

Sisseton School District Registration Information

Has the student ever attended school in the Sisseton School District before? Yes / No If yes -When _____
What school did you attend before coming here? _____

HEAD OF HOUSEHOLD: Last Name: _____ First Name: _____

Relationship to Student: _____

Mailing Address/City/State/Zip _____

Home Phone # _____ Work Phone # _____ Other Phone # _____

Cell Phone # _____ E-Mail Address: _____

Physical Address: (NOT PO BOX) _____
Number Street City State ***County***

Permanent Address: Is this your permanent address? Yes No

If Rural Address, please list section and township: _____

If Rural Resident, will you need Bus Transportation: Yes / No

STUDENT RESIDES WITH: ___ Father ___ Mother ___ Other _____ (Specify)

Parents Info: Father: _____ Occupation: _____ Employer: _____

Work Phone # _____ **Mother:** _____ Maiden Name: _____

Occupation: _____ Employer: _____ Work Phone # _____

Marital Status: ___ Married ___ Single ___ Divorced ___ Separated ___ Widow(er)

STEP (father / mother) _____ Occupation: _____ Employer: _____

Work Phone # _____ **Guardian:** _____ Occupation _____

Employer _____ Work Phone # _____

OTHER HOUSEHOLD CHILDREN: (Include all children)

Name (Full Legal)				Name (Full Legal)			
Last, First, Middle Name	Grade	Birth date	Gender	Last, First, Middle Name	Grade	Birth date	Gender
1. _____	_____	/ / /	_____	4. _____	_____	/ / /	_____
2. _____	_____	/ / /	_____	5. _____	_____	/ / /	_____
3. _____	_____	/ / /	_____	6. _____	_____	/ / /	_____

STUDENT INFO: Last Name: _____ First Name: _____ Full Middle Name _____

Legal Name (if different than above): _____ Grade _____

Social Security Number: **XXX-XX-** _____ Gender: ___ Male ___ Female

Date of Birth: _____ Birth Place: (City): _____ (State): _____ (Country) _____

Citizenship (please circle): US Citizen / Foreign Exchange / Immigrant or Refugee / Resident Alien. Non - US Citizen, Proper Documentation is needed.

EDUCATION: (Please circle)

Is your child on suspension or expulsion from a different school district: Yes/No
Is your child open enrolled from another school district? Yes/No
Do you live outside of the Sisseton School District? Yes/No
Does your child receive educational assistance or an IEP/504 plan? Yes/No
If "yes" to any of the above questions, please explain:

ETHNICITY: Circle One

Is student Hispanic or Latino? (A person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish Culture or origin, regardless of race). Yes/No

RACE: Circle all that apply: What is student's race? Regardless of how you answered the first question, circle all that apply.

1. **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.)
2. **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.)
3. **Black or African American** (A person having origins in any of the black racial groups of Africa.)
4. **Native Hawaiian or Other Pacific Islander** (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
5. **White** (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)
6. **Nonresident aliens** (for whom neither race nor ethnicity is reported)
7. **Two or more races**
8. **Race and ethnicity unknown**

LANGUAGE:

A local school district may administer a home language survey to students enrolled in the district as the first screening process to identify students with limited English proficiency.

1. What language is most frequently spoken at home? _____
2. Which language did your child learn when he/she first began to talk? _____
3. What language does your child most frequently speak at home? _____
4. What language do you most frequently speak to your child? _____
5. * **Did your family move here for Agriculture related employment? Yes or No**
6. Do you prefer written or oral communications from school? Circle one: Written or Oral

Are there any Legal Papers we need to be aware of and have on file? (Custody, Name Changes, Restraining Orders, Visitation Rights)

Circle: Yes/No

EMERGENCY CONTACT #1 OTHER THAN PARENT OR GUARDIAN

Last Name: _____ First Name: _____ Relationship to Student: _____

Home Phone # _____ Work Phone # _____ Cell Phone # _____

EMERGENCY CONTACT #2 OTHER THAN PARENT OR GUARDIAN

Last Name: _____ First Name: _____ Relationship to Student: _____

Home Phone # _____ Work Phone # _____ Cell Phone # _____

CAMPUS MESSENGER is the tool used to get important messages or parents, such as weather related school announcements and cancellations. Each household needs phone number listed (home or cell phone) to receive these messages. Please give us the phone numbers you would like used for this service. _____

Signature of Parent or Guardian _____ Date: _____

District Signature _____