



# WATERFORD PUBLIC SCHOOLS

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Mr. Thomas W. Giard III  
Superintendent

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Assistant Superintendent

## SUPPLEMENTAL STUDENT INFORMATION SURVEY

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

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

In order for Waterford Public Schools to best serve your child, we are asking families to fill out this **Supplemental Student Information Survey**. The information in this survey will assist Waterford Public Schools in meeting the individual learning needs of your child and help in providing appropriate services and instruction for your child throughout the school year. This information will only be shared with appropriate district personnel (i.e.: teachers, special services, etc.) and with the Federal Government and State of Connecticut for data reporting purposes only. We value your feedback and look to use this information to create the best learning environment for your child. This survey is voluntary, is not a requirement for enrollment and will have no effect on your child's enrollment status.

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

### STUDENT INFORMATION

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

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

### RACE/ETHNICITY

*Please answer both questions. See addendum for definitions.*

Is the child Hispanic/Latino?  Yes  No

Is the child from one or more races using the following (choose all that apply):

- American Indian or Alaskan Native  Asian  White  
 Black or African American  Native Hawaiian or Pacific Islander

### HOME LANGUAGE INFORMATION

What is the first language your child learned to speak?  English  Other: \_\_\_\_\_

What is the language spoken by the adults in your home?  English  Other: \_\_\_\_\_

What language does your child speak at home?  English  Other: \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

Has the student been identified as Talented and Gifted in a previous district?  Yes  No

If yes, what district? \_\_\_\_\_

Has the student attended school in Waterford before?  Yes  No

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

Did the student attend Waterford Public Schools' Early Childhood screening process?  Yes  No

If no, was the Early Childhood screening done in another district?  Yes, District: \_\_\_\_\_  No

Did the student attend *nursery school* or *preschool*? (does not include daycare)  Yes  No

If yes, name of school: \_\_\_\_\_

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

**Addendum**

**WATERFORD PUBLIC SCHOOLS**  
Supplemental Student Information Survey  
Race/Ethnicity Codes

According to the Federal No Child Left Behind Act of 2001, all students must be assigned to a racial/ethnic subgroup for analysis purposes. The collection of this data utilizes a two-part question.

If a parent or student does not select at least one race/ethnicity category, appropriate school personnel will select the category for the student, and initial it in the presence of the parent.

If a student is identified as Hispanic/Latino, they must also select a race. The Federal Government would like to afford Hispanic/Latino populations the opportunity to better describe themselves according to their culture and heritage. If a parent or student does not select a race, appropriate school personnel will select the category for the student, and initial it in the presence of the parent.

**Definition of Race and Ethnic Categories**

Category	Definition
Hispanic/Latino	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
American Indian or Alaska Native	A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
Black/African American	A person having origins in any of the black racial groups of Africa.
Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

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

**FOR SCHOOL USE ONLY**

To be completed by School Nurse:

Immunization requirements met:  Yes  No

Potassium Iodine:  Yes  No

Physical assessments requirements met:  Yes  No

Temporary registration recommended until: \_\_\_\_\_  N/A

Health requirements issues pending: \_\_\_\_\_

Board of Education and State Health requirements reviewed and verified by:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

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To be completed by School Administration:

Proof of Residency provided:  Lease  Mortgage  Other: \_\_\_\_\_

Date school records request form signed: \_\_\_\_\_

Cumulative  Health  Confidential

Temporary admission approved until: \_\_\_\_\_

Admission approved on: \_\_\_\_\_

\_\_\_\_\_  
School Administrator

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date