

Registration: Parent Permission and Acknowledgement Checklist

Student Name: _____ School: _____

In which language would you like to receive communications from the school? _____

Kindergarten and Students New to the District complete this section.

I have filled out the **enrollment card**.

ALL STUDENTS including Kindergarten and New Students complete this section.

I have updated my student's personal information on Infinite Campus. **(Returning Students Only)**

I have completed the **race/ethnicity survey** as required by federal guidelines.

I have completed the **Home Language Survey** as required by federal guidelines.

I have read the district **Computer and Network Services: Acceptable Internet Use Policy (Board Policy 698)** and have completed the **Computer and Network Service User Agreement (Board Policy 698F1)**. I

have reviewed the district's **Child Nutrition Program** policies and have **completed and turned in the Free/Reduced Meal Application (All families are required to complete this form.)**

I understand that the **Discipline Handbook and Registration Policies** are located on the district website and are available for me to read. They include the following:

Discipline Policy Handbook

Bus Rules

Student Dress Code Policy (Board Policy 517)

Student Use of Electronic Communication and Entertainment Devices Policy (Board Policy 518)

Parent/Student Title I Partnership Agreement

"Notice of Compliance Family Educational Rights and Privacy Act"

Annual Notification of Pupil Rights Amendment

Student Injuries Policy (Insurance forms are available in the school office if you wish to purchase student health insurance.)

Administering Medications Policy (Board Policy 561) I am aware that my child will not be given medication at school without a signed medication permission form (available in the school office, if needed).

I understand that if I do not want my student to be filmed or photographed by the school; I am required to submit a statement in writing to my student's school.

This is my current e-mail address: _____

I am aware that other district/school information (district calendar, school supply lists, immunization schedules, etc.) can be found on the district website (**d55.k12.id.us**) and/or school links.

Please check one of the following boxes ONLY if it presently applies to the student's current living situation.

The student is living in a shelter, transitional housing, or awaiting foster care.

The student is living with more than one family in a house or an apartment due to temporary loss of housing or economic hardship. (Please mark this only if you have recently moved in with another family for this school year).

The student is living in a temporary trailer, campground, car, or park.

The student is living in a hotel or motel.

If you checked any of the four boxes above, then please complete the **Standard Student Residency Questionnaire**.

Parent Signature _____

Date _____

Student Signature _____

Date _____