

**ANADARKO PUBLIC SCHOOLS ENROLLMENT FORM
2019 - 2020**

Date _____ School _____ Grade _____

STUDENT NAME _____
(LEGAL NAME) Last First Middle

STUDENT'S SOCIAL SECURITY NUMBER _____ - _____ - _____

MAILING ADDRESS _____

IF P.O. BOX OR ROUTE #, PLEASE GIVE PHYSICAL DIRECTIONS TO ADDRESS _____

DATE OF BIRTH _____ AGE _____ SEX (CIRCLE ONE) MALE FEMALE

BIRTH CITY _____ STATE _____ COUNTRY _____

WILL STUDENT RIDE A BUS? _____ BUS NUMBER _____

DOES STUDENT LIVE MORE THAN 1 ½ MILES FROM SCHOOL? (CIRCLE ONE) YES NO

SCHOOL STUDENT LAST ATTENDED _____

IF SCHOOL LAST ATTENDED WAS NOT IN ANADARKO, PLEASE GIVE SCHOOL NAME AND ADDRESS _____

IS THIS A TRANSFER STUDENT? YES _____ NO _____
(TRANSFER STUDENTS ATTEND SCHOOL IN ANADARKO WHILE RESIDING WITHIN ANOTHER DISTRICT)

HAS STUDENT BEEN IN SPECIAL EDUCATION CLASSES DURING PREVIOUS SCHOOL YEAR? YES _____ NO _____

*PLEASE LIST INDIVIDUALS THAT HAVE YOUR PERMISSION TO CHECK YOUR CHILD OUT FROM SCHOOL.
ONLY PERSONS LISTED ON THIS ENROLLMENT FORM WILL BE ALLOWED TO CHECK OUT YOUR CHILD DURING
SCHOOL HOURS.*

PLEASE INDICATE ANY MEDICAL PROBLEMS/CONDITIONS WE SHOULD BE AWARE OF _____

GUARDIAN INFORMATION

GUARDIAN #1 _____
NAME ADDRESS PHONE

RELATIONSHIP TO STUDENT _____
CELL PHONE

Email address _____

EMPLOYER _____
NAME ADDRESS PHONE

PLEASE COMPLETE THE BACK OF THIS FORM

GUARDIAN #2 _____
NAME ADDRESS PHONE
RELATIONSHIP TO STUDENT _____
CELL PHONE

Email address _____

EMPLOYER _____
NAME ADDRESS PHONE

ADDITIONAL CONTACT _____
NAME ADDRESS PHONE
RELATIONSHIP TO STUDENT _____
CELL PHONE

WITH WHOM DOES THE STUDENT LIVE? (CIRCLE ONE) BOTH PARENTS MOTHER FATHER
GUARDIAN RELATIVE FRIEND

PLEASE LIST NAMES AND GRADES OF ALL CHILDREN CURRENTLY LIVING IN YOUR HOME THAT ARE ATTENDING ANADARKO PUBLIC SCHOOLS FOR 2019-2020

NAME	GRADE	NAME	GRADE
NAME	GRADE	NAME	GRADE
NAME	GRADE	NAME	GRADE

MILITARY IDENTIFIER:
IF EITHER PARENT/GUARDIAN IS CURRENTLY ENLISTED/SERVING, PLEASE CHECK APPROPRIATE SPACE BELOW:
____ ARMED FORCES ____ RESERVE ____ NATIONAL GUARD

DOES YOUR CHILD LIVE IN A HOUSING AUTHORITY HOME? (CIRCLE ONE) **YES** **NO**
IF YES, CIRCLE ONE: APACHE CADDO COMANCHE DELAWARE KIOWA HOUSING AUTHORITY
WICHITA ANADARKO HOUSING AUTHORITY
OTHER _____

PROJECT NUMBER _____

DOES YOUR CHILD LIVE ON TRUST LAND? (CIRCLE ONE) **YES** **NO**
LEGAL DESCRIPTION: TN _____ RNG _____ SEC _____ QTR _____

PLEASE GIVE PHYSICAL DIRECTIONS _____
(IF DIRECTIONS ARE THE SAME AS ON THE OTHER SIDE OF THIS FORM)

PLEASE SIGN AND DATE THIS ENROLLMENT FORM VERIFYING ALL STUDENT INFORMATION GIVEN ABOVE IS CORRECT:

PARENT/GUARDIAN (circle one) DATE

As part of Every Student Succeeds Act, you may request any teacher's credentials by contacting the building principal.