



REGISTRATION FORM K-5

Teacher: _____

School _____ Present Grade _____ Bus# _____ Enrollment Date: _____

FOR OFFICE USE ONLY

____ TN IMMUNIZATION CERTIFICATE
____ PROOF OF RESIDENCE/ZONE

____ COPY OF BIRTH CERTIFICATE
____ PROOF OF GUARDIANSHIP

____ PHYSICAL/APPT. DATE _____

Has student been previously enrolled in any Tennessee public school, including the Clarksville-Montgomery County School System?

School Name _____ Grade Level _____

Is or has student been in any of the following programs? **Special Education** Yes ___ No ___ **ELL** Yes ___ No ___ **504 Plan** Yes ___ No ___

Gifted Yes ___ No ___ **Speech/Language** Yes ___ No ___ If yes, does student have records at previous school? Yes ___ No ___

Student Name _____

____ Last _____ First _____ Middle _____

Date of Birth _____ **Gender** ___ Male ___ Female **Ethnicity:** Is this student Hispanic or Latino? ___ Yes ___ No

Race: Check all that apply (At least one is required) ___ Alaskan Native/American Indian ___ Asian ___ African American /Black
___ White ___ Native Hawaiian/Pacific Islander

Address _____

____ Street or Road _____ Apt. # or Subdivision _____ Zip Code _____

Primary Contact Phone _____ **Mother's Maiden Name** _____

Military Dependent ___ No ___ Active Duty ___ National Guard ___ Reserve

Student's Birthplace _____

____ City _____ County _____ State/Province _____ Country _____

Last School Attended _____

____ School Name _____ Street _____ City _____ State _____ Zip _____

Legal guardianship of student: ___ Mother ___ Father ___ Both ___ Other (Specify) _____

(Current legal documents concerning child custody, adoption, and guardianship must be on file in school office.)

Parent/Guardian Name _____ **Relationship** _____

Employer _____ **Occupation** _____ **Work Phone** _____

Parent/Guardian Name _____ **Relationship** _____

Employer _____ **Occupation** _____ **Work Phone** _____

Where does your child stay at night? (Please check one)

- ___ Home/apartment owned or rented by the parent(s)/guardian(s)
- ___ In an automobile
- ___ With a relative or friend (family does not have a residence)
- ___ A campsite
- ___ In a shelter
- ___ Other housing (please explain) _____
- ___ In a motel

___ The above indicated housing is inadequate (i.e. no electricity, running water, etc.)

In an emergency situation, if parent/guardian cannot be located, the school will use judgment and make necessary arrangements.

I certify the above information is true and accurate.

Parent/Guardian Signature _____ Date _____

It is the policy of the Clarksville-Montgomery County School system not to discriminate against any student, employee or applicant on the basis of sex, marital status, race, color, creed, national origin, or handicapping condition.



**REQUIRED AT REGISTRATION
FOR ALL NEW STUDENTS**

Student Name _____

Primary Home Language Survey K-12:

- 1. What is the first language your child learned to speak? _____
- 2. What language does your child speak outside of school? _____
- 3. What language is mostly spoken in your child’s home? _____

If the answer to any of the questions above is a language other than English, please provide the following information:

Was the child born in the United States (U.S.)? Yes / No If no, complete the following:

Country of Birth: _____

Date of Entry into the U.S. (MM/DD/CCYY): _____

Date of Entry into first U.S. school (MM/DD/CCYY): _____

This section is to be completed only for students who answered any of questions 1-3 with a language other than English.

Years of Education in Home Country: _____

Interrupted Schooling: Yes / No

L1 (1st language) Literacy: Yes / No

ELL/ESL student in another U.S. school? Yes / No

Years of previous education in U.S. schools: _____

In what language do you want notices sent to you from the school? _____

Please check the category of the student:

- Category A – speaks only the language other than English
- Category B – speaks mostly the language other than English
- Category C – speaks English and the other language equally as well
- Category D – speaks mostly English
- Category E – speaks only English

Parent/ Guardian Signature _____

Please file original copy in the cumulative folder and distribute copy to the ESL teacher if another language other than English is listed in any block on this form. If there is not an assigned ESL teacher, send this form to the ESL coordinator at the ESL office.