



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:

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: 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, 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? [] No [] Yes - specify:
Has student ever had a 504 plan? [] 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?

What is your child's country of birth?
Has student attended school in the United States for 3 full academic years or more? [] No [] Yes

What date did the Immigrant Student enter a United States school? / /
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: _____
KCAST ID: _____
Florida ID: _____
Date Entered: _____
Grade: _____
HR Teacher: _____
Bus Number: _____
Birth Verification: _____
 No Yes
Custody: _____
Immunization: No Yes
Physical: No Yes
Exceptional Education
Program:
 Gifted
 EMH
 TMH
 Physically Impaired
 Physical Therapy
 Occupational Therapy
 Speech Impaired
 Language Impaired
 Hearing Impaired
 Visually Impaired
 Emotionally Handicapped
 SED
 PMH
 SLD
 Deaf
 Deaf/Blind
Other programs in which
child was enrolled:
 Chapter I Reading
 Chapter I Math
 ESOL

Parent/Guardian Signature: _____ 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.