

**KINGSLEY HIGH
NEW STUDENT REGISTRATION FORM**

Student's Name _____
Last First Middle

Physical Address _____

City _____ Zip Code _____

Mailing Address _____

City _____ Zip Code _____

Home Telephone # _____ E-Mail _____

Date of Birth _____ Grade _____

Ethnicity: (choose one): ____1 Hispanic or Latino ____Not Hispanic or Latino

Race (choose one or more, regardless of Ethnicity): ____1 American Indian or Alaskan Native ____2 Asian
____3 Black or African American ____4 White ____5 Native Hawaiian or Other Pacific Islander

Mother's Name _____ Mother's Work # _____

Father's Name _____ Father's Work # _____

Who does the student live with now?	
Both Parents []	Guardian []
Father []	Step-Father []
Mother []	Step-Mother []

Relationship to Guardian: _____

Has student ever been in a special education program? Yes [] No [] Has a current IEP: Yes [] No []

Has student ever been suspended? Yes [] No []

Has student ever been expelled? Yes [] No []

What is your child's native or first language? _____

Are there any medical concerns the school should be aware of? Yes [] No []

If so, what are they? _____

School attended last _____

Address _____

City, State, Zip _____

Date last attended this former school _____

Parent/Guardian Signature _____ Date _____