

**LOVELADY INDEPENDENT SCHOOL DISTRICT
REGISTRATION FORM
2010- 2011**

Student (Legal Name) Last: _____ First: _____ Middle: _____ Age: _____ Date of Birth: _____ Male: _____ Female: _____ Birth Place: _____ 2008-09 Grade Level: _____	Physical Address: _____ _____ City, St, Zip _____ Mailing Address: _____ _____ City, St, Zip _____ Hm Phone _____	Date of Enrollment: _____ Social Security # _____ - _____ - _____ Ethnicity: American Indian or Alaskan Native: _____ Asian or Pacific Islander: _____ Black, not of Hispanic origin: _____ Hispanic: _____ White, not of Hispanic origin: _____
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Father: _____ Address: _____ City, St, Zip: _____ Employer: _____ Hm Phone: _____ Wk Phone: _____ Cell Phone: _____ E-Mail: _____ Service Branch: _____ Rank: _____ Are you the person enrolling this student: YES / NO	Mother: _____ Address: _____ City, St, Zip: _____ Employer: _____ Hm Phone: _____ Wk Phone: _____ Cell Phone: _____ E-Mail: _____ Service Branch: _____ Rank: _____ Are you the person enrolling this student: YES / NO
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Guardian: _____ Address: _____ City, St, Zip: _____ Employer: _____ Hm Phone: _____ Wk Phone: _____ Cell Phone: _____ E-Mail: _____ Service Branch: _____ Rank: _____ Are you the person enrolling this student: YES / NO	Emergency Contact Information (other than Parent or Guardian) Name: _____ Hm Phone: _____ Wk Phone: _____ Cell Phone: _____ Name: _____ Hm Phone: _____ Wk Phone: _____ Cell Phone: _____
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Special Programs (Please check any of the services below that this student has received from LISD or any previous school attended)			
Special Education YES / NO	Bilingual – ESL YES / NO	Gifted & Talented YES / NO	504 Program YES / NO
Other: _____			

The above information is required for a permanent school record of your child and will be used by school personnel. Presenting false documents, records or information is a violation of state law and may subject you to tuition cost for your child. I certify that the information given above is correct.

_____ Parent or Guardian Signature	_____ Date
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(For Office Use Only)	
Teacher: _____ Control No: _____ Eligibility Code: _____ PK Par Mil: _____ PK Foster: _____	
Birth Cert. _____ Soc. Sec. _____ Copy of DL: _____ Home Lang. _____	
Gift: _____ LEP: _____ BIL: _____ ESL: _____ Par Per: _____ Econ: _____ Special Ed: Prim _____ Sec _____ Tert _____ Multi: _____	

The following information is presented to assist you in filling out this form. Please note that the following information is mandatory for inclusion on any records transferred to comply with **TECS 25.002**, Identification required for enrollment.

District Name, County-District-Campus-ID Campus Name and Phone Number Social Security Number or State-Approved Alternative ID First, Middle, and Last Name Generation, Sex, and Ethnicity	Date of Birth ID last reported to PEIMS Local Student ID number Current Grade Level
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The remainder of the information listed on the form is optional, but can be included with the mandatory information. If confidentiality is a concern, it is not necessary to transfer optional information, e.g., Special Program Information, etc.

Original Entry Date: This date should be the first date of attendance during the current school year. For returning students, this date would be the first day of school for the current school year.

Last Withdrawal Date: This date should be the date the student withdrew from school or the last date of attendance if the student failed to withdraw.

Current Grade Level: Please refer to C050 in the most recent copy of the *Public Education Information Management System (PEIMS) Data Standards* if coding questions occur. The Promotion or Placement information may only be appropriate for students other than high school students.

IMMUNIZATIONS

Exemptions: M = Medical exemption
R = Religious

CURRENT SIX-WEEK GRADES

Course-Code-Abbreviation: Please refer to C022 of the most recent *PEIMS Data Standards* for further information. For this form, you may use either the following codes, the course name, or the course abbreviation for credit type. The course name may be the most useful piece of information for the new district of enrollment.

Credit Type: 01 = Regular
02 = Honors
03 = Advanced Placement
04 = Credit by exam
05 = College course
06 = International Baccalaureate
07 = Summer school
08 = Special education ARD requirement
09 = Experimental
10 = Magnet
11 = Correspondence
12 = Local credit
13 = High school course taken in the 7th or 8th grade
14 = Night course
15 = Gifted/Talented
99 = Other

Course Semester: 0 = 1 semester only
1 = first semester of a 2-semester course
2 = second semester of a 2-semester course

Withdrawal Grade: This grade should reflect the current or most recent work accomplished by the student at withdrawal or on the last day of attendance. Information about the most recently completed 6-week period or semester can be provided by attaching a copy of the most recent report card.

This form was created as a service to districts. It is a requirement that student records be transferred to the new district of enrollment within 30 days. The Social Security Number or state-approved alternative ID should be included on the record transferred, along with district-ID, student name, sex, ethnicity, date-of-birth, and prior-student-ID as reported to PEIMS.