



SUMMER SCHOOL REGISTRATION FORM

DATE _____ I.D.# _____

PROGRAM _____ SCHOOL-SITE _____

FUTURE GRADE LEVEL _____ STUDENT S.S.# _____

NAME _____
(Legal) (Last, First, Middle)

NAME _____
(Assumed) (Last, First, Middle)

STUDENT'S ADDRESS _____
(No., Street)

_____ HOME PHONE _____
(City, State, Zip Code)

MAILING ADDRESS _____
(If different from the student's address)

DATE OF BIRTH _____ BIRTHPLACE _____

PRIMARY LANGUAGE: PARENT _____ STUDENT _____

FATHER'S NAME _____ OCCUPATION _____

EMPLOYER _____ WORK PHONE _____

MOTHER'S NAME _____ OCCUPATION _____

EMPLOYER _____ WORK PHONE _____

GUARDIAN'S NAME _____ RELATIONSHIP _____
(Name of guardian with whom student lives if not the parent)

CURRENT SCHOOL _____
(School Name)

SCHOOL ADDRESS _____
(No., Street)

_____ (City, State, Zip Code)

LAST MIAMI-DADE COUNTY PUBLIC SCHOOL ATTENDED _____

STUDENTS NEW TO MIAMI-DADE COUNTY PUBLIC SCHOOLS SHOULD SEE THE INITIAL ENTRY CHECK LIST ON THE BACK.

STUDENTS NEW TO MIAMI-DADE COUNTY PUBLIC SCHOOLS

INITIAL ENTRY - CHECK LIST

1. Completed Summer School Registration Form
2. Birth Verification Record - (e.g., Copy of Birth Certificate, Passport)
3. Health Records - HRS-H Form 3040 with TB Test Results and Immunization Record
4. Verification of Grade Level - Current Grade Report or a written statement from the Principal
5. Complete mailing address of current school
6. District Instructional Center Form to verify program and location
7. Home Language Survey Form (to be filed in cum)