**HICKMAN COUNTY SCHOOL ENROLLMENT FORM**

MORE INFORMATION ON BACK

**Student's Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last First Middle**

Student's SS# \_\_\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_\_ Student's Date of Birth \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_

Student's Birth City Student's Birth State Student's Birth County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's Birth Country Mother's Maiden Name

Date Enrolled: Year student first enrolled in any U.S. school\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age Grade Sex: M\_\_\_F\_\_\_\_ Language spoken in home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Street City Zip

**Race:** Hispanic/Latino\_\_\_\_ American Indian \_\_\_\_\_ White \_\_\_\_\_ Pacific Islander

Black/African American \_\_\_\_ Asian \_\_\_\_ Multi-Racial

**Primary Ethnicity** (Check ONLY ONE): American Indian \_\_\_ Asian

\_\_\_\_\_\_Black/African American \_\_\_\_\_Hispanic/Latino

\_\_\_\_\_Native Hawaiian/Pacific Islander \_\_\_\_\_White

**BUS:** Morning Bus # Afternoon Bus #\_\_\_\_\_\_\_\_\_\_ Miles (one way)\_\_\_\_\_\_\_\_\_\_

**PARENT INFORMATION:**

**Father's/Guardian's Name:**

911 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City Zip

P.O. Box Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment (Company name)

**Is Father/Guardian currently enlisted in: Army\_\_\_\_\_ Navy\_\_\_\_ Air Force\_\_\_\_\_ Marines\_\_\_\_ Coast Guard\_\_\_\_\_**

**National Guard Reserves Are You: Full Time\_\_\_\_\_ Part Time\_\_\_\_\_**

**Mother's/Guardian's Name:**

911 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City Zip

P.O. Box Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment (Company name)

**Is Mother/Guardian currently enlisted in: Army\_\_\_\_\_ Navy\_\_\_\_ Air Force\_\_\_\_\_ Marines\_\_\_\_ Coast Guard\_\_\_\_\_**

**National Guard Reserves Are You: Full Time\_\_\_\_\_ Part Time\_\_\_\_\_**

**Who has legal Custody of this Child?** Both Mother Father Other

**Who does the child live with?** Both Mother Father Other

**EARLY DISMISSAL/EMERGENCY INFORMATION:**

Please indicate what your child will do ***to get home in*** *cars* ***of early dismissal from school in case of emergency*** or inclement weather. Because of limited time and the number of students, we will not be able to let students call individually.

\_\_\_\_\_\_\_\_\_Bus/Number \_\_\_\_\_\_\_\_\_Car Rider \_\_\_\_\_\_\_Other Specify Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Who HAS PERMISSION TO PICK UP your child and can be contacted in case of emergency or early dismissal:**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Who CANNOT pick up your child at any time:**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PREVIOUS SCHOOL INFORMATION:**

Has the student ever been enrolled in Hickman County Schools? yes no

If entering from another school system:

Name of School

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City/State Zip

Has the student ever received Special Education Services Yes \_\_\_\_No

**PHOTO AND INFORMATION RELEASE:**

May your child's photo or information be released in district publications, local newspapers or social media?

Yes\_\_\_\_\_ No\_\_\_\_\_\_\_

May your child's information be released to Military? May your child's information be released to Colleges?

Yes\_\_\_\_\_\_ No\_\_\_\_\_\_ Yes\_\_\_\_\_ No\_\_\_\_\_\_

**CORPORAL PUNISHMENT:**

In the event that alternative disciplinary methods do not seem to be effective, may your student receive corporal punishment (paddling) by administration? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF PARENT/GUARDIAN** DATE: