

-PLEASE PRINT-

School Year _____
Home Room _____
Student ID# _____

Complete this box if	Entry Date _____
Student is new to this	Entry Grade _____
School.	Entry Age _____

Teacher _____
Grade _____
Male/Female _____

**HIGHLAND LOCAL SCHOOL DISTRICT
REGISTRATION FORM**

HAS INFORMATION ON THIS FORM CHANGED FROM LAST YEAR? YES _____ NO _____

Student Name _____ Home Phone Number (____) _____
Last First Middle (REQUIRED)

Address _____ Race _____
Street City State Zip Code (OPTIONAL)

Birth Date _____ Birth Place _____ Social Security Number _____
(REQUIRED) City State County (OPTIONAL)

Name/address of last school attended *(new students only)* _____

Parent Status:	<input type="checkbox"/> Married	<input type="checkbox"/> Single	Child Lives with:	<input type="checkbox"/> both natural parents	<input type="checkbox"/> only father	<input type="checkbox"/> only mother
	<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated		<input type="checkbox"/> natural mother, step/adoptive father	<input type="checkbox"/> grandparents (with legal custody)	
	<input type="checkbox"/> Widowed			<input type="checkbox"/> natural father, step/adoptive mother	<input type="checkbox"/> other relative (with legal custody)	

Residential Parent/Guardian _____ Cell Phone Number _____

Place of Employment _____ Work Phone Number _____

Residential Parent/Guardian _____ Cell Phone Number _____

Place of Employment _____ Work Phone Number _____

Non-residential Parent _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Does the non-residential parent have visitation rights? _____

Is there a court decision stating that the non-residential parent should **NOT** receive school information or attend school activities? _____

Please attach a certified copy of the page of the court decision establishing custody or guardianship and those sections referring to visitation rights and contacts with the school. Also include the page bearing the judge's signature and court seal. This copy should include any and all modifications made as of the date of registration of the child in this school. It is also the responsibility of the parents to inform the principal of any subsequent modifications during the child's tenure at the school.

Special services or programs Eligible for special education? _____ If yes, can a current IEP be obtained? _____

Other (Gifted, etc.) _____

I give _____	do not give _____	permission for directory information to be released.
I authorize _____	do not authorize _____	publicity releases which include my child's picture/name.
<i>(If neither is checked, permission is assumed to be granted)</i>		

Date

Parent/Guardian Signature