

School Year: \_\_\_\_\_  
 Building: \_\_\_\_\_  
 Today's Date: \_\_\_\_\_

## Bettendorf Community School District Student Enrollment Form

Entry Date: \_\_\_\_\_  
 Entry Grade: \_\_\_\_\_  
 Student ID \_\_\_\_\_

**Please Print**

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STUDENT INFORMATION																	
Students Full Legal Name (Last,First,Middle)					Birth Date		Ethnicity - Is student Hispanic/Latino? <input type="checkbox"/> yes <input type="checkbox"/> No										
Nickname		Grade		Gender <input type="checkbox"/> M <input type="checkbox"/> F		<b>Student's Race (choose one or more)</b> <input type="checkbox"/> White <span style="margin-left: 150px;"><input type="checkbox"/> Black or African American</span> <input type="checkbox"/> Native Hawaiian/other Pacific Islander <span style="margin-left: 100px;"><input type="checkbox"/> Asian</span> <input type="checkbox"/> American Indian/Alaskan Native											
City of Birth		US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No		Primary Language													
Has student attended preschool <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Preschool			<b>Housing Status</b> <input type="checkbox"/> Not Homeless (Have permanent address)												
School previously attended					<b>If Homeless - choose one of the following:</b> <input type="checkbox"/> Doubled-Up (living w/relatives, friends) <span style="margin-left: 20px;">Name: _____</span> <input type="checkbox"/> Sheltered/Transitional (shelter, temporary housing) <span style="margin-left: 100px;"><input type="checkbox"/> Hotel/Motel</span> <input type="checkbox"/> Unsheltered (living in places not used as regular sleeping accommodation)												
PARENT/GUARDIAN INFORMATION - PRIMARY Household																	
Same address & phone as student																	
Address (Street Address, City, State, Zip)					Home Phone												
Name			Relationship (circle) Mother Father Stepmother Stepfather Guardian Other(specify)				HOUSEHOLD INFORMATION										
Please list all siblings in household																	
Place of Employment		Work Phone		Cell Phone		Email		Name									
								Relationship									
Name		Relationship (circle) Mother Father Stepmother Stepfather Guardian Other(specify)		Gender		Grade		Birth Date									
Place of Employment		Work Phone		Cell Phone		Email		Name									
								Relationship									
								Relationship									
PARENT/GUARDIAN INFORMATION - SECONDARY Household - Not living with student								Gender		Grade		Birth Date					
<input type="checkbox"/> Joint Custody or <input type="checkbox"/> Non-Custodial Please choose one																	
Name			Relationship		Address (Street Address, City, State, Zip)					Name							
										Relationship							
Home Phone		Place of Employment		Work Phone		Cell Phone		Email		Gender		Grade		Birth Date			
Name			Relationship		Address (Street Address, City, State, Zip)					Name							
										Relationship							
Home Phone		Place of Employment		Work Phone		Cell Phone		Email		Gender		Grade		Birth Date			
EMERGENCY CONTACT INFORMATION - OTHER THAN PARENTS (Within 30 minutes driving distance)																	
Name				Relationship				Name				Relationship					
Home Phone		Work Phone		Cell Phone		Home Phone		Work Phone		Cell Phone		Home Phone		Work Phone		Cell Phone	
Name				Relationship				I certify that the above is my correct address and that I am a legal resident of the <b>Bettendorf School District</b> . If not, I have applied for open enrollment or tuition into the district from _____ School District. I understand that any falsification of my address will result in my child being unable to attend Bettendorf Schools.									
Home Phone		Work Phone		Cell Phone													