



17400 State Route 22, Cherry Plain, NY 12040 ■ P.O. Box 259 Berlin NY, 12022  
Phone: 518-658-1500

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### Private School Registration Forms

#### Student Information:

Student Last Name: \_\_\_\_\_ Student First Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ Home Language: \_\_\_\_\_

Ethnicity: Is this student Hispanic, Latino, or of Spanish Origin? Yes ( ) No ( )

Race: ( ) White ( ) Black/African American ( ) Asian ( ) American Indian/Alaska Native ( ) Native Hawaiian/  
Other Pacific Islander

**Pupil Resides with:** (Please circle) Both Parents Mother Father Guardian Foster Parent

**Parent/Guardian Name:** \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### Private School Information:

Name of Private School \_\_\_\_\_

Address: \_\_\_\_\_

Contact person at school: \_\_\_\_\_ Phone #: \_\_\_\_\_

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Parent/Guardian Signature

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Date



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**Housing Information:** (check any that apply)

Foster Home: \_\_\_\_\_  
Transitional Housing: \_\_\_\_\_  
Migrant: \_\_\_\_\_

Is your current address a temporary living arrangement (Y/N) \_\_\_\_\_  
Is this temporary living arrangement due to loss of housing or economic hardship (Y/N) \_\_\_\_\_

If you answered yes, to the above questions, please answer the following question:

Where is the student presently living (check one)

- \_\_\_ In a motel
- \_\_\_ In a shelter
- \_\_\_ With more than one family in a house or apartment
- \_\_\_ Moving from place to place
- \_\_\_ In a place not designed for ordinary sleeping accommodations such as a car, park, or campsite

**HOME LANGUAGE QUESTIONNAIRE (HLQ):** (check boxes that apply)

1. What language(s) is spoken in the student's home or residence?  English  Other \_\_\_\_\_  
*specify*
2. What language(s) is spoken most of the time to the student, in the home or residence?  English  Other \_\_\_\_\_  
*specify*
3. What language(s) does the student understand?  English  Other \_\_\_\_\_  
*specify*
4. What language(s) does the student speak?  English  Other \_\_\_\_\_  
*specify*
5. What language(s) does the student read?  English  Other \_\_\_\_\_  
*specify*
6. What language(s) does the student write?  English  Other \_\_\_\_\_  
*specify*

7. In your opinion, how well does the student understand, speak, read and write in English?

	<i>Very well</i>	<i>Only a little</i>	<i>Not at all</i>
<b>Understands English</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Speaks English</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Reads English</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Writes English</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>