Independent School District 196 Rosemount-Apple Valley-Eagan Public Schools Educating our students to reach their full potential

			uly 2000	F	Revised _	January 2	020
Title Student a	and Census Info	rmation					
OFFICE USE ONLY							
Date	School	ol #		_ Student #			
mm/dd/yy							
homeroom	to	eacher/counselor					□ re-enrolled
language code	last locat	tion code	start date _	mm/dd/yy	bus #	time	
□ birth certificate received	☐ guardianship par	pers received \Box	transfer paperwo	rk completed			
PRINT AND COMPLETE AL	L INFORMATION RE	QUESTED BELOW	USING BLACK IN	IK.			
STUDENT Full Legal Name						م العراد : معر	
	last name		first nam	e		middle	name
Birthdate	Grade entering	Gender 🗆 M	□F				
ППЛ аслуу							
Early childhood screening is	required for entry into	public school kinde	rgarten. Has your	child complete	d screening?	kindergarten	only)
☐ Yes, in District 196							
☐ Yes, in (what district?)							
□ No, my child has not be							
Resident district (if not Distri	ct 196):						
If not a resident of District 19	96, has a Statewide E	nrollment Options Fo	orm been complete	ed and approve	ed? □ Ye	es 🗆 No	
Is this student: (check all tha	at apply)						
☐ Foreign exchange stu	,	☐ Receiving Englis	sh Learner service	s			
☐ Receiving Gifted/Tale		☐ Receiving Speci					
☐ Homeless	1100 001 11000	☐ Ward of the stat		000/121			
☐ Receiving 504 Plan se	orvione	□ ward or the stat	C				
☐ Necelving 504 Flan Se	31 VICES						
Last school attended (name))		District	Date	s attended _		
Loot ashaal addrass							
Last school address	street		city	state	ziŗ		country
			•		·		,
Dates attended							
(mo/yr) - (mo/yr)						
		STATE AND F	EDERAL REPO	RTING			
Was your child born outside	of the USA Puerto B	ico or U.S. Territorie	s? □ Yes □ No	(if ves please	e answer two	auestions hel	ow)
			c0010	, y 00, piodoc		940000000000000000000000000000000000000	···/
Date of first enro	Ilment in a USA school	ol:mm/	dd/yy				
0.11-	and the second						
2. How many full ye	ears of school has you	ır cniia completed in	trie USA?				
Have you moved to this are	a within the last 36 mg	onths for temporary	or seasonal agricu	Itural or fishing	work? 🗆 Y	′es □ No	

Minnesota law requires the school district to keep accurate, updated records for all students. The information collected on this form will be used for purposes of enrollment, program eligibility, educational services and state and federal reporting. Some of the information requested is voluntary, such as the state/federal reporting and language information section, however, failure to provide some or all of the requested information may limit the school district's ability to enroll and serve your student. This information will be used within the school district on a need-to-know basis, and may also be shared with the Minnesota Department of Education, released pursuant to a subpoena or court order and shared as otherwise permitted by state and federal law. Some of the information may be classified as directory (public) information.

FAMILY INFORMATION

PRIMARY HOUSEHOL	. D : Parent/Guardian #	/ 1				
Name						_ Gender □ M □ F
last		first		r	middle	
Street address			City	Sta	te Zip Cod	e
Relationship to student			Em	nail		
Phone numbers (chec	k one as primary nu	ımber for school distr	rict announc	ements):		
□ Mobile		□ Work				
In what language doe	s the parent/guardia	n prefer to receive dis	strict comm	unications?		
PRIMARY HOUSEHOL	. D : Parent/Guardian #	#2				
Name						_ Gender □ M □ F
last		first		r	middle	
Relationship to student			En	nail		
Phone numbers: Mob	ile	Wo	rk		Other	
In what language doe	s the parent/guardia	n prefer to receive di	strict comm	unications?		
Other children under	age 18 living in the	PRIMARY HOUSEHOL	_D (list addition	onal children on sepa	rate sheet)	
last name	first name	middle name	gender	birthdate (mm/dd/yy)	relationship to stud	ent school attending
			MF			
			\square M \square F			
SECONDARY HOUSE	HOLD (if applicable)	: Parent/Guardian #1				
Name						_ Gender □ M □ F
last		first			niddle	
Street address			City	Sta	te Zip Cod	e
Relationship to student			Em	nail		
Phone numbers (chec	k one as primary nu	ımber for school distr	rict announc	ements):		
□ Mobile		□ Work □ Other				
In what language does	s the parent/guardia	n prefer to receive dis	strict comm	unications?		
PRIMARY HOUSEHOL	.D : Parent/Guardian #	‡2				
Name						_ Gender □ M □ F
last		first			middle	
Relationship to student			Em	nail		
Phone numbers: Mob	le	Woi	rk		Other	
In what language doe	s the parent/guardia	n prefer to receive di	strict comm	unications?		
Other children under	age 18 living in the l	PRIMARY HOUSEHOL	D (list addition	onal children on sepa	rate sheet)	
last name	first name	middle name	gender	birthdate (mm/dd/yy)	relationship to stude	ent school attending
			□М□Е			

parent/guardian signature

mm/dd/yy