

Hudsonville Public Schools Kindergarten Student Registration

3886 Van Buren • Hudsonville, MI 49426 • 616-669-1740

Office Use
ID # _____
MCIR _____
SOC _____
IDT _____

Please indicate your placement preference: <input type="checkbox"/> Full day/every day kindergarten <input type="checkbox"/> Full day/every day prekindergarten <input type="checkbox"/> Unsure, please contact me to schedule a screening → If your child's birth date is after September 1, we will automatically contact you to schedule a screening.	Preschool attended (if applicable): _____ Name of School/Location _____ Program
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Student Name (full, legal name) _____ (_____) First Middle Last Nickname/Goes by	Gender <input type="checkbox"/> M <input type="checkbox"/> F
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Student Address _____ City _____ State _____ Zip _____

County _____ Home Phone # _____

Date of Birth _____ *If the student's birth date is between September 2 - December 1, parents must complete a waiver request.
month/day/year

Place of Birth _____ Grade Entering _____
City State

Is this student Hispanic/Latino? (choose only one):
 No, not Hispanic or Latino
 Yes, Hispanic or Latino

Yes No Is your child's native tongue a language **OTHER THAN** English?

What is the student's race? (select one or more, regardless of ethnicity):
 American Indian or Alaska Native
 Asian
 Black or African-American
 Native Hawaiian or Other Pacific Islander
 White

Yes No Is the primary language used in your child's home or environment a language **OTHER THAN** English?
If yes, what language? _____

Legal Guardian Names: Please ✓ with which parent(s)/guardian(s) student lives.

1. _____
First/Last - Parent/Guardian Name Address City, State, Zip
Relationship to Student Home Phone # Work Phone # Cell Phone #
Email Address _____

2. _____
First/Last - Parent/Guardian Name Address City, State, Zip
Relationship to Student Home Phone # Work Phone # Cell Phone #
Email Address _____

Yes No Is either parent currently actively serving in the military?

Medical Information

Special Medical Needs/Allergies _____

Sibling Information: Please list below any other siblings presently attending Hudsonville Public Schools.

Name	Grade	Building
_____	_____	_____
_____	_____	_____

Registration Date _____ Parent Signature _____

Reminder: The original birth certificate must be viewed and copied by office personnel. Thank you!

Hudsonville Public Schools does not discriminate on the basis of race, color, religion, sex, national origin, age, height, weight, marital status, handicap, disability, or limited English proficiency in any of its programs or activities. The following office has been designated to handle inquiries regarding the nondiscrimination policies: Director of Human Resources, Hudsonville Public Schools, 3886 Van Buren Street, Hudsonville, MI 49426. Phone: 616-669-1740