

Van Wert City Schools
District Office
205 W Crawford St
Van Wert OH 45891
419-238-0648 – Office
419-238-3974 – Fax

Kindergarten Student Registration

Student Name _____

Registering for What Grade _____ School Year _____

Start Date Van Wert City Schools _____

Required Documents:

Copy of Birth Certificate

Copy of Immunization Records

Copy of Custody Papers (if applicable)

Proof of Residency (in the Van Wert City School District) for parent or legal guardian

Completed forms can be dropped off or mailed to the school building your child will be attending:

Kindergarten - Early Childhood Center, 1120 Buckeye Dr. (off E. Ervin Rd.) - Phone 419-238-0384

Grades 1-5 - VW Elementary School, 10992 State Route 118 South - Phone 419-238-1761

Grades 6-8 - VW Middle School, 10694 State Route 118 South - Phone 419-238-0727

Grades 9-12 - VW High School, 10708 State Route 118 South - Phone 419-238-3350

When the school is in receipt of registration forms, parent/guardian will receive an email from Final Forms, our online forms and data management service, instructing them to follow the link to set up a login and password. Parent/Guardian will then complete the online forms. The Final Forms link can also be found on our website, vwcs.net, under Parents – Final Forms.

The student will not be officially registered until the parent/guardian completes the above process.

If you have any questions regarding Student Registration, please do not hesitate to call the school.

Thank You.

Van Wert City Schools Registration Form

Male Female

_____	_____	_____	
<i>Student Last Name</i>	<i>First Name</i>	<i>Full Middle Name</i>	
_____	_____	(____) _____	
Address	City/State/Zip	Primary Phone Number	
_____	_____	(____) _____	
Father's Name	Address (if different from Student)	Phone Number	
_____	_____	(____) _____	
Employer		Work Number	
_____	_____	(____) _____	
Mother's Name	Address (if different from student)	Phone Number	
_____	_____	(____) _____	
Employer		Work Number	

Primary Email Address			

_____	_____	_____	_____
Child's Birthdate	Place of Birth (City)	Grade 2021-2022	Social Security Number
Mothers Maiden Name _____			

Check the Language that You Speak in Your Home:

English Spanish Other (specify) _____

Race/Ethnic Category:

- White, Non-Hispanic
- Black, Non-Hispanic
- Multiracial
- Hispanic/Latino
- Asian
- American Indian/Alaskan Native
- Native Hawaiian/Other Pacific Islander

Is the student of Hispanic/Latino heritage? Yes No

(Hispanic/Latina means a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

Special Services:

Is your child on an IEP? _____ Yes _____ No
Is your child on a 504 Plan? _____ Yes _____ No