



Moose Lake Community School Registration

Independent School District #97
4812 County Road 10, Moose Lake, MN 55767
218-485-4435

Student Information:

LAST Name (Legal) _____ FIRST Name (Legal) _____ Full MIDDLE Name _____

Nickname or Preferred Name: _____ Birth Date: _____ Gender: M / F _____ Grade level: _____

Assistance needed with: ☐ Math ☐ Reading ☐ Speech ☐ General Learning ☐ 504 Plan

Special Education / IBP:

- | | | |
|---|--|---|
| <input type="checkbox"/> Speech/Language | <input type="checkbox"/> Visually Impaired | <input type="checkbox"/> Autistic |
| <input type="checkbox"/> Dev Cognitive Disability | <input type="checkbox"/> Specific Learning Disability | <input type="checkbox"/> Traumatic Brain Injury |
| <input type="checkbox"/> Physically Impaired | <input type="checkbox"/> Emotional/Behavioral Disorder | |
| <input type="checkbox"/> Hearing Impaired | <input type="checkbox"/> Other Health Impaired | |

Please list any health concerns we should be aware of: _____

Previous Enrollments: (most recent first)

Name of School	Year/Grade	City and State	Phone and Fax
1. _____	____/____	_____	____/____
2. _____	____/____	_____	____/____
3. _____	____/____	_____	____/____

PRIMARY Residence: (all information & mailings will be sent to the primary household)

Student lives with:	Holds legal custody?	Legal Guardian	Have you moved to this school district within the last 36 months for temporary or seasonal agricultural or fishing work?
<input type="checkbox"/> Natural Father	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
<input type="checkbox"/> Natural Mother	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
<input type="checkbox"/> Stepfather	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
<input type="checkbox"/> Stepmother	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
<input type="checkbox"/> Foster Parents	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
<input type="checkbox"/> OTHER: (list)	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	

Bussing information:

☐ Walker ☐ Bus

PRIMARY Parent/Guardian (1) Information:

Name: _____
Physical address: _____
City / State / Zip _____
County _____
Home Phone: _____ Unlisted? ☐
Cell Phone: _____
Place of employment: _____
Work phone / Pager _____

PRIMARY Parent/Guardian (2) Information:

Name: _____
Mailing address _____
City / State / Zip _____
Resident School District _____
E-mail: _____
Cell Phone: _____
Place of employment: _____
Work Phone / Pager _____

Student's SECONDARY Household (if applicable, or birth parent household if primary residence is foster)

Request school information to be sent to this household also? yes ☐ no ☐

Relationship to student:	Holds legal custody?	Legal Guardian
<input type="checkbox"/> Natural Father	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
<input type="checkbox"/> Natural Mother	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
<input type="checkbox"/> Stepfather	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
<input type="checkbox"/> Stepmother	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
<input type="checkbox"/> OTHER: (list)	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>

SECONDARY Parent/Guardian (1) Information:

Name: _____
 Physical address: _____
 City / State / Zip: _____
 County: _____
 Home Phone: _____ Unlisted? _____
 Cell Phone: _____
 Place of employment: _____
 Work phone / Pager: _____

SECONDARY Parent/Guardian (2) Information:

Name: _____
 Mailing address: _____
 City / State / Zip: _____
 Resident School District: _____
 E-mail: _____
 Cell Phone: _____
 Place of employment: _____
 Work Phone / Pager: _____

****Note:** Please notify the school office and provide legal documentation if there is a custodial issue**

Have parental rights been terminated (Ward of State)? Yes ___ No ___ (if Yes, please provide legal documentation)

Social Worker Name _____ Social Worker Phone Number _____

CENSUS: Please list all other permanent members (adults & children) in student's household.

Full Legal Name (last, first, middle)	Birth Date	Gender	Relationship	Age / Grade	School
1. _____	_____	M / F	_____	___ / ___	_____
2. _____	_____	M / F	_____	___ / ___	_____
3. _____	_____	M / F	_____	___ / ___	_____
4. _____	_____	M / F	_____	___ / ___	_____
5. _____	_____	M / F	_____	___ / ___	_____
6. _____	_____	M / F	_____	___ / ___	_____
7. _____	_____	M / F	_____	___ / ___	_____
8. _____	_____	M / F	_____	___ / ___	_____

ADDITIONAL INFORMATION:

If the student is entering kindergarten, have they received Early Childhood Screening? Yes ___ No ___

If YES, where? _____

Is the student homeless? Yes ___ No ___

The following questions apply to secondary school students:

Is the student a Teen Parent? Yes ___ No ___

Is the student a Displaced Homemaker? Yes ___ No ___

I certify the information provided here is true and complete to the best of my knowledge.

 Parent/Guardian Printed Name

 Parent/Guardian Signature

 Date

Tennison Warning: You have been asked to supply private information concerning your child. Pursuant to M.S. 12.04, school districts are required to inform parent/guardians how this information will be used. All information collected will be private and confidential. We may need to phone you or other designated people. You may refuse to supply the requested information. This may greatly hinder us in helping your child. Please note that information that you provide to our schools will only be available to staff who work directly with your child or to emergency response personnel. Data privacy laws protect confidentiality.