


MIFFLINBURG AREA SCHOOL DISTRICT

Household Registration Form

[Household Address]

Directions: A household is a physical address at which one or more students reside. This form is used for the *initial* enrollment of one or more household children in a particular school year. Shaded boxes should not be completed.

Household Address Information

Address	_____	School Year	_____
	_____	Today's Date	_____
City	_____	Language	_____
State/Zip	_____		
Primary Phone (_____)	_____		

Proof of Residency Type (include copy)

Household Name



MIFFLINBURG AREA SCHOOL DISTRICT

Household Registration Form
[Parent/Guardian Information]

Directions: Consider every child that resides at the household listed on Page 1. Every child at this address has at least one parent or legal guardian (PG). List below all parents or legal guardians for children living in this household. In some cases, a PG might not live at the household address but should be included. Address information does not need to be completed for PG's living in the household. Shaded boxes should not be completed.

Guardian Information (PG1)	Household Name	<input type="text"/>
Legal First Name _____	Legal Last Name _____	
Salutation (ex. Dr.) _____	Suffix (ex. Jr.) _____	Gender (ex. M or F) _____
Home Address _____	Home Phone* (_____) _____	
_____	Mobile Phone*(_____) _____	
City _____	Work Phone *(_____) _____	
State/Zip _____	Email _____	
Employer _____		
Employer Addr _____		*-only use numbers that have no extension.

City _____	State _____	Zip _____
Employer Phone (_____) _____	Extension _____	

Guardian Information (PG2)	Household Name	<input type="text"/>
Legal First Name _____	Legal Last Name _____	
Salutation (ex. Dr.) _____	Suffix (ex. Jr.) _____	Gender (ex. M or F) _____
Home Address _____	Home Phone* (_____) _____	
_____	Mobile Phone*(_____) _____	
City _____	Work Phone *(_____) _____	
State/Zip _____	Email _____	
Employer _____		
Employer Addr _____		

City _____	State _____	Zip _____
Employer Phone (_____) _____	Extension _____	



MIFFLINBURG AREA SCHOOL DISTRICT

Household Registration Form

[Parent/Guardian Information]

Guardian Information (PG3)	Household Name
Legal First Name _____	Legal Last Name _____
Salutation (ex. Dr.) _____	Suffix (ex. Jr.) _____ Gender (ex. M or F) _____
Home Address _____	Home Phone* (____) _____
_____	Mobile Phone*(____) _____
City _____	Work Phone *(____) _____
State/Zip _____	Email _____
Employer _____	
Employer Addr _____	*-only use numbers that have no extension.

City _____	State _____ Zip _____
Employer Phone (____) _____	Extension _____

~~[Current/Future Student Information]~~

Current/Future Enrollment Verification: List all household students that are currently attending Mifflinburg schools, the parents or legal guardians for each student, and the relationship of each to the student. Additionally, write either a “yes” or “no” to indicate that student reports can legally be sent to that person. If there are any students that are residing in your home that are not currently attending Mifflinburg Area School District, but are expected to in the future, please list below as well.

Student Name	Grade	Birthdate	Parent/Guardians	Correspondence
Jane Doe (example)	10	12/13/1998	PG1-father PG3-mother	Yes Yes
John Doe (example)	7	1/1/2001	PG1-father PG2-mother	Yes Yes



MIFFLINBURG AREA SCHOOL DISTRICT

Household Registration Form
[New Student Information]

Directions: Complete all information for the student being enrolled. Use only legal names. Do not complete the information in any shaded boxes.

Household Name

Legal First Name _____ Nickname _____

Legal Middle Name _____ Date of Birth _____

Legal Last Name _____ City of Birth _____

Suffix _____ (ex. Lewisburg, PA or San Juan, PR)

Student Email _____ Country of Birth _____

Gender (Male/Female)

Ethnicity: Hispanic (Yes/No)

Circle all races that apply:

White

American Indian or Alaska Native

Asian

Black

Native Hawaiian or other Pacific Islander

Attended **Head Start** (Yes/No)

Pre-School(s) Attended _____

List all guardians for this student and also the relationship to this student.

Ex. PG1-father, PG2-mother _____

List all guardians that have legal correspondence rights Ex. PG1, PG3 _____

Enrollment Date

Enrollment Code

Birth Certificate Copy

Grade

School Calendar

Processed by



MIFFLINBURG AREA SCHOOL DISTRICT
Education and Language History Survey

Directions: Complete all information for the student being enrolled. Use only legal names. Do not complete the information in any shaded boxes.

Household Name

Legal First Name _____ Legal Last Name _____

Date of Birth _____ Grade 9 Entry Date (actual mm/dd/yyyy) _____

Did this student previously attend a Mifflinburg School? (Yes/No) Foster Care? (Yes/No)

1. Last School Attended

Name _____

City _____ State _____ Country _____

2. Final Date at this Last School _____

3. Last Grade Level Completed _____. Date of Completion (mm/yyyy) _____

4. School of Completion

Name _____

City _____ State _____ Country _____

5. Does this student have an IEP for any of the following:

Speech ___ Learning Disability ___ Other Impairment (please specify) _____

The Office of Civil Right (OCR) requires that school districts/charter schools/full day AVTS identify limited English proficient (LEP) students in order to provide appropriate language instructional programs for them. Pennsylvania has selected the Home Language Survey as the method for the identification.

1. What is/was the student's first language? _____

2. Does the student speak a language other than English? (Yes/No). If "yes", what language(s)? Do not include languages learned in school.

3. What language(s) is/are spoken in your home? _____

4. Has the student attended a United States school in any three years of his or her lifetime? (Yes/No) If "yes", complete the below

Name of School	State	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____



MIFFLINBURG AREA SCHOOL DISTRICT

Household Registration Form
[Parental/Residency Statement]

I, _____, hereby verify that I am the primary custodial parent or a legal guardian of the children listed on the **New Student Information** forms at the residence address as identified on the **Household Address** form;

and

All parent/guardian information is complete and true;

and

I hereby verify that I am a resident at the address listed on the **Household Address** form and that the children as listed on the **New Student Information** form(s) are residing with me at this time. Under Pennsylvania law, a child is considered to be a resident of the school district in which his/her parent or legal guardian maintains a residence. It is also required that the student dwell continuously at this residence in the Mifflinburg Area School District;

and

I also agree to notify the Mifflinburg Area School District of any information that changes, such as, but not limited to, a change in telephone number, residence address, or custodial parent change.

18 PA.C.S.A. Section 4904. Unsworn falsification to authorities

(d) In general. –A person commits a misdemeanor of the second degree if, with intent to mislead a public servant in performing his official function, he: (1) makes any written false statement which he does not believe to be true; (2) submits or invites reliance on any writing which he knows to be forged, altered or otherwise lacking in authenticity; or (3) submits or invites reliance on any sample, specimen, map, boundary mark, or other object which he knows to be false.

(e) Statements “under penalty”. –A person commits a misdemeanor of the third degree if he makes a written false statement which he does not believe to be true, on or pursuant to a form bearing notice, authorized by law, to the effect that false statements made therein are punishable.

(f) Perjury provisions applicable. –Section 4904© through (f) of this title (relating to perjury) applies to this section.

I further verify that I have not misled, withheld, or falsified any information and the statements herein are true and correct. I understand that false statements are made subject to the penalties of 18 PA C.S.A., Section 4904 relating to unsworn falsification to authorities. Additionally, I have initialed and dated all completed forms for which this verification applies.

Parent/Guardian Signature

Date