

NUMBER IN FAMILY: _____ LIVING AT HOME: _____ DECEASED: _____

SISTER'S/BROTHER'S NAMES	DATE OF BIRTH	GRADE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

If student is not living with one or both biological parents, please provide the following information on the parent(s) not living with the student.

Name: _____ E-mail Address: _____

Address: _____

Phone Number: _____ Cell number: _____

Does parent have custody: Yes No (For School Use Only: Copy of paperwork: Yes No)

May parent pick-up from school: Yes No

PRIOR SCHOOL INFORMATION

SCHOOL LAST ATTENDED: _____ GRADE: _____

ADDRESS: _____
CITY STATE ZIP

HAS THE STUDENT BEEN ENROLLED IN A U.S. SCHOOL FOR AT LEAST THREE YEARS? _____

IF PREVIOUS SCHOOL WAS NOT IN PA, WHEN DID YOU ENTER PA? _____

DATE YOU MOVED INTO THE SCHOOL DISTRICT? _____

DOES STUDENT RECEIVE LEARNING SUPPORT SERVICES (Special Education-IEP)?
 YES NO

DOES STUDENT CURRENTLY PARTICIPATE IN AN ENRICHMENT PROGRAM (GIEP)?
 YES NO

IF YES, WHO WAS YOUR CONTACT FOR IEP/GIEP ISSUES? _____
Name Title

**Please note that if the student has an IEP/GIEP, we must have their current plan prior to the student starting classes.

FOR ENROLLMENTS THAT ATTENDED A NON-U.S. SCHOOL WITHIN THE PAST THREE YEARS

DOES THE STUDENT SPEAK ENGLISH? YES NO

DIALECT COUNTRY OF ORIGIN (IF NOT ENGLISH): _____

WHEN DID THE STUDENT ENTER THE U.S.: _____

NUMBER OF YEARS IN U.S. SCHOOLS: _____