

Student Registration Worksheet

Entry Date _____
 Withdrawal Date _____
 Current Grade _____

Student Information: SIS # _____ SSID # (For Office Use Only) _____

Name: _____				Date of Birth: ____/____/____	
(Last)	(First)	(Middle Name)	(Called Name)		
Address: _____				Gender: Male Female (Circle One)	
City: _____		Zip Code: _____		County: _____ District of Residence: _____	
Telephone: (____) _____		Unlisted: Yes No (Circle One)		Will bus transportation need to be provided? Yes No (Circle One)	
Social Security Number (For Office Use Only): _____				Bus Route # _____ (Mark residence on map.)	
Place of Birth (City&State): _____		Mother's Maiden Name: _____			
Ethnic Origin:					
Asian/Pacific Islands _____		Black, Non-hispanic _____		Hispanic _____	
American Indian/Alaskan Native _____		White _____		Multiracial _____	
Homeless Status: Yes _____ No _____		If yes, check one:		Lives in public operated shelter _____	
				Lives in privately operated shelter _____	
U.S. Citizen: Yes _____ No _____		If no, check one:		Lives with relatives or friends _____	
				Other: _____	
Limited English Proficiency: Yes _____ No _____		Country of Origin: _____		If yes, then language spoken: _____	

Parent/Guardian Information:

Father Mother Step Parent Guardian Foster Parents Parents Separated/Divorced (Circle Appropriate Status)
Name: _____
Address: _____
City/Zip: _____
Phone: _____
Cell Phone: _____ Pager: _____
Nationality: _____
Birthdate: _____ Place of Birth: _____
Occupation: _____ Grade Completed: _____
CHILD LIVING WITH <u> Father </u> <u> Mother </u> <u> Other </u>

Father Mother Step Parent Guardian Foster Parents Parents Separated/Divorced (Circle Appropriate Status)
Name: _____
Address: _____
City/Zip: _____
Phone: _____
Cell Phone: _____ Pager: _____
Nationality: _____
Birthdate: _____ Place of Birth: _____
Occupation: _____ Grade Completed: _____
CHILD LIVING WITH <u> Father </u> <u> Mother </u> <u> Other </u>

OFFICE USE ONLY:		
Birth Certificate: _____	For Student Entering:	For Student Withdrawing:
Social Security Card: _____	Records Requested _____	Request Received _____
Immunization Records: _____	Records Received _____	Records Sent _____
Proof of Residency: _____	Entered in Computer _____	
Custody Papers: _____ (Specify)	Court Order: _____	Other: _____

Custodial Information:

IT IS OHIO STATE LAW THAT EACH STUDENT PROVIDE A CERTIFIED COPY OF ANY CHILD CUSTODY ORDER OR DECREE, WHICH HAS BEEN ISSUED WITH RESPECT TO THE STUDENT. THE CUSTODIAL PARENT OF SUCH A STUDENT MUST ALSO PROVIDE THE BOARD OF EDUCATION WITH CERTIFIED COPIES OF ANY LATER COURT ORDERS, WHICH MODIFY THE ORIGINAL CUSTODY ORDER OR DECREE. [Ohio Revised Code 3313.672(b)]

PLEASE CHECK ONE OF THE FOLLOWING STATEMENTS THAT APPLIES TO YOUR CHILD:

- ___ A. Child lives with natural parent(s) or with legally adoptive parents.
- ___ B. Parents are divorced or legally separated; child resides with parent that has legal custody by court order.
(If this is your situation, you must provide the school with a copy of the court order within 30 days)
- ___ C. Parents are divorced or legally separated; child resides with parent that **DOES NOT** have legal custody.
(If this is your situation, you will be asked to pay prevailing tuition rates of the district or obtain legal custody within 60 days)
- ___ D. Child lives with a Guardian who has been granted legal custody by court order.
(If this is your situation, you must provide the school with a copy of the court order)
- ___ E. Child lives with a Guardian who **HAS NOT** been granted legal custody by court order.
(If this is our situation, you will be asked to pay prevailing tuition rates of the district or obtain legal custody within 60 days)
- ___ F. Child lives with Foster Parents.
(If this is your situation, you must have a representative of the custodial agency with you and all necessary court orders, proof of district responsibility for educational costs and previous school records at the time of enrollment. **YOUR CHILD WILL NOT BE ENROLLED WITHOUT MEETING ALL THESE REQUIREMENTS**)
- ___ G. Child is 18 years of age or older and lives apart from his/her parent or guardian.
- ___ H. Tuition Student. (You must obtain a tuition agreement with current rates and payment schedule from the Board Office.)

SCHOOL HISTORY :
School previously attended: _____
School Address: _____
City/State/Zip: _____
Has student ever attended any school in this district? Yes No
Name of School District last attended: _____
Year last attended that District: ____/____/____

ENTRY INFORMATION:

1. Explain school fees - \$ _____
2. Explain lunch and milk tickets. (May need free/reduced application)
3. Remind parent/guardian to return the completed forms ASAP.
(Emergency Medical and Health Record Form)
4. Give student a Student Handbook.

FAMILY INFORMATION:

Names of brothers/sisters:

First Name	Last Name	Date of Birth
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

WITHDRAWAL INFORMATION:

Name and address of school withdrawing to: _____

Have school fees been paid, all textbooks returned, and all outstanding library materials returned? Yes _____ No _____

Your signature is required so we have authorization to release records to the student's new school when requested: _____

(Parent/Guardian Signature)

I, as parent or guardian of the above child, do hereby certify that all the above information is correct. _____

(Parent/Guardian Signature) Date