

**State Required Information**

**Ethnicity Code: Must choose one.**

Hispanic: \_\_\_\_\_

Non- Hispanic: \_\_\_\_\_

**Race Codes: Must choose one, but may choose more than one.**

American Indian/Alaskan Native \_\_\_\_\_

Asian \_\_\_\_\_

Native Hawaiian/Pacific Islander \_\_\_\_\_

Black/African American \_\_\_\_\_

White/Caucasian \_\_\_\_\_

Country of Birth \_\_\_\_\_ Date entered U.S. \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_  
(If born outside the US)

County of Birth \_\_\_\_\_ City of Birth \_\_\_\_\_ State of Birth \_\_\_\_\_

Where does the student stay at night? \_\_\_\_\_ one family house, mobile home, apartment

\_\_\_\_\_ temporarily with more than one family in a house, mobile home, apartment

\_\_\_\_\_ in a shelter \_\_\_\_\_ in a motel/hotel \_\_\_\_\_ in a car

\_\_\_\_\_ other, Explain \_\_\_\_\_

Please check the statement below if it applies to your child.

\_\_\_\_\_ Student has a parent or guardian that is "Active Duty" Military.  
Active Duty means full-time duty in the active military service of the United States.

\_\_\_\_\_ Student has a parent or guardian that is a member of the "National Guard."  
National Guard means the individual is a member of the Army National Guard or the Air National Guard.

\_\_\_\_\_ Student has a parent or guardian that is a "Reserve" in one of the armed forces.  
Reserve means enlistment, appointment, grade, or office held as a Reserve of one of the armed forces.

**Emergency person to be called when parents/guardian cannot be reached:**

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Doctor to be called in case of emergency: \_\_\_\_\_ Phone \_\_\_\_\_

Dentist to be called in case of emergency: \_\_\_\_\_ Phone \_\_\_\_\_

List any physical handicap, allergies or special needs: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is student taking any medication: Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**The following three questions serve as the home language survey:**

What language did your child learn when he/she first began to talk? English \_\_\_ Spanish \_\_\_ Japanese \_\_\_ Other \_\_\_\_\_

What language does your child most frequently speak at home? English \_\_\_ Spanish \_\_\_ Japanese \_\_\_ Other \_\_\_\_\_

What language is spoken by you and your family most of the time at home? English \_\_\_ Spanish \_\_\_ Japanese \_\_\_ Other \_\_\_\_\_

**PLEASE CONTACT THE SCHOOL IMMEDIATELY OF ANY CHANGES TO THIS FORM**

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_