

Please Print HAS STUDENT EVER BEEN ENROLLED IN GRANITE DISTRICT? YES NO **School** _____ **Year** _____

STUDENT'S (LEGAL) LAST NAME FIRST MIDDLE PRIMARY PHONE

STUDENT'S ADDRESS APT # CITY ZIP CODE MONTH DAY YEAR
 MALE FEMALE DATE OF BIRTH

FOR OFFICE USE ONLY

STUDENT ID _____
 GRADE _____ BUS # _____
 FAMILY ID _____
 (Elementary Schools Only)
 TEACHER _____

OPEN ENROLLMENT PERMIT
 NEW RENEW REVOKE

RESIDENCE DISTRICT: _____

RESIDENCE SCHOOL: _____

ENROLLMENT NOTES: _____

KINDERGARTEN
 AM PM ALL DAY

IMMUNIZATIONS
 MMR DPT
 2nd MMR POLIO

*****PARENT / GUARDIAN NAME(S) AND ADDITIONAL CONTACTS *****

NAME	RELATION	LIVES WITH	RELEASE	HOME PHONE	WORK PHONE	CELL PHONE

******* PERSON TO CALL IN EMERGENCY WHEN PARENT CANNOT BE REACHED *******

NAME OF EMERGENCY CONTACT	HOME PHONE	WORK PHONE	CELL PHONE

SIBLINGS IN DISTRICT

SIBLING NAME	BIRTH DATE

GENERAL INFORMATION

DOES THIS STUDENT RESIDE IN A SINGLE PARENT HOME? YES NO

DOES THE STUDENT HAVE SPECIAL HEALTHCARE CONCERNS? YES NO

CONCERNS: _____

HAS THE STUDENT RECEIVED SPECIAL ED/504 SERVICES? YES NO

DOES YOUR FAMILY COME FROM A REFUGEE BACKGROUND? YES NO

WHICH LANGUAGE DOES YOUR CHILD MOST FREQUENTLY SPEAK AT HOME?
 WHICH LANGUAGE DO ADULTS IN YOUR HOME MOST FREQUENTLY USE WHEN SPEAKING WITH YOUR CHILD?
 WHICH LANGUAGE DO YOU PREFER FOR SCHOOL TO HOME COMMUNICATION?
 WHICH LANGUAGE(S) DOES YOUR CHILD CURRENTLY UNDERSTAND OR SPEAK?

RACE/ETHNICITY

Is this student Hispanic / Latino? YES NO

Native American Tribal Information
 Goshute
 Navajo
 Paiute

Which of the following groups describe the students race?
 ASIAN CAUCASIAN
 Afr Am NATIVE AMERICAN
 PACIFIC ISLANDER Other

PREVIOUS SCHOOL ATTENDED

SCHOOL _____

ADDRESS _____

CITY _____ ST _____ ZIP _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

EMAIL _____