English as a Second Language School
Student Registration

Today's Date: _____

_____New Student _____Returning Student (previous level)

Name: _____
(first name) (family name)

Address: _____
(street)

_____
(city) (state) (zip code)

Telephone: _____

_____Male _____Female

Native Country_____ First Language _____

Birthday _____

When did you come to the United States? _____

How did you hear about this class?

_____Friend or Family _____Radio

_____Brochure _____Other

_____Newspaper

Placement Level (this section completed by staff only)

_____Beginner _____Intermediate _____Advanced