



**NEW AND RE-ENTRY STUDENT REGISTRATION INFORMATION**

**PARENTS/GUARDIANS PLEASE READ:** Please fill out this form completely and present it with your student's required documents to the SLPS representative when completed.

**Please Print**

STUDENT NAME \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_ APT # \_\_\_\_\_ ZIP CODE **631** \_\_\_\_\_  
HOUSE NUMBER STREET NAME TYPE (St., Ave., Ln., etc.)

GRADE \_\_\_\_\_ SEX \_\_\_\_\_ RACE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ HOME TEL# \_\_\_\_\_  
MONTH DAY YEAR AREA CODE

EMERGENCY # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EMERGENCY CONTACT \_\_\_\_\_  
AREA CODE

STUDENT'S SOC. SEC. # (Optional, \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_) DCN/Medicaid # \_\_\_\_\_

SCHOOL AND DISTRICT \_\_\_\_\_ WITHDRAWAL DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
LAST ATTENDED \_\_\_\_\_

MOTHER/GUARDIAN NAME \_\_\_\_\_

MOTHER/GUARDIAN EMAIL \_\_\_\_\_ CELL PHONE # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
AREA CODE

FATHER/GUARDIAN NAME \_\_\_\_\_

FATHER/GUARDIAN EMAIL \_\_\_\_\_ CELL PHONE # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
AREA CODE

**ALL of the following questions MUST be completed in accordance with Missouri Department of Education guidelines.**

- Does student use a language other than English?  Yes  No Please specify: \_\_\_\_\_
- Is a language other than English used at students home?  Yes  No Please specify: \_\_\_\_\_
- **Has student ever received special education services?**  Yes  No Please specify: \_\_\_\_\_
- **Is student currently in Missouri Children's Division (DFS) custody, or residing in a foster home/residential facility?** Yes  No  Caseworker name: \_\_\_\_\_ TEL # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
AREA CODE
- Have you or a member of your family moved with a child or children within the past 3 years to seek or obtain a temporary or seasonal agricultural, landscaping, or food processing job?  Yes  No

If "Yes," moved from \_\_\_\_\_

- Presently, where is student living? *Please check only one box.* to \_\_\_\_\_  
 In permanent, stable housing with parent(s)  In a shelter  With more than one family in a house or apartment  
 With friends or family members (other than parent/guardian)  In a motel, car, campsite or temporary housing

**Missouri Safe Schools Act Disciplinary Information: (Providing false disciplinary information is a Class B misdemeanor.)**

- Is student presently under suspension or expulsion from another school or district for violating school board policies relating to weapons, alcohol, drugs, willful infliction of injury to another person?  Yes  No

If "Yes," please describe: \_\_\_\_\_

- Has student been charged or convicted of any felonies?  Yes  No

If "Yes," please describe: \_\_\_\_\_

**PARENTS/GUARDIANS PLEASE READ.** By signing below I understand ***I must personally*** provide residence verification, immunization records, and birth records to my child's assigned school to complete my child's registration, and failure to present the required documents and paperwork will result in denial of enrollment.

X \_\_\_\_\_  
SIGNATURE OF PARENT / GUARDIAN

DATE \_\_\_\_\_ 11/02/2011 LFK