

**FOR SCHOOL USE ONLY:**

Date Enrolled: \_\_\_\_\_ Entry Code \_\_\_\_\_ Student ID # \_\_\_\_\_ Records Requested \_\_\_\_\_ Graduation Yr \_\_\_\_\_

Birth Cert (NRS 392)      Health (NRS 392)      Guardianship Form      Sp.Ed.      Proof of Res.      Variance

**CARSON CITY SCHOOL DISTRICT STUDENT REGISTRATION FORM**

Name: \_\_\_\_\_ Grade Entered: \_\_\_\_\_  
(Student's legal (last name) (first name) (middle name) as per birth certificate)

Gender: M F      Date of Birth: \_\_\_\_\_ Birth City: \_\_\_\_\_ Birth State: \_\_\_\_\_

Birth Country: \_\_\_\_\_ Date Entered United States: \_\_\_\_\_ Date Entered United States Schools: \_\_\_\_\_

Student Resides With (circle): Mother & Father      Mother      Step-Mother      Father      Step-Father      Legal Guardian(s)

**Legal Guardian (s):** You must supply the School with a copy of the legal guardianship paperwork. Received: YES NO

Home Address: \_\_\_\_\_  
Street City Zip

Mailing Address: \_\_\_\_\_  
Street or P.O. Box City Zip

Home Phone: ( )

Is student ¼ (25%) AMERICAN INDIAN or enrolled in a tribe? \_\_\_\_\_ Yes \_\_\_\_\_ No

If not, was the student's parent/grandparent enrolled in a tribe? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Parent/Legal Guardian Information**

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone: ( )

Home Phone: ( )

Cell Phone: ( )

Cell Phone: ( )

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone: ( )

Work Phone: ( )

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Stepparent Information**

Stepfather's Name: \_\_\_\_\_

Stepmother's Name: \_\_\_\_\_

Cell Phone: ( )

Cell Phone: ( )

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone: ( )

Work Phone: ( )

**Legal Restriction Information:** You must supply the School with a copy of the legal restriction paperwork. Rec: Yes No

If either parent is legally restricted from this student, please specify: \_\_\_\_\_

## Sibling Information

Sibling(s) At This School \_\_\_\_\_ Grade \_\_\_\_\_ Sibling \_\_\_\_\_ Grade \_\_\_\_\_  
Sibling Enrolled in Other Carson City Schools \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_  
Sibling Enrolled in Other Carson City Schools \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_  
Sibling Enrolled in Other Carson City Schools \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

## Previous School Information:

Name of last school this student attended: \_\_\_\_\_  
Address of last school attended: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Has the student ever attended a Carson City school in the past? (circle) YES NO Years Attended ? \_\_\_\_\_  
Which Carson City School (circle)? CHS PIONEER EVMS CMS BORD/BRAY EMPIRE SEELIGER MARK TWAIN FRITSCH FREMONT

Does your child have a current Individualized Educational Plan. (IEP) (Circle one) YES NO	If yes, specify category	Does your student have a 504 Accommodation Plan (Circle one) YES NO
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## Home Language Survey

*The Carson City School District needs to determine the language spoken in the home of each student. This information is essential so that the school can provide appropriate instruction for all students. We ask your cooperation in helping us comply with this important requirement. Thank you.*

1. First language learned by the student? \_\_\_\_\_
2. Language spoken by student with friends? \_\_\_\_\_
3. Language used in the home? \_\_\_\_\_
4. Do you require written translation of information sent home? \_\_\_\_ yes \_\_\_\_ no If yes, specify language \_\_\_\_\_
5. Do you require oral translation when meeting with school officials? \_\_\_\_ yes \_\_\_\_ no If yes, specify language \_\_\_\_\_

## Student Living Arrangements

*The Carson City School District has access to resources for students who are experiencing challenges in their living arrangements that may affect their academic success. In order to see if your child may be eligible, please check the choice that best describes the student's living situation: Own/Rent \_\_\_\_\_ Doubled with another family for financial reasons \_\_\_\_\_ Unemployed \_\_\_\_\_ Evicted \_\_\_\_\_ Hotel/Motel \_\_\_\_\_ RVPark \_\_\_\_\_ Institution \_\_\_\_\_ FosterCare \_\_\_\_\_ Other \_\_\_\_\_*

## ALL SCHOOLS MEDIA NEWS

Occasionally throughout the school year, students receive public recognition for their participation in school activities. This recognition could include television interviews, highlights, newspaper articles, a list of honor roll students, sports team members, school contests, and classroom projects, etc. If you **do not** want to have your child's name and/or photograph (or any other general information, such as age and grade level) released to the media, please sign this form.

Please **do not** release my child's name, photograph, or any other information to the media.

Student's Name \_\_\_\_\_ Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

## ATTENTION: HIGH SCHOOL STUDENTS ONLY

Phone numbers and/or addresses will be available for representatives from colleges and universities. A signature means you **do not** want your child's information released.

Parent/Guardian Signature or High School Student Signature (if 18 or older) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_