

Tonto Basin School District #33
P.O. Box 337 | Tonto Basin, AZ 85553
Director/Cafeteria Manager: Jeannie Cline
Phone: 928-479-2277 | Fax: 928-479-2720

Application # _____
Temp # _____
TBS ID _____
SAIS ID _____
Enrolled _____
Direct Cert _____
Match / No Match

New Student Registration

Student Name: _____ Gender: _____
Last Middle First
Legal Last Name: _____ Birthdate: ____/____/____ Grade: ____ Class: _____

Ethnicity: No, not Hispanic or Latino Yes, Hispanic or Latino

Race: American Indian/Alaskan Native Black White Hispanic Pacific Islander/Asian

Language Survey

What is the primary language used in home? _____

What is the language most often spoken by the student? _____

What is the language the student first acquired? _____

Parent/Guardian: _____ Relationship: _____ Birth Mother: _____

Address: _____
Street/P.O. Box City, State Zip

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Preferred Name: _____ Email: _____

Adult Registering: _____ Last 4 Digits of Parent SS# _____ Total Household Members: _____

Any Food Allergies: _____

Medical Problems: _____

Any Cash Assistance Received: Yes No Food Stamps Received: Yes No

Additional Notes: _____

