

**NETTLETON SCHOOL DISTRICT
STUDENT ENROLLMENT FORM**

Copy to: Office
Counselor
Homeroom Teacher

PLEASE PRINT CLEARLY

STUDENT INFORMATION

Legal Name _____
Last First Middle
 SS# _____ Birth Date _____
 Birth Information: City _____ County _____
 State _____ Country _____ Certificate Number _____
 Race:(Circle One) AS B H NA PI W Gender: (Circle One) M F
 Mailing Address _____
 Street/911 Address _____
 City, State, ZIP _____ Home Phone () _____

Last School Attended _____
 Address _____
 City, State, ZIP _____
 Foreign Exchange Student? N Y If so, which Country _____
 Student Enrolled in Special Education at Last School Attended? Yes No
 Student in Foster Care? Yes No If so, Contact's name: _____
 Student Enrolled in Speech? Yes No Student Enrolled in Gifted? Yes No

Parent/Guardian Name _____
 Relationship to student _____
 Mailing Address _____
 City, State, ZIP _____ Last Grade Completed _____
 Employer _____ Occupation _____
Military Affiliation: NONE National Guard Active Duty
 PRIMARY Phone () _____ (AIM Notification)
 Work Phone () _____
 Email Address _____

Parent/Guardian Name _____
 Relationship _____
 Mailing Address _____
 City, State, ZIP _____ Last Grade Completed _____
 Employer _____ Occupation _____
Military Affiliation: NONE National Guard Active Duty
 PRIMARY Contact Phone () _____ (AIM Notification)
 Work Phone () _____
 Email Address _____

With whom does child live? _____

Special Instructions _____

Brothers and/or sisters under 21—Give name and birth date.

OFFICE USE ONLY

Date _____ School _____
 MSIS ID _____
 Grade _____
 HR Teacher _____

Birth Certificate
 Immunization Compliance Form
 Verification of Legal Residence (2)
 Social Security Card
 Acceptable Use Policy
 Publicity Permission Form
 Check if Applicable

Immigrant
 McKinney-Vento Homeless Assistance Act
 Migrant
 English Language Learner

Verified by _____ Date _____

OTHER INFORMATION

Bus # _____ Walk _____ Other _____

Township _____ Range _____

In-Dist. Transfer Home School _____

TRANSFER RECORDS

Ordered From _____

Ordered By _____

Records Received Yes No

Date Records Received _____

Special Medical/Emotional/Educational or physical
 limitations needs that might help teachers

HOME LANGUAGE SURVEY

Please check the appropriate answer:

1. What is the first language the student learned to speak?

English _____ Other _____

2. What language does the student most often speak?

English _____ Other _____

3. What language is most often spoken in the student's home?

English _____ Other _____

4. In what language do parents prefer that communication comes home?

English _____ Other _____

5. Has this student attended any U.S. school in any three years of his/her life time?

NO _____ Yes _____

MIGRANT ELIGIBILITY

If you have moved and/or changed jobs in the last 3 years, did you LOOK FOR or GET any of the following jobs listed below?

Check ALL that apply.

FARMING (crops, catfish, chickens, Christmas trees, sod, etc.)

TREES (cutting, planting, and/or cultivating)

COMMERCIAL FISHING

PROCESSING CROPS (ginning, meat processing, meat packing, or canning in a plant)

IMMIGRANT CHILDREN AND YOUTH ELIGIBILITY

Do you have children ages 3 through 21 who were not born in any State; and have not been attending one or more schools in any one or more States for more than 3 full academic years? Yes No

HOMELESS ELIGIBILITY

Please check the appropriate answer:

1. Does the student lack a fixed, regular and adequate residence, for example: agricultural migrant children, children living on the "streets" (i.e. tents, vehicles, etc.)? Yes No

2. Does the student have a primary nighttime residence in a supervised or privately operated shelter, for example: children who have been abused and/or neglected, children of domestic violence, welfare hotels, transitional housing? Yes No

3. Is the student temporarily staying with relatives or friends because of loss of job, other income loss, housing loss ("double up" families or affidavit)? Yes No

Excluded from the definition of homeless: "any individual imprisoned or otherwise detained pursuant to an Act of Congress or a state law."

EMERGENCY CONTACTS/PERMISSION TO RELEASE

Please list 4 additional Emergency Contacts (Other than Parent/Guardian):

1. Name _____
Relationship to Student _____
Address _____
Home Phone () _____ Work Phone () _____
Cell Phone () _____

3. Name _____
Relationship to Student _____
Address _____
Home Phone () _____ Work Phone () _____
Cell Phone () _____

2. Name _____
Relationship to Student _____
Address _____
Home Phone () _____ Work Phone () _____
Cell Phone () _____

4. Name _____
Relationship to Student _____
Address _____
Home Phone () _____ Work Phone () _____
Cell Phone () _____

Medications _____

I will not hold the school district financially responsible for the emergency care and/or transportation for said child.

Signature of Parent/Guardian

Date: _____

The information above is true and current. I understand that I am to inform school officials any time legal custody, address, or phone numbers change.

Student Signature

Date

Parent/Guardian Signature

Date

**NETTLETON SCHOOL DISTRICT
HEALTH INFORMATION SHEET**

Student's Name: _____

Grade: _____ Homeroom Teacher: _____

DOB: _____ Age: _____ Race: _____ Sex: _____

Address: _____

Telephone: _____ Cell: _____

Father/Guardian: _____ Place of Work: _____

Work Phone: _____ Cell: _____

Mother/Guardian: _____ Place of Work: _____

Work Phone: _____ Cell: _____

Allergies: _____

Family Physician: _____ Phone: _____

Emergency Contacts (other than parent/guardians)

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Please check what student may be given at school:

_____ Tylenol _____ Cough Drops _____ Mylanta/Tums _____ Benadryl (if bee/wasp sting)

Please list the student's past health history (hospitalizations, asthma, diabetes, etc.)

Daily Medications (medications/dosage/time): _____

I, the undersigned, give Nettleton School District my permission for treatment for accidents or any medical problems pertaining (student name) _____. In the event of a medical emergency, I give my consent to have my child taken to a local emergency room, and further, I assume all necessary expenses. I understand that any information contained within this document shall be shared with school personnel as deemed necessary.

Parent/Guardian Signature

Date

Nettleton School District Acceptable Use Policy

Access to e-mail and the Internet enables students, staff, administration, and parents in the school setting to explore thousands of libraries, databases, and bulletin boards while exchanging messages with Internet users throughout the world. Families are warned that some materials accessible via the Internet may contain items that are illegal, defamatory, inaccurate, or potentially offensive to some people.

While the school's intent is to make Internet access available to further educational goals and objectives, individuals may find ways to access other materials as well. We believe that the benefit to students from access to the Internet, in the form of information resources and opportunities for collaboration, exceed any disadvantages. Ultimately, parents and guardians of minors are responsible for setting and conveying the standards that their children should follow when using media and information sources. To that end, Nettleton School District supports and respects each family's right to decide whether to apply for access. Adults in the school setting are reminded of the intent of school computers and Internet access and agree to abide by school use policies. School users are responsible for good behavior on school computer networks just as they are in a classroom, office, or any school structure.

Communications on the networks are often public in nature. General school rules for behavior and communications apply. The network is provided to conduct research and to communicate with others. Access to network services is given to students and adults who agree to act in a considerate and responsible manner. Parent permission is required for all students. Access is a privilege, not a right. Access entails responsibility. Likewise, school personnel and parents at school are expected to abide by the same decorum. Individual users of the district computer networks are responsible for their behavior and communications over those networks. It is presumed that users will comply with district standards and will honor agreements they have signed. Beyond the clarification of such standards, the district is not responsible for restricting, monitoring, or controlling the communications of individuals utilizing the network.

Within reason, freedom of speech and access to information will be honored. During school, teachers will guide them toward appropriate materials. Outside of school, families bear the same responsibility for such guidance as they exercise with information sources such as television, telephones, movies, radio, and other potentially offensive media.

Any NSD device checked out by a student from NSD will be the responsibility of the student and/or student's parent/guardian. Devices can be checked out on a daily basis and must be returned the following morning. All devices and accessories must be returned in satisfactory condition.

As outlined in Board policy and procedures on students' rights and responsibilities, copies of which are available in school offices, the following are NOT permitted:

1. sending or displaying offensive messages or pictures
2. using obscene language
3. harassing, insulting, or attacking others
4. damaging computers, computer systems, or computer networks
5. violation of copyright laws
6. using another's password
7. trespassing in another's folders, work, or files
8. intentionally wasting limited resources
9. employing the network for commercial purposes

Violations may result in loss of access as well as other disciplinary or legal action.

Student's signature: _____ Parent Signature: _____

Adult User's Signature _____ Date: _____

