For District Use Only	
PA Secure ID#	
Student #	
Homeroom #	

MARPLE NEWTOWN SCHOOL DISTRICT

Student Registration Form

Date _____

Student Legal Name:		Gender		Birth Certificate # & State	
Middle Name:		Birthdate:		Passport #	
Last Name:		Entering Grade:		Ethnicity	
Preferred Name:		Date of Entry		Language Spoken at Home	

Address:		Living with:	
Apartment#/Complex		Parent/Guardian Full Name:	
City/State/Zip		Residence Phone:	
Email Address:		Work Phone:	
Preschool/School Last Attended:		Parent /Guardian #2 Full Name:	
Address		Address (if different)	
		Phone:	

Brothers/Sisters:

Name:	Gender	Birthdate:
Name:	Gender	Birthdate:
Name:	Gender	Birthdate:
Name:	Gender	Birthdate:

I do hereby declare that I am a resident of the Marple Newtown School District and reside at the above address.

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☐ Deed	Curriculum
☐ Lease	Grade
☐ Multiple Occupancy	Building
☐ Other Proof of Residency	☐ Transcripts received
☐ Affidavit Needed	☐ IEP Needed
☐ Custody Agreement	☐ Emergency Cards
☐ Restraining Order	☐ Immunizations

_____ _____

Parent/Guardian Signature Date