

Powell County Schools Enrollment Form- Student Information (1 Per Student)

Demographic Information

Student's Legal Name: _____
First Middle Last

Birthdate: ____/____/____ **Grade:** _____ **Gender:** Male Female
Month Day Year

Social Security #: _____ - _____ - _____ **Today's Date:** ____/____/____
(Optional: Needed to match student records, for KEES Money, and other initiatives.)

Is the student Hispanic/Latino? Yes No
Is the student from one or more of these races?
 White Black or African American American Indian or Alaska Native Asian
 Native Hawaiian or Other Pacific Islander

Please Check School Enrolling In:

- Bowen Elementary
- Clay City Elementary
- Stanton Elementary
- Powell Co. Middle
- Powell Co. High
- Powell Co. Academy

Student E-Mail: _____ **Student Cell Phone:** (____) _____-

Previous School Information

Name of School: _____
County

Is your child presently under an expulsion order from any other school district? Yes No
Is your child presently under consideration for expulsion? Yes No
Is your child presently involved in the juvenile justice system? Yes No
Has your child been disciplined for a violation of state law or school regulation relating to weapons, alcohol, or drugs? Yes No

Transportation

How does this child get TO SCHOOL? Walk Bike Drive Transported by someone on pickup list
 Bus _____ Bus Number (If not known leave blank)

Address picked up by bus: _____
(Physical Street Address) (City)

How does this child get HOME? Walk Bike Drive Transported by someone on pickup list
 Bus _____ Bus Number (If not known leave blank)

Address dropped off by bus: _____
(Physical Street Address) (City)

Participation in Programs

Please check any special programs in which the student has participated:

- Speech/Language Special Reading Special Education IEP 504 Plan Gifted/Talented
- Free/Reduced Lunch Migrant Other _____

Language

Primary Language of the Household: English Spanish Other _____
Does the student speak a language other than English? No Yes **What language?** _____

Parent in U.S. Armed Forces or National Guard

Does this child have a parent or guardian currently serving as an active duty member of the U.S. Armed Forces, or full-time National Guard? Yes No

If yes, please provide: **Start Date:** _____ **Branch:** _____ Mother Father
Start Date: _____ **Branch:** _____ Mother Father