

# Kenai Peninsula Borough School District Student Registration Information Form

Office Use Only

Student's Legal Name   
 Last Name (Suffix)                      First                      Middle

ID # \_\_\_\_\_  
 School \_\_\_\_\_  
 Grade \_\_\_\_\_  
 Locker \_\_\_\_\_  
 Teacher \_\_\_\_\_  
 Immunizations Current \_\_\_\_\_

Phy Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ City

Student's Mailing Address \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State Zip Code \_\_\_\_\_ Phone (Home /Student Cell) \_\_\_\_\_

2nd Mailing Address \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State Zip Code \_\_\_\_\_ Relationship \_\_\_\_\_

Parents E-Mail \_\_\_\_\_ Parent E-Mail2 \_\_\_\_\_  
 Relationship - Mother/Father/Other - Circle one                      Relationship - Mother/Father/Other - Circle one

Student Resides With \_\_\_\_\_ Parents-Father-Mother-Joint-Guardian-etc \_\_\_\_\_  
 Student's Date of Birth \_\_\_\_\_ Month/Day/Year \_\_\_\_\_ Student's Place of Birth \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Are there any custody arrangements?  Yes  No *If yes, legal custody documents must be submitted to the school office.*

Is the Student Hispanic or Latino?  Yes  No     Male  Female    Language Spoken at Home \_\_\_\_\_

Active Duty Parent/Guardian?  Yes  No

Is the Student: (Choose one or more. You must select at least one.)  
 Caucasian     Black     Asian     American Indian     Alaska Native     Pac Islander/Hawaiian

## Parent/Guardian/Emergency Contact Information

Name	Relationship	Home Phone	Work Phone	Cell Phone	Employer	Can Pickup
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

### School Information:

Name of preschool attended \_\_\_\_\_

Name of last school attended \_\_\_\_\_

Address of last school attended \_\_\_\_\_

Have you ever attended school in the Kenai Peninsula Borough?  Yes  No

Do you qualify for any type of Special Education services?  Yes  No

Are you currently receiving any type of Special Education services?  Yes  No

If Yes, check the courses that your student was in at his/her previous school

Study Skills     Speech     Resource     Life Skills

**The above information is correct to the best of my knowledge:**

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

**In case of emergency, Student released to:**

\_\_\_\_\_  
 (\*\* For Office Use Only \*\*)                      Date