



Student Information Form

Student's Name: _____

Student ID Number: _____



DECLARATION OF RACIAL/ETHNIC BACKGROUND

Federal and state government mandates require the school district to identify the racial/ethnic background of each student.

Racial/ethnic category is private data and will only be released under one of the following conditions:

1. To district employees who have a legitimate need to know.
2. To other educational agencies who have a legitimate need to know, or
3. To other agencies or individuals who provide a release form signed by you or by your child once he or she reaches legal age.

I DECLARE THE ABOVE STUDENT'S RACIAL/ETHNIC BACKGROUND TO BE (check one):

- | | |
|--|---|
| <input type="checkbox"/> American Indian or Alaskan Native | A person having original peoples of North America and who maintains cultural identification through tribal identification or community recognition. |
| <input type="checkbox"/> Asian or Pacific Islander | A person having origins in any of the peoples of the Far East, Southeast Asia, the Pacific Islands, or the Indian subcontinent. |
| <input type="checkbox"/> Hispanic | A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race. |
| <input type="checkbox"/> African American | A person having origins in any of the Black racial groups of Africa. |
| <input type="checkbox"/> Caucasian, non-Hispanic | A person having origins in any of the original peoples of Europe, North Africa, or the Middle East. |

I UNDERSTAND THE ABOVE DESIGNATION CAN ONLY BE CHANGED ONE TIME FOR THE DURATION OF MY CHILD'S ENROLLMENT IN THE SAINT PAUL PUBLIC SCHOOLS.

STUDENT LANGUAGE INFORMATION

Dear Parents/Guardians:

In order to help your child learn, your child's teachers need to determine which language your child uses most. Please respond to the questions below by checking the appropriate box.

- | | | |
|--|----------------------------------|---|
| 1. Which language did your child learn first? | <input type="checkbox"/> English | <input type="checkbox"/> Other (specify): _____ |
| 2. Which language is most often spoken in your home? | <input type="checkbox"/> English | <input type="checkbox"/> Other (specify): _____ |
| 3. Which language does your child usually speak? | <input type="checkbox"/> English | <input type="checkbox"/> Other (specify): _____ |

Do you work in the agriculture or fishing industry for your seasonal/temporary employment? Yes No

PARENT OR GUARDIAN SIGNATURE: _____ Date: _____