

**BANGOR SCHOOL DEPARTMENT
Pupil Registration Form**

Has the child ever been enrolled in Bangor Public Schools?
 No _____ Yes _____ If yes, what school(s) and grade(s): _____

FOR SCHOOL USE:
 _____ StudentID
 _____ Birth Certificate Certified By
 _____ Grade/Teacher Code

DOB: _____ Gender: M _____ F _____ Grade _____

Student
 Last Name: _____, First Name: _____ MI: _____

The child primarily lives with: <input type="checkbox"/> Both parents <input type="checkbox"/> Half time with each parent <input type="checkbox"/> Mother <input type="checkbox"/> Mother and Stepfather <input type="checkbox"/> Father <input type="checkbox"/> Father and Stepmother <input type="checkbox"/> Foster Parent(s)/Guardian <input type="checkbox"/> Grandparent(s) <input type="checkbox"/> Other _____ * For shared custody fill out Additional Mailing form	Household information: Phone Number: _____ Physical Address: _____ City: _____ State: _____ Zip: _____ Mailing Address (if different than above): Address: _____ City: _____ State: _____ Zip: _____
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Members of Household: (please list all members of the residence)

Name	Relationship to Student (Mother/Sibling/etc)	Work Phone (if appropriate)	Cell Phone (if appropriate)

CONTACT INFORMATION:

Mother/Guardian's Info

Father/Guardian's Info

Full name		
Address**		
CityStateZip**		
Home phone**		
Pager		
Cell		
Work place		
Work phone		
Other place		

Daycare Provider (Name, Address, Phone): _____

EMERGENCY CONTACT INFORMATION: (In the event of a STUDENT emergency)

	Name	Phone number(s)	Relationship
#1			
#2			
#3			
#4			

AUTO-DIAL CONTACT INFORMATION: (in the event of a SCHOOL emergency)

	Description of number (Mom's Work, Dad's Cell, Home, etc.)	Phone Nbr (area code & 7 digits only, no extension #s)
#1		
#2		
#3		
#4	Email Address (only one)	

MEDICAL INFORMATION:

Allergies: _____
 Conditions: _____
 Medications: _____
 Physician Name, Phone and Address: _____

ENROLLMENT INFORMATION:

<u>Check Only One:</u>	<u>Check Only One:</u>	<u>Check Only One:</u>	<u>Check All That Apply:</u>
English Proficiency: <input type="checkbox"/> Native English Speaker <input type="checkbox"/> Bilingual-Never LEP <input type="checkbox"/> Limited English Proficient <input type="checkbox"/> Transitioned Back to LEP <input type="checkbox"/> Former LEP <input type="checkbox"/> Status unknown	Lunch status: For which does the student qualify? <input type="checkbox"/> Free lunch <input type="checkbox"/> Reduced lunch <input type="checkbox"/> Full price lunch <input type="checkbox"/> Not sure	Ethnicity: <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Hispanic <input type="checkbox"/> Am. Indian/Native Alaskan	The child is: <input type="checkbox"/> Migrant <input type="checkbox"/> Homeless <input type="checkbox"/> State ward <input type="checkbox"/> State Agency Client

Language spoken in the home most often: _____

Town of Birth: _____ State/Country of Birth: _____

<p>For Transfer Students From Other Districts:</p> <p>What school did the student last attend? Name of school: _____ _____ Address: _____ _____ Length of time at that school: _____</p> <p>Has your child received CDS services? No ___ Yes ___</p>	<p>For Pre-K/Kindergarten Enrollments</p> <p>Enter number of days per week your child attended?</p> <input type="checkbox"/> Daycare <input type="checkbox"/> Pre-K / 4-Year Old Program <input type="checkbox"/> Head Start <input type="checkbox"/> Nursery school (1 year) Which one? _____ _____ <input type="checkbox"/> Nursery school (2 years)	<p style="text-align: center;"><u>Field Trips</u></p> <p>During the year, there are times when the teachers will wish to take pupils on short trips in the Bangor area to get first-hand experience in community enterprises, in nature study, or to see other things of educational interest. Are you willing to have your child take part in these field trips conducted by the teacher?</p> <p style="text-align: center;">Yes _____ No _____</p>
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<u>Media Release</u>
During the year, there are times when newspapers and television networks recognize various school events, performances and student work. Are you willing to allow your child to participate in photos and to have his or her name mentioned in the article? <p style="text-align: center;">Yes _____ No _____</p>

_____ Date

_____ Signature (Father, Mother or Guardian)

