

FORM 101
(STUDENT ENTRY)

Fair Lawn Public Schools
STUDENT ACCOUNTING DATA ELEMENTS ENTRY FORM

Please print all information

Registration Date: _____, 20 ____

Student ID number: _____

(For Office Use Only)

Student's Last Name : _____ First Name: _____ Middle Initial _____

Home address: _____, Fair Lawn, NJ 07410

Home telephone number (no cell phones): (_____)
Area code

Date of birth: ____ / ____ / ____ Place of birth: ____ / ____ Gender: Male Female
month / day / year State or Province / Country

Birth verification: Birth Certificate number _____ Issuing County/State: _____

or
Passport number: _____ Country of Issue: _____ Expiration date: _____ U.S. entry date: _____

State required Ethnic Code: (Insert appropriate letter code in box) Current grade in school: _____
A - American Indian/Alaskan Native B - Asian/Pacific Islander C - Black/Not Hispanic D - Hispanic E - White/Not Hispanic

Last school attended: _____ Public Private

Address: _____
Street City State and/or Country

PARENT/GUARDIAN INFORMATION:

Father's full name: _____

Address (if different than above): _____
Street City State and/or Country

Telephone number (if different from above) _____ E-mail address: _____

Mother's full name: _____

Address (if different than above): _____
Street City State and/or Country

Telephone number (if different from above) _____ E-mail address: _____

Legal guardian, if other than parent above: _____

Address: _____
Street City State and/or Country

Telephone number: _____ E-mail address: _____

Relationship (if any) to student: _____

SIBLING INFORMATION:

Name: _____ Grade: _____ School: _____

Name: _____ Grade: _____ School: _____

Name: _____ Grade: _____ School: _____