

Wood County Educational Service Center
2022-23 New Student/Change of Information Form

☐ New student

☐ Withdrawn

☐ Change of Info

If change of info, please explain change, then complete pertinent info below: _____

Person Completing Form

Date

Please thoroughly fill in ALL information for new students.

Teacher: _____

Attendant: ☐ Y ☐ N

Building/District of Attendance: _____

Student's Name: _____

First

Full Middle Name

Last

Nickname: _____ DOB: _____ Grade Level: _____

Entry Date: _____ Withdraw Date: _____

District Prior to Removal (Foster/Court Placed): _____

Responsible District (Child's Current Residence) : _____

(District ESC Bills)

Student's Address: _____

Student's City of Birth: _____

City/State/Zip: _____

Phone: _____

SSN: _____

Mother's Name: _____

Address (if different): _____

Phone: _____

Cell: _____

Father's Name: _____

Address (if different): _____

Phone: _____

Cell: _____

Student's Race/Ethnicity:
(Please check all that apply)

___ Am. Indian/Alaskan

___ Asian

___ Black/African American

___ Hispanic/Latino

___ Native Hawaiian/Pacific Island.

___ White