

**Kenilworth Junior High School  
Incoming Student Information Questionnaire**

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Current School: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please complete and return with your registration packet.**

**Circle yes or no:**

- Does your child participate in any honors classes?  
Yes No
- Is your child in the gate program?  
Yes No
- Is your child receiving special ed services (IEP)?  
Yes No
- Does your child have a 504 plan?  
Yes No
- Does your child have a behavior plan?  
Yes No
- Is your child in a self contained classroom?  
Yes No

**Legal custody papers on file?** Yes No

If yes, please explain: \_\_\_\_\_

**Attendance Concerns?** Yes No

If yes, please explain: \_\_\_\_\_

**Discipline Issues:**

Has your student ever been **suspended**? Yes No

If yes, please explain: \_\_\_\_\_

Has your student ever been **expelled**? Yes No

If yes, please explain: \_\_\_\_\_

**List questions, comments, or concerns about your student below:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_