

**MONSON PUBLIC SCHOOLS**  
MONSON, MASSACHUSETTS 01057

<b>Quarry Hill Community School</b> <i>43 Margaret Street</i> <i>Telephone: (413) 267-4160</i> <i>Fax: (413) 267-4154</i>	<b>Granite Valley Middle School</b> <i>21 Thompson Street</i> <i>Telephone: (413) 267-4155</i> <i>Fax: (413) 267-4624</i>	<b>Monson High School</b> <i>55 Margaret Street</i> <i>Telephone: (413) 267-4589</i> <i>Fax: (413) 267-4157</i>
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**REGISTRATION FORM**

**STUDENT INFORMATION:**

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Address</b>			<b>Home Phone Number</b>
<b>Date of Birth</b>	<b>City of Birth</b>	<b>Student's Cell Phone #</b>	<b>Parent's Cell Phone No.</b>
<b>Was student previously enrolled in another Massachusetts state school system?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Name and Address of Previous School Attended</b>	

**Student lives with:**

Both Parents  Mother  Father  Guardian  Foster Parent  Other \_\_\_\_\_

Is the parent an active duty member of the Uniformed Services, National Guard, Reserve or a Veteran:

Yes  No

<b>Parent/Guardian</b>	<b>Parent/Guardian</b>
<b>Address</b>	<b>Address</b>
<b>Place of Employment</b>	<b>Place of Employment</b>
<b>Work Phone Number</b>	<b>Work Phone Number</b>
<b>Highest level of education attained</b> <input type="checkbox"/> High School <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate <input type="checkbox"/> Other: _____	<b>Highest level of education attained</b> <input type="checkbox"/> High School <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate <input type="checkbox"/> Other: _____

**Race/Ethnicity (Please check only one):**

American Indian or Alaskan Native  Asian or Pacific Islander  Black  White  Hispanic

**Please note: If you choose not to supply this information, we are required to report estimation by observation to the Massachusetts Department of Education.**

Brothers/Sisters Names	Birthdate	Grade	Brothers/Sisters Names	Birthdate	Grade

**Student's Immigrant Status:**

The student was NOT born in the United States and has NOT finished three full years of school in the United States  Yes  No

If Yes, please provide student's Country of Origin (birth): \_\_\_\_\_

<b>Parent's Email Address:</b>	<b>Would you like to receive automated telephone calls announcing school closings and/or delays?</b> <input type="checkbox"/> Yes (please fill out back of this form) <input type="checkbox"/> No
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**OVER PLEASE** →

## Emergency School Closing Information

You can visit **monsonschools.com** to see our current status (*every attempt will be made in the morning to update that page, but please keep in mind that conditions such as power outages, or downed cable lines may prevent that from happening*).

If you'd like to be called for either of these reasons, please complete and return this form as soon as possible. Remember to sign it where indicated!

**Would you like to be called in the morning if there is going to be no school or a delayed opening (all calls will go out beginning at 6 A.M. – or as soon as a decision is made after that). Please note the only phone number that the system will attempt to call is the home phone number that we currently have on file for you.**

Yes

No

**Would you like to be called in the event of an emergency closing? Our system will attempt to call your home phone number first, and then up to two additional phone numbers, trying to make a “live” delivery.**

Yes

No

**Additional Numbers to call (for Early Dismissal Only): Please note that the system can only dial numbers in the ###-###-#### format – extensions, etc. are not acceptable.**

2<sup>nd</sup> Number to Try

3<sup>rd</sup> Number to Try

**PARENT /GUARDIAN  
SIGNATURE (REQUIRED)**

If you need assistance translating this document into a language other than English, please contact the district's Coordinator of English Language Learners at 413-267-4150 x 1000.

Si necesita ayuda que traduce este documento en un idioma de otra manera que inglés, contacta por favor Coordinador del distrito de Estudiantes ingleses de Idioma en 413-267-4150 X 1000.

Если Вы нуждаетесь в помощи, переводящей этот документ на язык кроме английского языка, пожалуйста свяжитесь с Координатором района английских Языковых Учеников в 413-267-4150 x 1000.

Якщо вам необхідна допомога переклад цього документа на іншій мові, крім англійської, будь ласка, зв'яжіться з координатором району від вивчають англійську мову на 413-267-4150 x 1000.

如果你需要除了英语将这份文件翻译成一种语言的帮助，请在 413-267-4150 x 1000

联系英语学习者的地区的协调人。

**Parent/Guardian Signature**

*For Office Use Only:*

Entry Date:\_\_\_\_\_ Entering Grade:\_\_\_ ID Number:\_\_\_\_\_ Home Room:\_\_\_\_\_ Former Student:

The Monson Public Schools provide equal Educational and Employment Opportunities without regard to race, color, sex, religion, national origin, sexual orientation, and disability.

Revised June 2014