

**Alaska Gateway School District**  
Student Enrollment Form

**School**

**First**

**Middle**

**Last**

**Physical Address**

**Mailing Address**

**City**

**State**

**Zip**

**Home Phone**

**Date of Birth**

**Social Security Number**

**Gender : Male Female**

**Entry Grade Level:**

**Enrollment date**

**Transferring From:**

**City of Birth**

**Father (First/Last)**

**Father's Day Phone**

**Father's Employer**

**Father's Email**

**Mother (First/Last)**

**Mother's Day Phone**

**Mother's Employer**

**Mother's Email**

**Guardianship** (mother/father/both/other)

**Ethnicity**

- Alaskan Native
- American Indian
- Asian/Pacific Islander
- Black
- Hispanic
- Mixed Ethnicity
- Other
- White

**Emergency Contact**

**Phone**

**Medications** (or other health notes)


**Please attach student's class schedule.**