



2022-2023 Quick Registration Form

Upon our receipt and entry of this completed form, you will receive an email providing access to the Tyler/SIS Parent Portal, which allows you to complete your student's online enrollment forms. It is your responsibility to protect your Parent Portal password. Middle and high school students have student-level access.

Hazelwood School District requires timely completion of all online registration forms to prevent any enrollment delays.

Have you previously had a student enrolled in a Hazelwood School District school (including Early Childhood)? Yes No
Have you already visited a Hazelwood School District school this year to register a student? Yes No

Parent Name: _____ Relationship: _____

Email Address: _____

Spouse Name: _____ Relationship: _____

Address: _____ Phone Number: _____
(House #) (Street Name) (City) (State) (Zip) (Please specify Home/Cell)

<p>Student 1: _____ Gender: _____ Race: _____</p> <p>Transferring From: _____ DOB: _____ Grade: _____</p> <p>HSD School Student Will Be Attending: _____</p>
<p>Student 2: _____ Gender: _____ Race: _____</p> <p>Transferring From: _____ DOB: _____ Grade: _____</p> <p>HSD School Student Will Be Attending: _____</p>
<p>Student 3: _____ Gender: _____ Race: _____</p> <p>Transferring From: _____ DOB: _____ Grade: _____</p> <p>HSD School Student Will Be Attending: _____</p>

Are you on the birth certificate or legal guardianship documents for the student(s) you are enrolling? Yes No

Do you have a student in foster care? Yes No

If yes, name of student _____

Are you the leaseholder/homeowner of the residence in which you reside? Yes No

Do you and your child live with a Hazelwood School District resident? Yes No

Are you currently experiencing homelessness? Yes No

What is your child's first language? English ONLY Other

Student's native language _____

Has any student in your family ever been suspended or expelled from a school? Yes No

If yes, name of student _____

Does your child currently have an I.E.P (Individual Education Plan)?

Yes No

If yes, name of student _____

Does your child currently have a 504 Accommodation Plan?

Yes No

If yes, name of student _____

Do you have a student who qualified for gifted services in another district?

Yes No

If yes, name of student(s) _____

Name of school/district providing gifted services _____

Parent Signature _____ Date _____

Staff Signature _____ School _____ Date _____