

Sandusky City Schools - Registration Form Grades K-6

407 Decatur Street, Sandusky, OH 44870-2442



First Name		Middle Name		Last Name		Date of Birth ____/____/____	
Address		Apt.	Home Phone ____-____-____		Work Phone ____-____-____		Cell Phone ____-____-____
Grade _____ Gender: Male _____ Female _____		Ethnicity/Race Answer both questions (Required by the U.S. Dept. of Education, 72 Fed. Reg. 59267) 1. Ethnicity of child: (please check one) Hispanic/Latino Yes__ No__ 2. Race of child: (check all that apply)					
Student I.D. (assigned by district)		American Indian or Alaska Native _____ Asian _____ Black/African American _____ Native Hawaiian/other Pacific Islander _____ White/Non-Hispanic _____					
Place of Birth City _____, State _____			Primary language spoken at home: English _____ Other (specify) _____			Has student ever attended Sandusky City Schools? Yes _____ No _____	
Previous School Attended				Services Received Special Education (IEP/MFE) _____ ESL Services _____ Gifted _____ 504 Plan _____			
Previous School Address/City/State/Zip				Previous School : Phone _____ Fax _____			
Biological Parent Information							
Mother Last Name _____		First Name _____		Maiden Name _____			
Address, if different from above _____				City _____		State _____	Zip _____
Father Last Name _____		First Name _____					
Address, if different from above _____				City _____		State _____	Zip _____
Residential Information, Child lives with: Biological/Adoptive Parents _____ Mother only _____ Father only _____ Grandparents _____ Mother/Stepfather _____ Father/Stepmother _____ Foster Parents _____ Other _____							
If child is NOT living with both Natural Parents, is there a temporary or permanent custody order/decreed allocating parental rights and responsibilities? Yes _____ No _____ If yes, you must provide a certified/journal entry stamped copy of that order and any future changes or modifications.							
If child lives with Legal Guardian/Foster Parent/Other, please provide the following information.							
Last Name _____		First _____					
<i>(Legal Guardian/Foster Parent/Other must reside at the above address listed for child.)</i>							
Custody Legal Guardian _____ Foster Parent _____ Grandparent Act _____ Other _____							
Please list all siblings who attend Sandusky City Schools in Grades K-6 only							
Last Name _____		First _____		Current Grade _____		Building Attending _____	
Last Name _____		First _____		Current Grade _____		Building Attending _____	
Last Name _____		First _____		Current Grade _____		Building Attending _____	
To the best of my knowledge, the above information is correct and I am aware will be filed with my child's school records.							
(sign) _____				(date) _____			

Form 040 1312 11-2011

Office Use Only

Start Date _____ Building Assigned to _____ Parent _____ Bus Garage _____ DASL _____

Bus Stop _____ AM Bus # _____ Time _____ PM Bus # _____ Time _____