

SPRINGFIELD SCHOOL DISTRICT HOME EDUCATION STUDENT REGISTRATION APPLICATION

SUPERVISOR/PARENT/GUARDIAN DEMOGRAPHICS

SUPERVISOR/PARENT/GUARDIAN: _____ RELATIONSHIP: _____

ADDRESS (H): _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____ EMAIL: _____

CHILDREN PARTICIPATING IN HOMESCHOOL PROGRAM						
NAME	GENDER	AGE	GRADE	DOB	ETHNICITY* <small>(select code(s) below)</small>	ADDRESS (if different from above)

* 1. American Indian/Alaskan Native 3. Black (Non-Hispanic) 4. Hispanic 5. White (Non-Hispanic) 6. Multi-Racial 9. Asian 10. Native Hawaiian/ Pacific Islander

Parent/Guardian Signature _____ Date _____

OFFICE USE ONLY

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Custody Decree | <input type="checkbox"/> Multiple Occupancy | <input type="checkbox"/> Immunization |
| <input type="checkbox"/> Agreement of Sale | <input type="checkbox"/> Intent to Move | |
| <input type="checkbox"/> Deed, Lease, Mortgage | <input type="checkbox"/> 1302 Affidavit | |
| <input type="checkbox"/> Utility Bill | <input type="checkbox"/> Foster – Court Letter | |

Student Name	SSD Student ID	PA Secure ID
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I.D. Requirements:

- | | | |
|---|---|-----------------------------------|
| <input type="checkbox"/> PA Driver's License or PA Photo ID | <input type="checkbox"/> Bank Statement | <input type="checkbox"/> Pay Stub |
| <input type="checkbox"/> PA Vehicle Registration | <input type="checkbox"/> Voter's Registration | |

Date Affidavit Received: _____

Approved By: _____ Date: _____