the Secondary	House	hold (adults	and chil	dren)			
Full Legal Name (Last, First, Middle)			D.O.B (mm/dd/yyyy)	Gende (M or		elatior Stud	nship to lent	Grade	School (If Attending)		
				_							
	Previous		Enrollments (lis	t the n	_		_	_			
*Name of School			City and State	1.6	Grad			hone or I	ax (if known)		
*If student is enrolling in grades 9-12, ple	ease mak	e sure to	list ALL high school	ols for c	redit pi	ırpose	S. 				
		CA	. d o .o.t/ o . Et b .o.i o.it								
Due to differences in State and Feder	al report		dent's Ethnicity		aka sa	lection	v(s) in all t	hroo soct	ions below		
			•								
For Federal reporting, check ONE	For Federal reporting, check All responses that apply. (Must check ONE) For State reporting, check ONE										
Is the student Hispanic or Latino?	☐ American Indian or Alaska Native							nerican Indian			
☐ Yes	☐ Asian	1				_	laska Nati	ve?			
□ No	☐ Black	or Africa	n America								
	☐ Nativ	e Hawaii	an or Other Pacifi	c Islander			lo				
	☐ White	e									
	Н	lome La	nguage Questio	nnaire							
	Check the phrase that best describes your student:						Indicate the language(s) other than English in space provided:				
	☐ Language(s) other than English.										
My student first learned:	☐ English and language(s) other than English.										
	☐ Only English										
	☐ Language(s) other than English.										
My student speaks:			nguage(s) other than English.								
	☐ Only English.										
No. shodash wadanshanda	☐ Language(s) other than Engl										
My student understands:	_		nguage(s) other than English.								
	☐ Only English. ☐ Language(s) other than English.										
My student has meaningful and											
consistent exposure to:	_	☐ English and language(s) other than English.☐ Only English.									
	L Only		/Guardian Signa	ture							
Data provided on this registration from will be	rused hy i				rose Sci	nools to	identify th	e student	and family for		

Data provided on this registration from will be used by personnel in the Buffalo Hanover Montrose Schools to identify the student and family for school placement, open enrollment and transportation. You are not required to respond to all requests for information on this form; however, be advised that incomplete information may limit the ability of the Buffalo Hanover Montrose Schools to fully provide education services.

I certify the information given above is true and complete to the best of my knowledge.