

Name _____
LAST FIRST MIDDLE

TERM ENDING →	LAST									FIRST						MIDDLE						EXTRACURRICULAR ACTIVITIES				EL.	7	8	9
ELEMENTARY SUBJECTS	K GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	GRADE	MIDDLE SCHOOL SUBJECTS	7TH GRADE	GRADE	GRADE	GRADE	GRADE	GRADE				
ARITHMETIC																			AGRICULTURE										
ART																			ART										
LANGUAGE																			ENGLISH										
MUSIC																			GEOGRAPHY										
PHYSICAL ED.																			HISTORY										
READING																			HOMEMAKING										
SCIENCE																			INDUSTRIAL ARTS										
SOCIAL STUDIES																			LITERATURE										
SPELLING																													
WRITING																													
																			MATHEMATICS										
																			MUSIC										
																			PHYSICAL ED.										
																			SCIENCE										
READING LEVEL																													
PROMOTED																			PROMOTED										
CITIZENSHIP																			CITIZENSHIP										
DAYS PRESENT																			DAYS PRESENT										
DAYS ABSENT																			DAYS ABSENT										
TIMES TARDY																			TIMES TARDY										
CODE for Extended Absences																			SIGNATURE OF HOME ROOM TEACHER ↔										
1. Illness																													
2. Family Illness																													
3. Truancy																													
4. Out of Town																													
5. Indigent																													
6. Suspension or Expulsion																													
7. Parental Indifference																													
8.																													

NOT FOR REPLICATION

LAST NAME		FIRST		MIDDLE		SEX	PLACE OF BIRTH			BIRTH DATE	BIRTH INFORMATION (CHECK SOURCE)				
											Birth Certificate <input type="checkbox"/>				
											Passport or Immigration Certificate <input type="checkbox"/>				
HOME ADDRESS				GRADE	PHONE NO.	DATE	FAMILY DATA				MOTHER		FATHER		
							Name								
							Country or State of Birth								
							Language in Home								
							Date Naturalized								
							Educational Status								
							Occupation (in pencil)								
							Marital Status								
OTHER CHILDREN IN THE FAMILY															
NAME		BIRTH DATE		NAME		BIRTH DATE		Stepparent							
								Guardian							
								With whom does the child reside? (in pencil)							

TESTING PROGRAM (Headings to be Inserted by Individual School District)

GRADE	DATE	C.A.	M.A.	NAME OF TEST																

Remarks or Referrals: