



San Mateo-Foster City School District
1170 Chess Drive • Foster City • California • 94404
(650) 312-7700 • www.smfc.k12.ca.us

Office Use Only
School of Assignment: \_\_\_\_\_ Grade Level: \_\_\_\_\_
Primary Residence / NCLB:
Hotels/Motels \_\_\_\_\_ Unsheltered \_\_\_\_\_ Other \_\_\_\_\_
Temporary Shelters \_\_\_\_\_ Permanent Housing \_\_\_\_\_
Doubled-up \_\_\_\_\_ Foster Family or Kinship Placement \_\_\_\_\_

NEW STUDENT REGISTRATION FORM

STUDENT LEGAL NAME \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_
(STudent Name fields with Last, First, Middle labels)
STUDENT GENDER \_\_\_\_\_ STUDENT DATE OF BIRTH \_\_\_\_\_ STUDENT BIRTH PLACE \_\_\_\_\_
(M/F) (Month/Day/Year) (City / State / Country)
ADDRESS WHERE STUDENT RESIDES \_\_\_\_\_
(House number, street name, apartment number, city, state, zip code)
MOST RECENT SCHOOL ATTENDED \_\_\_\_\_ DATES ENROLLED \_\_\_\_\_
(Mo/Yr)
SCHOOL ADDRESS/CITY/STATE/ZIP \_\_\_\_\_ PHONE \_\_\_\_\_
CHILD IS LIVING WITH: Father Mother Legal Guardian/Foster Parent Authorized Caregiver

Table with 3 columns: (Circle one) FATHER / STEPFATHER / LEGAL GUARDIAN / CAREGIVER, (Circle one) MOTHER / STEPMOTHER / LEGAL GUARDIAN / CAREGIVER, and PARENT EDUCATION LEVEL\*. Rows include NAME, STREET ADDRESS, CITY/STATE/ZIP, HOME PHONE, CELL PHONE, E-MAIL ADDRESS, EMPLOYER, WORK PHONE, and PARENT EDUCATION LEVEL\* with dropdown options.

\*Required by California Department of Education

Table with 5 columns: SIBLING NAMES, BIRTH DATE, RELATIONSHIP, LIVING AT HOME?, SCHOOL ATTENDING

- 1. HAS YOUR CHILD EVER BEEN ENROLLED IN THE SAN MATEO-FOSTER CITY SCHOOL DISTRICT? Yes No
If yes, which school? \_\_\_\_\_ Dates Enrolled \_\_\_\_\_
2. MY CHILD RECEIVES THE FOLLOWING SERVICES: Special Day Class (SDC) Resource Specialists Program (RSP) Speech & Language
(Check all that apply) 504 Plan Gifted & Talented (GATE) English Learner
3. DOES YOUR CHILD RECEIVE FREE OR REDUCED-PRICE LUNCH? Yes No
4. FAMILY LANGUAGE: WHAT LANGUAGE WOULD YOU LIKE US TO USE WHEN COMMUNICATING WITH YOU? English Spanish
5. RACE AND ETHNICITY - PART 1: IS THE STUDENT HISPANIC OR LATINO? (Select only one) No, not Hispanic or Latino Yes, Hispanic or Latino
Part 1 of the question is about ethnicity, not race. No matter what you selected above, please continue to answer the following questions by marking one or more boxes to indicate what you consider your student's race to be.
PART 2: WHAT IS THE RACE OF THIS STUDENT? (Select one or more)
American Indian or Alaskan Native Vietnamese Hmong Samoan Black or African American
Chinese Asian Indian Other Asian Tahitian White
Japanese Laotian Hawaiian Other Pacific Islander
Korean Cambodian Guamanian Filipino



Please answer all questions on this form.

School: \_\_\_\_\_

## Home Language Survey

Student's Name: \_\_\_\_\_  
Last First

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
/ /  
(month / day / year)

- The California *Education Code* contains legal requirements which direct schools to determine the language(s) spoken in the home of each student. This information is essential in order for the school to provide adequate instructional programs and services.
- As parents or guardians, your cooperation is requested in complying with this legal requirement. Please respond to each of the questions listed below as accurately as possible.
- Only one language per line. Be specific about the language (example: Mandarin not Chinese)

1. What language did your child learn when he or she first began to speak? \_\_\_\_\_  
(one language only)

2. What language does your child use most frequently at home? \_\_\_\_\_  
(one language only)

3. What language do you (the parents or guardians) use most frequently to speak to your child? \_\_\_\_\_  
(one language only)

4. Name the language most often spoken by the adults in the home. (parents, guardians or any other adults) \_\_\_\_\_  
(one language only)

5. Was your child born in the United States? Yes  
 No, if your child was not born in the United States, when did your child first come to the U.S.? \_\_\_\_\_  
/ /  
(month / day / year)

6. When did or will your child first enter a public or private school in the United States, not including preschool? \_\_\_\_\_  
/ /  
(month / day / year)

7. When did or will your child first enter a California public school, not including private or preschool? \_\_\_\_\_  
/ /  
(month / day / year)

8. What is the name of the last California public school attended?  
 \_\_\_\_\_  
Last grade attended

9. Has your child completed 3 full grade levels in schools within the United States or it's territories? Yes No

\_\_\_\_\_  
 Signature of Parent / Legal Guardian

\_\_\_\_\_  
 Date



## Informal Primary Language Survey

Parents who indicated English Only on the Home Language Survey do not need to complete this survey.

The purpose of the Informal Assessment of Primary Language Proficiency is to provide additional information, along with the results of the California English Language Development Test (CELDT), to design appropriate instruction and support services.

### I. General Information

Student's Name: \_\_\_\_\_  
Last First

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month / date / year

Primary Language: \_\_\_\_\_  
(Language other than English indicated on the Home Language Survey)

### II. School Experience

List the country or countries where the student attended school and the grade levels that were completed.

Country	Grade	Completed	
_____	_____	Yes	No
_____	_____	Yes	No

### III. Oral Language

Check the box that best describes the student's ability to speak and understand the primary language.

#### A. The student uses the primary language at home:

- Never
- Sometimes
- Almost always

#### B. The student uses the primary language with siblings and/or friends:

- Never
- Sometimes
- Almost always

### IV. Literacy

Place a check in the box that best describes the student's ability to read and write in the primary language.

#### How often does the student read in the primary language?

- Never (does not know how to read in primary language)
- Reads sometimes
- Almost always (prefers to read in primary language)

#### How often does the student write in the primary language?

- Never (does not know how to write in primary language)
- Writes sometimes
- Almost always (prefers to write in primary language)

### V. Comments

Provide any comments that will give more information to the school about the student's primary language proficiency, academic background, and ability to function in school.

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Date \_\_\_\_/\_\_\_\_/\_\_\_\_