

Hardee County School District Student Registration Form

Local ID# _____ Entry Date _____ Entry Code _____ School _____ Teacher _____

Student Information

Last		Suffix	First		AKA		Middle			
SS# (optional)		DOB		Gender	Birth Place			Birth Verification	Grade	
Prior Retention: Yes ___ No ___		Grade		Immunization Code			Expiration Date			
Hispanic/Latin Origin: Yes ___ No ___		American Indian/Alaska: Native Yes ___ No ___		Asian: Yes ___ No ___		Black/African American: Yes ___ No ___		Native Hawaiian/Other Pacific Islander: Yes ___ No ___		White: Yes ___ No ___
Physical Address					City			Zip		
Mailing Address					City			Zip		
Home Phone		Does your child ride a bus? Yes ___ No ___					AM Bus #		PM Bus #	
Emergency Phone		Name					Relationship			
Emergency Phone		Name					Relationship			

Parent/Guardian Information

Military Family Student: Yes ___ No ___		Both Natural Parents		Mother	Father	Foster Parent	Other		
Custody Code:					Temporary Custody:				
Father's Name (or legal guardian)					Mother's Name (or legal guardian)				
Employer					Employer				
Contact Phone					Contact Phone				
Alternate phone					Alternate phone				
Email address					Email address				

School Enrollment Information

Date Entered US School		Last School Attended			Withdrawal Date		School phone number		
Address				City/State				Zip	
Has student previously attended a Florida school? Yes ___ No ___ Where _____ Date _____									
Has student previously attended a school in this county? Yes ___ No ___ Where _____ Date _____									
School age siblings:									
Have parents traveled within the past 3 years in order to work in seasonal, temporary, or agricultural labor? Yes ___ No ___									
Type of work					Where did you move from?				
Is a language other than English used in your home? Yes ___ No ___					Language				
Did the student have a first language other than English? Yes ___ No ___					Language				
Does this student most frequently speak a language other than English? Yes ___ No ___					Language				
Has the student ever been in a special education program? Yes ___ No ___							Type		
Parent/Guardian Signature:									

White: Cum Folder
Yellow: Data Clerk
Pink: Migrant Clerk