



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: _____

RACE/ETHNICITY

Part A. Is this student (or are you) Hispanic/Latino? (Choose only one)

No, not Hispanic/Latino

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

*The above part of the question is about ethnicity, not race. No matter what you selected above, **please continue to answer the following** by marking one or more boxes to indicate what you consider your student's (or your) race to be.*

Part B. What is this student's (or your) race? (Choose one or more)

American Indian or Alaska Native (A person having origins in any of the original peoples of North and South America, 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, for example, 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.)

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.

<input type="checkbox"/>	Check box if you would like to receive Spanish-interpreted documents when available.
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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 _____

High School students. Will your high school student be riding the bus to and from school? Yes No
 Please call the **Bus Garage** at **320-864-3032** with transportation-related questions.

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

Parents signature	_____	_____
	Signature	Relationship to student

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: Shelley Renville, 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:

