

Moon Area School District Registration

Census # _____ Registration Date: _____

School: _____ Gr: _____ Start Date: _____

Student Last Name: _____ First Name: _____ Middle: _____ Sr. Jr. _____ Gender: F M Age on Sept 1, 2011: _____

Date of Birth: ____/____/____ Birthplace: _____ Initial PA Enrollment: ____/____/____ Initial US Enrollment: ____/____/____

Is student Hispanic or Latino? Yes No If no, select Ethnicity: American Indian/ Alaskan Native Asian Black Native Hawaiian or Other Pacific Islander White

Previous School Attended: _____	Previous School Address: _____	Previous School Phone Number: _____
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Does student have an IEP? Yes No Special Needs? _____

Student Primary Address:

Primary/Home Phone: * _____

* Will be used by the Alertnow rapid notification phone system used by MASD for outreach/general calls.

Type of Residence: Mobile Home Apt. Own Rent-Owners Name: _____

Student Secondary Address:

Primary/Home Phone: * _____

* Will be used by the Alertnow rapid notification phone system used by MASD for outreach/general calls.

Type of Residence: Mobile Home Apt. Own Rent-Owners Name: _____

Relationship: (Please circle)	Parent/Guardian Name: _____
Father and Mother	Employer: _____
Father	Birthplace: _____
Mother	Additional Phone Number: _____
Father and Stepmother	Additional Phone Number: _____
Mother and Stepfather	
Guardian	
Other: (Specify) _____	

Relationship: (Please circle)	Parent/Guardian Name: _____
Father and Mother	Employer: _____
Father	Birthplace: _____
Mother	Additional Phone Number: _____
Father and Stepmother	Additional Phone Number: _____
Mother and Stepfather	
Guardian	
Other: (Specify) _____	

Names of Other Children in the Family					
First Name	Last Name	Birth Date	Gender	Grade	School-now attending or will be attending

Home Language Survey

The Office of Civil Rights (OCR) requires that school districts/charter schools/full day AVTS identify limited English proficient (LEP) students in order to provide appropriate language instructional programs for them. Pennsylvania has selected the Home Language Survey as the method for the identification.

1. What is/was the student's first language?		
2. Does the student speak a language(s) other than English? (Do not include languages learned in school.)	Yes	No
If yes, specify language:		
3. What language(s) is/are spoken in your home?		
4. Has the student attended any United States school in any 3 years in their lifetime?	Yes	No
If yes, complete the following:		
Name of School	State	Dates Attended

Person completing this form: _____

Signature: _____

The school district/charter school/full day AVTS has the responsibility under the federal law to serve student who are limited English proficient and need English instructions services. Given this responsibility, the school district/charter school/full day AVTS has the right to ask for the information it needs to identify English Language Learners (ELLs). As part of the responsibility to locate and identify ELLs, the school district/charter school/full day AVTS may conduct screenings or ask for related information about students who are already enrolled in the school as well as from students who enroll in the school district/charter school/full day AVTS in the future.