

WESTFIELD PUBLIC SCHOOLS REGISTRATION FORM

Please note: Children must be 5 years of age on or before September 1st to enter kindergarten. Please print all information.

School entering: _____ Grade: _____ Date: _____

Student Information

Student's Legal Name: _____

First

Full Middle Name

Last Name

Date of Birth: _____ Gender: _____ Male _____ Female

Place of Birth: _____
City & State (Country if outside of the US)

Student's Address: _____

Primary Residence is with: Parents _____ Father _____ Mother _____ Legal Guardian _____

Has this student been enrolled in the Westfield Public Schools before: No _____ Yes _____ Where: _____

Parent/Legal Guardian #1

_____ Father _____ Mother _____ Legal Guardian _____ Other

Name: _____ Language: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Place of employment: _____ Work phone: _____

Living with student: Yes _____ No _____

#2. _____ Father _____ Mother _____ Legal Guardian _____ Other

Name: _____ Language: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Place of employment: _____ Work phone: _____

Living with student _____ Yes _____ No

If student lives with someone OTHER than parent, please provide the following information:

Name: _____ Relationship to student: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Place of employment: _____ Work phone: _____

Mass Statue provides that both parents have equal rights and access to their child and his/her school records, unless a court order states differently. Court orders should be copied and kept at the child's school.

Are there any court documents (legal issues/custody) that name your child? Yes _____ No _____

Please indicate which parent/guardian can pick up the child from school? Father _____ Mother _____

Which parent receives report cards/school mailings? Father _____ Mother _____

Section 3: Outreach & Emergency Communications:

Westfield Public Schools uses a school-to-parent telephone notification system called School Messenger. With this system, schools can send periodic and personalized voice messages to parents within minutes. The School Messenger service will be used to complement our emergency preparedness procedures and to inform parents of upcoming school events.

In the event of a school or district-wide emergency, the School Messenger service will deliver an emergency communication to all phone numbers which we have on file.

Please provide the two phone numbers that you want us to use when contacting you through the School Messenger system.

Phone Number 1: _____

Phone Number 2: _____

Email address 1: _____ Email address 2: _____

Section 4: Ethnicity and Race Report

In order to comply with state and federal requirements, Westfield Public Schools must classify each student by ethnicity and race. The regulations require that one ethnicity be chosen, while one or more designations may be chosen for race. This information will be used to inform the State and Federal Departments of Education regarding district demographics and assist in the determination of funding levels. All individual data will remain confidential.

Ethnicity: (Choose only one)

Hispanic — includes people of Cuban, Mexican, Puerto Rican, South American, Central American or any other Spanish culture.

Non-Hispanic

Race: (Choose all that apply)

American Indian - includes Alaskan Native or any person having origins in any of the original people of North/South/Central America who maintain tribal affiliation or community attachment.

Asian - includes any person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Thailand, Vietnam, and the Philippine Islands.

Black - includes African American or any person having origins in any of the black racial groups of Africa.

Pacific Islander — includes Native Hawaiian or any person having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands.

White - includes any person having origins in any of the original people of Europe, the Middle East, or North Africa.

Section 5: Publication Consent

Department of Education Regulations 603 CMR 23.07 (4) (a): the school may release for publication certain information from officially recognized school activities/functions concerning your child, from time to time without first obtaining your consent, unless indicated otherwise below. This may include student’s first name, grade, school, photographs, videotaping and typically included for classroom project in our newspaper, local newspaper or district website.

I DO agree to release this information for publication without my consent

I DO NOT agree to release this information for publication without my consent

Section 6: Active Military Affiliation

Student has parent with NO Military Affiliation (00)

Student has a parent on active duty (01)

Student has a parent who is medically discharged veteran or who has retired within the past year (02)

Student has a parent who died in active duty (03)

Section 7: Previous School Experience

Name of school last attended: _____ School District: _____

Address: _____

Phone: _____ Fax: _____

Grades attended: _____ Dates of attendance: _____

Home address while attending previous school: _____

Has the student ever repeated a grade level? Yes ___ No ___ If yes, which one(s)? _____

Has the student been evaluated for Special Needs? Yes ___ No ___

Is the student on an Individualized Educational Plan (IEP)? Yes ___ No ___

Is the student on a 504 Accommodation Plan? Yes ___ No ___

Does your child need English as a Second Language Services? Yes ___ No ___

Signature of Custodial Parent or Guardian:

By signing below I affirm that all the information on this form is correct to the best of my knowledge. If this student is enrolled in the District on the basis of information knowingly falsified by me, I am liable to the District for the daily tuition rate and the student will be withdrawn.

Signature: _____ Date: _____