Anderson County School District Two
Registration Form

EARLY CHILDHOOD ENTRY FOR 3, 4 AND 5 YEAR OLDS

Student Name: _____
(Last) (First) (Middle)

- Has either parent of the child received Family Literacy Services (adult literacy such as adult education: basic literacy, GED, High School Diploma, ELS; parent education classes; child development classes; parent and child together time classes)?
  Which parent? _____ Mother _____ Father

- Has either parent participated in a Parenting Program?
  Which parent? _____ Mother _____ Father

- What was your child's weight at birth? _____

- What was the last childcare setting for your child prior to attending school?
  _____ Center Based Care _____ Family Child Care Center (Home-based)
  _____ Head Start _____ Home w/ Family Member ____ Home w/ Non-Family Member

- What is your family's medical care source?
  _____ Free Health Clinic _____ Emergency Room
  _____ Family Physician _____ Other

- Family Income Range (circle one)

0 – 10,000
10,001 – 20,000
20,001 – 30,000
30,001 – 40,000
40,001 – 50,000
50,001 – 60,000
60,001 - above