

CARDINAL LOCAL SCHOOLS

15982 E. High St, PO Box 188, Middlefield, Oh 44062
440-632-0261

STUDENT ENROLLMENT FORM

PLEASE PRINT

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STUDENT INFORMATION:

Student's Legal Name: _____
Last Name First Name Middle Name

Grade: _____** Gender: M F

Birthdate: _____ Citizenship: ___U.S. ___Exchange Student* ___Other*
Country of Citizenship if Exchange or Other* _____
Birth City: _____ *Provide passport

Is the student identified as: ___Special Ed (IEP) ___On a 504 plan ___Gifted ___LEP

Is the student currently: ___Expelled ___Suspended?

Admission Reason:

- ___ Enrolled 1st time in an Ohio public/community school because of age(kdg)
- ___ Transferred from homeschool (**not** online school)
- ___ Transferred from out of state or country
- ___ Transferred from non public school
Name of school _____
- ___ Transferred from another Ohio public, community or online school
Name of school district _____
- ___ Not enrolled in an Ohio Public/community school since 2003 for a reason
not listed above
- ___ Not newly enrolled in this school district (attended Cardinal previously)

****Grade placement subject to adjustment upon receipt of previous school records**

REQUIRED BY THE U.S. DEPARTMENT OF EDUCATION

Race/Ethnicity:

Is the student Hispanic/Latino? Y N

What is the student's race?

Choose all that apply-

- ___ Asian
- ___ Black or African American
- ___ American Indian or Alaskan Native
- ___ Native Hawaiian or Pacific Islander
- ___ White

Home Language Survey:

What language did your child first speak when they learned to talk? _____

What language does your child use most frequently at home? _____

What language do you use most frequently to your child?

What language do the adults at home most often speak?

How long has your child attended school in the United States?
