



Corinth School District Registration Form

PLEASE PRINT CLEARLY

<i>STUDENT INFORMATION</i>	<i>OFFICE USE ONLY</i>
Legal Name _____ Preferred Name _____ <small style="display: flex; justify-content: space-around; font-size: small;"> Last First Middle </small>	Date _____ School _____
Birth Information: City _____ County _____	MSIS ID _____
SS# _____ Birth Date _____	Student ID _____
State _____ Country _____ Certificate Number _____	Grade _____ Entry Code _____
Ethnicity: Student is of Hispanic, Latino, or Spanish culture or origin? <input type="checkbox"/> Yes <input type="checkbox"/> No	HR Teacher _____
Race:(Circle One) W B AI/AN A PI Gender: (Circle One) M F	<i>CHECK IF APPLICABLE</i>
Race:(Circle any others that apply) W B AI/AN A PI	<input type="checkbox"/> Birth Certificate
Mailing Address _____	<input type="checkbox"/> Immunization Compliance Form
Street/911 Address _____	<input type="checkbox"/> Verification of Legal Residence (2)
City, State, ZIP _____ Home Phone () _____	<input type="checkbox"/> Acceptable Use Policy
Last School Attended _____	<input type="checkbox"/> Publicity Permission Form
Address _____	<input type="checkbox"/> Social Security Card
City, State, ZIP _____	<input type="checkbox"/> Immigrant
Student EVER attended CSD? _____ If so, name/grade of CSD school _____	<input type="checkbox"/> McKinney-Ventro Homeless Assistance Act
Student Enrolled or EVER enrolled in Special Education at Last School Attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Migrant
Student Enrolled in Speech? <input type="checkbox"/> Yes <input type="checkbox"/> No Student Enrolled in Gifted? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> English Language Learner
Parent/Guardian Name _____ Deceased? _____	Verified by _____
Relationship _____ <input type="checkbox"/> Emergency Contact <input type="checkbox"/> Guardian Indicator	<i>OTHER INFORMATION</i>
Mailing Address _____	<input type="checkbox"/> Bus <input type="checkbox"/> Car <input type="checkbox"/> Other
City, State, ZIP _____ Last Grade Completed _____	<input type="checkbox"/> Tuition Student District # _____
Employer _____ Occupation _____	<input type="checkbox"/> In-Dist. Transfer Home School _____
Home Phone () _____ Work Phone () _____	<i>TRANSFER RECORDS</i>
Email Address _____ Beeper/Cell Phone () _____	Ordered From _____
Parent/Guardian Name _____ Deceased? _____	Ordered By _____
Relationship _____ <input type="checkbox"/> Emergency Contact <input type="checkbox"/> Guardian Indicator	Records Received <input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing Address _____	Date Records Received _____
City, State, ZIP _____ Last Grade Completed _____	Medications _____
Employer _____ Occupation _____	Special Medical/Emotional/Educational information that might help teachers _____
Home Phone () _____ Work Phone () _____	_____
Email Address _____ Beeper/Cell Phone () _____	_____
With whom does child live? _____	_____
Special Instructions _____	List any physical limitations or restrictions of child
Brothers and/or sisters under 21—Give name and birth date.	_____
_____	_____
_____	_____

Corinth School District

Child's Name _____ **School** _____

Parent/Guardian's Name _____

Address _____ **Phone** _____

<p style="text-align: center;">Home Language Survey</p> <p>Please check the appropriate answer.</p> <p>1. What is the first language the student learned to speak? English ____ Other (name) _____</p> <p>2. What language does the student most often speak? English ____ Other (name) _____</p> <p>3. What language is most often spoken in the student's home? English ____ Other (name) _____</p> <p>4. In what language do parents prefer that written communication comes home? English ____ Other (name) _____</p> <p>5. Has the student been in the care of a person who speaks another language? No ____ Yes (name) _____</p>	<p style="text-align: center;">Migrant Eligibility</p> <p>If you have moved and/or changed jobs in the last 3 years, did you LOOK FOR or GET any of the following jobs listed below: Check all that apply.</p> <p>___ FARMING (crops, catfish, chickens, Christmas trees, sod, etc.) ___ TREES (cutting, planting, and/or cultivating) ___ COMMERCIAL FISHING ___ PROCESSING CROPS (ginning, meat processing, meat packing, or canning in plant)</p> <hr/> <p style="text-align: center;">Immigrant Children and Youth Eligibility</p> <p>Do you have children ages 3 through 21 who were not born in any state; and have not been attending one or more schools in any one or more states for more than 3 full academic years?</p> <p style="text-align: center;">YES NO</p>
<p style="text-align: center;">Homeless Eligibility</p> <p>Please circle the appropriate answer:</p> <p>1. Does the student lack a fixed, regular and adequate residence, for example: agriculture migrant children, children "living on the streets" (i.e. tents, vehicles, etc), or have been abandoned by their legal guardian? YES NO</p> <p>2. Does the student have a primary nighttime residence in a supervised or privately operated shelter, for example: children who have been abused and/or neglected, children of domestic violence, welfare hotels, transitional housing? YES NO</p> <p>3. Is the student temporarily staying with relatives or friends because of loss of job, other income loss, or housing loss? YES NO</p>	

I declare my information to be true and I understand that a pupil admitted under false information is not legally enrolled and will be withdrawn immediately following verification of information. I also understand that I am to inform school officials any time legal custody, address, or phone numbers change.

Signature of Parent/Guardian

Date