



MONTEREY PENINSULA UNIFIED SCHOOL DISTRICT



Student Registration Form — Please Print Legibly in Blue or Black Ink

Student Name _____ Birth Date ____/____/____
Last Name First Name Middle Name Month Day Year
Other Name Used in School _____ Birth City _____ State _____ Country _____
Male [] Female [] Grade Level Entering _____ Middle or High School: Please provide transcript
Name and Address of last school attended: _____
City State Zip Code Country

Has your child been previously enrolled in a California school? [] No [] Yes If yes, what school? _____ Year _____
Does your child receive Special Education Services? [] No [] Yes Is there a current IEP? [] No [] Yes (please attach) Is there a 504? [] No [] Yes
Has your child been previously expelled or suspended from school? [] No [] Yes Is your child currently suspended? [] No [] Yes
Has your child been previously retained? [] No [] Yes If yes, at what grade level? _____

Ethnicity: Is student Hispanic or Latino? [] Yes [] No
Student Race (required per US Federal Policy and CA Ed Code) — check all that apply :
[] American Indian or Alaskan Native Tribal Affiliation _____ [] Guamanian
[] Chinese [] Korean [] Laotian (Asian) [] Other Asian [] Samoan [] Filipino
[] Japanese [] Vietnamese [] Cambodian [] Hawaiian [] Other Pacific Islander [] Black or African American [] White

Home Language Survey
Date of Initial Enrollment in US Schools ____/____/____ Date of Initial Enrollment in CA Schools ____/____/____
Month Day Year Month Day Year
Which language did your child learn first? _____
Which language does your child use most frequently at home? _____
Which language(s) is (are) spoken in your home? _____
Which language do you most frequently speak to your child? _____
If Spanish, how would you like your correspondence? [] Spanish [] English

Primary Home Address _____
Street City Zip Code
Is your home on (check one) [] U.S. govt. property [] POM (Ft. Ord) [] La Mesa [] Presidio [] No
Home Phone: _____ Mailing Address (if different from above) _____

Parent/Legal Guardian
Relationship: [] Father [] Mother [] Legal Guardian [] Step-parent
Lives With student? [] Yes [] No Is Military? [] Yes [] No
DOD Civilian [] Yes [] No Branch _____
Last Name: _____
First Name: _____ Middle Initial _____
Contact Phone: _____
[] Cell Phone [] Work Phone
E-mail: _____
Employer: _____
Employer Address: _____
Education Level: [] Not a high school graduate [] High school graduate [] Some college (includes AA degree) [] College graduate (BA or BS) [] Graduate school/postgraduate training
Address (if different from above): _____

AUTHORIZED PARENT/GUARDIAN SIGNATURE _____ DATE _____

School Use Only
Student # _____ Entry Date _____
School _____ Teacher _____