



Halifax County Schools Kindergarten Application Form 2018 - 2019

Date: _____

I. Child's Name: _____

Date of Birth: _____ How Verified: _____

Sex: Male: _____ Female: _____ Birthplace: _____

Social Security #: _____ (optional)

Age in years and months as of August 31st: _____ Years _____ Months

Race: _____ Black _____ Indian _____ White
_____ Hispanic _____ Other _____

II. 911 Address: _____

Mail Address: _____

Telephone: _____ If no phone, how can we reach you? _____

III. Parents Marital Status: _____ Married _____ Divorced _____ Separated
_____ Widowed _____ Single

IV. Father's Name: _____

Father's Age: _____ Highest grade completed (circle): 6 7 8 9 10 11 12

Years of College _____ Disabled? _____ Yes _____ No

Employer's Name: _____ Phone: _____

V. Mother's Name: _____

Mother's Age: _____ Highest grade completed (circle): 6 7 8 9 10 11 12

Years of College _____ Disabled? _____ Yes _____ No

Employer's Name: _____ Phone: _____

VI. Guardian's Name: _____ Relationship: _____

Guardian's Age: _____ Disabled? _____ Yes _____ No

Employer's Name: _____ Phone: _____

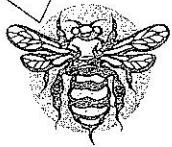
VII. Child Resides With: _____ Relationship: _____

Family Size: # of older brothers: _____ sisters: _____

of younger brothers: _____ sisters: _____

Number of person(s) living in home other than those already on this sheet? _____

WELCOME



Aurelian Springs Institute of Global Learning Registration Form

STUDENT INFORMATION

Current Grade: _____

Legal Last Name _____

Legal First Name _____

Middle Name _____

Date of Birth _____ Gender M / F

Proof of Age _____

Home Phone _____ Unlisted Y / N

Social Security # - -

Home Address _____

Apt. # _____ City _____

State _____ Zip Code _____

Mailing Address _____

Apt. # _____ P.O. Box No. _____

City _____

State _____ Zip Code _____

How long at present address? _____

(Please list mailing address if you receive your mail at a different location than the home address)

Ethnicity: Hispanic or Non-Hispanic (Please circle one)

Race: (Please circle one) American Indian / Alaskan Native Asian / Pacific Islander

Black Hispanic White

Multi-racial (Please list races) _____

PREVIOUS SCHOOL INFORMATION

Name of last school attended _____

Address _____

City _____ State _____ Zip Code _____

Telephone # (If Available) _____

IMMIGRATION RELATED INFORMATION

Country of Birth _____ First Language _____

City of Birth _____ Language at Home _____

Citizen of (Country) _____ Language Most Used _____

PARENT/GUARDIAN INFORMATION (Documentation of legal custody must be provided if required)

(Please check one) Custody Living with Parents Court Access

Relationship _____

Last Name _____

First Name _____

Living w/Student Y / N Same Address Y / N

Address _____

Home Phone _____

Cell Phone # _____

Employer _____

Occupation _____

Business Phone _____

Relationship _____

Last Name _____

First Name _____

Living w/Student Y / N Same Address Y / N

Address _____

Home Phone _____

Cell Phone # _____

Employer _____

Occupation _____

Business Phone _____

Halifax County Schools

AURELIAN SPRINGS ELEMENTARY



10536 Hwy 48
Littleton, NC 27850
(252) 586-4944
Marcus Jones, Principal
Jacqueline Harper, School
Counselor
Jeanetta Hockaday, Data
Manager

Student Withdrawal Form

Student's Name _____ Date of Birth _____

NC Wise Pupil # _____ Withdrawal Date _____

The following reports have been printed from NC Wise prior to withdrawal:

_____ Standardized Test Summary _____ Incident Summary Report
_____ Attendance Summary _____ Schedule
_____ Office Index Card _____ Report Card

Library Information

Books Returned: _____ yes _____ no

If no, please identify the Title and Author of book:

Title	Author
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Signature of Media Specialist

Signature of Data Manager

Date