



# WATERFORD PUBLIC SCHOOLS

15 Rope Ferry Road ♦ Waterford, Connecticut 06385

Phone (860) 444-5801 ♦ Fax (860) 444-5870

**Mr. Thomas W. Giard III**  
Superintendent

**Mr. Craig C. Powers**  
Assistant Superintendent

## REGISTRATION FORM

**\*\*For Office Use Only\*\***

School: \_\_\_\_\_ State Assigned Student ID Number: \_\_\_\_\_

District Student ID Number: \_\_\_\_\_

**\*\* PLEASE PRINT CLEARLY \*\***

### STUDENT INFORMATION

Registration Date: \_\_\_\_\_ Anticipated Date of Entry: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Last First Middle Suffix (Jr., III, etc.)

Gender:  Male  Female

Date of Birth: \_\_\_\_\_

### RESIDENCE INFORMATION

Street: \_\_\_\_\_ Telephone: \_\_\_\_\_

Town: \_\_\_\_\_

Who does student reside with?  Parent #1  Parent #2  Both Parents  Guardian

Is the student homeless?  Yes  No

### Notice Regarding Homeless Students:

The Waterford Public Schools will work with all students experiencing homelessness to make sure they are enrolled in school, even if they do not have the required documents or cannot provide the information listed herein. If you are a student, or the parent or guardian of a student, who is homeless, and have questions or concerns about enrolling for school, please speak with our enrollment staff or contact the Waterford Public Schools' Homeless Liaison, Gina Wygonik, at 105 Clark Lane, Waterford, CT 06385, (860) 444-5802, [gwygonik@waterfordschools.org](mailto:gwygonik@waterfordschools.org).

Student Name \_\_\_\_\_

SASID \_\_\_\_\_

District ID \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

Contact #1: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_ Military Affiliation:  Yes  No

Contact #2: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_ Military Affiliation:  Yes  No

Contact #3: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_ Military Affiliation:  Yes  No

**EDUCATIONAL BACKGROUND**

Name and address of previous school: \_\_\_\_\_

Previous grade placement: \_\_\_\_\_ Has the student been retained?  Yes In what grade? \_\_\_\_\_  No

Sending school's recommended grade placement for this school year: \_\_\_\_\_

Has the student officially withdrawn from previous school?  Yes Date: \_\_\_\_\_  No

Has the student attended school in Waterford before?  Yes  No

If yes, when did the student attend? \_\_\_\_\_ Which school? \_\_\_\_\_

**SIBLING INFORMATION** - Other siblings attending school:

Name	Male/ Female	Birth date	Grade	Name of School	Date Entered