



School Registration Form

Student # _____
Parent # _____
SAIS # _____

STUDENT INFORMATION:

Name: First _____ Middle _____ Last _____ [] Female [] Male

Was the child previously enrolled at SABIS® International School? [] Yes [] No If yes when _____

Date of birth ____/____/____ Place of birth _____ Country of birth _____

Applicants Home Address: _____ Phone number _____

City _____ State _____ Zip code _____ Social Security Number ____ - ____ - ____

Enrollment for: [] Immediate [] Fall [] Spring Grade applying for: _____ Childs age: _____

Present grade: _____ Present school: _____ School District: _____

Has student ever been on Special Education? [] No [] Yes If yes what type of program: _____

Has the student ever been suspended? [] No [] Yes if yes please explain: _____

Has the student ever been expelled? [] No [] Yes if yes please explain: _____

Is there a custody issue we should know about? [] No [] Yes if yes please explain: _____

Student Language Assessment

What is the primary language used in the home regardless of the language spoken by the student? _____

What is the language most spoken by the student? _____

What is the language that the student first acquired? _____

Has the student been in the ELL program? [] No [] Yes if yes when _____

If yes, please provide a copy the most recent ELL test results to our school

STUDENT ETHNIC INFORMATION: Please answer BOTH PART A & PART B as required by the Federal Government

Part A: Is this student Hispanic/Latino? (Choose only one) Part B: What is the student's race?

- [] Yes, Hispanic/Latino (A person who is Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race)
[] America Indian or Alaskan native
[] Native Hawaiian or other Pacific Islander
[] No, not Hispanic/Latino
[] Asian
[] Black or African American
[] White

Do you have other children presently attending SABIS®

Name: _____ Grade _____ Name: _____ Grade _____ Name _____ Grade _____

PARENT/GUARDIAN INFORMATION:

Parent(s) Martial Status [] Single [] Married [] Separated [] Divorced Child lives with _____

If divorced or separated, does the father/mother have permission to sign the child out of school? [] Yes [] No

If "No" is marked, please provide court documentation and give name _____

Mr. Mrs. Ms. _____ Relationship to student: _____
Parent/ Guardian full name

Home address _____ Phone Numbers: Home _____

City _____ State _____ Zip Code _____ Cell _____

Work _____

Mr. Mrs. Ms. _____ Relationship to student: _____
Parent/ Guardian full name

Home address _____ Phone Numbers: Home _____

City _____ State _____ Zip Code _____ Cell _____

Work _____

Parent/Guardian Signature

Date

For office use only:

Re-Enrollment [] Yes [] No

Date received: _____ Date Entered: _____

Received By: _____ Entered By: _____