

Hardeman County Schools Application for Enrollment

School Entering:		Previously enrolled in Hardeman Co.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date:		If Yes, what school and year?	
Student's Name:			
Student's Address:			<input type="checkbox"/> 2 proofs
AM Bus:	PM Bus:	Number of Miles from School:	
Grade Level:	<input type="checkbox"/> Proof	PK use only: # of Application:	
Date of Birth:	Gender:	Ethnicity:	
Birth Certificate #:	<input type="checkbox"/> Copy	Social Security #:	<input type="checkbox"/> Copy
Tennessee Permanent Certificate of Immunization <input type="checkbox"/> Yes <input type="checkbox"/> No If no, attach Temporary or PK Certificate			
<input type="checkbox"/> Custody		<input type="checkbox"/> Custody	
Parent's/Guardian's Name		Parent's/Guardian's Name	
Home Phone	Cell Phone	Work Phone	
Address		Address	
City, ST ZIP Code		City, ST ZIP Code	
E-Mail:		E-Mail:	

Alternative Emergency Contacts

Primary Emergency Contact			Secondary Emergency Contact		
Home Phone	Cell Phone	Work Phone	Home Phone	Cell Phone	Work Phone
Address			Address		
City, ST ZIP Code			City, ST ZIP Code		

Medical Information

Hospital/Clinic Preference	
Physician's Name	Phone Number
Insurance Company	Policy Number
Allergies/Special Health Considerations	
<p>I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.</p>	
Parent's/Guardian's Signature	Date

Home Language Survey

If a language other than English is marked for any of numbers 1-4, the student must be assessed for his/her English proficiency to determine whether or not the student needs ESL support services. Please notify Mr. Wooden when it is determined that an assessment is necessary.

1. What language did your child first learn to speak/use?	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other
2. What language does your child most often speak/use at home?	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other
3. What language do you most often speak to/use with your child?	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other
4. What language do the adults at home most often speak/use?	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other

On what date did your child first enroll in school in the USA?

Nighttime Residence Survey

Where does your child stay at night? (Please check one)

- Home/apartment owned or rented by the parent(s)/guardian(s)
- With a relative or friend (family does not have a residence)
- In a shelter
- In a motel
- In an automobile
- A campsite
- In housing that is inadequate (i.e. no electricity, running water, etc.)
- Other housing (Please explain)

Records Request Information

School Leaving: _____ Phone Number: _____

FAX Number: _____

School Address: _____

Principal's Name: _____

Reason for Leaving: _____

Was this student receiving any special services? Yes No

If yes, Records Release form must be signed.

Signatures

I hereby certify that the above information is true and correct.

Parent/Guardian Signature

Date

I request that the above pupil be admitted to _____ school.

Principal's Signature

TO BE COMPLETED BY SCHOOL STAFF

Date and Time Application Received _____ Initials _____

Are all documents attached to application? Yes No

CC: Wendy Mills, Hardeman County Board of Education; School Attendance Secretary; School Food Services Manager; Homeroom Teacher; if PK, Monica Shaw, Hardeman County Board of Education.