

APPLICATION FOR REGISTRATION  
FORT WORTH PUBLIC SCHOOLS

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R K U T N

SCHOOL NUMBER 260 DATE Sept. 6 1956

NAME OF PUPIL Oswald LEE MARUET TELEPHONE PE-82259

DATE OF BIRTH Oct 18 1939 AGE 16 SEX M PRESENT GRADE 10

AUTHORITY GIVEN IN ESTABLISHING BIRTH DATE \_\_\_\_\_ (TO BE FILLED IN FOR FIRST GRADE OR KINDERGARTEN CHILD ONLY)

RESIDENCE OF PUPIL 4936 Collinwood BIRTHPLACE NEW ORLEANS, LA.

NAME OF PERSON WITH WHOM CHILD LIVES, IF NOT WITH PARENTS \_\_\_\_\_

SCHOOL ATTENDED LAST YEAR WARREN EASTERN NEW ORLEANS, LA.

CHILD'S ADDRESS WHEN ENUMERATED IN SCHOLASTIC CENSUS LAST JANUARY \_\_\_\_\_

FATHER'S NAME Dead ADDRESS \_\_\_\_\_

MOTHER'S NAME Oswald, MARGARET ADDRESS 4936 Collinwood, Ft. Worth

FATHER'S OCCUPATION \_\_\_\_\_ MOTHER'S OCCUPATION \_\_\_\_\_

DATE PUPIL MOVED TO FORT WORTH July 1st 1956

IS THIS PUPIL A MEMBER OF ANY HIGH SCHOOL FRATERNITY OR BROTHERITY? YES \_\_\_\_\_ NO

\*Members of high school fraternities and societies are exempt from attendance in public schools by act of the Texas Legislature, October, 1907, FORM 3

WHEN SUCCESSFULLY VACCINATED? 1952 PHYSICIAN \_\_\_\_\_ CITY Ft. Worth

(A pupil whose vaccination was reported or who was not regularly enrolled in the Fort Worth Public Schools last year must provide a certificate of successful vaccination signed by a licensed physician.)

HAS CHILD BEEN IMMUNIZED AGAINST DIPHTHERIA? (YES) 1940 WHOOPING COUGH? (YES) 1940

IS CHILD HARD OF HEARING, NEAR-SIGHTED, OR HAS HE ANY OTHER PHYSICAL DEFECT OR WEAKNESS? NO

(This information is necessary in order for the teacher to understand the pupil's needs)

IN CASE OF SUDDEN ILLNESS OR ACCIDENT, IF FAMILY CANNOT BE CONTACTED, CALL DR. \_\_\_\_\_

TELEPHONE \_\_\_\_\_

PLEASE LIST BELOW THE NAMES OF ALL OTHER CHILDREN IN THE FAMILY UNDER EIGHTEEN (18) YEARS OF AGE

LAST NAME	FIRST NAME	BIRTHDAY			AGE		SCHOOL ATTENDING
		BIRTH	DAY	YEAR	MALE	FEMALE	

I HEREBY CERTIFY THAT THE CHILDREN WHOSE NAMES ARE GIVEN HEREON ARE IN MY CHARGE AND CUSTODY AND THE DATES OF THEIR BIRTHS ARE TRUE AND CORRECT.

NOTE: This application must be signed by the father, mother, legal guardian, or person certified to be in full legal control of pupil.

SIGNED: Marguerite Oswald

ADDRESS: 4936 Collinwood

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(Copy)  
FORT WORTH PUBLIC SCHOOLS.

COMMISSION EXHIBIT No. 1873-I