

Route Info: ___ EMIS
___ Supt.
___ Prin.

Elementary School
35 Elm St., P.O. Box 34

Fort Loramie Local Schools Student Registration

Fort Loramie, Ohio 45845

JR/SR High School
600 East Park St., P.O. Box 290

Student Information:

Office Use Only:

Admission Date: _____ SIS # _____ SSID # _____ Registration Date _____

Student Name: _____ Date of Birth: ____/____/____
(Last) (First) (Middle Name) (Called Name)

Address: _____ Gender: Male Female Current Grade _____

City: _____ Zip Code: _____ City of Birth _____ Mother's Maiden Name _____

Telephone: (____) _____ Social Security Number: _____ District of Residence _____

Are you a current resident of the Fort Loramie Local School District YES NO (Circle One) – If YES, proof of residency may be required

Father's Name

Name: _____

Address: _____

City/Zip: _____

Phone: (____) _____

Cell Phone: (____) _____

Email Address: _____

Employer: _____ Phone (____) _____

Mother's Name

Name: _____

Address: _____

City/Zip: _____

Phone: (____) _____

Cell Phone: (____) _____

Email Address: _____

Employer: _____ Phone (____) _____

Step Parent/Foster Parent/Other Adult Person Living in Home

Name: _____ Relationship to Child _____

Phone: (____) _____ Cell Phone (____) _____ Employer: _____ City: _____

Work Phone: (____) _____ Address if other than student's _____

Are Parents Divorced? YES NO

Name of Custodial Parent _____

Is Father/Mother deceased? YES NO