## SOUTHEAST LOCAL SCHOOLS STUDENT REGISTRATION FORM

Updated 3-10-2010

	Elementary	<u> </u>	•		
	John R. Lea Middle School	$\square$ W	☐ Waynedale High School		
Student Name:					
	(Last)	(First)		(Middle)	
Address:	et Number			P.O. Box #	
			G		
	State:				
	So Di SE				
Date of Birth:	/Place of E	(County)	(City)	(State)	
	c / Latino Origin?Yes				
Race: ~ Check any	that apply:				
White		Black or African Amer		Asian	
American Ir	ndian or Alaska Native	Native Hawaiian or Oth	ner Pacific Islander	·	
Parent/Guardian/O	ther Relationship:				
Father's Name:		Mother's Nan	ne:Mother of		
	Father or Step-father				
			den Name:		
Father's Employer:		Mother's Emp	Mother's Employer:		
Work Telephone N	fumber:	Work Telepho	one Number:		
D	C'atama	,			
# Youn	ger # Older Sisters:	# Younger # Older			
Is the student resid	ing with both parents?Yes	No			
	custody vested in?Mothe		_Co-Custody		
•	at a copy of the court ordered		· · · · · · · · · · · · · · · · · · ·	e of enrollment.	
Please circle the co	ounty in which parent lives: 38	-Holmes 85-W	ayne	76-Stark	
Last school attende	ed:		•		
	previous school:				
	ceive any special services? (Spee				
•	ne child's medical history includi	•			
	ich the school should be alerted:				
Has your child atte	nded a school in our district befo	re:Yes	_No		
For Office Us					
	Student ID #				
Entered:	Sent for records:	Records Received:		Career Center	