NEW STUDENT APPLICATION USD#466

This form must be filled out completely and returned to the appropriate school office before the student can start. You will then get an Online Enrollment account and you will finish the enrollment process online.

Student Information

Student Legal Name_____ _____ _____
                              (First)   (Middle)   (Last)

Gender_____ Date of Birth_____ SSN_____

Circle One:

Part A: Hispanic: Yes   No

Part B: Race: Amer. Indian or Alaska Native   Asian   Black/African American
                 Native Hawaiian or Other Pacific Islander   White

Parent information for adults living at student's address

Name_____ Relationship_____

Active email address: (Must have to complete enrollment process on Online Enrollment.)

_____

Address_____

Home Phone_____ Cell Phone_____

Employer_____ Work Phone_____

Name_____ Relationship_____

_____

Address_____

Home Phone_____ Cell Phone_____

Employer_____ Work Phone_____

Siblings in Scott County Schools

Name (First & Last)   Grade

_____   _____

_____   _____

_____   _____

_____   _____