



Saginaw Public Schools EXPRESS STUDENT ENROLLMENT FORM

Parent or Legal Guardian Name: _____

Address: _____ Zip Code _____

Telephone Number: (____) _____ Last school student attended _____

School student will attend _____

Student's legal name:

Last _____ First _____ MI: _____

Name or Initial (according to birth certificate - but this can be edited later)

Birth Date: _____ Gender: **M** ___ **F** ___

Birth City/State: _____ Grade Attending in Fall 2007: _____

Has this student ever been enrolled in the SPSD? **No** **If yes, what school** _____

Race/Ethnic Group:

___ American Indian or Alaskan Native

___ African American

___ Caucasian

___ Asian

___ Hispanic

___ Hawaiian or Pacific Islander