

**STUDENT REGISTRATION
SCHOOL DISTRICT OF CORNELL**

Date _____

Grade: _____

STUDENT INFORMATION

Legal Name _____
(First) (Middle) (Last)

Address _____
(Street/Mailing) (City) (State) (Zip) (County)

Home Phone _____ Social Security Number _____ Sex: M/F

Birthdate: _____ **Place of Birth:** _____
(City, State and County)

Ethnic Origin: ___ White ___ American Indian ___ Black ___ Asian/Pacific Islander ___ Hispanic

EMAIL ADDRESS (required) _____

Student Lives With:

1. _____ Relationship: (Parent, Guardian, Other) _____
(First Name) (Last Name)
Home Phone: _____ Cell Phone: _____
Employed at: _____ Work Phone: _____

2. _____ Relationship: (Parent, Guardian, Other) _____
(First Name) (Last Name)
Home Phone: _____ Cell Phone: _____
Employed at: _____ Work Phone: _____

Not Listed Above (Parent/Guardian):

_____ Relationship: _____
(First Name) (Last Name)

Address: _____ Home Telephone: _____

Employed At: _____ Work Telephone: _____

Previous School Attended:

Name of School _____

Address/Telephone # _____

Please list other children in the home (0-21 years of age)

	<u>Name</u>	<u>Sex</u>	<u>Date of Birth</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Has student attended Cornell Area Schools previously? Yes ___ No ___ If so, when? _____

Has the student ever been placed in a special school program? Yes _____ No _____ (for example: Gifted & Talented, Learning Disability, Emotional Disability) If yes, please describe:

Has the student had any other problems that the counselor should be aware of? If so, please detail:

How will your child be coming to school? School bus () Walking ()

If your child is a bus student, please list pick-up and drop off location:

Pick-up _____

Drop off _____

Any additional comments which will help is better understand your child. (Weak eyes, poor hearing, weak kidneys, nosebleeds, allergies,....)

EMERGENCY CONTACT INFORMATION

(In case of an emergency, person to contact if parent is not available: Please list two)

_____	_____	_____
(Name)	(Relationship)	(Phone)

_____	_____	_____
(Name)	(Relationship)	(Phone)