Kenai Peninsula Borough School District
Student Registration Information Form

Office Use Only
ID #
School
Grade
Locker
Teacher
Immunizations Current _____

Student's Legal Name _____
Last Name (Suffix) First Middle

Phy Address _____ City _____

Student's Mailing Address _____ Address City State Zip Code _____ Phone (Home /Student Cell)

2nd Mailing Address _____ Address City State Zip Code _____ Relationship

Parents E-Mail _____ Relationship - Mother/Father/Other - Circle one

Parent E-Mail2 _____ Relationship - Mother/Father/Other - Circle one

Student Resides With _____ Parents-Father-Mother-Joint-Guardian-etc

Student's Date of Birth _____ Month/Day/Year

Student's Place of Birth _____ City _____ State

Are there any custody arrangements? ___Yes ___No *If yes, legal custody documents must be submitted to the school office.*

Is the Student Hispanic or Latino? ___Yes ___No ___Male ___Female Language Spoken at Home _____

Active Duty Parent/Guardian? ___Yes ___No

Is the Student: (Choose one or more. You must select at least one.)
___ Caucasian ___ Black ___ Asian ___ American Indian ___ Alaska Native ___ Pac Islander/Hawaiian

Parent/Guardian Contact Information

Name	Relationship	Home Phone #	Work Phone #	Cell Phone #	Place of Employment

Emergency Information - If unable to contact parents, in case of emergency or illness, who shall we call and to whom may we release your child?

	Emergency				
	Emergency				
	Emergency				
	Emergency				

School Information:

Name of preschool attended _____

Name of last school attended _____

Address of last school attended _____

Have you ever attended school in the Kenai Peninsula Borough? ___ Yes ___ No

Do you qualify for any type of Special Education services? ___ Yes ___ No

Are you currently receiving any type of Special Education services? ___ Yes ___ No

If Yes, check the courses that your student was in at his/her previous school

___ Study Skills ___ Speech ___ Resource ___ Life Skills

The above information is correct to the best of my knowledge:

_____
Signature of Parent or Guardian Date

In case of emergency, Student released to:

_____
(** For Office Use Only **) Date