



HEMPFIELD AREA SCHOOL DISTRICT
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Dr. Tammy S. Wolicki
Superintendent
Dr. Mark A. Gross
Assistant Superintendent
Secondary

Dr. Matthew R. Conner
Assistant Superintendent
Elementary
Mr. Wayne J. Wismar
Business Manager

Committed to Educational Excellence

NON-RESIDENT REGISTRATION FORM

1305 Foster Placement

1306 Institutionalized Placement

STUDENT'S NAME _____

Date of Birth _____ Date Institutionalized _____

School _____ Grade _____ Date Entered _____

**** INFORMATION IN THIS SECTION IS VERY IMPORTANT ****

Name of Last Custodial Parent _____

Address of Last Custodial Parent _____

School District of Residence _____

County of Residence _____

List exact name and address of family and agency child is residing with:

Name of Foster Parents _____

Address of Foster Parents _____

Name of Placing Agency _____

Address of Agency _____

Phone Number of Agency _____

Foster Parents receive a per diem? YES NO

Signature of Caseworker _____

IS COURT ORDER/PLACEMENT VERIFICATION RECEIVED YES NO

(This registration form is to be completed by placing agency when possible)