



SNOHOMISH SCHOOL DISTRICT 201 NEW STUDENT REGISTRATION FORM

SCHOOL: _____

DATE: _____

DO NOT WRITE IN SHADED AREA – FOR OFFICE USE ONLY

STUDENT SCHOOL NUMBER	SCHOOL ENTRY DATE	MEDICAL ALERT	HOMEROOM NUMBER	LOCKER NUMBER	BUS ROUTE
					AM PM

Has any member of your family ever been enrolled in the Snohomish School District? ☐ Yes ☐ No

STUDENT NAME: Legal Last Name		Legal First Name		Legal Middle Name		Also Known As:	
BIRTHDATE (Month/Day/Year)	GENDER F ☐ M ☐	BIRTHPLACE: City County State Country				Grade Level:	
DISTRICT RESIDENT? ☐ Yes ☐ No		Military Family Status (circle) ☐ A – U.S. Armed Forces active duty ☐ G – National Guard member ☐ M – More than one member of Armed Forces/National Guard ☐ N – No affiliation ☐ R – U.S. Armed Forces reserves ☐ Z – Do not wish to state				PRIMARY LANGUAGE SPOKEN AT HOME ☐ English ☐ Other	
Resident District:							

PRIMARY HOUSEHOLD (primary parent/guardian where student resides) Legal Last Name (of primary contact) Legal First Name Middle Name RELATIONSHIP TO STUDENT ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Guardian ☐ Grandfather ☐ Grandmother ☐ Uncle ☐ Aunt ☐ Agency ☐ Friend ☐ Self				PRIMARY CONTACT # (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted		PRIMARY CONTACT PH #2 (area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted	
Legal Last Name Legal First Name Middle Name RELATIONSHIP TO STUDENT ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Guardian ☐ Grandfather ☐ Grandmother ☐ Uncle ☐ Aunt ☐ Agency ☐ Friend ☐ Self				PHONE #1 (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted		PHONE #2 (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted	
FAMILY EMAIL ADDRESS				ADDITIONAL EMAIL ADDRESS			
RESIDENT ADDRESS	Street			Apt #	City State ZIP		
MAILING ADDRESS (If different from above)	Street			Apt #	P O Box	City State ZIP	
SECOND HOUSEHOLD (Non-custodial parent/guardian not residing with student) Legal Last Name Legal First Name Middle Name RELATIONSHIP TO STUDENT ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Guardian ☐ Grandfather ☐ Grandmother ☐ Uncle ☐ Aunt ☐ Agency ☐ Friend ☐ Self				PHONE #1 (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted		PHONE #2 (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted	
Legal Last Name Legal First Name Middle Name RELATIONSHIP TO STUDENT ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Guardian ☐ Grandfather ☐ Grandmother ☐ Uncle ☐ Aunt ☐ Agency ☐ Friend ☐ Self				PHONE #1 (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted		PHONE #2 (include area code) ☐ Home ☐ Work ☐ Cell ☐ Please check if unlisted	
FAMILY EMAIL ADDRESS				RELATIONSHIP TO STUDENT: ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Guardian ☐ Grandfather ☐ Grandmother ☐ Uncle ☐ Aunt ☐ Agency ☐ Friend ☐ Self			
SECOND HOUSEHOLD MAILING ADDRESS						(Street/PO Box, City, State, ZIP) ADDITIONAL MAILINGS REQUESTED ☐ Yes ☐ No	

SCHOOL PREVIOUSLY ATTENDED	SCHOOL DISTRICT PREVIOUSLY ATTENDED	PREVIOUS SCHOOL LOCATION (City and State)
HAS STUDENT EVER ATTENDED SNOHOMISH PUBLIC SCHOOLS? ☐ Yes ☐ No		DATE ATTENDED (Month/Year)
IF YES, NAME OF SCHOOL(S) ATTENDED		

IS THERE A JOINT-CUSTODY OR PARENTING PLAN IN EFFECT? ☐ Yes ☐ No (If yes, plan must be on file with the school) ☐ Copy Attached

IS THERE A RESTRAINING ORDER IN EFFECT? ☐ Yes ☐ No (If yes, legal papers must be on file with the school) ☐ Copy Attached

Restraining order is against: ☐ Mother ☐ Father Other

Please complete additional registration information on back

HAS THE STUDENT EVER BEEN SUSPENDED FOR A WEAPONS VIOLATION?

☐ Yes☐ No

Date: _____

HAS YOUR CHILD EVER QUALIFIED FOR OR BEEN ENROLLED IN A SPECIAL EDUCATION PROGRAM?

☐ Yes ☐ NoHAS YOUR CHILD EVER BEEN ON AN IEP? (Individualized Education Program) ☐ Yes ☐ NoHAS YOUR CHILD EVER QUALIFIED FOR OR HAD A 504 PLAN? ☐ Yes ☐ No

HAS YOUR CHILD EVER PARTICIPATED IN:

☐ Title – Title 1 Services☐ LAP – Learning Assistance Program☐ Gifted – Accelerated Learning Program☐ ELL – English Language Learner

HAS YOUR CHILD EVER BEEN RETAINED?

☐ Yes ☐ No

If yes, at what grade level(s) _____

DOES STUDENT ATTEND CHILD CARE?

☐ Before school ☐ After school ☐ Before and after school

CHILD CARE PROVIDER

Name

Address

Phone Number

ADDITIONAL CHILD CARE ARRANGEMENTS (Please provide information to school in writing)

PLEASE LIST OTHER SIBLINGS ATTENDING SNOHOMISH PUBLIC SCHOOLS

Last Name

First Name

School

Grade

SPECIAL INSTRUCTIONS REGARDING RELIGIOUS BELIEFS (Please provide information to school in writing)

STUDENT RELEASE AUTHORIZATION

When injury, illness or other non-emergency situations occur involving your child, we want to be able to quickly reach families or other responsible adults. In the event we cannot reach a parent/guardian, please list persons you trust who are available during the day to provide care for your child.

PRIMARY EMERGENCY CONTACT (after parent/guardian contact) <i>Legal Last Name</i> <i>Legal First Name</i>		RELATIONSHIP TO CHILD	PHONE #1 (include area code) ☐ Home ☐ Work ☐ Cell	PHONE #2 (include area code) ☐ Home ☐ Work ☐ Cell
PRIMARY CONTACT ADDRESS <i>Street</i>		<i>City</i>	<i>State</i>	<i>ZIP</i>
SECONDARY EMERGENCY CONTACT (after parent/guardian contact) <i>Legal Last Name</i> <i>Legal First Name</i>		RELATIONSHIP TO CHILD	PHONE #1 (include area code) ☐ Home ☐ Work ☐ Cell	PHONE #2 (include area code) ☐ Home ☐ Work ☐ Cell
SECONDARY CONTACT ADDRESS <i>Street</i>		<i>City</i>	<i>State</i>	<i>ZIP</i>

STUDENT RELEASE AUTHORIZATION: In the event that the school is unable to contact the parent/guardian, I authorize that my child may be released to the person(s) listed above.

Legal Parent/Guardian Signature _____ *Date* _____

EMERGENCY MEDICAL AUTHORIZATION: I understand that in the event of accident or illness, every effort will be made to contact parent/guardian immediately. If parent/guardian cannot be reached, I authorize school authorities to obtain emergency care for my child.

Legal Parent/Guardian Signature _____ *Date* _____

ETHNICITY AND RACE COLLECTION FORM – STATE AND FEDERALLY REQUIRED INFORMATION

QUESTION 1. Is your child of Hispanic or Latino origin? (Check all that apply)

- | | | | |
|---|--|---|--|
| ☐ H00 Hispanic | ☐ H08 Costa Rican | ☐ H16 Mexican | ☐ H24 Salvadoran |
| ☐ H01 Not Hispanic/Latino | ☐ H09 Cuban | ☐ H17 Mestizo | ☐ H25 Spaniard |
| ☐ H02 Argentine | ☐ H10 Dominican | ☐ H18 Native | ☐ H26 Surinamese |
| ☐ H03 Bolivian | ☐ H11 Ecuadorian | ☐ H19 Nicaraguan | ☐ H27 Uruguayan |
| ☐ H04 Brazilian | ☐ H12 Guatemalan | ☐ H20 Panamanian | ☐ H28 Venezuelan |
| ☐ H05 Chicano (Mexican American) | ☐ H13 Guyanese | ☐ H21 Paraguayan | ☐ H29 Hispanic/Latino Write In* |
| ☐ H06 Chilean | ☐ H14 Honduran | ☐ H22 Peruvian | |
| ☐ H07 Colombian | ☐ H15 Jamaican | ☐ H23 Puerto Rican | |

QUESTION 2. What race(s) do you consider your child? (Check all that apply)

- | | | |
|---|---|---|
| ☐ B00 Black/African-American | ☐ B46 Somali | ☐ B92 Malian |
| ☐ B01 African American | ☐ B47 South Sudanese | ☐ B93 Mauritanian |
| ☐ B02 African Canadian | ☐ B48 Sudanese | ☐ B94 Nigerien (Niger) |
| ☐ B03 Anguillian | ☐ B49 Ugandan | ☐ B95 Nigerian (Nigeria) |
| ☐ B04 Antiguan | ☐ B50 Tanzanian (United Republic of Tanzania) | ☐ B96 Saint Helenian |
| ☐ B05 Bahamian | ☐ B51 Zambian | ☐ B97 Senegalese |
| ☐ B06 Barbadian | ☐ B52 Zimbabwean | ☐ B98 Sierra Leonean |
| ☐ B07 Barthélemois/Barthélemoises (Saint Barthélemy) | ☐ B53 East African Write In* | ☐ B99 Togolese |
| ☐ B08 British Virgin Islander | ☐ B54 Argentine | ☐ C01 West African Write In* |
| ☐ B09 Caymanian (Cayman Island) | ☐ B55 Belizean | ☐ C02 Black Write In* |
| ☐ B10 Cuba Dominican | ☐ B56 Bolivian | ☐ W00 White |
| ☐ B11 Dominican (Dominican Republic) | ☐ B57 Brazilian | ☐ W01 Bosnian |
| ☐ B12 Dutch Antillean (Netherlands Antilles) | ☐ B58 Chilean | ☐ W02 Herzegovinian |
| ☐ B13 Grenadian | ☐ B59 Colombian | ☐ W03 Polish |
| ☐ B14 Guadeloupian | ☐ B60 Costa Rican | ☐ W04 Romanian |
| ☐ B15 Haitian | ☐ B61 Ecuadorian | ☐ W05 Russian |
| ☐ B16 Jamaican | ☐ B62 El Salvadoran | ☐ W06 Ukrainian |
| ☐ B17 Martiniquais/Martiniquaise | ☐ B63 Falkland Islander | ☐ W07 Eastern European Write In* |
| ☐ B18 Montserratian | ☐ B64 French Guianese | ☐ W08 Algerian |
| ☐ B19 Puerto Rican | ☐ B65 Guatemalan | ☐ W09 Amazigh or Berber |
| ☐ B20 Caribbean Write In* | ☐ B66 Guyanese | ☐ W10 Arab or Arabic |
| ☐ B21 Angolan | ☐ B67 Honduran | ☐ W11 Assyrian |
| ☐ B22 Cameroonian | ☐ B68 Mexican | ☐ W12 Bahraini |
| ☐ B23 Central African (Central African Republic) | ☐ B69 Nicaraguan | ☐ W13 Bedouin |
| ☐ B24 Chadian | ☐ B70 Panamanian | ☐ W14 Chaldean |
| ☐ B25 Congolese (Republic of the Congo) | ☐ B71 Paraguayan | ☐ W15 Copt |
| ☐ B26 Congolese (Democratic Republic of the Congo) | ☐ B72 Peruvian | ☐ W16 Druze |
| ☐ B27 Equatorial Guinean | ☐ B73 South Georgia and the South Sandwich Islands | ☐ W17 Egyptian |
| ☐ B28 Gabonese | ☐ B74 Surinamese | ☐ W18 Emirati |
| ☐ B29 São Toméan | ☐ B75 Uruguayan | ☐ W19 Iranian |
| ☐ B30 Principe | ☐ B76 Venezuelan | ☐ W20 Iraqi |
| ☐ B31 Central African Write In* | ☐ B77 Latin American Write In* | ☐ W21 Israeli |
| ☐ B32 Burundian | ☐ B78 Botswanan | ☐ W22 Jordanian |
| ☐ B33 Comoran | ☐ B79 Mosotho (Lesotho) | ☐ W23 Kurdish |
| ☐ B34 Djiboutian | ☐ B80 Namibian | ☐ W24 Lebanese |
| ☐ B35 Eritrean | ☐ B81 South African | ☐ W25 Libyan |
| ☐ B36 Ethiopian | ☐ B82 Swazi | ☐ W26 Moroccan |
| ☐ B37 Kenyan | ☐ B83 South African Write In* | ☐ W27 Omani |
| ☐ B38 Malagasy (Madagascar) | ☐ B84 Beninese | ☐ W28 Palestinian |
| ☐ B39 Malawian | ☐ B85 Bissau-Guinean | ☐ W29 Qatari |
| ☐ B40 Mauritian (Mauritius) | ☐ B86 Burkinabé (Burkina Faso) | ☐ W30 Saudi Arabian |
| ☐ B41 Mahoran (Mayotte) | ☐ B87 Cabo Verdean | ☐ W31 Syrian |
| ☐ B42 Mozambican | ☐ B88 Ivorian (Cote d'Ivoire) | ☐ W32 Tunisian |
| ☐ B43 Reunionese | ☐ B89 Gambian | ☐ W33 Yemeni |
| ☐ B44 Rwandan | ☐ B90 Ghanaian | ☐ W34 Middle Eastern Write In* |
| ☐ B45 Seychellois/Seychelloise | ☐ B91 Liberian | ☐ W35 North African Write In* |

Please see reverse for additional options.

*Write In _____

What race(s) do you consider your child? (Check all that apply) Continued

- | | | |
|---|---|---|
| ☐ W36 White Write In* | ☐ N25 Skokomish Indian Tribe | ☐ A18 Okinawan |
| ☐ W37 Kuwaiti | ☐ N26 Snohomish Tribe | ☐ A19 Pakistani |
| ☐ N00 American Indian/Alaskan Native | ☐ N27 Snoqualmie Indian Tribe | ☐ A20 Punjabi |
| ☐ N01 Chinook Tribe | ☐ N28 Snoqualmoo Tribe | ☐ A21 Singaporean |
| ☐ N02 Confederated Tribes and Bands of the Yakama Nation | ☐ N29 Spokane Tribe of the Spokane Reservation | ☐ A22 Sri Lankan |
| ☐ N03 Confederated Tribes of the Chehalis Reservation | ☐ N30 Squaxin Island Tribe of the Squaxin Island Reservation | ☐ A23 Taiwanese |
| ☐ N04 Confederated Tribes of the Colville Reservation | ☐ N31 Steilacoom Tribe | ☐ A24 Thai |
| ☐ N05 Cowlitz Indian Tribe | ☐ N32 Stillaguamish Tribe of Indians of Washington | ☐ A25 Tibetan |
| ☐ N06 Duwamish Tribe | ☐ N33 Suquamish Indian Tribe of the Port Madison Reservation | ☐ A26 Vietnamese |
| ☐ N07 Hoh Indian Tribe | ☐ N34 Swinomish Indian Tribal Community | ☐ A27 Asian Write In* |
| ☐ N08 Jamestown S'Klallam Tribe | ☐ N35 Tulalip Tribes of Washington | ☐ P00 Native Hawaiian/Other Pacific Islander |
| ☐ N09 Kalispel Indian Community of the Kalispel Reservation | ☐ N37 American Indian Write In* | ☐ P01 Carolinian |
| ☐ N10 Kikiallus Indian Nation | ☐ N38 Upper Skagit | ☐ P02 Chamorro |
| ☐ N11 Lower Elwha Tribal Community | ☐ A00 Asian | ☐ P03 Chuukese |
| ☐ N12 Lummi Tribe of the Lummi Reservation | ☐ A01 Asian Indian | ☐ P04 Fijian |
| ☐ N13 Makah Indian Tribe of the Makah Indian Reservation | ☐ A02 Bangladeshi | ☐ P05 i-Kiribati/Gilbertese |
| ☐ N14 Marietta Band of Nooksack Tribe | ☐ A03 Bhutanese | ☐ P06 Kosraean |
| ☐ N15 Muckleshoot Indian Tribe | ☐ A04 Burmese/Myanmar | ☐ P07 Maori |
| ☐ N16 Nisqually Indian Tribe | ☐ A05 Cambodian/Khmer | ☐ P08 Marshallese |
| ☐ N17 Nooksack Indian Tribe of Washington | ☐ A06 Cham | ☐ P09 Native Hawaiian |
| ☐ N18 Port Gamble S'Klallam Tribe | ☐ A07 Chinese | ☐ P10 Ni-Vanuatu |
| ☐ N19 Puyallup Tribe of Puyallup Reservation | ☐ A08 Filipino | ☐ P11 Palauan |
| ☐ N20 Quileute Tribe of the Quileute Reservation | ☐ A09 Hmong | ☐ P12 Papuan |
| ☐ N21 Quinault Indian Nation | ☐ A10 Indonesian | ☐ P13 Pohpeian |
| ☐ N22 Samish Indian Nation | ☐ A11 Japanese | ☐ P14 Samoan |
| ☐ N23 Sauk-Suiattle Indian Tribe of Washington | ☐ A12 Korean | ☐ P15 Solomon Islander |
| ☐ N24 Shoalwater Bay Indian Tribe of the Shoalwater Bay Indian Reservation | ☐ A13 Lao | ☐ P16 Tahitian |
| | ☐ A14 Malaysian | ☐ P17 Tokelauan |
| | ☐ A15 Mien | ☐ P18 Tongan |
| | ☐ A16 Mongolian | ☐ P19 Tuvaluan |
| | ☐ A17 Nepali | ☐ P20 Yapese |
| | | ☐ P21 Pacific Islander Write In* |

*Write In _____

REQUIRED INFORMATION: If born in a country other than the United States, please answer these questions:

How many months have you been in the United States? _____ How many years? _____

Has your child had any formal education outside the United States? ☐ Yes ☐ No

Where and how long? _____

Date: _____ Legal Parent/Guardian Signature of Verification: _____