

New Family Add Form

Date: _____

New Family #: _____

Please provide information below for the address at which student(s) resides.

Parent/Guardian Information

Relation to Student (Check one

Mother Father Guardian

_____/_____/_____
Last First M.I.

_____/_____/_____
Last First M.I.

Address (Please provide street address and P.O. Box #)

Phone

City, State, Zip

Alt. Phone

This address is a shelter or temporary housing. Yes No
Please circle one

Attached is a copy of my driver's license, utility bill or lease, etc. to verify residency

Email Address

Student Information *List all children from oldest to youngest (ages 18 years to birth).*

First Name	Middle Name	Last Name	Date of Birth	Ethnicity / Language	Gender
_____	_____	_____	___/___/___	___/_____	_____
_____	_____	_____	___/___/___	___/_____	_____
_____	_____	_____	___/___/___	___/_____	_____
_____	_____	_____	___/___/___	___/_____	_____
_____	_____	_____	___/___/___	___/_____	_____

- Ethnicity Categories: 1. American Indian or Alaskan Native 2. Asian or Pacific Islander 3. Hispanic
 4. Black, not of Hispanic origin 5. White, not of Hispanic origin

Have you recently moved to this school district within the last 36 months for temporary or seasonal agriculture or fishing work? Yes No

New Student Add Form

SITE (Check one PS ELEM MS HS
Primary School, Elementary School, Middle School, or High School

New Student #: _____

Name: _____
 Last First Middle

Gender: Female Male Date of Birth: ____ / ____ / ____ Grade: _____

Does this child currently have:

- | | | |
|--|------------------------------|-----------------------------|
| 1. an Individualized Education Plan (IEP)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. a 504 Plan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. an Individualized Health Plan (IHP)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. an Evacuation Plan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

(If you answered “yes” to question one (1) or question two (2) above, please submit a copy of your child’s file containing all relevant documentation.)

Ethnicity: _____
(Please select from the categories below.)

1. American Indian or Alaskan Native
2. Asian or Pacific Islander
3. Hispanic
4. Black, not of Hispanic origin
5. White, not of Hispanic origin

For Middle School Only:
(please choose if interested)

- Band
- Choir
- Both Band and Choir

Note: Must have a copy of the enrolling student’s birth certificate.