



Manhattan Beach  
Unified School District

**New Student Information Form**

Student's Legal Name: \_\_\_\_\_

(as listed on birth certificate)

Gender (M/F): \_\_\_\_\_ Grade Level: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary or \_\_\_\_\_ Secondary or \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Family Email Address: \_\_\_\_\_

(please provide one main email address for school notifications)

Additional Information: Parent/Guardian 1 Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Parent/Guardian 2 Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Name(s) and age(s) of siblings enrolled or currently enrolling in MBUSD:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian Highest Education Level (check one):  Graduate School  College Graduate

Some college (includes AA degree)  High school graduate  Not a high school graduate  Decline to state

Primary Language: \_\_\_\_\_

1) Which language did your son/daughter learn when he/she first began to talk? \_\_\_\_\_

2) Which language does your child most frequently speak at home? \_\_\_\_\_

3) Which language do you most frequently use when speaking with your child? \_\_\_\_\_

4) Which language is most often spoken by adults in the home? \_\_\_\_\_

Special needs/Abilities: GATE \_\_\_\_\_ Special Ed/IEP \_\_\_\_\_ 504 \_\_\_\_\_ Speech \_\_\_\_\_ Other \_\_\_\_\_

Last School Attended: \_\_\_\_\_

School Phone Number (Required): (\_\_\_\_\_) \_\_\_\_\_ School Address: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_

Office Use Only:  Birthplace  Parent Ed Level  Primary Language: \_\_\_\_\_

Date: \_\_\_\_\_ Student Number: \_\_\_\_\_ Family Number: \_\_\_\_\_