

Warwick School District Enrollment Form

Office Use: Date _____ Building _____ Student ID _____

Student Name (per birth certificate) _____
(Last) (First) (Middle)

Date of Birth _____ **State and City of Birth** _____ **Entering Grade** _____

Name to be called (Nickname) _____ **Telephone** _____ **Unlisted?** Y N

Student Full Address _____

Municipality Lititz Boro Warwick Township Elizabeth Township

Gender M F **Student Social Security #** _____ (optional)

Ethnicity Hispanic or Latino Not Hispanic or Latino (If Hispanic or Latino is checked, Race is automatically Hispanic)

Race American Indian/Alaskan Asian Black White Native Hawaiian/Pacific Islander

Student Lives With: Both Parents Mother Only Father Only Guardian Foster Parent/s
Mother/Stepfather Father/Stepmother Other _____

Primary Residence Responsible Party Information (same address as Student)

Name _____	Name _____
Relationship to Student _____	Relationship to Student _____
Email Address _____	Email Address _____
Employer _____	Employer _____
Employer's Telephone # _____	Employer's Telephone # _____
Cell Phone # _____	Cell Phone # _____

List other household members:

Last Name	First Name	Relationship to Student	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Secondary Residence Responsible Party Information

(complete this section only if there is a shared custody arrangement between birth parents OR if neither of the Primary Responsible Parties listed above are the birth or legally adoptive parents-Custodial Information section on the back must also be completed)

Full Address/Home Phone _____

Should school mailings be sent to this address? Y N

Name _____	Name _____
Relationship to Student _____	Relationship to Student _____
Email Address _____	Email Address _____
Employer _____	Employer _____
Employer's Telephone # _____	Employer's Telephone # _____
Cell Phone # _____	Cell Phone # _____

List other household members:

Last Name	First Name	Relationship to Student	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

School Last Attended

School Name _____ District Name _____
School Address _____ Telephone # _____
_____ Fax # _____

If transferring from out of State, has student ever been enrolled in a Pennsylvania school? YES NO

Special Education Services Provided

Did student have an IEP? YES NO Date: _____ (please provide copy)
Did student have a 504 Accommodation Plan? YES NO Date: _____ (please provide copy)
Did student have a Gifted IEP? YES NO Date: _____ (please provide copy)
Other Special Services Received _____

Home Language Survey

1. What was the first language your child learned to speak? _____
2. What language/s does your child speak most often at home? _____
3. What language/s is spoken most often by family members in your home? _____
*If you did not answer **ENGLISH** to all of these questions, please complete a lavender Home Language Survey form.*

Custodial Information

***NOTE:** This section needs to be completed **only if** the student doesn't live with both birth/adoptive parents OR if neither of the responsible parties listed in the Primary Residence is the birth parent or legally adoptive parent of the student.

If you are the Foster Parent:

Name and Address of Placement Agency: _____
Agency Telephone #: _____ Placement Date: _____
Birth Parent/s Name: _____ Unknown
Birth Parent/s Address: _____ Unknown

If you are the Guardian:

Do you have a legal affidavit indicating your parental responsibility? YES NO (If yes, please provide copy of document)
Birth Parent/s Name: _____ Unknown
Birth Parent/s Address: _____ Unknown

If you are the Custodial Parent:

Do you have legal custody through a court order? YES NO (If yes, please provide copy of court document)
If yes, does the court order limit the non-custodial parent's access to school records? YES NO
May the child be released from school to the non-custodial parent? YES NO

*When a student resides with only one birth/adoptive parent, **that** parent will be considered the custodial parent. The non-custodial parent should be listed under the Secondary Residence information. The non-custodial parent has access to the child's records unless there is a court order forbidding it. It is the responsibility of the custodial parent to provide the school with any limiting court order.*

Office Use Only

Appointment at Building _____ Proposed Start Date _____ Teacher _____ Photo ID: YES NO
Date Records Requested _____ Date Records Received _____ Bus # _____ Bus Stop _____
ESL: YES NO **IEP:** YES NO **IU:** YES NO **Immunization Rec'd:** YES NO