

Harvest Elementary

Alpine School District
**KINDERGARTEN REGISTRATION
 FORM**



TIME PREFERENCE			
<input type="checkbox"/> A-AM	<input type="checkbox"/> A-PM	<input type="checkbox"/> B-AM	<input type="checkbox"/> B-PM

Student's Name _____
 Last First Middle

Circle One
 BOY GIRL Name you want your child called in school _____

Date of Birth _____ Birth Place (City & State) _____

Father's Email _____ Mother's Email _____

Student's Home Address _____
 City State Zip

Name of Parent or Legal Guardian _____

STUDENT LIVES WITH <i>(Write Names)</i>	FOSTER	STEP	<i>Circle Primary Phone #</i>		
			HOME PHONE	CELL PHONE	WORK PHONE
Mother					
Father					
Guardian					
Other					

Circle One
 Yes No Do you have legal custody of the child you are registering?
 Yes No Is the child you are registering a foster child/ward of the court?
 Yes No Does this child have an Individualized Education Plan or is he/she receiving Special Education Services?
 Yes No Has your child attended an Alpine School District pre-school?
 Yes No Has your child been living in the US for the last 3 years?
 Yes No Are you living with friends or relatives?
 Yes No Is the primary language spoken in the home English? If no, what language is spoken? _____

I attest by this signature I am the custodial parent or legal guardian of the student above. I acknowledge that falsifying this record makes me subject to law.

Parent/Guardian Signature _____ Date _____

PLEASE TURN OVER AND FILL OUT BACK OF THIS FORM

OFFICE USE ONLY

Pre-Registration Teacher _____ AM PM Student # _____ Date Enrolled _____

Immunizations - Complete In Process Birth Certificate Proof of Residency Legal Docs

Post-Registration Skyward - NCLB Schedule Home Room Student Count Class List ESL
 Y or N

ETHNICITY: Is this student Hispanic/Latino?

_____ Yes, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

_____ No, not Hispanic/Latino

The question above relates to ethnicity, not race. Please mark one or more to indicate your student's race.

RACE: What is your student's race: (Choose one or more)

_____ **American Indian or Alaska Native** (A person having origins in any of the original peoples of North and South American (including Central America,) and who maintains tribal affiliation or community attachment.

_____ **Asian** (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand, and Vietnam.)

_____ **Black or African American** (A person having origins in any of the black racial groups of Africa.)

_____ **Native Hawaiian or Other Pacific Islander** (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

_____ **White** (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

_____ I understand that the district is required to report the above information for all students, but I refuse to declare a race. I also understand that if I refuse to declare a race district personnel will do their best to determine my child's race and report that determination.