

For School Year \_\_\_\_\_ - \_\_\_\_\_

## Student Information

Student's Name \_\_\_\_\_ Nickname (if any) \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
Last First Middle

Ethnicity (requested for state statistics): \_\_\_\_\_

Student's Age \_\_\_\_\_ Date of birth \_\_\_\_\_ Place of birth (city, state) \_\_\_\_\_

Current Grade in School: \_\_\_\_\_ Applying for Grade \_\_\_\_\_

Full or PartTime? \_\_\_\_\_

Student lives with (if other than parents) \_\_\_\_\_

## Previous School Experience

Please list schools your child has