

Independent School District 196  
 Rosemount-Apple Valley-Eagan Public Schools  
*Educating our students to reach their full potential*

Series Number 501P Adopted July 2000 Revised March 2016  
 Title Student and Census Information

Date \_\_\_\_\_ School # \_\_\_\_\_ Student # \_\_\_\_\_ Family # \_\_\_\_\_

**PRINT AND COMPLETE ALL INFORMATION REQUESTED BELOW USING BLACK INK.**

<b>STUDENT Full Legal Name</b> _____		last name _____		first name _____		middle name _____	
birthdate _____		sex _____		grade _____			
month/day/year _____							
Has student ever attended school in Minnesota? <input type="checkbox"/> No <input type="checkbox"/> Yes - Where? _____							
Which special service(s) has student received? <input type="checkbox"/> 504 Plan <input type="checkbox"/> ELL (English Language Learner) <input type="checkbox"/> Special Ed (IEP) <input type="checkbox"/> specify primary language _____ <input type="checkbox"/> Early Childhood <input type="checkbox"/> Other _____ <input type="checkbox"/> Gifted/Talented							
<b>FOR FEDERAL REPORTING PURPOSES</b>						<b>If left blank staff will complete.</b>	
<b>Ethnicity</b> (Check one):				<b>Race</b> (Check all that apply):			
<input type="checkbox"/> No, not Hispanic/Latino				<input type="checkbox"/> American Indian/Alaskan native			
<input type="checkbox"/> Yes, Hispanic/Latino				<input type="checkbox"/> Asian			
				<input type="checkbox"/> Black/African American			
				<input type="checkbox"/> Native Hawaiian or other Pacific Islander			
				<input type="checkbox"/> White			
last school attended _____						District # _____	
school address _____							
(if other than District 196)		street _____		city _____		state _____ zip _____	

<b>HEAD OF HOUSE (HOH)</b>				What relation is Head of House to student? Please use <b>Code</b> from box below.  <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">F = Father</td> <td style="width: 50%;">G = Guardian</td> </tr> <tr> <td>M = Mother</td> <td>X = Self</td> </tr> <tr> <td>P = Foster parent</td> <td>S = Step parent</td> </tr> <tr> <td>GP = Grandparent</td> <td></td> </tr> <tr> <td>O = Other _____</td> <td></td> </tr> </table>				F = Father	G = Guardian	M = Mother	X = Self	P = Foster parent	S = Step parent	GP = Grandparent		O = Other _____	
F = Father	G = Guardian																
M = Mother	X = Self																
P = Foster parent	S = Step parent																
GP = Grandparent																	
O = Other _____																	
1st HOH _____		sex <input type="checkbox"/> M <input type="checkbox"/> F		Code _____													
last _____ first _____ middle _____																	
2nd HOH _____		sex <input type="checkbox"/> M <input type="checkbox"/> F		Code _____													
last _____ first _____ middle _____																	
address _____ apt. # _____																	
city _____ state _____ zip _____																	
If above address is temporary, please list permanent address and approximate date of possession:																	
street _____		city _____		state _____		zip _____ date _____											
primary phone ( ) _____		1st HOH work phone ( ) _____		2nd HOH work phone ( ) _____													
		1st HOH cell phone ( ) _____		2nd HOH cell phone ( ) _____													
		1st HOH email address _____		2nd HOH email address _____													
List <b>ALL</b> children and adults living at this address other than those above: (List additional residents on separate sheet.)																	
Full Legal Name _____		middle initial _____		sex <input type="checkbox"/> M <input type="checkbox"/> F		birthdate mo/day/yr _____											
first _____						school and grade (if enrolled) _____											
						What relationship is person to student? _____											
Have you moved to this school district within the last 36 months for temporary or seasonal agricultural or fishing work? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																	
<b>X</b> _____						parent/guardian signature _____ date _____											

<b>OFFICE USE</b>	
homeroom _____	teacher/counselor _____ <input type="checkbox"/> re-enrolled
language code _____	last location code _____ start date _____ Bus # _____ Time _____
<input type="checkbox"/> birth certificate <input type="checkbox"/> guardianship papers received <input type="checkbox"/> transfer paperwork completed	

Minnesota law requires the school district to keep accurate, updated records for all students. Failure to provide some or all of the requested information may limit the school district's ability to enroll and serve your student. This information will be used within the school district and may also be shared with the Minnesota Department of Education and as otherwise permitted by state and federal law. Some of the information may be classified as directory (public) information.