

TROPICAL ELEMENTARY #0731

Name _____ Grade _____ Teacher _____ Entry Code _____ Entry date _____



THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
STUDENT REGISTRATION FORM

Only the parent/guardian (F.S. 1000.21(5)) who registers the student (i.e., completes this form), may withdraw the student from his/her current school, unless there is documentation of extenuating circumstances indicating otherwise. If the information below changes, it is the parent's/guardian's responsibility to notify the school within 10 school days.

Student (Legal Name)

Last _____ First _____ Middle _____

Address _____ Bldg. _____ Apt. _____ City _____ Zip _____

Home Phone _____ Cell Phone _____ Parent email _____

F.S.I. _____
(Florida Student ID)

Student SSN _____
(Students' Social Security Numbers are not required for enrollment or graduation. F.S. 1008.386 requires SBBC to use the S.S.N. for its management information system.)

Sex Male Female Current Grade Level _____

Ethnicity: Is the student of Hispanic, Latino or Spanish origin?
Yes No

Race

White <input type="checkbox"/>	Native American/ Native Alaskan <input type="checkbox"/>
Black <input type="checkbox"/>	Native Hawaiian/ Pacific Islander <input type="checkbox"/>
Asian <input type="checkbox"/>	

Student number registration checklist:

_____ Original Birth Certificate

_____ Registering Parent ID

_____ Proof of Address 1

_____ Proof of Address 2

If you decide to attend Tropical, you must come in to complete a full registration packet.

Thank you.