## Transferring from another Pinellas County School

Proof of Residency (2 forms of documentation required)
Completed Withdrawal Form

## PINELLAS COUNTY SCHOOLS. STUDENT REGISTRATION FORM (K-12)

-					DATE	,	SIGNATURE OF PARENT/LEGAL GUARDIAN
be essigned, as per	loation number can be assigned, as per tate statute.						
at an afternate identi-	ecurity number, you must inform the chool in writing so that an alternate identi-						
h the student's social	provide the school with the student's social	 ਰ-ਵ					
condition of enroll-	re not required as a condition of enroll-				;		IF YES, PLEASE PROVIDE DETAILS.
) students registering   ial Security numbers	security numbers from students registering in public schools. Social Security numbers	NO	ACTIONS?YES _		EHE BEEN ANY JUV	N A CHARGE, OR HAVE THE	HAS YOUR CHILD EVER BEEN ARRESTED RESULTING IN A CHARGE, OR HAVE THERE BEEN ANY JUVENILE JUSTICE
ida Statues, requires to request Social	Section 229.559, Florida Statues, requires he school district to request Social	<del>-</del>		-	     	/IOUS SCHOOL?YES	HAS YOUR CHILD EVER BEEN EXPELLED FROM A PREVIOUS SCHOOL?
		7.					PURSUANT TO FLORIDA STATUE 1006.07;
				7YESNO	UDENTS RECORDS	THE STUDENT AND/ OR STI	IS THERE ANY COURT ORDER RESTRICTING ACCESS TO THE STUDENT AND/ OR STUDENTS RECORDS? IF YES, PROVIDE THE SCHOOL WITH A CERTIFIED COPY.
STEPMOTHER  STEPFATHER	MOTHER (		BOTH PARENTS	CHILD LIVES WITH:	EMERGENCY CONTACT PHONE	EMERGENCY	NAME OF EMERGENCY CONTACT
		}					
			FROM STUDENT)	HOME ADDRESS (IF DIFFERENT FRO	HOME ADDRESS		NAME OF STEP PARENT (IF APPLICABLE)
WORK PHONE	CELL PHONE		FROM STUDENT)	HOME ADDRESS (IF DIFFERENT FRO	HOME ADDRES		FATHER'S NAME/LEGAL GUARDIAN (CIRCLE ONE)
WORK PHONE	CELL PHONE		FROM STUDENT)	HOME ADDRESS (IF DIFFERENT FRO	HOME ADDRES		MOTHER'S NAME/LEGAL GUARDIAN (CIRCLE ONE)
WORK PHONE	CELL PHONE		S	DIAN EMAIL ADDRESS	PARENT/GUARDIAN EMAIL ADD		*STUDENT SOCIAL SECURITY NUMBER (OPTIONAL)
			DED	LAST SCHOOL ATTENDED	IF NO, NAME, CITY AND STATE OF LAST SCHOOL A	IF NO, NAME	IF YES, NAME OF PINELLAS COUNTY SCHOOL
				·		100L7YESNO	HAS STUDENT EVER ATTENDED A PINELLAS COUNTY SCHOOL?
			K ONE) WHITE HAWAIIAN PACIFIC ISLANDER		YESNO (MUST C	LATINO ETHNICITYY	DATE OF BIRTH   PLACE OF BIRTH (CITY, STATE)
			ZIP CODE		СПҮ	LOT#	STUDENT'S ADDRESS - NUMBER. STREET & APT. # OR LOT #
DATE	, D.	GRADE	FEMALE	·			
	WITH	SCHOOL NAME	MALE		PHONE NUMBER		STUDENT'S LEGAL NAME (LAST, FIRST, MIDDLE)
			-		•		

PCS Form 2-1151 (Asv. 11/13) Aevlew Date 11/14

DATE

Category Y Warehouse IO# 98313

	I authorize the above references as an Emergency contact person(s) to participate in; (check all applicable)
	Phone number; ( ) Cell phone number: ( )
	(2)Emergency contact other than Parent / Guardian:
	Phone number: ( ) Cell phone number: ( )
	(1)Emergency contact other than Parent / Guardian: relationship relationship
	EMERGENCY CONTACTS
	Signature of parent / iegal guardian В при
	( ) remove student from school grounds ( ) receive calls regarding an emergency or illness.
	( ) receive information regarding student ( ) sign school forms related to student ( ) attend parent conferences
	permission for the above listed step-parent(s) to participate in the following (check all applicable)
	, the student listed herein. I give my
	attest that I am the parent/ legal guardian of
-	
-	State
	Succi
	Address City City
	vame of last School attended Phone number: ( )
	Has this student ever been enrolled ill ally obecidi to classes:
<u> </u>	If Yes Explain:
_	

## **BUS REQUEST**

Transportation may be provided for your student if within the guidelines of our Pinellas County School district.

- Student living within 2 miles may not receive transportation.
- Students living outside of our "zone" may not receive transportation.
  - Magnet students will be issued "arterial" transportation.

Pinellas Park High School will request a bus for you. Once the bus is requested it may take up to 5-7 days.

We will call you as soon as transportation as responded to our request for your bus. Please provide us with

Student Name:	 
Phone number:_	 
Email:	 

Please circle the appropriate rationale for our request

New Student

Address Change

Thank you