

For Office Use Only:
WVEIS # _____
Date Entered _____
Initials _____

Monroe County WVEIS Student Data Collection Form

Date of Enrollment _____

Student name is the LEGAL NAME (first, middle, and last) as found on a birth certificate or other court document, i.e. legal name change or adoption papers. No student should be enrolled using only a nickname or name other than the legal name. Please bring original birth certificate, immunization records, and Social Security card to the enrollment meeting with the school counselor.

Student Name _____
Last First Middle Other

Has the student ever been enrolled in Monroe County Schools before (including PreSchool, Head Start, or PAT Programs)? _____

Sex: _____ **Date of Birth:** _____ **Birthplace:** _____

Current Grade Level: _____ **Social Security Number:** ____/____/____

Previous School: _____ **Student Home Number:** _____

Native Language: _____ **Race:** _____

IMMIGRANT INFORMATION

Was the child born in one of the 50 states in the United States, the District of Columbia, or the Commonwealth of Puerto Rico? _____

Does the Child have less than 4 full US academic years? _____

If yes, how many full academic years have been completed at this point of enrollment? _____

FAMILY INFORMATION

If the student’s parents are not married or not living together and there is a custody order, the school must have a copy of this order for the student’s file. Unless this information is on file, the school is required by law to treat biological parents as equals with regard to release of any information request by that parent concerning his or her child. WV§48-11-601 & Federal Education Records Privacy Act of 1974.

Primary Parent Information- This is with whom and where the student will be living. Using legal names only.

Primary _____
Last First Middle

Relationship: _____ Employer: _____

Physical Address: _____

Mailing Address: _____

Home Phone: _____ Cell: _____ Work: _____

Email Address: _____

Secondary Parent Information – Required unless a court order is present. Use legal names only.

Is secondary parent (choose one): _____

Secondary _____
Last First Middle

Relationship: _____ Employer: _____

Physical Address: _____

Mailing Address: _____

Home Phone: _____ Cell: _____ Work: _____

Email Address: _____

Additional Contact Information

This information may be required in some cases. Stepparents, grandparents, relatives, and neighbors may be listed here. Additional contacts are people who may be contacted if a need arises and the school cannot contact the primary or secondary parent.

Contact One _____
Last First Middle

Relationship: _____ Employer: _____

Physical Address: _____

Home Phone: _____ Cell: _____ Work: _____

Contact Two _____
Last First Middle

Relationship: _____ Employer: _____

Physical Address: _____

Home Phone: _____ Cell: _____ Work: _____

Physician Information -Required if available.

Parents are to have ALL shot records up to date and provide a birth certificate from the Department of Vital Statistics for all students enrolling in West Virginia Schools. If you do not have these records or if they are already on file, you will need to discuss this with school staff responsible for collecting this information.

Physician's Name : _____ Office Phone: _____
Last First

Address: _____
Street or Route Address City State Zip

Special Instructions: Concerns about custody, diet, illness, etc.

Bus Information/Directions – This information is required.

Bus # _____ **Name of Bus Driver:** _____

Detailed directions to student home: _____

Registration Statement Required By

**West Virginia Code 18-5-15f
(Pupil NOT Currently Under Suspension or Expulsion)**

I, _____ do hereby swear/affirm that _____
Pupil's Parent, Guardian, or Custodian Name of Pupil

is not, at this time, under suspension or expulsion from attendance at a private or public school in West Virginia or any other state.

Pupil's Parent, Guardian or Custodian

To be completed by notary

State of West Virginia
County of Monroe, to wit:

The foregoing instrument was acknowledged before me this _____ day
of _____, 20____, by _____.

My commission expires on _____.

{Seal}

Notary Public

Prior to admission to Monroe County Schools, a sworn statement or affirmation indicating whether the student is, at the time, under and IEP, 504 Plan, or a SAT is required.

Please mark yes or no to each of the following:

IEP : _____

504 Plan: _____

SAT: _____

Please print your name to certify that the above information is in accordance with fact.

Parent/Guardian Name: _____
Last First Middle

Date: _____