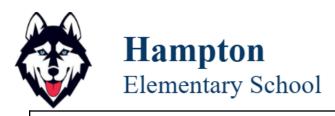


Student Registration Form 2025-2026

Student Informa	ation:					
Student's Legal Nam	e:					ID#
	Last	First		Mido	lle	
Nickname/Preferred	Name:					
Birth Date:		Gender: M	F	NB	Age	
						n your own, living with a
•	• • •	0 0				,
•		r parent/guardian; livi	_			
campground (unshel	itered)? No \	es Residency	Date Ch	ieck:		<u> </u>
Parent/Guardia	n Emergency Co	ntact Informatio	n:			
Contact #1:		Con	tact#2: _			
Relationship to Studen	nt:	Rela	ationship	to Student:		
Work Phone:		Wor	k Phone:			
						Phone:
	xists, it is the Parent's/	Guardian's responsibility				records? No Yes rder to the school. It must be
Student resides with		a		٥.	c	
		er: Stepmoth				
Foster Parent(s):	Oth	ner adults in the house	ehold:			
		Proof of Residency:				
Driver's License:	Utility Bill:	_ Deed: Prope	erty Tax E	Bill:		
Sibling Informat	tion:					
List brothers, sisters,	stepbrothers, and s	tepsisters younger tha	n 20 yea	ars of age v	vho current	ly reside in Windham
County. Do not inclu	de your student for	whom this form is con	npleted.			
•	•					
First/Last Name	Phone	Gender M/F/NB	Birth	Date Sch	ool Grade	Same Address Y/N
		· ·				•



Student Registration Form 2025-2026

L.	Do you have any concerns which would help us to better understand your child (fears, behaviors, personal traits)?
2.	Has there been any major change in the family (moving, illness, death in family, new baby, divorce)?
3.	Would you like the School Guidance Counselor to contact you to discuss any of the above?
4.	Please list foods or activities your child does <u>not</u> like:
5 .	Please list your child's favorite activities:
c	Please list your child's favorite foods/snacks/drinks:
ο.	——————————————————————————————————————
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other.
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other.
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset:
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset: b. Tired: c. In Pain: d. Bored:
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset:
	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset:
7.	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset:
7.	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset:
7.	How does your child indicate what he/she is feeling? (List all that apply.) Examples, hits, hides face, covers ears/face, screams, tell an adult, bites or other. a. Upset: