

Valley Local School District Student Registration Form

Student's Legal Name: (as it appears on birth certificate)

First
Middle
Last
Preferred Name

Grade: _____ **Birthdate:** _____ **Gender:** Male / Female **Place of Birth:** (city, state) _____

Home Phone Listed/Unlisted: _____ **Student Cell:** _____ **Social Security #:** _____

The following questions are required by Federal Law as of 2010 per Ohio Department of Education: **Is the student Hispanic or Latino?** Yes / No

Ethnic Category (Check all that apply) Asian/Pacific Island Black Hispanic American Indian/Alaskan Multi-Racial White

Student's Address:

911 Physical Street Address
City
State
Zip

Mailing Address
City
State
Zip

Previous School Attended: _____ **Phone/City:** _____

Has student ever attended Valley Schools before? Yes / No **If Yes, please note year and grade level** _____

Individual Education Plan (IEP): Yes / No **Section 504 Plan:** Yes / No **Passed high school graduation testing requirements:** Yes / No

Has student ever been retained? Yes / No **If Yes, what grade?** (Please include Pre-K and Pre-First): _____

Mother's Maiden Name: _____ **Custody Papers:** Yes / No **Residential Custodian:** _____

Is the student a dependent of a parent/ legal guardian who is an active member of any Active Duty Force or National Guard? Yes / No

(Please check appropriate box) Army Navy Air Force Marines Coast Guard Army National Guard Air National Guard

Parent/Guardian Information: Please check with whom the student is living: Both Parents Mother Father Grandparent Guardian

Mother's Name
Home Phone
Cell Phone
Email Address

Street Address/PO Box (If different than Student)
City
State
Zip

Employer
Work Phone

Father's Name
Home Phone
Cell Phone
Email Address

Street Address/PO Box (If different than Student)
City
State
Zip

Employer
Work Phone

Legal Guardian's Name (If other than Parent)
Home Phone
Cell Phone
Relationship

Street Address/PO Box (If different than Student)
City
State
Zip

Employer
Work Phone
Email Address

Parent/Guardian Signature _____ **Date** _____

Office Use Only: Student ID # _____ Status _____ Resident District _____
Homeroom Assignment _____ Bus # _____