

## NEW STUDENT REGISTRATION FORM

Student Name(Last)		(First	:)	(Middle)	(Known As)		
Date of Birth B	irthplace (City	//State or	Country)				
□Male □Female Grade Ha	s your child e	ever attend	led school in A	Ipine School Dis	trict? □Yes □No		
School Last Attended		Address					
Student transferring from: Circle One	WITHIN DISTRICT OUT OF DISTRICT			OUT OF STATE	OUT OF COUNTRY		
Enrollment date in first USA school_		*If o	ut of country, v	which country?			
Father's Email	Mother's Email						
Student's Home Address							
Name of Parent or Legal Guardian _	(City)		(State)				
STUDENT LIVES WITH		oton Oton	Circle Primary Phone #				
(Write Names)	DOB Fo	ster Step	HOME PHONE	CELL PHONE	WORK PHONE		
Father							
Mother							
Guardian							
Other							
Student's school-aged siblings:							
Schools siblings are/will be attending:Circle One1. YesNoHas your child lived in the L2. YesNoDo you have legal custody3. YesNoIs the child you are register4. YesNoDoes this child have an Ind5. YesNoAre you living with friends on6. YesNoHas your child ever been su7. YesNoIs this child receiving Englis8. YesNoIs English the primary langu9. What is the native language of this students	JS for the last a of the child you ing a foster chi <b>ividualized Ed</b> or relatives? uspended/expe sh language su uage spoken in	3 years? u are registe ild/ward of t ducation P elled from s pport?	ering? he court? <b>lan</b> or is he/she chool?		Education Services?		
I attest by this signature I am the custodial parent or leg	gal guardian of the s	student above.	I acknowledge that fal	sifying this record makes	me subject to law.		

Parent/Guardian Signature

## lian Signature \_\_\_\_\_ Date \_\_\_\_\_\_ Date \_\_\_\_\_\_ Date \_\_\_\_\_ DATE \_\_\_\_\_

Teacher	Track Studer	nt #	Date Enrolled	Start Date
Skyward - D NCLB D Sch	nedule 🗆 Home Roo	om 🗆 Advisor	Class List	ESL Y or N
Immunizations -  Complete				

OFFICE USE ONLY

Federal Legislation is now requiring more detailed reporting for student ethnicity and race. As a result, Alpine School District asks that you help us comply with this legislation by answering the following questions.

ETHNICITY: Is this student Hispanic/Latino?

Yes 
Hispanic/Latino (a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

No 🗆 Not Hispanic/Latino

RACE: What is this student's race? (Choose one or more)

American Indian or Alaska Native (a person having origins in any of the original peoples of North, South or Central America and who maintains tribal affiliation or community attachment)

If checked, please indicate which Tribe or Band

- Asian (a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including; Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand and Vietnam)
- Black or African American (a person having origins in any of the black racial groups of Africa)
- □ **Native Hawaiian or Other Pacific Islander** (a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)
- **White** (a person having origins in any of the original peoples of Europe, the Middle East, or North Africa)
- I understand that the district is required to report the above information for all students, but I refuse to declare a race for my student. I understand that district personnel will do their best to determine my child's race and report that determination.