

Preschool Section Preferred AM or PM
If Preferred Section is full
will you take the other? Yes or No
Are you a WLS Returning
Preschool Student? Yes or No

Student Registration Form

Are you a resident of Wayne Local School District? Yes No
Has your child ever been enrolled in Wayne Local School District? Yes No

OFFICE USE: Enrollment Date _____ ID# _____

PLEASE PRINT

Student Legal First Name _____ Legal Middle Name _____
Legal Last Name _____ called Name _____ Mother's Maiden Name _____
Student's Social Security # _____ Student's Date of Birth _____
Gender M/F _____ Birthplace City _____ State _____ Native Language _____ Grade _____
Street Address _____ PO Box # _____ Apt. # _____ Lot # _____
City _____ State _____ Zip _____ Home Phone () _____
School Previously Attended _____ City _____ State _____

CITIZEN STATUS OF STUDENT: U.S. Citizen Non-U.S. Citizen/Immigrant

RACIAL/ETHNIC GROUP:

Is the student of Hispanic/Latino heritage? Yes No

What race is the student? (Choose ONE OR MORE)

- White (Persons having origins in any of the original peoples of Europe, North Africa or the Middle East)
 Black or African American (Persons having origins in any of the Black racial groups of Africa)
 Asian (Persons having origins in any of original peoples of the Far East, Southeast Asia, or the Indian subcontinent.
 American Indian or Alaskan Native (People who maintain tribal affiliations or community attachment to the original peoples of North, South and Central America)
 Native Hawaiian or Other Pacific Islander (Persons having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands)

* The U.S. Department of Education allows observer identification if a parent or guardian refuses to provide their child's racial/ethnic group. The observed designation will be communicated to the parent or guardian by the district prior to designation.

HOME LANGUAGE SURVEY

State and Federal regulations requires Wayne-local Schools to have the following Home Language Survey completed and on file for every child enrolled in our district. Please answer all questions. Please Print.

For Parents/Guardians: Please answer the following questions:

1. What language did your son/daughter speak when he/she first learned to talk? _____
2. What language does your son/daughter use most frequently at home? _____
3. What language do you speak most frequently to your son/daughter? _____
4. What language do the adults at home most often speak? _____
5. How long has your son/daughter attended school in the United States? _____

I understand that State and Federal regulations require the school district to collect information regarding my child's native language. The above information is true and accurate.

Parent/Guardian Signature X _____ Date _____

Is this child receiving Special Education Services? Yes No
Is this child receiving Gift Education Services? Yes No

If yes, does this student have a current IEP? Yes No
If yes, does this student have a current WEP? Yes No

STUDENT NAME: _____

GRADE: _____

Student lives with:

Two parents present (natural or step)

- Living with Mother and Father
- Living with Mother and Stepfather
- Living with Father and Stepmother

One parent present (natural or step)

- Living with Mother
- Living with Father

Living with Legal Guardian

Living with Foster Parents

Other siblings in the Wayne local School District:

Name _____ Grade _____ Name _____ Grade _____

Name _____ Grade _____ Name _____ Grade _____

Status of Parents: Married Divorced Widowed Separated Single/Never Married

If divorced, who has legal custody? Mother Father Shared Parenting

Custody Papers? Yes No

Are you the natural/adoptive parent(s) of the child? Yes No

Was the child court placed in your home? Yes No If yes, Date of Assignment _____ County _____

If foster/guardian, in which district did the natural parent(s) reside at the time of placement _____

FATHER/GUARDIAN:

MOTHER/GUARDIAN:

Name _____

Name _____

Address (if different) _____

Address (if different) _____

Home/cell phone _____

Home/cell phone _____

Email _____

Email _____

Employer _____

Employer _____

Work Phone _____

Work Phone _____

Stepmother (if applicable) _____

Stepfather (if applicable) _____

Cell _____ work phone _____

Cell _____ work phone _____

Falsification under Ohio Revised Code section 2921.13 is a misdemeanor of the first degree punishable by a maximum of six months imprisonment or a fine of \$1,000 or both.

I, the undersigned, do hereby state and declare under penalty of falsification that I am the parent or legal guardian of the student named on this form and that this registration information is true and correct.

Parent/Guardian Signature _____ Date: _____