

Lebanon City School District Student Registration Form

Has your child ever been enrolled in Lebanon City School District? ___ Yes ___ No

Code Word: *(K-6 Only)*

OFFICE USE:
Enrollment Date: _____ ID#: _____

Are you a Lebanon City School Employee?
___ Yes ___ No

PLEASE PRINT

Student's Legal Name: _____
First
Middle
Last

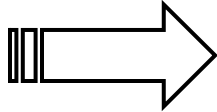
Preferred Name: _____ Social Security Number: _____ Gender: Male Female

Date of Birth: _____ Place of Birth: _____
City
State/Province
Country

Mother's Maiden Name: _____ Student's Native Language: _____ Grade: _____

Home Address: _____

Home Phone: _____



Community Safe Phone: _____
 List primary number you would like our "automated" emergency system to contact. This communication could be made at any hour of the day.

Parent/Guardian Information:

Status of biological parents (circle one): Married Divorced Separated Widowed Never Married

If divorced, who has legal custody? Mother Father Shared If shared, who is residential? _____

Are you the natural/adoptive parent(s) of the child? Yes or No ~ If no, what is your relationship to the child? _____

If foster/guardian, what district did the natural parent(s) reside in at the time you received custody? _____
 (if other than Lebanon, assignment of tuition is required)

Father/Guardian: [] Lives With

Name: _____

Address: _____

Home Phone: _____

Work/Cell: _____

Place of Employment: _____

Step-Mother (if applicable): _____

Work/Cell Phone: _____

Mother/Guardian: [] Lives With

Name: _____

Address: _____

Home Phone: _____

Work/Cell: _____

Place of Employment: _____

Step-Father (if applicable): _____

Work/Cell Phone: _____

Other Siblings in the District

Name	Grade
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Emergency Contacts

Name	Relationship	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Who may **NOT** pick up your child?

- - OVER - -

Lebanon City School District Student Registration Form

CITIZEN STATUS OF STUDENT

U.S. Citizen Non-U.S. Citizen/Immigrant*
 Exchange Student Refugee (I-94 Card Yes No)

*Immigrant Students are:

1. Age 3-21,
2. Were not born in the United States, and
3. Have not attended one or more schools in any one or more of the states for more than three academic yrs.

Date First Enrolled in U.S. School: _____

RACIAL/ETHNIC GROUP

Is the student of Hispanic/Latino origin, regardless of race? Yes No

(Note: Hispanic or Latino means a person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race.)

What race is the student? (may choose more than one)

W – White B – Black or African American P – Native Hawaiian or Other Pacific Islander
 A – Asia I – American Indian or Alaskan Native

I understand The U.S. Department of Education allows observer identification if a parent or guardian refuses to provide their child's racial/ethnic group. The observed designation will be communicated to the parent or guardian by the district prior to designation.

Home Language Survey:

What language did your child speak when he/she first learned to talk? _____

What language does your child use most frequently at home? _____

What language do you use most frequently to your child? _____

What language do the adults at home most often speak? _____

How long has your child attended school in the United States? _____

Special Services:

Has your child received any of the following services? (Please circle all that apply)

Gifted Education Multifactored/Psychological Evaluation Individual Education Plan (IEP)
Limited English Proficient Plan (LEP) 504 Individualized Accommodation Plan

I, the undersigned, do hereby state and declare under penalty of falsification* that I am the parent or legal guardian of the student named on this form and that this registration information is true and correct.

Parent/Guardian Signature: _____ **Date:** _____

*Falsification under Ohio Revised Code section 2921-13 is a misdemeanor of the first degree punishable by a maximum of six (6) months imprisonment or a fine of \$1,000 or both.

Requested information is mandated under Senate ORC Bill 140 and Education Management Information Systems (Sections 3301-0714).