

Registration Form

Please print!



Student Info: as on Birth Certificate

First Name	Middle Name	Last Name	Suffix (Jr., II, etc.)	Nickname
<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth	City of Birth	State of Birth	Country of Birth
Languages: <i>if other than English</i>	Home	Native	Correspondence	

Federal data reporting requirements: {Choose only one}

- Hispanic/Latino {Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race}
- Not Hispanic/Latino

Please **continue by checking one or more options** to indicate what you consider your student's race to be:

- American Indian Alaskan Native Asian Black African American
- Native Hawaiian/Other Pacific Islander White

Home Address	Apt.	City	State	Zip
Mailing Address <input type="checkbox"/> Same as home address	Apt.	City	State	Zip

Student's Home Phone: _____ Student's Cell Phone: _____

Student lives with: Mother Father Guardian Foster Home Relative

Parent Info:

Title (Mr, Ms, etc)	First Name	Middle Name	Last Name	Suffix (Jr., II, etc.)
Languages: <i>if other than English</i>	Home	Correspondence	Email address	

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Secondary Parent or Legal Guardian {Please provide legal custody document*, required due to local, state or federal regulations.}

Title (Mr, Ms, etc)	First Name	Middle Name	Last Name	Suffix (Jr., II, etc.)
Languages: <i>if other than English</i>	Home	Correspondence	Email address	

Work Phone: _____ Home Phone: _____ Cell Phone: _____

please continue on back

Registration continued

Please print!

{If you have 2 sheets of paper- please fill out the next line again please}



DAYTON

PUBLIC SCHOOLS

First Name	Middle Name	Last Name	Suffix (Jr., II, etc.)	Date of Birth
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Last School Attended:

School Address:	City	State	Zip
Phone:	Fax:		

Emergency Contact/Pick-up Authorization {in addition to primary and secondary contacts}

Phone Numbers

<input type="checkbox"/> EMERGENCY	Name	Relationship to Student	H:	W:	C:
<input type="checkbox"/> EMERGENCY	Name	Relationship to Student	H:	W:	C:
<input type="checkbox"/> EMERGENCY	Name	Relationship to Student	H:	W:	C:
<input type="checkbox"/> EMERGENCY	Name	Relationship to Student	H:	W:	C:

Permission:

- Yes or No. I hereby give my permission to have my child participate in field trips and community experiences (including RTA travel) as a necessary part of the educational process for Dayton Public Schools, as indicated by my signature below.
- Yes or No I hereby give my permission for my child to be photographed, interviewed, and/or video tape-recorded for news stories, district publications, on the DPS Web/internet, or in other electronic media during his/her enrollment in Dayton Public Schools during the school year, as indicated by my signature below.
- I do not want my child to participate in the following activities:

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My signature below certifies the information provided on this Student Registration Form is true to the best of my knowledge. I am also aware that the information I have provided is subject to review and verification and that I may be asked to provide additional documentation to support this form. I understand that it is the responsibility of the student, parent and/or legal guardian to notify Dayton Public Schools officials immediately upon change of address, custody or living arrangements. As the parent/guardian of a student enrolled in Dayton Public Schools, I agree to review the district's Student Code of Conduct and understand that my child is responsible for behaving responsibly. The Student Code of Conduct will be provided to your child at his/her assigned school and is available at http://www.dps.k12.oh.us/documents/contentdocuments/doc_23_5_121.pdf

Signature of Parent or Legal Guardian	Date
Please print name of Parent/Guardian	

Thank you for your trust
in Dayton Public Schools.
Lori L. Ward, Superintendent

- I have completed this form and have no other students to register/ I wish to print submit:
- I have other students to register. I wish to submit and update this form for another student:

DPS ONLY	HOMEROOM	COUNSELOR	SCHOOL YEAR	ENTRY CODE	STAFF INITIALS	FORM: 19767 REV 7/7/11