

**Elementary and Middle School Initiative (EMSI) Program  
Participant Information/Registration Form  
2011-2012**

This information is necessary to complete your Tri-Annual Program Accountability Reports.

Collect this information on each student participating in EMSI activities.

School: \_\_\_\_\_ Activity Leader(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Student Name:					Age:	
Grade Level:			Male:		Female:	
Ethnicity:	Afro-American	Anglo	Hispanic	Native American	Asian	Other

**Check the boxes below which hold true for this student.**

Student is participating because he/she is exhibiting, or has exhibited, behavioral problems that have a negative impact on their overall healthy development.	<input type="checkbox"/>
Student is participating because they are unsupervised after school	<input type="checkbox"/>
Student is participating because he/she needs something to do after school	<input type="checkbox"/>
Student is participating because he/she needs academic assistance	<input type="checkbox"/>

**Name and phone number to call in case of emergency:**

Name	Phone Number	Alternative Number

**List each Activity in which the student is registered:**

Activity Name:	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

**Student was informed of Attendance Policy.** Yes \_\_\_\_\_ No \_\_\_\_\_

**Is student eligible for free or reduced lunch?** Yes \_\_\_\_\_ No \_\_\_\_\_

Please update as needed.

**One Registration Form per child**