RIVERSIDE SCHOOL DISTRICT ENTERING STUDENT

STUDENT ID#		STUDENT STATE ID#			SCHOOL		
Date of E	Entry:	Grade	Hom	neroom	Teache	er	
*****	********	*******	*****	*******	******	*******	*****
Student's Name:					DOB:		
	(Last Name)		(M	iddle Name)			
Male:	_ Female:	Birthplace:	City	State	2	Country	
Am Indian	DATA (Please check the or Alskn Native Multiple Filipin	Pac Islander			Hispanic	White	(non Hispanic
TRANSF	ERRED FROM:	(Name	& Address of	Previous Sch			
II	anna attan da dala Diana						
•	ever attended the Rivers						
Parent with	whom child lives: Both	Mother	Father		_Guardian	Oth	er
Father's Na	ame		Mo	other's Name _			
Home Adda	ress						
Own	Rent Other	_ If other, please ex	xplain	 			
Home Phon	ne	Cell Phone					
Father's Work Phone			Mother's Work Phone				
Place of Employment			Place of Employment				
Occupation			Occupation				
Father's Email			Mother's Email				
Emergency Phone #			Emergency Phone #				
***If child	lives with a Guardian we	e must have a copy	of any Guardi	anship Papers	s on File		
Eligible for	r Special Education Servi	ces: Y or N	Does your ch	nild have an II	EP: Y or N		
	t ALL Children in fam i Name	ily:	Date of I	Birth	G	rade	
Name and What lang What lang How man How man I give my	d grade of youngest stu guage is spoken at hom guage does the student yy years has the student yy years has the student permission for my son ne of Parent/Guardian	dent in Riverside ne? speak? t resided in this co t attended school i	ountry?in this count hotographed	ry?/videoed (yes	arbook, star st	udents, etc.)	
I verify th	ne above information to	be accurate: (Sig	nature of Pa	rent/Guardi	an/Agency En	rolling Stude	nt)