Franklin County Schools Student Data/Enrollment

School	Enrollment Date							
Last Name F	First Name	Middle Na	Middle Name					
Student resides with	Relation							
Birth Date Age	Gender M or F	Social Security _						
Ethnicity (Circle one.) Hispanic Non-Hispanic Race (Circle all that apply.) White	Black Indian	Asian Pacific Islander					
Date entered US Schools		US Citizen Y o	r N					
Birth City Birth County	ounty Birth State		Birth Country					
Home Language Primar	Primary Language Limited English Proficient Y or N							
Last School Attended	Date V	Date Withdrawn						
Last School Attended Address Street	City	State Zip	Phone					
Mother's Full Name	ther's Full Name Maiden Name							
Language English or Non-English Active Military Y								
Residence (911 Address)	Cit	y	Zip					
Mailing Address	Ci	ty	Zip					
County Email Address								
Primary Phone Cell Pho	ne	Work Phone						
Employer Employment Add	lress							
Number you preferred to be notified by Emergency Notified	cation System (School Messenge	r)						
Father's Full Name								
Language English or Non-English Active Military Y	or N Active Member of Reser	ves Y or N Active						
Residence (911 Address)	Cit	у	Zip					
Mailing Address	Cit	ty	Zip					
County Email Address Can pick up student at sch			tudent at school Y or N					
Primary Phone Cell Pho		Work Phone						
Employer Employment Add								
Number you preferred to be notified by Emergency Notified	cation System (School Messenge	r)						
A copy of the legal court order regarding child's cust parents. A legal custody order is required from any g		t school if student do	es not reside with both					
Guardian's Full Name								
Language English or Non-English Active Military Y	or N Active Member of Reser	ves Y or N Active						
Residence (911 Address)	Cit	y	Zip					
Mailing Address_	Cit	ty	Zip					
County Email A	.ddress							
Primary Phone Cell Pho	ne	Work Phone						
Employer Employment Add	lress							
Number you preferred to be notified by Emergency Notifie	cation System (School Messenge	r)						

Student Name				G	Grade
Mode of Transportation (Circle)	Private Automobile	or School Bus	Bus #		
The following persons have permiss required.	sion to pick up or check out	this student from school	l. Proof of iden	tification v	will be
Full Name	Relationship to Student	Address		F	Phone #
	_				
T	1 11.6 . 1 .			<u> </u>	
List any restrictions in regard to pic	k up rights for student				
Code of Conduct - The Code of Co	-	•			
the tab 'Parents' . The <i>Code of Conduct</i> c standards, as well as other legal notices	1				•
contents of the <i>Code of Conduct</i> , includir		_	•	•	•
you and your child are aware of the con		, , , , , , , , , , , , , , , , , , , ,	,		
December / Leavel Councilian Ciamatana			Data		
Parent/Legal Guardian Signature _			Date	:	
		cy Questionnaire			
This question	nnaire is intended to address	s the McKinney-Vento A	ct 42 U.S.C. 11	435.	
1. Is your current address a temporary living arrangement?			Yes	or	No
2. Is this temporary living arrangement due to loss of housing or economic hardship?			Yes	or	No
If you answered YE	S to the above question	ns, please provide the	e following i	nformati	on:
3. Where does your child stay at nig	ght? (Please check one)				
Home/aparts	ment owned or rented by the p	parent(s)/mardian(s)			
	ve or friend (family does not ha				
In a shelter		,			
In a motel In an automo	shile				
A campsite	Dile				
In housing th	nat is inadequate (i.e. no electri				
Other housing	ng (please explain):				
4. Do you currently have pre-school	l children not enrolled in sch	hool?	Yes or	r No	
If yes, please list their names and ag	;es:				
.	10.1	1 0	D 10:		11
Presenting a false record or false	• •				
child under false documents	s subjects the person to li	admity for tuition or other	ner costs. 1 E	€ Sec.25.	υυ2(3)(a).
Parent /Legal Guardian Signature			Date		