

**DARIEN PUBLIC SCHOOLS**

<b>Student Name:</b> _____	<b>Date of Entry:</b> _____
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Student I.D.: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: \_\_\_\_\_ Birth date: \_\_\_\_\_  
(9 digit Social Security Number) (2 digits only) (mm/dd/yy)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_  
House # \_\_\_\_\_ Street \_\_\_\_\_ Apt. # \_\_\_\_\_

Home Phone: \_\_\_\_\_ Race: \_\_\_\_\_ (Race code explanation on back)

Birthplace: City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Citizen Status: U.S. \_\_\_\_\_ Other \_\_\_\_\_ Specify: \_\_\_\_\_

Name of Previous School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Public? \_\_\_\_\_ Private? \_\_\_\_\_ Grade Completed: \_\_\_\_\_ Date: \_\_\_\_\_

Father's Name: \_\_\_\_\_

(Marital Status: Married, Separated, Divorced, Widowed, Guardian) Legal Custody\* \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell #: \_\_\_\_\_

Father's or Guardian's Firm or Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

(Marital status: Married, Separated, Divorced, Widowed, Guardian) Legal Custody\* \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell #: \_\_\_\_\_

Mother's or Guardian's Firm or Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\*If separated or divorced, who has legal custody of this child?

\*It is our policy to share information with both parents unless we are advised otherwise.

Dominant Language Information is required by state law **PLEASE ANSWER ALL FOUR QUESTIONS:**

First language spoken by student: \_\_\_\_\_

Current language spoken by student: \_\_\_\_\_

Primary language spoken by parents: \_\_\_\_\_

Dominant language spoken in home: \_\_\_\_\_

**NAME AND BIRTH DATE OF BROTHERS AND SISTERS UNDER 21 YEARS OF AGE**

NAME	MO	DA	YR	NAME	MO	DA	YR
NAME	MO	DA	YR	NAME	MO	DA	YR
NAME	MO	DA	YR	NAME	MO	DA	YR

**Emergency local contacts if neither parent can be reached:**

1) Phone: \_\_\_\_\_ Cell# \_\_\_\_\_

2) Phone: \_\_\_\_\_ Cell# \_\_\_\_\_

3) Phone: \_\_\_\_\_ Cell# \_\_\_\_\_

\_\_\_\_\_  
**Parent's/Guardian's Signature**

**ETHNIC CATEGORY INFORMATION IS REQUIRED BY STATE LAW**

**RACE CODE EXPLANATION KEY:**

A	Asian American	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands.
B	Black	Not of Hispanic origin. A person having origins in any of the Black racial groups.
H	Hispanic	A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture of origin, regardless of race.
I	American Indian	A person having origins in any of the original peoples of North America.
W	White	Not of Hispanic origin. A person having origins in any of the original peoples of Europe, North Africa, the Middle East or the Indian Subcontinent.

**For school use only:**

Is Birth Certificate verified?      Y \_\_\_\_\_      N \_\_\_\_\_      witnessed by \_\_\_\_\_

Is Residency verified?      \_\_\_\_\_      witnessed by \_\_\_\_\_

**Documentation Presented**