# Spreckels Union School District
## Registration Data Form

### STUDENT'S LEGAL NAME

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Suffix</th>
</tr>
</thead>
</table>

**Gender:**
- Male
- Female
- Other (circle one)

**Birth Date:**
- Month
- Day
- Year

**Grade:**
- Kindergarten
- 1st
- 2nd
- 3rd
- 4th
- 5th
- 6th
- 7th
- 8th
- 9th
- 10th
- 11th
- 12th

**Student's Birthplace:**
- City
- State

**Student's Primary Residence**:
- City
- State
- Zip Code
- Country

*In the event the student resides in multiple households, please provide a single address here for State reporting requirements*

**Interdistrict Transfer (circle one):**
- Yes
- No

### PARENT/LEGAL GUARDIAN INFORMATION (with whom the student lives)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Suffix</th>
</tr>
</thead>
</table>

**Mr./Mrs./Ms./Other (circle one):**

**Relation to Student:**
- Parent
- Legal Guardian
- Other (circle one)

**Parent/Legal Guardian Residence:**
- Street
- City
- State
- Zip Code
- Country

**Parent/Legal Guardian Mailing Address:**
- Street
- City
- State
- Zip Code
- Country

*(if different from above)*

**Phone Number(s):**
- Cell
- Home
- Work (circle one)

**Email Address:**

### Student Services

Is the student currently receiving any of the following services?

- Individualized Education Plan (IEP)
- 504 Plan
- Other (please describe)

### LAST SCHOOL ATTENDED

<table>
<thead>
<tr>
<th>School Name</th>
<th>Grade</th>
<th>Date Last Attended</th>
</tr>
</thead>
</table>

**School Address:**
- City
- State
- Zip Code
- Country

**Signature of Parent/Legal Guardian**

### FOR DISTRICT USE ONLY

<table>
<thead>
<tr>
<th>Reviewed By</th>
<th>Teacher</th>
<th>Date of Review</th>
<th>SIS Entry Date</th>
</tr>
</thead>
</table>

*In the event the student resides in multiple households, please provide a single address here for State reporting requirements*