

**CHARLESTON COMMUNITY UNIT DISTRICT NO. 1
STUDENT REGISTRATION INFORMATION**

Student Name: _____

Last First Middle

Grade Male Female

Address: _____

City State Zip

Date of Birth: _____

Are you a resident of Charleston School District?
 Yes No

Please list other siblings in the household.

<u>Sibling Name</u>	<u>Sibling Birthdate</u>
_____	_____
_____	_____
_____	_____
_____	_____

Student lives with (Please circle one)

Father and Mother Mother only

Father only Foster Parents

Other (specify) _____

Guardian 1: _____

Address: _____

City, State, Zip: _____

Primary Phone: _____

Work Phone: _____

Cell Phone #: _____

E-mail address: _____

Guardian 2: _____

Address: _____

City, State, Zip: _____

Primary Phone: _____

Work Phone: _____

Cell Phone #: _____

E-mail address: _____

See Reverse side to complete Race and Ethnicity Information.

All students are provided equal opportunities in all education programs for all services. No person shall be discriminated against on the basis of race, color, creed, national origin, gender, sexual orientation, age, ancestry, marital status, citizenship status, or mental or physical disability in any of its programs, activities, services or benefits. All students are guaranteed equal access to Educational and extra-curricular activities as required by Illinois PA 79-597 and Title IX of the 1973 Educational Amendments..

By signing this form, I agree that the above information is correct

Signature of Parent/Guardian: _____ Date: _____

RACE AND ETHNICITY DATA COLLECTION

INSTRUCTIONS: This form is to be filled out by the student’s parents or guardians, and both questions must be answered. Part A asks about the student’s ethnicity and Part B asks about the student’s race. If you decline to respond to either question, the school district is required to provide the missing information by observer identification.

PART A: Is this student Hispanic/Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

Choose only one.

No, not Hispanic/Latino

Yes, Hispanic/Latino

PART B: What is the student’s race? Choose one or more

American Indian or Alaska Native (A person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.)

Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)

Black or African American (A person having origins in any of the black racial groups of Africa.)

Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

HOME LANGUAGE SURVEY

Section 228.15: Identification

1. Is a language other than English spoken in the home, and, if so, which language?

2. Does the student speak a language other than English, and, if so, which language?

Student’s Name

School

Grade

Parent/Guardian Printed Name

Parent/Guardian Signature

(To be placed in student’s temporary file)

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