



New Student Registration Form

Complete ALL AREAS of the form. Please note: Social Security number and email address are optional.

Office Use Only

Entry Date/Code: / /	FL Student #:
School:	
Teacher/Section/Grade: / /	
Transportation: Bus # / Driver /	
Lunch: <input type="checkbox"/> Regular <input type="checkbox"/> Reduced <input type="checkbox"/> Free	School Year Entered 9th Grade:
Date First Entered a U.S. School:	Birth Verification:
Data Entry Date:	Initials:

Student Information

Student Legal name (Last, First, Middle)		Student Former Name or AKA (if applicable)	
Student Social Security # (Optional) _____ - _____ - _____ *See Walton County Notice of Social Security Number Disclosure			
Student Place of Birth (city, state, county, country)	Student DOB (mm/dd/yyyy)	Student Age	Student Gender <input type="checkbox"/> M <input type="checkbox"/> F
Student Home Phone Number	Preferred Parent/Guardian Contact Telephone Numbers Day or Cell: _____ Evening or Cell: _____		
Student Local Address (house number, street name, apartment number, city, state, zip code)			

Brief Directions to Home

Student Race (must check at least one box - check all that apply) American Indian or Alaskan Native Asian
 Black or African American Native Hawaiian or Other Pacific Islander White

Student Ethnic Origin (Must check Yes or No) Yes, Hispanic or Latino No, Not Hispanic or Latino

Immigrant (check all that apply) Age 3 - 21 Not born in U.S., Puerto Rico, or District of Columbia
 Not attended U.S. school more than 3 full academic years

Is a language other than English spoken in the home? <input type="checkbox"/> Yes <input type="checkbox"/> No	Student Primary Language?
Does the student have a first language other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	Parent Primary Language?
Does the student most frequently speak a language other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Student Residence Information Indicate who the student lives with (check only one) Legal Guardians and custody restraints require legal documentation.
 Both Parents Mother Father Grandparent Foster Parent Group Home

Parent/Guardian Information

Mother or Guardian		Home Telephone	
Day Telephone #	Evening Telephone #	Cell Telephone #	Accept text on cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address if not the same as student (house number, street name, apartment #, city, state, zip code)		Email Address (optional)	

Father or Guardian		Home Telephone	
Day Telephone #	Evening Telephone #	Cell Telephone #	Accept text on cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address if not the same as student (house number, street name, apartment #, city, state, zip code)		Email Address (optional)	

Previous Education Information

If registering for Kindergarten, in which of the following programs did the student participate during the year prior to Kindergarten entry, if any?
 Pre-Kindergarten Early Intervention Pre-Kindergarten Disabilities (ESE) Subsidized Child Care Non-Subsidized Child Care Head Start

Has student ever been retained? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what grade(s)?	Has student previously attended a Florida public school? <input type="checkbox"/> Yes <input type="checkbox"/> No Florida School Name/City/County / /
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Name of Last School Attended: _____
School Type (check one only): Public Private Charter Virtual Home Education

Educational Plan (If applicable, check all that apply) 504 Plan Other _____
 Individual Education Plan (i.e., Speech, Language, Specific Learning Disability, Emotional/Behavior Disability, Autism Spectrum Disorder, Intellectual Disability, Other Health Impaired, Gifted)

Entry Disclosures (If applicable, check all that apply) The student has been expelled from school.
 The student has been arrested or prosecuted for a violation of a criminal statute resulting in a charge.

False Information: Florida Statute 837.06 states: "Whoever knowingly makes a false statement in writing with intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable by law." Additionally, a person who knowingly makes a false declaration under penalties of perjury is guilty of the crime of perjury by false written declaration, a felony of the third degree under Florida Statute 92.525 and will be reported to the State Attorney's office.

I have read the above statement and verify all information provided in this document is true and accurate. I understand providing false documentation will result in immediate withdrawal of my child and referral for enrollment in the appropriate school district. I certify that the above named student is a resident of the State of Florida.

Parent/Guardian Signature: _____ Relationship: _____

No person shall, on the basis of race, color, religion, gender, age, ethnicity, national origin, marital status, disability, political or religious beliefs be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity, or in any employment conditions or practices conducted by this school district, except as provided by law.

* Walton County Notice of Social Security Number Disclosure: The Florida public school system uses the SSN as a student identifier for purposes of tracking and assisting students in the transition from one educational level to the next, linking all levels of the state educational system. The intent is to establish a comprehensive Division of Public Schools Information Database and the State University System Database to provide integrated information at the state level for educational decision-making.