



Hendry County District Schools
Registration Form

Legal Name: Last First Middle

Hispanic: * Yes No *(See Definitions)
Race: * White Black Asian Am. Indian Pacific Islander (Check all that apply)
Sex: Male Female Social Security Number: *(See Note on Page 2)
Date of Birth: Birth Place: City: State:

Street Address:
Mailing Address:

City: State: Zip:
County of Residence: Hendry Glades Lee Palm Beach Collier Other

Home Phone Number: Emergency Phone Number:

Father's/Legal Guardian's Name:
Work Place: Work Phone:

Mother's/Legal Guardian's Name:
Work Place: Work Phone:

Student lives with: Father & Mother Mother Only Father Only
Stepfather & Mother Stepmother & Father Foster Parents Grandparents Other

Emergency Contact Person:
(If parent can't be reached) Name Phone Number Relationship

Has student ever been enrolled in a Florida public school? No Yes
If yes, year: School Name:

Has student ever been enrolled in a Hendry County school? No Yes
If yes, year: School Name:

FOR ENTERING KINDERGARTEN STUDENTS ONLY:
Has student participated in a preschool/day care program? No Yes If yes, Where?
If yes, in which program? Head Start Migrant PK Title I Pre-K Pre-K with disabilities
Teenage Parent Program VPK Program PK, Other

Is student a child of a Military Family? No Yes
Has student ever repeated a grade? No Yes If yes, what grade?
Has student ever been in special education or had an IEP? No Yes - specify:
Has student ever had a 504 plan? No Yes - specify:
Has student been referred to or is receiving mental health? No Yes - specify:

Has student ever been in an alternative program or a Department of Juvenile Justice program? No Yes specify:

Last preschool/school attended: Name:
Address:
City: State: Zip: Phone: ()

Any other school that should be contacted for records: Name:
Address:
City: State: Zip: Phone: ()

Is student on any medication? No Yes - what kind?
Does student have a handicap, wear glasses or a hearing aid? No Yes
Did student have a first language other than English? No Yes
Does the student most frequently speak a language other than English? No Yes - what language?
Is a language other than English used in the home? No Yes - what language?
Was student born in any State or U.S. territory or possession? No Yes
Has student attended school in the United States for 3 full academic years or more? No Yes
What date did the Immigrant Student enter the United States: / /
Have parents been engaged in temporary/seasonal agricultural/fishing activities during the last 3 years? No Yes
Will student ride a school bus? No Yes
Are you applying for free/reduced lunch? No Yes

Table with 3 columns: Names of brothers/sisters and other children in the home, School attending, Grade. Rows 1, 2, 3.

Parental consent for screening: The school is hereby given my consent for my child to participate in the school health service programs. This means that my child will receive health appraisals at school, including vision, hearing, dental and scoliosis (abnormal curvature of the spine) screening, as well as control of communicable disease. Further, I also give consent for my child to participate in the county educational screening program.

Signature of Parent/Legal Guardian: Date:

Definitions:

Please answer **BOTH** questions 1 and 2.

1. Is your child Hispanic or Latino? **(Please, mark only one.)**

- No, my child is not Hispanic or Latino
- Yes, my child is Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. What is your child's race? **(Please, mark all that apply, however mark at least one.)**

- American Indian or Alaska Native – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, e.g., Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American – A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

FOR OFFICE USE ONLY

Zone: _____
 School: _____
 Orig. Entry Date: _____
 Student ID: _____
 Florida ID: _____
 Date Entered: _____
 Grade: _____
 HR Teacher: _____
 Bus Number: _____
 Birth Verification:
 No Yes
 Custody: _____
 Immunization: No Yes
 Physical: No Yes
Exceptional Education
 Gifted
 Physically Impaired
 Physical Therapy
 Occupational Therapy
 Speech/lang Impaired
 IND
 Deaf/HH
 VI
 EBD
 SLD
 OHI
 TBI
 ASD
 DD – before 6

Other programs in which child was enrolled:
 RTI
 ESOL

Signature of Parent/Legal Guardian: _____ Date: _____

Social Security Number Note: **FL Statute 1008.386 – Social security numbers used as student identification numbers**

Each school district shall use social security numbers as student identification numbers in the management information system maintained by the school district. However, a student is not required to provide his or her social security number as a condition for enrollment or graduation.

The School Board of Hendry County, Florida prohibits any policy or procedure, which results in discrimination on the basis of race, sex, national origin, marital status, disability, age, or religion. Individuals who wish to file a discrimination and/or harassment complaint, or individuals with disabilities requesting accommodations under the Americans With Disabilities Act (ADA) may call the equity officer at (863) 674-4550.