

# WEST HARTFORD PUBLIC SCHOOLS - STUDENT PROFILE ENTRY FORM

NEW STUDENT ENTRY DATE		RETURNING STUDENT ENTRY DATE			DISTRICT ZONE	EXCEPTION	<input type="checkbox"/> COIA MAGNET LOTTERY <input type="checkbox"/> SMITH MAGNET LOTTERY		<input type="checkbox"/> BRISTOW MIDDLE LOTTERY <input type="checkbox"/> PRE-K LOTTERY		<input type="checkbox"/> PUPIL SERVICES <input type="checkbox"/> ELC EVALUATION	
STUDENT NUMBER	SCHOOL CODE	GRADE	HOMEROOM NUMBER	COUNSELOR CODE	LAST NAME			FIRST NAME			MIDDLE NAME	
STUDENT ADDRESS/STREET-APT#-CITY-STATE-ZIP CODE							PRIMARY PHONE #			<b>RACE/ETHNICITY INFORMATION</b>		
BIRTHDATE (MONTH/DAY/YEAR)		BIRTHPLACE (STATE-COUNTRY)		GENDER	DATE FIRST ENROLLED IN ANY US SCHOOL		VERIFICATION OF BIRTHDATE <input type="checkbox"/> BIRTH CERTIFICATE <input type="checkbox"/> PASSPORT		DOES STUDENT HAVE AN IEP? <input type="checkbox"/> YES <input type="checkbox"/> NO		Is this child Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No <hr/> What is the child's race? (Check one or more, even if you answered "Yes" to the Hispanic/Latino question): American Indian/Alaska Native _____ Asian _____ Black or African American _____ Native Hawaiian/Other Pacific Islander _____ White _____	
<b>CURRENT STUDENT FAMILY INFORMATION</b>												
STUDENT RESIDES WITH: <input type="checkbox"/> BOTH PARENTS <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER/STEFFATHER <input type="checkbox"/> FATHER/STPMOTHER <input type="checkbox"/> FOSTER PARENTS <input type="checkbox"/> LEGAL GUARDIAN(S) (SPECIFY RELATIONSHIP) _____                   OTHER _____												
PARENT/GUARDIAN 1: LAST			FIRST			MIDDLE			<b>DOMINANT LANGUAGE SURVEY</b>			
ADDRESS			CELL#			WORK #			What language did your child learn to speak first? _____ What is the primary language spoken by you or other persons in your home? _____ What is the primary language spoken by your child when he/she is at home? _____			
OCCUPATION			EMPLOYER			EMAIL						
PARENT/GUARDIAN 2: LAST			FIRST			MIDDLE						
ADDRESS			CELL#			WORK #						
OCCUPATION			EMPLOYER			EMAIL						
<b>BROTHER/SISTER INFORMATION (UNDER THE AGE OF 18)</b> NAME _____ DOB _____ NAME _____ DOB _____ NAME _____ DOB _____ NAME _____ DOB _____ NAME _____ DOB _____ NAME _____ DOB _____												
<b>PREVIOUS SCHOOL INFORMATION</b>												
LAST SCHOOL ATTENDED					DATE LEFT		LAST GRADE COMPLETED					
STREET			CITY			STATE		ZIP		GRADES REPEATED (IF ANY)		
PHONE:					FAX:						<b>PARENT/GUARDIAN SIGNATURE X</b>	
							PARENT SIGNATURE			DATE		
							INTERVIEWER SIGNATURE			DATE		
<b>RESIDENCY VERIFICATION INFORMATION</b>												
MORTGAGE STMT _____		SETTLEMENT STMT. _____		CLOSING DATE _____		UTILITY BILL _____		OTHER _____				
RENTAL AGREEMENT _____		TERM _____		LESSEE(S) _____								
LESSOR _____			LESSOR ADD. _____			PHONE# _____						