

To be completed by school personnel:

Entry Date _____
Locker # _____
Bus # _____
Boundary Choice

Jordan School District
SECONDARY REGISTRATION

Parent: Please complete this card and return it to school with registration materials.

Student No. _____
Birth Date _____
Home Phone _____
Parent E-mail _____

Name _____ (Last) _____ (First) _____ Grade _____ Sex: M F
Student's Home Address _____ City _____ Zip _____
Guardianship: Both Parents Mother Father Other
Father _____ Employer _____ Phone _____ Cell _____
Mother _____ Employer _____ Phone _____ Cell _____
Guardian _____ Employer _____ Phone _____ Cell _____
(If different than parent)
Relationship of Guardian _____
School Last Attended _____ Address _____

Federal Ethnicity and Race Count

Part 1 – Ethnicity: Is the student (or are you) Hispanic/Latino?
 No, not Hispanic/Latino
 Yes, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, Central American, South American or other Spanish culture or origin, regardless of race.)

The above part of the question is about ethnicity, not race. No matter what you selected above, **please continue to answer the following** by marking one or more boxes below to indicate what you consider your student's (or your) race to be.

Part 2 – Race: What is your student's (or your) race? (Choose one or more.)
 Central American Indian, North American Indian, South American Indian or Alaska Native, a person having origins in any of the original peoples of Central America, North America or South America, and who maintains community attachment or tribal affiliation.
 Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
 Black or African American (A person having origins in any of the black racial groups of Africa.)
 Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, Tonga or other Pacific Islands.)
 White or Caucasian, a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

If Part 1 or Part 2 is left blank, observer identification will be used. Race designated by observer

COMPLETE OTHER SIDE

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Home Language Survey

• Which language does your child most frequently speak at home? _____
• Which language do adults in your home most frequently use when speaking with your child? _____
• Which language(s) does your child currently understand or speak? _____
• Does your family come from a refugee background? _____
• Is this student a refugee student? (Students CAN be both refugee and immigrant.) Yes No
• Is this student an immigrant student? (Students CAN be both refugee and immigrant.) Yes No
• Is your child a migrant student? Yes No
If yes, what is the date that you moved to this area? (mm/dd/yy) _____

In case of an accident, illness, or emergency school closure, I give permission to contact and/or release my child to the person(s) listed below for care until I arrive:
Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____

Please list any health problem(s) and/or special education needs that may affect school work _____

Permission is granted for the above named student to ride the school bus or public transportation on school supervised field trips or activities.

Parent's Signature _____

(Please do not fold this card)

District Secondary Registration Cards are to be filled out by parents or guardians of all students entering school.
If parents or guardians need interpretive assistance and interpreters are not available in the school, please call Alternative Language Services at 801-567-8116.