

Student ID _____

SASID _____

EASTON/REDDING/REGION 9 PUBLIC SCHOOLS
Easton - Redding, Connecticut

GRADE ENTERING _____

REGISTRATION CARD

DATE ENTERED _____

(Parents are responsible to inform the school of any change in information on this card.)

LEGAL NAME _____ M F
Last First Middle

HOME ADDRESS _____ Rent Own
Street Town Zip

MAILING ADDRESS _____
Street Town Zip

SOCIAL SECURITY # - - HOME TELEPHONE # _____

BIRTHDATE _____ BIRTHPLACE _____
Month Day Year

COPY OF PROOF OF RESIDENCY ON FILE

LEGAL DOCUMENTATION OF BIRTH ON FILE

Documents reviewed _____

LIST ALL OTHER CHILDREN IN FAMILY

Full Name	Birthdate	Sex	Full Name	Birthdate	Sex
1. _____			4. _____		
2. _____			5. _____		
3. _____			6. _____		

SCHOOLS PREVIOUSLY ATTENDED

List most recent school first

	City and State	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The information below is required by the State of Connecticut Department of Education.

DOMINANT LANGUAGE

1. Student's dominant language? _____
2. What language did your child learn to speak first? _____
3. What is the primary language spoken by parents/guardians or other persons living in the home? _____
4. What is the primary language spoken by your child at home? _____

Is the student a citizen of the United States? Yes No

U.S. DEPARTMENT OF EDUCATION RACE AND ETHNICITY INFORMATION

Is this child Hispanic/Latino? Yes No

What is the child's race?

- American Indian or Alaskan Native Black or African American White
- Asian Native Hawaiian or Other Pacific Islander

