



# Glencoe-Silver Lake Public Schools

Independent School District #2859

## New Student Registration Form

**Use legal name only.** The purpose and intended use of this data is to enable the school staff to effectively and safely provide service to you and your family. You have the right to refuse the needed information; however, if you do not complete all information you may not receive services needed. The information we collect will be maintained in the office and may be shared with authorized school personnel.

### Enrolling Student:

Legal last name		Legal first name		Middle name	None <input type="checkbox"/>
Grade	Nickname/Preferred Name to use at School		Date of birth		Gender – circle one M or F
Country of birth _____ If country of birth is not USA, date of first enrollment in a USA school Date _____ Year _____					
Child lives with: _____ both parents _____ mother only _____ father only _____ joint custody _____ foster parents _____ other (specify) _____					
<input type="checkbox"/> Military-Connected Youth Indicate if the student has an immediate family member who is currently in the armed forces as a reservist or on active duty, or who has recently retired.					

### Parent/Legal Guardian and Emergency Contact #1:

Last name		First name		Middle name	
Gender: M or F	Email		Employer/Occupation		
County you live in			Work phone ( ) -		
Home phone ( ) -			Cell phone ( ) -		
Residential address <input type="checkbox"/> Check here if you are currently homeless		City		State	Zip
Mailing address (if different or P.O. Box)		City		State	Zip
Relationship to student					

### Parent/Legal Guardian and Emergency Contact #2:

Last name		First name		Middle name	
Gender: M or F	Email		Employer/Occupation		
County you live in			Work phone ( ) -		
Home phone ( ) -			Cell phone ( ) -		
Residential address <input type="checkbox"/> Check here if you are currently homeless		City		State	Zip
Mailing address (if different or P.O. Box)		City		State	Zip
Relationship to student					

**REQUIRED** Please list school name, city, state and phone number of previous schools attended last 4 years

(School most recently attended)

**REQUIRED** Has this child ever attended a school in Minnesota?  Yes  No

If yes, where and when? \_\_\_\_\_

Have you recently moved within the last 36 months for temporary or seasonal agricultural or fishing work?  Yes  No

Has this child ever received special education services?  Yes  No Does this child have an active IEP?  Yes  No

Is this child currently on a 504 Plan?  Yes  No Is this child receiving ESL services?  Yes  No

Is this child receiving Title I services?  Yes  No Indicate special needs, handicaps or disabilities the school should be aware of \_\_\_\_\_

Has this child completed Early Childhood Screening?  Yes  No Screening Date: \_\_\_\_\_

**LEGAL GUARDIANSHIP PAPERS ON FILE?**  Yes  No

The school has the responsibility for the welfare of the child, but can only function according to the law when properly informed. If parents of the child are separated, the school district must be informed (1) who has the custody of the child and (2) what person(s) are approved to see the child or to transport him/her away from school. If there is a restraining order in effect denying either of the parents the right to see or contact the child, there must be a court order on file in the school office.

Who has legal custody?  Both parents  Father  Mother  Other \_\_\_\_\_

Restraining order?  Yes  No If yes, date of court order \_\_\_\_\_

Court order on file in school office?  Yes  No

**Siblings of enrolling student**

Legal last name	Legal first name	Legal middle name	Gender: M or F	Date of birth
Legal last name	Legal first name	Legal middle name	Gender: M or F	Date of birth
Legal last name	Legal first name	Legal middle name	Gender: M or F	Date of birth
Legal last name	Legal first name	Legal middle name	Gender: M or F	Date of birth
Legal last name	Legal first name	Legal middle name	Gender: M or F	Date of birth

Please add additional children on another piece of paper.

Check box if you would like to receive **Spanish-interpreted documents** when available.

**Non-household Member Emergency Contact #3:** Adult who can assume responsibility & is authorized to take your child in an emergency.

Name	Relationship to student
Home phone (        )                                -	Cell phone (        )                                -

**Non-household Member Emergency Contact #4:** Adult who can assume responsibility & is authorized to take your child in an emergency.

Name	Relationship to student
Home phone (        )                                -	Cell phone (        )                                -

**Elementary students-**A student's transportation eligibility is determined based on the distance they must travel to and from school. Transportation is provided to those students who must travel from home or a daycare provider that is one mile or more from school. **Preschool students-**Transportation is available to most preschool students within the district. If your child transports from daycare, fill in the information below.

Name of daycare provider \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Address of daycare provider \_\_\_\_\_ City \_\_\_\_\_

I hereby give my permission for the professional persons, school district, or agency listed above to release all school records, psychological assessments, and/or health records regarding my child to Glencoe-Silver Lake School District #2859 for the purpose of planning educational services. If there are changes to any information provided, I will contact GSL Schools.

Form completed by \_\_\_\_\_ Date \_\_\_\_\_  
Please print name

**Parent's signature** \_\_\_\_\_ Relationship to student \_\_\_\_\_  
Signature

**Thank you for returning this form to your child's GSL school. Questions? Contact:**

Preschool: Michelle Marti, 320-864-2681	GSL Jr./Sr. High School (7-12): Cheryl Templin, 320-864-2405
Lincoln Elementary School (K-2): Kim Ruschmeier, 320-864-2666	District Office: Trisha Zajicek, 320-864-2494
Lakeside Elementary (3-6): Lori Hatlestad, 320-864-2500	

**Internal Use Only**

Teacher/RAP:	Transportation	Locker #
Records Requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	Records Received? <input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:



## 2019-20 Ethnic and Racial Demographic Designation Form

Student's First Name: \_\_\_\_\_ Middle Name/Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ District: \_\_\_\_\_ School: \_\_\_\_\_

Schools are required to report ethnicity and race to the state and to the U.S. Department of Education. Because of recent changes to Minnesota state law, Minnesota disaggregates each category into detailed groups to further represent our student populations. Parents or guardians are not required to answer the federal questions (**in bold**) for their children. If you choose not to answer the federal questions (**in bold**), federal law requires schools to choose for you. This is a last resort—we prefer if parents or guardians complete the form. State questions are labeled as “Optional” and schools will not fill in this information for you.

This information helps improve teaching and learning for everyone and helps us accurately identify and advocate for students currently underserved. The information this form collects is considered private information. You can review the privacy notice to learn more about the purpose of collecting this information, how it will be used and not used, and how the detailed groups were identified. The privacy notice can be found in our [Frequently Asked Questions: Ethnic and Racial Designation Form](#).

**Is the student Hispanic/Latino as defined by the federal government?** The federal definition includes persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.<sup>1</sup>

*[You must select “yes” or “no” to this question.]*

**Yes** *[If yes, go to Question A.]*

**No** *[If no, go to Question 1.]*

Optional Question A: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- |  |                                       |  |  |
|--|---------------------------------------|--|--|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Guatemalan   | <input type="checkbox"/> Salvadoran                            | <input type="checkbox"/> Other Hispanic/Latino |
| <input type="checkbox"/> Colombian           | <input type="checkbox"/> Mexican      | <input type="checkbox"/> Spaniard/Spanish/<br>Spanish-American | <input type="checkbox"/> Unknown               |
| <input type="checkbox"/> Ecuadorian          | <input type="checkbox"/> Puerto Rican |  |  |

*Go to Question 1.*

*[Select “yes” to at least one of the Questions (1-6) below.]*

**Question 1: Does the student identify as American Indian or Alaska Native as defined by the state of Minnesota?** The state of Minnesota definition includes persons having origins in any of the original peoples of North America who maintain cultural identification through tribal affiliation or community recognition. [This question is needed to calculate state aid/funding.]

**Yes** *[If yes, go to Question 1a.]*

**No** *[If no, go to Question 2.]*

Optional Question 1a: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Cherokee      | <input type="checkbox"/> Other North American Indian Tribal Affiliation |
| <input type="checkbox"/> Anishinaabe/Ojibwe  | <input type="checkbox"/> Dakota/Lakota | <input type="checkbox"/> Unknown  |

*Go to Question 2.*

<sup>1</sup>Federal Register, Vol. 72, No. 202/Friday, October 19, 2007/Notices/59274

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**Question 2. Is the student American Indian from South or Central America?**

**Yes** [Go to Question 3.]

**No** [Go to Question 3.]

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**Question 3. Is the student Asian as defined by the federal government?** The federal definition includes persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.<sup>1</sup>

**Yes** [If yes, go to Question 3a.]

**No** [If no, go to Question 4.]

Optional Question 3a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

Decline to indicate

Chinese

Karen

Other Asian

Asian Indian

Filipino

Korean

Unknown

Burmese

Hmong

Vietnamese

Go to Question 4.

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**Question 4. Is the student black or African American as defined by the federal government?** The federal definition includes persons having origins in any of the black racial groups of Africa.<sup>1</sup>

**Yes** [If yes, go to Question 4a.]

**No** [If no, go to Question 5.]

Optional Question 4a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

Decline to indicate

Ethiopian-Other

Somali

African-American

Liberian

Other black

Ethiopian-Oromo

Nigerian

Unknown

Go to Question 5.

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**Question 5. Is the student Native Hawaiian or Other Pacific Islander as defined by the federal government?** The federal definition includes persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.<sup>1</sup>

**Yes** [Go to Question 6.]

**No** [Go to Question 6.]

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**Question 6. Is the student white as defined by the federal government?** The federal definition includes persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.<sup>1</sup>

**Yes**

**No**

Parent(s)/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

Parent(s)/Guardian Signature \_\_\_\_\_