

OLEY VALLEY SCHOOL DISTRICT -- STUDENT REGISTRATION FORM

Print all Information (Complete one student registration form per child)

Student Name:

Last First Middle Social Security No.* Birthdate Sex M/F

Student Address:

PO Box Apt. No. Street Town State Zip Code

Mailing Address

(if different from above)

PO Box Apt. No. Street Town State Zip Code

Please identify your township of residence:

Alsace Oley Pike Ruscombmanor

() _____
Student Home Telephone Number

E-Mail Address

() _____
Phone Number Designated for School Messenger

Student Birth Place:

City State Birth Certificate No.

Student Race:

White/Caucasian Hispanic/Latino American Indian/Alaskan

Black/African American Asian Native Hawaiian/Pacific Islander

Name of Emergency Contact Person: _____ Emergency Contact Telephone # _____

Name of School Student Last Attended _____ School District Name _____ Phone # _____

Date Moved into Oley Valley School District _____ Reason for Transfer _____

Does student have an Individual Education Plan for Gifted Education? ____ (Y) ____ (N) Please provide documentation, if applicable

Does student have an Individual Education Plan for Special Education? ____ (Y) ____ (N) Please provide documentation, if applicable

Does student have a Service Agreement/Chapter 15? ____ (Y) ____ (N) Please provide documentation, if applicable

Is student being placed by a Social or Legal Agency? ____ (Y) ____ (N) If so, name and address of agency _____

Is student a foster child ____ (Y) ____ (N) If so, is monetary support being provided ____ (Y) ____ (N)

Do Special Circumstances apply for this student? ____ (Y) ____ (N) If yes, explain _____

*Not Required

LIST all members of the Family Residing at Student's Address

	First Name	MI	Last Name	Person's Birthday			Sex	Home Phone	Cell Phone	Employer Phone
				Month	Day	Year	M or F			
Father	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Mother	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Stepfather	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Stepmother	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Siblings/Other	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Guardian**	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

**Explanation of Guardian Status: _____

I, the parent/guardian enrolling the aforementioned child, certify that the information given on this form is true and correct, and I recognize the following pursuant to laws regarding unsworn statements. This document presented for the purposes of enrollment for free school privileges is subject to investigation and verification, and should it be determined that the above is not a true representation of fact, either now or in the future, I shall be liable to reimburse the Oley Valley School District at the then current rate, plus interest and penalty, for improper attendance of each ineligible child in the School District.

Signature of Parent/Guardian _____

Date _____

School Personnel Use Only

Building Attending _____ Grade _____ Homeroom _____ AM Bus Number _____ PM Bus Number _____

Check indicating Non-Resident Tuition Policy was explained _____

Date of Student Entry _____

Student Identification Number _____

Signature of School Official _____

Date Entered into School Database _____

Distribution: Transportation/Census _____ Student Services _____