Registrar's Initials upon verification of accurate and completed forms:



FAMILY INFORMATION			
Student's Name:			
Person with whom student	resides:		
Mother Father	Both Other:		
NOTE: A current copy of cu	stody/guardianship papers <u>l</u>	MUST BE SUBMITTED TO SCI	<u>HOOL</u>
Mother/Guardian (1) Place Phone:	• •		
Father/Guardian (2) Place of Phone:			
Stepmother's Name (if appl	icable):	Phone:	
Address:			
Stepfather's Name (if applic	able):	Phone:	
Address:			
OTHER CHILDREN IN FAM	MLY:		
BOYS	AGE	GIRLS	AGE
If I move from the above ad Change of Address form wi		ust notify the Registrar's office i	immediately & complete a
I HEREBY AUTHORIZE BE BY ME.	EVERLY CITY SCHOOL TO	INVESTIGATE AND CONFIRM	A ANY STATEMENTS MADE
I CERTIFY THAT THE ABO	OVE STATEMENTS ARE TR	RUE AND THAT I WILL ABIDE I	BY THE POLICY.
Signature of Parent or Gua	rdian		



## **RESIDENCY INFORMATION**

In accordance with New Jersey state law (N.J.S.A. 18A:38-1 and 18A:7B-12), it is necessary to determine the residence of students entering the school district by answering the following questions: (check the appropriate answer)

I currently live in a:

a.	house that I own (Please provide a copy of your mortgage statement or deed)					
	(Address/phone):					
b.						
	(Address/phone):					
	c. hotel/motel/apartment	d. shelter				
	e. transitional housing facility	f. domestic violence shelter				
	g. runaway youth shelter	h. home for adolescent school-age mothers				
	i. migrant family dwelling	j. Other (please explain)				
•	. ,	necessity because the family lacks a regular or permane strict of permanent residency (then p				
2. (Check one	) The family is currently seeking	or the family will be seeking a permanent reside	nce in			
Beverly City	/. The family is NOT seeking a perm	manent residence in Beverly City at this time				
3. Please prir	nt the name of the person with whom	n you are staying:				
4. Please list of	other school aged children in the fam	mily (Please use an additional sheet if needed):				
Name	Date of Birth	Grade				
Name	Date of Birth	Grade				
are willfully fa	alse, I may be subject to punishme	e that if any of the foregoing statements made in the nent. Additionally, I will be responsible for paying the 11,775.00 (as of 2016-2017 school year)				

Registrar's Initials upon verification of accurate and completed forms:



## **ACADEMIC INFORMATION**

Student's Name:			
Last grade attended Current grade			
Last School AttendedSch	School Phone Number_		
School AddressCity		State	Zip
Was the student ever previously registered in the Beverly City School Distr	rict?	YesNo	
If "Yes", what was the last grade the student completed in Beverly City Sch	nool?		
Was the student ever classified by a Child Study Team?	1	Yes	No
2. Does the student have a current Individual Education Plan (IEP)?	2	Yes	No
3. Does the student have a current 504 Accommodation Plan?	3	Yes	No
4. Is the student classified as eligible for Speech/Language services	4	Yes	No
5. Is the student currently placed in Basic Skills or Advanced Math?	5	Yes	No
(If yes:Basic SkillsAdvanced)			
6. Is the student currently placed in Basic Skills or Advanced Reading	6	Yes	No
(If yes:Basic SkillsAdvanced)			
7. Was the student ever retained?	7	Yes	No
If yes, what grade level(s)?			
8. Does the <b>student</b> speak a language other than English at home?	8	Yes	No
If yes, what language			
9. Does the student have a <i>parent</i> whose native language is not English?	9	Yes	No
If yes, what language			
10. Does the student live with a <i>relative or guardian</i> whose native	10	Yes	No
language is not English?			
If yes, what language			
11. Has the student received English as a Second Language instruction?	11	Yes	No
If yes, what grade level(s)			