Independent School District 196 Rosemount-Apple Valley-Eagan Public Schools Educating our students to reach their full potential

Series Number 50	01P	_ Adopted _	July 2000		Revised	January 202	0		
Title Student a	and Census Info	ormation							
OFFICE USE ONLY									
Date	Scho	ool #		Student #					
homeroom		teacher/counse	lor				re-enrolled		
language code				e					
				mm/dd/yy					
□ birth certificate received	☐ guardianship pa	ipers received	transfer paper	work completed					
PRINT AND COMPLETE ALL INFORMATION REQUESTED BELOW USING BLACK INK.									
STUDENT Full Legal Name			first			middle.n			
	last name		first r	ame		middle na	ame		
Birthdate	_ Grade entering	Gender	□ M □ F						
Early childhood screening is	required for entry int	o public school	kindergarten. Has ye	our child complete	ed screening?	(kindergarten or	ıly)		
□ Yes, in District 196					-				
 Yes, in (what district?) No, my child has not b 									
Resident district (if not District 196):									
If not a resident of District 196, has a Statewide Enrollment Options Form been completed and approved?									
Is this student: (check all that apply)									
□ Foreign exchange student □ Receiving English Learner services									
Receiving Gifted/Taler	nted services	0	Special Education se	ervices/IEP					
 Homeless Receiving 504 Plan set 	nvicos	Ward of th	e state						
				_					
Last school attended (name)	l		District	Date	es attended				
Last school address	street		city	state	zip		country		
Dates attended					r		,		
	- (mo/yr)	-							
STATE AND FEDERAL REPORTING									
Was your child born outside of the USA, Puerto Rico or U.S. Territories? 🗆 Yes 📄 No (if yes, please answer two questions below)									
1. Date of first enrollment in a USA school:									
2. How many full years of school has your child completed in the USA?									
Have you moved to this area within the last 36 months for temporary or seasonal agricultural or fishing work? 🛛 Yes 🗋 No									

Minnesota law requires the school district to keep accurate, updated records for all students. The information collected on this form will be used for purposes of enrollment, program eligibility, educational services and state and federal reporting. Some of the information requested is voluntary, such as the state/federal reporting and language information section, however, failure to provide some or all of the requested information may limit the school district's ability to enroll and serve your student. This information will be used within the school district on a need-to-know basis, and may also be shared with the Minnesota Department of Education, released pursuant to a subpoena or court order and shared as otherwise permitted by state and federal law. Some of the information may be classified as directory (public) information.

In what language does the parent/guardian prefer to receive district communications? PRIMARY HOUSEHOLD: Parent/Guardian #2 Name last first middle Relationship to student	FAMILY INFORMATION										
last first middle Street address City State Zip Code Relationship to student Email	PRIMARY HOUSEHOLD: Parent/Guardian	#1									
Street address City State Zip Code PRiMary HOUSEHOLD: Parent/Guardian prefer to receive district communications? In what language does the parent/guardian prefer to receive district communications? PRIMARY HOUSEHOLD: Parent/Guardian prefer to receive district communications? In what language does the parent/guardian prefer to receive district communications? PRIMARY HOUSEHOLD: Parent/Guardian prefer to receive district communications? Other Primary in the PRIMARY HOUSEHOLD (list additional children on separate sheet) Iast name first middle name gender Molif F SECONDARY HOUSEHOLD (if applicable): Parent/Guardian #1 Name last first middle Street address City last first middle Street address City Isst first module Work City Molif C last first middle Street address City Mobile Work Other In what language does the parent/guardian prefer to receive district communications? The mumber of school district announcements): Mobile Mobile In what language does the parent/guardian prefer to receive district communications? The mumber of the check one as primary number for school district announcements): Mobile Mo		6		Gender 🗆 M 🗆 F							
Relationship to student											
Phone numbers (check one as primary number for school district announcements): In what language does the parent/guardian prefer to receive district communications? PRIMARY HOUSEHOLD: Parent/Guardian #2 Name last first middle Relationship to student mother ender and first mother on separate sheet) Other children under age 18 living in the PRIMARY HOUSEHOLD (list additional children on separate sheet) last aname first middle SECONDARY HOUSEHOLD (If applicable): Parent/Guardian #1 Name last first middle name gender MI F gender MI F gender MI F SECONDARY HOUSEHOLD (If applicable): Parent/Guardian #1 Name last first middle name gender MI F Gender MI F Gender MI F Gender MI F Gender MI F Gender MI F Gender MI F SeconDary HOUSEHOLD (If applicable): Parent/Guardian #1 Name last first middle name gender infinite middle mate gender infinite middle name gender infinite gender infinite Gender MI F Gender MI F last first middle name gender infinite middle infinite gender infinite Gender MI F last first middle name gender infinite Gender MI F last first middle infinite gender infinite middle infinite middle name gender infinite gender infinite gender infinite											
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In what language does the parent/guardian prefer to receive district communications?	Phone numbers (check one as primary number for school district announcements):										
PRIMARY HOUSEHOLD: Parent/Guardian #2 Name	□ Mobile	□ Work									
Name	In what language does the parent/guardian prefer to receive district communications?										
last first middle Relationship to student Email	PRIMARY HOUSEHOLD: Parent/Guardian	#2									
Relationship to student		firet		Gender 🗆 M 🗆 F							
Phone numbers: Mobile											
In what language does the parent/guardian prefer to receive district communications?											
Other children under age 18 living in the PRIMARY HOUSEHOLD (list additional children on separate sheet) last name first name middle name gender birthdate (mm/dd/yy) relationship to student school attending											
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Image In the image of the parent/guardian prefer to receive district communications?		C C		-							
SECONDARY HOUSEHOLD (if applicable): Parent/Guardian #1 Name		□ M □ F									
Name		□ M □ F									
Name	SECONDARY HOUSEHOLD (if applicable): Parent/Guardian #1									
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PRIMARY HOUSEHOLD: Parent/Guardian #2	Mobile Work Other										
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Name Gender M E	PRIMARY HOUSEHOLD: Parent/Guardian	#2									
	Name			Gender 🗆 M 🗆 F							
last first middle			middle								
Relationship to student Email											
Phone numbers: Mobile Other	Phone numbers: Mobile	Work	Other								
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$\square M \square F$		□M□F									
□ M □ F		□ M □ F									