

RSU# 18 Enrollment Form

School:

Grade:

A COPY OF THE STUDENT'S BIRTH CERTIFICATE MUST BE PROVIDED WHEN ENROLLING

RSU# 18 Enrollment Forms and Emergency/Permissions Sheets are stored in secured locations.

This form must be signed before starting school. All student information on this form is required and is used for local, state and federal funding.

-- Office Use Only --

Date of Entry:

Homeroom Teacher:

Birth Certificate certified by:

AM Bus Assignment:

PM Bus Assignment:

STUDENT INFORMATION

First:

Middle:

Last:

Physical Address:

City:

State:

Zip:

Mailing Address:

City:

State:

Zip:

Town of legal Residence:

Home Phone:

Student Cell Phone:

Date of Birth:

Gender: Female / Male

Year of Graduation:

Hispanic-Latino: Yes / No (Does student trace origins to Mexico, Puerto Rico, Cuba, Central and So America, and other Spanish cultures, regardless of race.)

Race: Please circle all that apply:

White / Black-African American / Asian / American Indian-Alaska Native / Native Hawaiian-Other Pacific Islander

If student's US citizenship status is immigrant, please enter the student's arrival date to the US: _____

HOMELESS STATUS

Is the enrolling student and their immediate family currently living in a homeless situation?

If yes, please circle one: In a shelter ~ Doubled up ~ Unsheltered ~ Motel/Hotel

For Students Only: Are you an Unaccompanied Minor? Yes / No If yes, are you currently in any of these homeless situations? (Please circle any that apply) In a shelter ~ Doubled up ~ Unsheltered ~ Motel/Hotel

BIRTH/ADOPTED FATHER'S/GUARDIAN'S INFORMATION

Birth/Adopted Father:

Is Birth/Adopted Father's address different from student's? Yes / No

If Yes, Please fill in: Address:

City:

State:

Zip:

Birth/Adopted Father's Daytime Phone:

Birth/Adopted Father's Employer:

Birth/Adopted Father's Home Phone:

Birth/Adopted Father's Cell Phone:

Birth/Adopted Father's Pager/Pin:

Birth/Adopted Father's Email:

BIRTH/ADOPTED MOTHER'S/GUARDIAN'S INFORMATION

Birth/Adopted Mother:

Birth/Adopted Mother's Maiden Name:

Is Birth/Adopted Mother's address different from student's? Yes / No

If Yes, Please fill in Address:

City:

State:

Zip:

Birth/Adopted Mother's Daytime Phone:

Birth/Adopted Mother's Employer:

Birth/Adopted Mother's Home Phone:

Birth/Adopted Mother's Cell Phone:

Birth/Adopted Mother's Pager/Pin:

Birth/Adopted Mother's Email:

STEP-PARENT INFORMATION: Please fill in this section if student resides with parent and step-parent

Step Parent:

Step Parent's Daytime Phone:

Step Parent's Cell Phone:

Step Parent's Pager/Pin:

GUARDIAN(S) INFORMATION

Guardian 1:

Guardian 2:

Is Guardian(s) address different from students? Yes / No

If Yes, Please fill in: Address:

City:

State:

Zip:

Guardian(s) Home Phone:

Day Phone:

Day Phone:

Employer:

Employer:

Cell Phone:

Cell:

Pager/Pin:

Pager/Pin:

Email:

Email:

STUDENT'S LEGAL RESIDENCE: Please verify student's legal PRIMARY residence.

Parents / Mother / Father / Mother-Stepfather / Father-Stepmother / Guardian(s) / Fosterparent(s) / State Ward / Grandparent(s) / Self / Other

If parents are divorced or separated, please indicate if custody is joint/shared: YES NO

Please notify the school principal immediately if there are any court orders restricting non-custodial parents or others from contact with the child and provide the principal with a copy of the order.

MILITARY FAMILIES:

Are one or both of the student's parents on full-time duty status in the active uniformed service of the United States (including members of the National Guard and Reserve on active duty orders), or within one year of medical discharge or retirement from those uniformed services?
YES / NO

STUDENT'S SIBLING(S)

Please list the name(s) and grade(s) of student's brother(s) and sister(s):

- | | | |
|----------|----------|----------|
| 1) _____ | 2) _____ | 3) _____ |
| 4) _____ | 5) _____ | 6) _____ |
| 7) _____ | 8) _____ | 9) _____ |

STUDENT'S FORMER SCHOOL/SPECIAL SERVICES INFORMATION: Only fill in this section for students who are enrolling

Former School Information:

Last School Attended:

Last District Attended:

School Address:

School Phone:

Enrolled in what Grade:

Was the student Homeschooled: Yes No

Special Services

Has the student received Special Education Services in the past? Yes No

Is the student currently receiving Special Education Services? Yes No

If YES, you must provide a copy of the student's most current IEP to the Registrar.

Has the student received Title 1 in the past? Yes No

Has the student received Limited English Proficiency (LEP) Services in the past? Yes No

EMERGENCY CONTACT INFORMATION:

In case of an emergency or illness please list contacts that will be authorized to pick up student if parent(s)/guardian(s) cannot be reached. If the student has a caseworker, please list as an emergency contact.

CONTACT 1ST ~

Name:	Relationship to student:
Phone:	Type: Cell / Home / Work / Pager
Phone:	Type: Cell / Home / Work / Pager
Phone:	Type: Cell / Home / Work / Pager

CONTACT 2ND ~

Name:	Relationship to student:
Phone:	Type: Cell / Home / Work / Pager
Phone:	Type: Cell / Home / Work / Pager
Phone:	Type: Cell / Home / Work / Pager

CONTACT 3RD ~

Name:	Relationship to student:
Phone:	Type: Cell / Home / Work / Pager
Phone:	Type: Cell / Home / Work / Pager
Phone:	Type: Cell / Home / Work / Pager

DAY CARE PROVIDER INFORMATION

Name:	Phone:
Address:	
Day Care Instructions:	

MEDICAL INFORMATION

Doctor:	Phone:		
Dentist:	Phone:		
Name of Health Insurance:			
Policy and Group Number:			
Please indicate which local hospital you wish your child taken to in case of an emergency :			
No Preference	Inland Hospital	MaineGeneral-Thayer Unit	MaineGeneral-Augusta

In an emergency or when your child is sick, it is our practice to first contact the mother/guardian, then the father/guardian, then the above emergency contacts (in order). If you wish to give more specific directions please indicate this here:

Please list any special medical considerations the school should be aware of:

Please list all allergies the school should be aware of:

Student Information Notices and Agreements

Annual Review [2013-2014 School Year]

STUDENT COMPUTER AND INTERNET USE

Student use of school computers, network and internet is provided to all RSU#18 students. The RSU community recognizes that the use of technology is essential to the success of our students education. Students are required to comply with the student computer and internet policy (IJNDB) and accompanying rules (IJNDB-R).

DIRECTORY INFORMATION - (Annual Notice of Student Education Records Rights)

Under the federal Family Educational Rights and Privacy Act (FERPA), RSU# 18 has designated the following student information as directory information that can be made public at its discretion: name, participation and grade level of students in officially recognized activities and sports, height and weight of student athletes, dates of attendance in the school unit, and honors and awards received. However, parent(s)/guardian(s) and eligible students over 18 do have the right to request that directory information not be released.

Yes, I do grant permission for directory information about my child to be released.

No, I do not grant permission for directory information about my child to be released.

INFORMATION ON RSU# 18 WEBSITE

RSU# 18 maintains a website to provide information about the schools, its programs and activities, and student and staff achievements. Maine law requires public schools to obtain written approval from parent(s)/guardian(s) prior to publishing personal information about students on the Internet. Such information may include: full names of students in connection with class rosters, honor rolls, awards received, and team/activity participant lists; group and/or individual photographs of students (no names will be used); individual student or class work (including but not limited to creative writing, research projects, art work, music performances, and audiovisual presentations).

Yes, I do grant permission for my child's information to be published on the RSU# 18 website.

No, I do not grant permission for my child's information to be published on the RSU# 18 website.

OUTSIDE MEDIA

On occasion, RSU# 18 allows media outlets such as local newspapers, radio stations, and television stations to visit the school to report on school programs and activities. You have the right to deny permission for your child's name, picture, voice, or statements to be used by outside media. However, please note that permission is not required for events open to the public such as athletic events, concerts, performances, and graduation ceremonies.

Yes, I do grant permission for the use of my child's name, picture, voice, and/or statement to be used by outside media.

No, I do not grant permission for the use of my child's name, picture, voice, and/or statement to be used by outside media.

FOR HIGH SCHOOL STUDENTS ONLY

The No Child Left Behind Act requires secondary schools to provide student names, addresses, and telephone numbers to both military recruiters and institutions of higher education upon request. Parent(s)/guardian(s) may prevent the release of student information to military recruiters and/or institutions of higher education, by checking the appropriate line(s) below. If the appropriate line is not checked or this signed form is not returned, the school is required by federal law to disclose the student's name, address, and telephone numbers to any military recruiters and/or institutions of higher education that request it.

INFORMATION PROVIDED TO MILITARY RECRUITERS

Yes, I do grant permission for my child's name, address, and telephone number to be released to military recruiters.

No, I do not grant permission for my child's name, address, and telephone number to be released to military recruiters.

INFORMATION PROVIDED TO INSTITUTIONS OF HIGHER LEARNING

YES, I do grant permission for my child's name, address, and telephone number to be released to institutions of higher education.

No, I do not grant permission for my child's name, address, and telephone number to be released to institutions of higher education.

NOTE TO PARENT(S)/GUARDIAN(S): Permissions remain in effect until modified by the parent(s)/guardian(s). A signature is required below to modify any of the above permissions. This form may be requested at any time in order to make modifications.

NOTE: I give permission for RSU# 18 to provide necessary medical treatment for my child if he/she is injured or becomes ill at school. In the event I cannot be reached in an emergency, I give permission for RSU# 18 to transport my child to a medical facility to obtain medical care. I understand that RSU# 18 does not assume any financial responsibility for the provision of medical transportation and/or medical care, and any charges for such services remain my responsibility.

Month/Day/Year

Parent/Guardian Name

Parent/Guardian Signature