The Heights Charter
Student Registration Form

*Please Note: **All** portions of this form must be completed in order to be processed*

STUDENT INFORMATION: (Please print clearly)

Student's Legal Name as it Appears on Birth Certificate (First, Middle, Last)	Alias or AKA	☐ Male ☐ Female
Birth Date (Month/Day/Year) — Birth Place (City, State, Country)	Grade Level Student Will be Enrolling Into	School Year

Residential Street Address, Apt or Unit,   City, Zip   Phone Number

Mailing Address (P.O. Box, City, Zip)   Last School Attended, City, State

Date Student First Enrolled in U.S. School: Name of First U.S. School Attended:

Does your child have a serious or chronic medical condition? ☐ No ☐ Yes
If yes, please specify:

Ethnic Background:
First: Choose one of the following: ☐ Hispanic or Latino   ☐ Not Hispanic or Latino

Second: Check any that apply: ☐ American Indian or Alaska Native   ☐ White   ☐ Black   ☐ Pacific Islander
☐ Filipino   ☐ Asian – Country of Origin _____

Student Lives With (Check all that apply)

☐ Father   ☐ Mother   ☐ Step-Parent   ☐ Grandparents   ☐ Guardian   ☐ Other:

PARENTS/GUARDIANS INFORMATION: (Please print clearly)

Father's Name	Address (if different from student)	Cell Phone
Mother's Name	Address (if different from student)	Cell Phone
Guardian or Step-Parent	Address (if different from student)	Cell Phone
Family Email Address		Emergency Contact (Name, Cell Phone)

Parent Education Level: Please check a category for each parent.

Father: ☐ Graduate/PostGrad Training   ☐ College Graduate   ☐ Some College   ☐ High School Graduate   ☐ Not a High School Graduate
Mother: ☐ Graduate/PostGrad Training   ☐ College Graduate   ☐ Some College   ☐ High School Graduate   ☐ Not a High School Graduate

Please answer the following questions:
Either parent or guardian on active duty in the uniformed military service or reserves?   ☐ Yes   ☐ No   If yes, which branch? _____
Pupil resides on federal/Native American property?   ☐ Yes   ☐ No

LIST ALL CHILDREN IN HOME IN ORDER OF BIRTH:

Name	Age	Birth Date	Grade	School
1.				
2.				
3.				
4.				
5.				

Signature of Parent/Guardian	Date

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