THE SCHOOL BOARD OF LIBERTY COUNTY, FLORIDA

PLEASE PRINT **STUDENT ENTRY FORM** **SCHOOL YEAR 2015-2016**

STUDENT LEGAL NAME-Last	Jr., III, Etc.	First	Middle Name or Initial	Grade

PARENT/GUARDIAN CONTACT INFORMATION: EMERGENCY CONTACT NUMBER:(_____)_____-_____

Mom/Guardian Name: _____

Work: (_____)_____-_____ Ext. _____ Home:(_____)_____-_____ Cell:(_____)_____-_____

Dad/Guardian Name: _____

Work: (_____)_____-_____ Ext. _____ Home:(_____)_____-_____ Cell:(_____)_____-_____

STUDENT LIVES WITH:

____ Both parents ____Surrogate Parents
____ Parent & Step-parent ____Legal Guardian
____ Mother Only ____Guardian Ad Litem
____ Father Only ____Other

Provide documentation of any special circumstances

Custody Concerns ____ Yes ____ No

TRANSPORTATION PLANS:

Morning	Afternoon
Bus _____	Bus _____
Walk ____	Walk ____
Car _____	Car _____

BIRTHDAY (Mo/Day/Yr)

_____/_____/_____

Student's Social Security number:

_____

MAILING ADDRESS	Apt. No.	City	Zip
911 ADDRESS-If different from Mailing Address	Apt. No.	City	Zip

SEX:

____ Male ____ Female

ETHNIC CATEGORY: Please check one: ____Hispanic/Latino ____Not Hispanic/Latino

RACIAL CATEGORY: Please mark all that apply: ____ White ____ Black/African American ____ Multi-Racial

____Hispanic ____Asian ____American Indian/Alaska Native ____ Native Hawaiian/ Pacific Islander

BIRTHPLACE-City	County	State	COUNTRY OF CITIZENSHIP

DID STUDENT COMPLETE KINDERGARTEN? ____Yes ____ No

DID STUDENT ATTEND VPK? ____Yes ____ No *If yes, which type?*

____ TITLE I ____ Exceptional Student Educational Program (ESE) ____HEADSTART ____ PRIVATE (FEE BASED-*LEAC or other*)

HAS STUDENT BEEN IN A SPECIAL PROGRAM?

_____ Yes _____ No

If yes, please place an (x) by the appropriate program(s):

_____ Exceptional Student Educational Program (ESE)

_____ ESOL _____ Alternative Ed. _____ 504 Plan

Is placement current? _____ Yes _____ No

Is a language other than English used in the home? ____Yes ____No

Does the student have a first language other than English?

____ Yes ____ No

Does the student most frequently speak a language other than English?

____Yes ____No

Is this child: ____homeless ____migrant ____ runaway

(check all that apply)

New Students: GIVE THE NAME, ADDRESS AND PHONE NUMBER OF THE LAST SCHOOL ATTENDED (Last School First)

_____ _____ _____ (_____)_____-_____

School Name City State Phone Number

New Students: GIVE NAME IF RECORDS WOULD BE LISTED UNDER ONE DIFFERENT FROM LEGAL NAME ABOVE

PLEASE LIST ALL EXPULSIONS, ARRESTS RESULTING IN A CHARGE, AND/OR JUVENILE JUSTICE ACTIONS THE STUDENT HAS HAD *(attach documentation if needed)*.

List all siblings/other students in the home who currently attend Liberty County:

Name:_____ Grade: ____ School: _____

Name:_____ Grade: ____ School: _____

Name:_____ Grade: ____ School: _____

Corporal Punishment Allowed ____Yes ____ No

Permission to Photograph/Video ____ Yes ____ No

Permission to use Internet ____Yes ____ No

FLORIDA STATUTES 837.06 PROVIDES THAT WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE.

Email Address: _____

Parent/Guardian Name (Please Print)_____

Parent/Guardian Signature _____ Date _____/_____/_____