

**VERNON PUBLIC SCHOOLS
CUMULATIVE RECORD – REGISTRATION FORM**

1.0 Office Data – for office use only School _____ Date of Registration _____ Date of Entrance _____ Residency Check _____
Grade _____ School last attended and address _____ Name of Pre-School/Nursery, if attended _____
Kindergarten: A.M. ____/P.M. ____ Birth Certificate _____ Immunization _____ Head Start _____ Vernon Student I.D.# _____ SASID # _____

Parent/Guardian - please complete sections 2.0 through 7.0 and print clearly

2.0 Student Data :

Student's Name _____ **Birthplace:** _____ **Sex:** M ___ F ___
(Last) (First) (Middle) (City) (State/Country)
Address _____ **Date of Birth:** Month ___ Day ___ Year ___ **Home Phone:** _____

Student's Ethnic Group: (circle one) American Indian Asian African-American Hispanic Caucasian **Primary Language spoken at Home** _____

3.0 Father's Data: **Name** _____ **(circle one)** Custodial Non-Custodial **Home Phone** _____
(Last) (First) (Middle)
Address _____ **(circle one)** Married Single Divorced Separated Deceased Remarried

Place of Employment _____ **Phone # at work** _____ **Ext:** _____ **Father's Cell #** _____

Lives with student Yes/No **Receives Mail** Yes/No **Can Dismiss the Student** Yes/No **Can Receive the student** Yes/No **Email address** _____

4.0 Mother's Data: **Name** _____ **(circle one)** Custodial Non-Custodial **Home Phone** _____
(Last) (First) (Middle)
Address _____ **(circle one)** Married Single Divorced Separated Deceased Remarried

Place of Employment _____ **Phone # at work** _____ **Ext:** _____ **Mother's Cell #** _____

Lives with student Yes/No **Receives Mail** Yes/No **Can Dismiss the Student** Yes/No **Can Receive the student** Yes/No **Email address** _____

Complete 5.0 only if student does not live with a parent:

5.0 Guardian's Data: **Name** _____ **(circle one)** Custodial Non-Custodial **Home Phone** _____
(Last) (First) (Middle)
Address _____ **(circle one)** Married Single Divorced Separated Deceased Remarried

Place of Employment _____ **Phone # at work** _____ **Ext:** _____ **Guardian's Cell #** _____

Lives with student Yes/No **Receives Mail** Yes/No **Can Dismiss the Student** Yes/No **Can Receive the student** Yes/No **Email address** _____

6.0 Brothers and/or sisters Data: Name _____ DOB _____ School _____ Grade _____
Name _____ DOB _____ School _____ Grade _____
Name _____ DOB _____ School _____ Grade _____

7.0 Registered by: Parent's signature _____ Guardian's signature _____