

**New Student Information**

PLEASE COMPLETE ALL FIELDS

*Student name should be entered as shown on the birth certificate*

LAST NAME:		MIDDLE NAME:	
FIRST NAME:		GENDER:	M / F
BIRTHDATE:		GRADE ENTERING:	
HOME ADDRESS:		CITY:	
PARENT E-MAIL ADDRESS:		ZIP CODE:	
Child lives @ this address w/	Both Parents _____ Mother _____ Father _____ Other _____		
MOTHER'S CELL #:		FATHER'S CELL #:	
MOTHER'S NAME:		FATHER'S NAME:	
PREVIOUS SCHOOL:			
Does the Student have an IEP? (Individualized Education Plan)			Yes/No
Is <b>English</b> the primary language spoken in the home?			Yes/No
Are there any concerns that would be helpful for the school to be aware of:			
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FOR OFFICE USE ONLY: Student #: _____ Address Verified _____ Yes _____ No _____			

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Are there any concerns that would be helpful for the school to be aware of:			
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FOR OFFICE USE ONLY:	Student #:	Address Verified	Yes	No
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