

KINGS LOCAL SCHOOL DISTRICT

PARENT/GUARDIAN FORM CHECKLIST

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Homeroom: \_\_\_\_\_

Please initial below if you have read and completed the following forms:

**(Initial)**

- I have completed and returned the **Student Registration Form** \_\_\_\_\_
- I have completed and returned the **Emergency Medical Form** \_\_\_\_\_
- I have completed and returned the **Race and Ethnicity Form** \_\_\_\_\_
- I have completed and returned the **Transportation Form** \_\_\_\_\_
- I have completed and returned the **Student Health History Form** \_\_\_\_\_
- I have completed and returned the **Home Language Survey** \_\_\_\_\_
- I have completed and returned the **Request for Transfer of School Records** \_\_\_\_\_
- I have completed and returned the **Expulsion Enrollment Form** \_\_\_\_\_

If applicable:

- I have completed and returned the **Homeless Survey** \_\_\_\_\_

My signature below indicates that I have received, read and agreed to abide by the policies contained in the following: **Acceptable Use Policy, Attendance Policy, FERPA, Photo/Work Release Policy.**

\_\_\_\_\_  
Student's name (PRINT CLEARLY)

Date: \_\_\_\_\_

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Parent or Guardian's name (PRINT CLEARLY)

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent or Guardian's signature