

# Hillsboro Middle/High School - New Student Enrollment Form

## Student Information

First Name:	Middle Name:	Date of Birth:
Last Name:		Grade:
Date first enrolled in a school in the U.S.:		Phone Number:
Parent/Guardian Name(s):	Father:	Mother:
Current Address:		Email:

Is this student Hispanic/Latino?  No, not Hispanic/Latino .  Yes (A person of Cuban, Mexican, So/Ctrl American, or other Spanish culture/origin, regardless of race)

The above question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your student's race to be.

**What is the student's race:**  American Indian/Alaskan Native  Asian  Black or African American  
*(choose one or more)*  Native Hawaiian/Other Pacific Islander  White

Does the student have an IEP (Individualized Educ. Plan) Y / N Is the student in Band? Y / N

## Request for Records

The student listed above, formerly enrolled at your school, is now enrolling as a student at Hillsboro Middle/High School, USD #410. Please provide us with the items checked below:

- |                                                                                       |                                                                                                                                                     |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Transcript</b></p> <p><b>Withdrawal Grades</b></p> <p><b>Health Records</b></p> | <p><b>Discipline Records</b></p> <p><b>Any Special Education Records</b></p> <p><b>Other Information to help us promote a smooth transition</b></p> |
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*School transferring from:* \_\_\_\_\_

*School's address and phone number:* \_\_\_\_\_

Parent/Guardian's signature: \_\_\_\_\_

*You can mail the student's records to:*

**Hillsboro Middle/High School**  
**400 East Grand**  
**Hillsboro, KS 67063**

***Thank you for your prompt attention to this matter.***

*Jill Hein, Counselor*  
*Hillsboro Middle/High School*  
**jill.hein@usd410.net**

### USD 410 - Home Language Survey

Local Educational Agencies (LEAs) are required to identify possible English Learners (ELs) during enrollment. This Home Language Survey (HLS) is used as a tool to determine if your child is eligible for language support services. If a language other than English is used by you or your child and your child meets the English Learner (EL) definition, the school may give your child an English Language Proficiency assessment. The school will share the results of the assessment with you.

1. What language did your child first learn to speak/use?

English \_\_\_\_\_ Spanish \_\_\_\_\_ Other (please specify) \_\_\_\_\_

2. What language does your child speak/use at home?

English \_\_\_\_\_ Spanish \_\_\_\_\_ Other (please specify) \_\_\_\_\_

3. What language do you speak/use with your child?

English \_\_\_\_\_ Spanish \_\_\_\_\_ Other (please specify) \_\_\_\_\_

4. What language do the adults regularly present or living in the home speak/use while in the presence of the child?

English \_\_\_\_\_ Spanish \_\_\_\_\_ Other (please specify) \_\_\_\_\_

#### **Parent/Guardian Information:**

Which language do you prefer:

English \_\_\_\_\_ Spanish \_\_\_\_\_ Other (please specify) \_\_\_\_\_

#### **Migrant Education Program Information:**

The Migrant Education Program (MEP) is authorized by Title 1 Part C of the Elementary and Secondary Education Act of 1965 (ESEA). The MEP provides formula grants to local education agencies to establish or improve education programs for children who may qualify for the Migrant Program. Please help us determine your child's eligibility for the Migrant Program by responding to the following questions.

Have you or a member of your family moved in the last 36 months to do, or apply for, agriculture or fishing related work, including dairies, nurseries, meat or vegetable processing, feed yards, or field work?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have your children moved with or to join the worker above in the past 36 months?

Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_