## CLARK-SHAWNEE LOCAL SCHOOLS SPRING KINDERGARTEN ENROLLMENT FORM

Possum Element		Keid Elen	nentary	Roc	kway Elementary
	<u>STUI</u>	DENT INFORM	MATION		
All applicable in	formation MUST be tak	en directly of	f of the student's	s certified birth	<u>certificate</u>
Legal First Name	Middle Name			_ Legal Last Name	
Address	City			State	Zip
Date of Birth	Birth City		Gender	Native Lar	nguage
The following information is not answered the student wil					y of these areas are
Is the student from Hisp Puerto Rican, South or	oanic/Latino heritage? Central American, or othe				ıban, Mexican,
2. Race Detail Element: P apply:	lease indicate the followin				
Did the student attend a P	re-School? If s	o, where			
PARENT INFO	ORMATION – <mark>custodial</mark>	parent(s)/gua	rdian(s) with wh	om the student	<u>resides</u>
☐ Both parents ☐ Shared ☐ Other	I Parenting ☐ Mother or	nly □ Father	only □ Guardiar	n/Foster Care	Grandparent
Mothers First Name	Las	st Name		Maiden Na	me
Mothers Address			Does	student live her	e full time?
Mothers Phone Number:	Home	Cell		Work	
Fathers First Name	Last	Name		·	
Fathers Address			Does	student live here	e full time:
Fathers Phone Number: H	Cell		Work _		
EME	RGENCY CONTACT IN	FORMATION	– other than par	ents – list two	
Name	Home phone		ell phone	Re	lationship
Name	Home phone		ell phone	Re	lationship
The information on this form Number for the student to ke the State and Federal govern	ep throughout his/her yea				
For Office Use Only:					
Resident Student OE	Student Home IRN		CP Student	Home IRN _	
Admission Date	Initia	als of person en	tering into DASL		2018