

Bus # _____ Bus Driver _____

Student ID# _____

Grade _____

Enrollment Year: 2021-22

Northern Wells Community Schools Student Enrollment Form

Student's Legal Name _____ Date of Birth _____ Gender _____
Last First Middle Male Female

Student Legal Guardian(s) (circle one) Both Parents Mom Dad Joint Guardian

If the above student is not living with both parents in the same household, legal documentation concerning custody is required per Indiana Code 20-26-11-3

Father's Name _____ Email Address _____

Address (include P O Box) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Mother's Name _____ Email Address _____

Address (include P O Box) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Guardian's Name _____ Email Address _____

Address (include P O Box) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Emergency Contact 1 Name _____ Relationship _____ Email Address _____

Address (include P O Box) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Emergency Contact 2 Name _____ Relationship _____ Email Address _____

Address (include P O Box) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Last School attended by this student if new enrollee to Northern Wells Community Schools district.

Mark all that apply: Has your child ever attended NWCS? Lancaster _____ Ossian _____ Norwell Middle School _____

Is this student presently expelled or involved in a pending expulsion hearing? Yes No

Has the student received special programming services in the following areas?

Reading Recovery Yes No High Ability Yes No

Special Education Yes No Other (please explain) _____

I verify that the information provided above is correct and acknowledge that it is the parent's responsibility to notify the appropriate school should any changes occur during the school year.

Parent/Legal Guardian Signature

Today's Date