

**Rochester City School District  
Registration Form**

**Student Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Male  Female

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade entering: \_\_\_\_\_ Cohort Year \_\_\_\_\_ Repeating? \_\_\_\_\_

Does student need/receive special services?  Yes  No  
 List service(s) \_\_\_\_\_

**ADULT INFORMATION**

	PARENT/LEGAL GUARDIAN	ADULT #2
<b>Name</b>		
<b>Relationship</b>		
<b>Address/Zip Code</b>		
<b>Home Phone</b>		
<b>Work Phone</b>		
<b>Pager/Cell phone</b>		

**SIBLING INFORMATION**

Name of sister(s) brother(s)	Age	Name of sister(s) brother(s)	Age

follow the directions on the Home Language Questionnaire (separate form) relative to referring students to the Language Placement Center.

Parent Signature \_\_\_\_\_

**FOR OFFICE USE ONLY**

Student I.D. # \_\_\_\_\_ Start Date \_\_\_\_\_

School Assigned \_\_\_\_\_ Grade Level \_\_\_\_\_

Pre-K Only: AM Session \_\_\_\_\_ PM Session \_\_\_\_\_ Full Day \_\_\_\_\_

- 1 Transfer within District from \_\_\_\_\_
- 5 Entering from non-public school \_\_\_\_\_
- 6 Entering from out of District \_\_\_\_\_
- Home School/ Other, specify \_\_\_\_\_

Federal Ethnic Category:  Hispanic or Latino  Not Latino/Hispanic

Federal Race:  American Indian or Alaska Native  Black or African American  White  
 Native Hawaiian/ or Other Pacific Islander  Asian

Registration completed by: \_\_\_\_\_ Zone: \_\_\_\_\_ Date: \_\_\_\_\_