Wac Berri: _____ **Foomka Diiwaangelinta** **(Somali)**
Si aad u qabsatid ballan Xafiiska Dugsiyada Magaalada Rochester

Taariikhda Gelitaanka__/_____/ **Lambarka Aqoonsiga**_____

Macluumaadka ardayga
Magac Dembe:_____Hore:_____Xarafka Dhexe_____
Lab❑ Dheddig❑
Taariikh Dhalasho:___/_____/_____Dugsi:_____Ilmuhu ma u baahan yahay/ma helaa adeegyo gaar ah?
❑Haa ❑Maya

Adeegyada Tax_____

"Code"ka Degmada: 42 Fasalka Salka ah: _____ ❑1 Beddel Degmada dhexdeeda min_____
❑ 5 Ka soo galaya dugsi aan dadweyne ahayn_____
Macalin: _____ ❑ 6 Ka soo galaya dugsi Degmada ka baxsan_____
❑ Wax kale, qeex_____

Fasalka uu galayo:_____ Sannadka 'Cohort'ka__ Ku-celin?_____

MACLUUNKA DADKA WAAWEYN **Lambarka Qofka Weyn**

	WAALID/KORIYE	QOF WEYN #2
Magac		
Qaraabanimada		
Cinwaan/'Zip Code'		
Talafoonka Guriga		
Talafoonka Shaqada		
Talafoonka Gacanta		

Caddeynta Koriyanimada ee la keenay: _____
Cinwaakii Hore: _____

MACLUUMAADKA WALAALAHA

Magac Walaal	Da'	Magac Walaal	Da'

Sharciga Dawladda Gobolku wuxuu rabaa in la buuxiyo Foomka Waresytaha Afka Guriga dhammaan ardayda cusun ee soo galaeysa dugsiyada dadweynaha Rochester. Xasuuso inaad raacdo tilmaamaha ku qoran Foomka Wareystaha Afka Guriga (oo ah xaanshi kale) sida ardayda loogu diro Xarunta Meeleynta Luqadda.

Saxeexa Waalidka _____

FOR OFFICE USE ONLY

Federal Ethnic Category: ❑Hispanic or Latino ❑Not Latino/Hispanic

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

Proof of DOB: ❑1Birth Certificate ❑Other_____

CHECK IF: ❑Immunization Record ❑Address verified ❑DOB verified ❑Transportation form completed

SCHOOLCHECKLIST:
❑Class List ❑Mainframe ❑HealthRecords ❑EmergencyForm ❑Database
❑Attendance ❑Cum Record ❑Field Trip Form ❑Portfolio ❑LunchApplication
❑Home Language Questionnaire ❑RequestedRecord ❑Release of Info Form ❑Photo/VideoReleaseForm

COPIES TO:
❑Office ❑Teacher ❑Nurse ❑Cafeteria ❑Spec. Service Teacher

Registration completed by:_____Zone:_____Date:_____