

2026-2027 WESTHOFF ISD STUDENT REGISTRATION

Student's Name: _____
First Name Middle Name Last Name Generation: (Jr, Sr, II, III, etc)

Student's Social Security Number: _____ - _____ - _____ Grade: _____

Gender: ___ Male ___ Female Student's Date of Birth: _____ - _____ - _____
Month Day Year

Birth City: _____ Birth State: _____ Birth Country: _____

Last School/District attended: _____

Did your child receive services in any of the following areas? (Check if applicable)

___ Bilingual ___ ESL ___ Gifted & Talented ___ Special Education ___ Speech ___ Dyslexia

___ 504 other: _____

Has your child ever attended Westhoff ISD? ___ Yes ___ No

Primary Phone Number: _____ - _____ - _____

Physical Address: _____
House Number Street Name Apt # City, ST and Zip Code

PO BOX: _____
City, St and Zip Code

Parent/Guardian (1): _____
First Name Middle Name Last Name

Relationship to student: _____ Parent/Guardian's Date of Birth: _____ - _____ - _____

Is address the same as students? Yes or No, If not what is the Address?

House Number Street Name Apt # City, St and Zip Code PO BOX

Email: _____ Work Phone: _____ - _____ - _____

Cell Phone: _____ - _____ - _____ Home Phone: _____ - _____ - _____

Parent/Guardian (2): _____
First Name Middle Name Last Name

Relationship to student: _____ Parent/Guardian's Date of Birth: _____ - _____ - _____

Is address the same as students? Yes or No, If not what is the Address?

House Number Street Name Apt # City, St and Zip Code PO BOX

Email: _____ Work Phone: _____

Cell Phone: _____ Home Phone: _____

2026-2027 WESTHOFF ISD STUDENT REGISTRATION

Texas Public School Student/Staff Ethnicity and Race Data Questionnaire

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race. *United States Federal Register (71 FR 44866)*

Part 1.) Ethnicity: Is this person Hispanic/Latino? (Choose one only)

- Yes, Hispanic/Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- No, Not Hispanic/Latino**

Part 2.) Race: What is the person's race? (Choose one or more)

- American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American** – A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands.
- White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Students Name: _____

Parent/Guardian Signature: _____

Date: _____

~~~~~  
*This space is reserved for local school observer. Upon completion and entering data in student software system, file this form.*

*Ethnicity – choose only one:*

\_\_\_\_ Hispanic/Latino

\_\_\_\_ Not Hispanic/Latino

*Race – choose one:*

\_\_\_\_ American Indian or Alaskan Native

\_\_\_\_ Asian

\_\_\_\_ Black or African American

\_\_\_\_ Native Hawaiian or other Pacific Islander

\_\_\_\_ White

Observer Signature: \_\_\_\_\_ Campus: \_\_\_\_\_ Date: \_\_\_\_\_

## 2026-2027 WESTHOFF ISD STUDENT REGISTRATION

Documents required for Student Registration:

Students Birth Certificate (Certified)

Students Social Security Card

Students Immunization Records

Parent Identification

Proof of Residency (utility bill, lease agreement, mortgage statement, voters registration card)

If any: Court Orders/Custody Documents