

**GLOVERSVILLE ENLARGED SCHOOL DISTRICT  
REGISTRATION FORM**

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

Birth date: \_\_\_\_\_ M\_\_\_\_ F\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: (Home) \_\_\_\_\_

(Cell) \_\_\_\_\_

Grade student was registered in at previous school: \_\_\_\_\_ Date Left: \_\_\_\_\_

School Previously Attended: \_\_\_\_\_

Has student attended any Gloversville schools before? \_\_\_\_\_ Which School/Grade: \_\_\_\_\_  
\_\_\_\_\_

**Parents:**

Father's Full Name: \_\_\_\_\_

Work Place: \_\_\_\_\_

Father's Address: \_\_\_\_\_

Work #: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

Work Place: \_\_\_\_\_

Mother's Address \_\_\_\_\_

Work #: \_\_\_\_\_

Are the natural parents living together? Yes\_\_\_ No\_\_\_

If remarried, name of step-parent: \_\_\_\_\_ Work #: \_\_\_\_\_

Mother's name if remarried: \_\_\_\_\_

Foster Home: Yes \_\_\_ No \_\_\_ If yes, copy of DSS 2999 Form is required

If separated or divorced, who has legal custody of the child? \_\_\_\_\_

Are there any restrictions on custody or guardianship? \_\_\_\_\_

Is there a court order in effect? Yes\_\_\_ No \_\_\_ (if yes, district needs a copy of the most recent  
Court Order)

Is Child known by any other name? If so, what is the name? \_\_\_\_\_

Please list all brothers and sisters starting with the oldest:

Name	Birth Date	Sex	Present Grade	Living at Home	School Attending
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**\*\*ORDER OF PROTECTION: (\*If an order of protection exists, it must be submitted at time of enrollment)**

**School History**

Does your child receive special education services or have an IEP?      \_\_\_ Yes    \_\_\_ No

Does your child have a Section 504 Plan (Accommodation Plan)?      \_\_\_ Yes    \_\_\_ No

Does your child receive Academic Intervention Services (Remedial)?      \_\_\_ Yes    \_\_\_ No

If yes, which subject? \_\_\_\_\_

Other Special Needs? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has your child ever repeated a grade? \_\_\_\_\_ If so, which: \_\_\_\_\_

**Other**

\_\_\_ Check here (and provide details) if student lives in a shelter, abandoned apartment/building, motel/hotel, camping ground, car, or train/bus station; if the student lives with relatives or others due to lack of housing or other similar situations; or if the student is temporarily housed in a shelter awaiting permanent foster care placement \_\_\_\_\_ (living arrangements). If box is checked, please complete STAC-202 form. The answer you give will help the district determine what services you or your child may be able to receive under the McKinney-Vento Act. Students who are protected under the McKinney-Vento Act are entitled to immediate enrollment in school even if they do not have the documents normally needed such as proof of residency, school records, immunization records, or birth certificate. Students who are protected under the McKinney –Vento Act may also be entitled to free transportation and other services.

**Please sign the following statement: (or it has been read to me):**

- I certify that the above information is true and correct to the best of my knowledge. I further understand that it is my responsibility as the Parent/Guardian to immediately inform the school district of any changes in the information provided.

\_\_\_\_\_  
Parent/Guardian Signature

Date: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_