



STUDENT REGISTRATION FORM PRE -K THROUGH ADULT (Appendix 4)

6 W X G I n o w s t a p p e a r s o n b i r t h c e r t i f i c a t e

Last Name First Name

Middle Name Appendage

Grade Military Family Yes No

Are you of Hispanic or Latino descent Yes No What is your race (Please check all that apply)

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

Sex Have you come to the U.S. in the last 5 years Yes No

Residence Address (This is the address used for school assignments and CANNOT be a Post Office Box)

Current residence is temporary/transitional (If checked, complete the Affidavit of Residency Form, Appendix 17)

Residence Address Apt./Bldg. #

City State Zip Code

County (if not Charlotte) D=Desoto, L=Lee, S=Sarasota No

Mailing Address (if different from residence address)

Street Apt./Bldg. #

City State Zip Code

Yes No

If yes, County If no, State/Territory Country

Previously attended Pre-K Yes No If yes, where?

