

## STUDENT ENROLLMENT FORM

Student's LEGAL Name (*First, Middle, Last*) \_\_\_\_\_

Birthdate \_\_\_\_\_ Place of Birth (*city, state, county, country*) \_\_\_\_\_

Gender M F \_\_\_\_\_ Age Spoken at Home \_\_\_\_\_

### Ethnicity Part A

Is this student Hispanic/Latino? (*choose only one*)  No, not Hispanic/Latino  Yes, Hispanic/Latino

Additional ethnicity categories are required starting the 2008–09 school year. The above part of the question is about ethnicity, not race. No matter what you selected above, **please continue to answer the following** by marking one or more boxes to indicate what you consider your student's race to be:

### Ethnicity Part B

What is the student's (or your) race? (*choose one or more*)

Black or African American  White  American Indian or Alaska Native  
 Native Hawaiian or Other Pacific Islander  Asian  Other

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (*used for student identification purposes only\*\**)

Have you recently moved to this school district within the last 36 months for temporary or seasonal agricultural or fishing work?

Yes  No

### Census Information

Parents or Guardians \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address (*if different*) \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Father's Work Phone Number \_\_\_\_\_ Father's E-mail Address \_\_\_\_\_

Mother's Work Phone Number \_\_\_\_\_ Mother's E-mail Address \_\_\_\_\_

Is this address within Northfield Public Schools' boundaries?  Yes  No

If not, which district is it in? \_\_\_\_\_

Is this a foster family?  Yes  No *NOTE: If student lives with a guardian fill in parent address below.*

Other siblings living at this address:

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Is there a parent at another address?

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

In which district/state did this child attend school last? \_\_\_\_\_

Will this child need special education services?  Yes  No

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**Enrollment Information** (*office use only*)

Name of Entering School \_\_\_\_\_ Grade \_\_\_\_\_ First Day in Class \_\_\_\_\_

Teacher/Case Manager \_\_\_\_\_

\*\*In accordance with the Federal Data Privacy Act of 1974 and the State of Minnesota Privacy Law (M.S. Section 13.43), you do not have to provide a social security number. If you do not wish to provide a social security number, our district will assign a unique number for your student.