

Official Start Date _____

ENROLLMENT FORM MFL MarMac Community School

Dear Parent or Guardian:

The following information is necessary for filling out your child's cumulative record folder. This folder, a continuous record of your child's school progress, is kept up-to-date and follows your child as he/she goes through this school or moves to another school.

1. Name _____
Last First Middle Nickname
2. Address _____
Street Address P.O. Box Number County

City, State, Zip Code Student Cell Phone
3. Open Enrolled? No ___ Yes ___ If yes, name of resident district? _____
4. Birth Date _____ 5. Age ___ 6. Birthplace _____
7. Grade _____ 8. Gender ___ 9. Primary language _____
10. Race/Ethnicity: ___ American Indian or Alaskan Native; ___ Black, not of Hispanic Origin;
___ Asian or Pacific Islander; ___ Hispanic; ___ White, Not of Hispanic Origin
11. Check the following if it pertains:
Parents Separated () Father Remarried () Father Deceased ()
Parents Divorced () Mother Remarried () Mother Deceased ()
12. Father _____
Name Address (if different than above)
Email address _____ Phone _____
Place of Employment _____ Work Phone _____
13. Mother _____
Name Address (if different than above)
Email address _____ Phone _____
Place of Employment _____ Work Phone _____
14. Step-parent or Guardian _____
Name Address (if different than above)
Email address _____ Phone _____
Place of Employment _____ Work Phone _____
15. Brothers: Number Older ___ Number Younger ___ / Sisters: Number Older ___ Number Younger ___
16. In an emergency, if you cannot be reached, whom should we contact?
Name _____ Relationship _____ Phone _____
17. Most Recent School Attended _____
Name Address
Date Last Attended _____ Grade _____ Teacher _____
18. Parent Signature _____ Date _____