WETHERSFIELD PUBLIC SCHOOLS **STUDENT DATA FORM**

ENROLLMENT/TRANSFER/WITHDRAWAL/CHANGE OF STUDENT INFORMATION

Date: **School:**

Last Name: **First Name:** **Middle Name:**

ELL ☐ **Yes** ☐ **No** **Kindergarten** ☐

ID # **DOB:** **SASID:** **GRADE:**

☐ **Completed Enrollment** ☐ **Change of Address** ☐ **Change of Guardian** ☐ **Change of School Within District**

☐ **Withdrawal** ☐ **Legal Name Change**

Student's First Day:

Home Address: (Prior) **Town/Zip:** **Phone:**

New Address Is: ☐ **Temporary** ☐ **Permanent** **Effective Date:**

New Address: **Town/Zip:** **Phone:**

Change of Guardian:

Legal Name Change:

Circumstances:

New Information Provided By:

REQUIRED STATE EXIT INFORMATION:

District Exit Date: **Exit Type:** (Refer to Table N for code) **Exit Status:** (Refer to Table O for code)

Days of Membership: **(instructional days enrolled in current year)**
Days of Attendance: **(instructional days present in current year)**

Data Sheet Submitted By:
Copies of this form should be emailed to:

Kristin Underhill, Superintendent's Office
Nikolay Stoyanov, Stillman
Suzanne Curtin, Data Manager, Stillman
Dave Aberle, Residency Officer
Michelle Conlan, Stillman
Patricia Welles, Special Services
Student's Permanent Record File