

# DALLAS ELEMENTARY SCHOOL DISTRICT #327 REGISTRATION FORM

STUDENT INFORMATION (please print)

GRADE LEVEL \_\_\_\_\_ SCHOOL YEAR 2010-2011

Student Legal Name \_\_\_\_\_  
Last Name First Name Middle

Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Home Phone \_\_\_\_\_

Student Address \_\_\_\_\_  
Physical Address Mailing Address

ALLERGIES \_\_\_\_\_

Race: \_\_\_\_\_ White \_\_\_\_\_ Hispanic \_\_\_\_\_ Black \_\_\_\_\_ Asian \_\_\_\_\_ American Indian  
\_\_\_\_\_ Multi-Racial \_\_\_\_\_ Native Hawaiian or other Pacific Islander

Languages spoken in the home: \_\_\_\_\_

Oldest Child - Middle Child - Youngest Child - Only Child (circle one)

Living Arrangements: (check one) \_\_\_\_\_ Own/Rent \_\_\_\_\_ Hotel/Motel \_\_\_\_\_ Shelter/Transitional \_\_\_\_\_ Doubled Up  
\_\_\_\_\_ Unsheltered

## Household Information:

Father Name \_\_\_\_\_ Father Employer \_\_\_\_\_

Address \_\_\_\_\_ Father Home Phone \_\_\_\_\_

Father Cell Phone \_\_\_\_\_ Father Employer Phone \_\_\_\_\_

Father email \_\_\_\_\_ Education \_\_\_\_\_

Mother Name \_\_\_\_\_ Mother Employer \_\_\_\_\_

Address \_\_\_\_\_ Mother Home Phone \_\_\_\_\_

Mother Cell Phone \_\_\_\_\_ Mother Employer Phone \_\_\_\_\_

Mother email \_\_\_\_\_ Education \_\_\_\_\_

Guardianship \_\_\_\_\_

Address if different from above \_\_\_\_\_

## Other members residing in this household:

<u>Name</u>	<u>Relationship to student</u>	<u>Birthdate</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**EMERGENCY INFORMATION:** In case of an emergency at school, parent will be called first. If the school is unable to contact parent, please list other persons we can notify.

<u>Name</u> <u>Work Phone</u>	<u>Relationship to student</u>	<u>Home phone</u>	<u>Cell phone</u>

**Connect-ED (automated phone notification system)**

If school is cancelled or we need to notify you about a school event please list 3 numbers you would like this information sent to:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Previous Education (for New students only):**

Please list the name and location of any school(s) that this student has attended in the past year:

\_\_\_\_\_

\_\_\_\_\_

Was student in any special classes? (Speech, Learning Disability, Band, etc.) If yes, please specify:

\_\_\_\_\_

\_\_\_\_\_