

Preschool Student Registration Form



Are you a resident of Wayne Local School District? Yes No

Is your child RETURNING to the WLS Preschool? Yes No

Please Print:

Student's Legal First Name: _____ Legal Middle Name: _____

Legal Last Name: _____ Called Name: _____ Mother's Maiden Name: _____

Student's Social Security Number: _____ - _____ - _____ Student's Date of Birth: _____

Gender: M / F Birthplace City and State: _____ Native Language: _____

Student Street Address: _____ P.O Box: _____ Apt./Lot #: _____

City: _____ State: _____ Zip: _____ Phone Number: _____

Grade: _____ Previous School Attended: _____ City and State: _____

CITIZEN STATUS OF STUDENT: U.S Citizen Non U.S. Citizen

RACIAL/ETHNIC GROUP: Is the student of Hispanic/Latino Heritage? Yes No

What race is the student? (choose one or more)

White (Persons having origins in any of the original peoples of Europe, North Africa or the Middle East)

Black or African American (Persons having origins in any of the Black racial groups of Africa)

Asian (Persons having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent)

American Indian or Alaskan Native (People who maintain tribal affiliations or community attachment to the original peoples of North, South and Central America)

Native Hawaiian or other Pacific Islander (Persons having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands)

*The U.S Department of Education allows observer identification if a parent/guardian refuses to provide their child's racial/ethnic group. The observed designation will be communicated to the parent/guardian by the district prior to designation.

Language Usage Survey

State and Federal regulations require Wayne Local Schools to have the following Home Language Survey completed and on file for every child enrolled in our district. Please answer all questions. Please print.

1. In what language(s) would your family prefer to communicate with the school? _____

2. What language did your child learn first? _____

3. What language does your child use most at home? _____

4. What languages are used most in your home? _____

5. In what country was your child born? _____

6. Has your child ever received formal education outside of the United States? Yes No

7. Has your child attended school in the United States? Yes No

If yes, when did your child first attend school in the United States? _____/_____/_____

Month Day Year

I understand that State and Federal regulations require the School District to collect information regarding my child's native language. The above information is true and accurate.

Parent/Guardian Signature: _____ Date: _____

Is this child receiving Special Education Services, or have a physical impairment? Yes No

If Yes, does this student have a current IEP? Yes No Does this student have a current 504? Yes No

Is this child receiving gifted services? Yes No If yes, does this child have a current WEP? Yes No

Is this child receiving English as a Second Language services? Yes No

Student lives with:

Two parents present (natural or step)

- Living with Mother and Father
- Living with Mother and Stepfather
- Living with Father and Stepmother

One parent present (natural or step)

- Living with Mother
- Living with Father

Living with Foster Parents

Living with Legal Guardian

Other siblings in the Wayne Local School District:

Name: _____ Grade: _____ Name: _____ Grade: _____

Name: _____ Grade: _____ Name: _____ Grade: _____

Status of Parents: Married Divorced Widowed Separated Single/Never Married

If divorced who has legal custody? Mother Father Shared Parenting

Custody Papers? Yes No Are you the natural/adoptive parents of the child? Yes No

Was the child court placed in your home? Yes No If yes, Date of assignment? _____ County _____

If foster/guardian, in which district did the natural parent(s) reside at the time of placement? _____

Parent/Guardian 1:

Name: _____

Address (if different): _____

Home/cell phone: _____

Email: _____

Employer: _____

Work Phone: _____

Stepparent (if applicable): _____

Cell: _____ Work phone: _____

Parent/Guardian 2:

Name: _____

Address (if different): _____

Home/cell phone: _____

Email: _____

Employer: _____

Work Phone: _____

Stepparent (if applicable): _____

Cell: _____ Work phone: _____

Falsification under Ohio Revised Code Section 2921.13 is a misdemeanor of the first degree punishable by a maximum of six months' imprisonment or a fine of \$1000 or both.

I the undersigned, do hereby state and declare under penalty of falsification that I am the parent or legal guardian of the student named on this form and that this registration information is true and correct.

Parent/Guardian signature: _____ Date: _____

