



LDC CODE 840

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.

Person Completing Form: Parent Guardian Student Other _____

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 ____/____/____ TEL# ____-____-____
MONTH DAY YEAR

EMERGENCY # _____ EMERGENCY CONTACT _____
AREA CODE

STUDENT'S SOC. SEC. # (Optional) _____ DCN/Medicaid # _____

SCHOOL AND DISTRICT WITHDRAWAL
LAST ATTENDED _____ DATE ____/____/____

MOTHER/GUARDIAN _____ EMPLOYER TEL# ____-____-____
AREA CODE

FATHER/GUARDIAN _____ EMPLOYER TEL# ____-____-____
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 _____ to _____

Presently, where is student living? *Please check only one box.*
 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