

**ELDON R-I SCHOOLS ENROLLMENT INFORMATION
2023--2024**

Date: _____

Race: (please check) White _____ Black _____ Hispanic _____ Indian _____ Asian _____ Other _____

Student's Name: _____ **Birthdate:** _____ **Age:** _____

Address: _____ **City:** _____ **ZipCode** _____

IF PO BOX is used, please list actual street address above: PO BOX # _____

Student Cell# _____

Home Phone #: _____ **Cell #:** _____ **Parent E-mail Address:** _____

Grade _____ **Male** _____ **Female** _____

Parent/Guardian (in home) or whom you are living: _____ **Are you a registered voter? YES NO**

Parent 1 Information: _____ **Relation:** _____

Employer: _____ **Work #:** _____ **Cell #:** _____

Parent/Guardian 2 Information _____ **Relation:** _____

Employer: _____ **Work #:** _____ **Cell #:** _____

Parent/Guardian E-mail Address: _____

Please list all siblings in Eldon Schools and their ages: _____

Are there currently any court orders dealing with custody or visitation? YES NO

IF YES, please provide the school with a copy. We CANNOT honor without documentation.

Emergency Contacts:

1.Name _____ **Relation:** _____ **Phone #:** _____ **Cell:** _____

2.Name _____ **Relation:** _____ **Phone #:** _____ **Cell:** _____

Name of Parent out of the home (if applicable): _____ **Relation:** _____ **Home #:** _____

Employer: _____ **Work #:** _____ **Cell #:** _____

Would this parent like a grade card sent to them? YES NO If yes please provide address:

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Previous school attended (name of school in what State): _____

Previous school address: _____ **Phone #:** _____

Circle the county in which you live: MILLER MORGAN MONITEAU

Circle the district in which you live: ELDON R-I HIGH POINT OTHER

Does the student use a language other than English? YES NO If YES, what language? _____

Is a language other than English used in the home? YES NO If YES, what language? _____

Are you or an immediate family member in the Military? (circle one) Active Duty National Guard or Reserve Unknown

Are you currently living in a temporary residence because your home has been damaged or economic hardship? (e.g. motel, hotel, car, campsite, shelter)? YES NO

Are you currently living with another family (doubled up) due to loss of housing, economic hardship, or a similar reason?

Explain if it is a similar reason. YES NO

Explain: _____

Has your family moved within the past 3 years to seek or obtain temporary or seasonal agricultural or food processing work? YES NO

_____ **My signature below signifies I give permission for my child to go on school or classroom trips during the elementary school years. I will be responsible to notify the school, in writing, if I want to change my position on my child attending field trips during his/her elementary years.**

Two sided please turn over

_____ I give permission for any local newspaper staff or school district to photograph my child and/or to publish his/her work to social media.

_____ My signature below signifies if I cannot be reached in the event of an emergency, I give consent for the school to obtain, through a physician or hospital of its choice, such medical care as is reasonably necessary for the student. I will not hold the school district financially responsible for the emergency care and/or transportation for said child.

_____ May take over the counter medications (generic Tylenol, cough drops, antacid, oral care, basic first aid).

Is child involved in (check all that applies): Special Ed. classes _____ Speech _____ Title I Reading _____ Gifted _____ 504 Plan _____

I VERIFY THAT ALL ENROLLMENT INFORMATION IS CORRECT.

Parent Signature _____ **Date** _____