

## Hastings Public Schools (ISD 200) - CENSUS FORM

**PLEASE COMPLETE ALL APPLICABLE INFORMATION REQUESTED BELOW**

Child's LEGAL Name (Last, First, Middle) \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_

Ethnicity (optional):  American Indian/Alaskan Native  
 Check all that apply  Asian  
 Hispanic  
 Black/African American  
 Native Hawaiian/Pacific Islander  
 White

Child's Primary Language:  
 \_\_\_\_\_

Gender:  Male  Female

**Parent/Guardian Information (who reside with child at address below – please provide LEGAL name)**

\_\_\_\_\_  
 (Last, First, Middle) Date of Birth \_\_\_\_\_  
 (MM/DD/YYYY)

Parent  Step-Parent  Guardian  Foster-Parent Gender:  Male  Female

\_\_\_\_\_  
 (Last, First, Middle) Date of Birth \_\_\_\_\_  
 (MM/DD/YYYY)

Parent  Step-Parent  Guardian  Foster-Parent Gender:  Male  Female

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Other siblings who reside at the above address (please provide LEGAL name)**

\_\_\_\_\_  
 (last, first, middle) \_\_\_\_\_ Gender:  Male  Female  
 (Date of Birth – MM/DD/YYYY)

\_\_\_\_\_  
 (last, first, middle) \_\_\_\_\_ Gender:  Male  Female  
 (Date of Birth – MM/DD/YYYY)

\_\_\_\_\_  
 (last, first, middle) \_\_\_\_\_ Gender:  Male  Female  
 (Date of Birth – MM/DD/YYYY)

\_\_\_\_\_  
 (last, first, middle) \_\_\_\_\_ Gender:  Male  Female  
 (Date of Birth – MM/DD/YYYY)

X \_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Return completed form to:  
 Hastings Public Schools, 1000 West 11<sup>th</sup> Street, Hastings, MN 55033