

# **Powhatan County Public Schools**

**Student Registration Form** 

Student Information			Stude	ent ID#	
Student's Full Legal Name (Exactly as shown	on birth certificate)			(For	Office Use)
Legal Last Name	Legal First Name		Legal Middle Name	5	Suffix
Date of Birth://	Gender:		Grade	2:	
Primary Language Spoken: What is the language most often spoken by What is the primary language used in the ho What is the language that the student first a Is the student an Immigrant? Immigrant – Individuals who are school aged 3 through attending one or more schools in any one or more Stat	ome (regardless of the language acquired? entry date in U.S. Scho n 21; were not born in any Stat	ge spoken by the stude Ols e of the United States of	nt)?	No	
Ethnic Group – The US Department of Education race. If both questions are not answered, school perso         Is the student Hispanic or Latino?         Race – Select all that apply         American Indian or Alaska Native	nnel are required to make sele No – Not Hispanic or La	ctions for both. atino	□Yes – Hispa	nic or Latino	
Military Connected Student  Student Student Student Student Student Student is a dependent of a member of Oceanic and Atmospheric Administration, or the Comm Reserve: Student is a dependent of a member of the National Guard: Active or Reserve	nissioned Corps of the U.S. Pub	lic Health Services)		Commissioned Cor	os of the National
Primary Household/Address of Student	/Enrolling Parent/Lega	l Guardian (where	student resides)		
Primary Parent/Guardian 1 (First, Last)	, - 0 , -0-	□ Mother □ Fath		lian 🗆 Foster P	arent
		Stepparent	Grandparer	nt 🗆 Other	
Primary Parent/Guardian 2 (First, Last)		🗆 Mother 🗆 Fath	er 🗆 Legal Guard	lian 🗆 Foster P	arent
		Stepparent	Grandparer	nt 🗆 Other	
Street Address		City		State	Zip
Primary Household – Parent/Guardian 1 Phones		Primary Household – Pai	rent/Guardian 2 Phones		
Lieme Dhone		Lloma Dhana			
Home Phone		Home Phone			
Work Phone		Work Phone			
Cell/Other Phone		Cell/Other Phone			
Email Address: Please provide an email address that we may	use to send information intended	for members of the studer	t's primary household.		



Secondary Household/Parent/Legal Guardian	Should this household receive mailings? $\Box Yes \ \Box No$			
Secondary Parent/Guardian 1 (First, Last)	□ Mother □ Father □ Legal Guardian □ Foster Parent			
	Stepparent     Grandpare	ent 🗆 Other		
Secondary Parent/Guardian 2 (First, Last)	t/Guardian 2 (First, Last) <ul> <li>Mother</li> <li>Father</li> <li>Legal Guardian</li> <li>Foster Parent</li> <li>Stepparent</li> <li>Grandparent</li> <li>Other</li> </ul>			
Street Address	City	State	Zip	
Email Address: Please provide an email address that we may use to send information		ondary nousenold.		
Secondary Household – Parent/Guardian 1 Phones	Secondary Household – Parent/Guardian 2 Pho	nes		
Home Phone	Phone         Home Phone			
Work Phone	Work Phone			
Cell/Other Phone	Cell/Other Phone			

### **Emergency Contacts**

Emergency Contact 1 (Other than parent/guardian) (	First, Last)	Relationship:		
Primary Phone	Other Phone		Permission to Rel	ease to Emergency Contact?
			□Yes □No	
Emergency Contact 2 (Other than parent/guardian) (I	irst, Last)	Relationship:		
Primary Phone	Other Phone		Permission to Rel □Yes □No	ease to Emergency Contact?
Emergency Release Authorization may be released to the person(s) listed above Legal Parent/Guardian Signature				ardian(s), I authorize that my child
Foster Care Placement Information Is student in a Foster Care Setting Name of State, County, City, or Agend	;? 🗆 No 🗆 Yes: DSS En	rollment Form Comple	ete? 🗆 Yes 🗆 No	Completed BID?        Yes    No
Pre-Kindergarten Experience Info	rmation			

### 🗆 Head Start 🔅 Public Preschool 🗆 Private Preschool/Daycare 🗅 Dept. of Defense Child Dev Prg 🔅 Family Home Daycare 🗅 No Preschool Experience

Average weekly time in Pre-K program? 🗆 No time in a formal or institutional Pre-K Program 🗆 Less than 15 hours 🗆 15-29 hours 🗆 30 or more hours

#### **Student Services Information**

Does this student have a current IEP (Individualized Education Plan)? Ves No Has this child ever had an IEP (Individualized Education Plan)? Ves No Does this child have a current 504 Plan? Does this child receive ESL (English as a Second Language) Services? Ves No Has your child ever been evaluated by Powhatan County Public Schools? Yes No Has your child ever been enrolled in, or received services from, Powhatan County Schools? No Yes, when? \_\_\_\_\_



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### **Expulsion and Conviction/Adjudication Affirmation**

Prior to enrolling a child, pursuant to Code of Virginia Section 22.1-3.2, the parent must affirm whether this child has ever been (i) expelled from school attendance at a private school or in a public school division of the Commonwealth or another state for an offence in violation of school board policies relating to weapons, alcohol or drugs, or for the willful infliction of injury to another person, and/or (ii) found guilty or adjudicated delinguent for any offense listed in subsection G of the Code of Virginia Section 16.1-260 or any substantially similar offense under the laws of any state, the District of Columbia, or the United States or its territories. It is a Class 3 misdemeanor to make a materially false statement or affirmation under this section.

(i) By signing this form, I affirm that this child  $\square$  HAS  $\square$  HAS NOT been expelled from school attendance.

(ii) By signing this form, I affirm that this child 🗆 HAS 🗆 HAS NOT been found guilty or adjudicated delinquent for any offense referenced herein.

Sibling Information – Please list the first and last name(s) of any siblings of this student that currently attend a Powhatan County Public School.

Last Name	First Name	Current School Attending

### **Court Order Information**

Does your child have court restrictions regarding a parent/legal guardian contact? Yes No (If yes, please provide copy of court documents)

\_\_\_\_\_ Court Order Type: \_\_\_\_\_\_ Order Locality: \_\_\_\_\_\_ Date of Order:

Student educational records and/or student will be released to parent/guardian unless a court order specifically prohibits contact or release with parent/guardian. Enrolling parent/legal guardian is responsible for providing current copies of all court orders.

Section 22.1-264.1 of the Code of Virginia states that, "Any person who knowingly makes a false statement concerning the residency of a child... in a particular division or school attendance zone... shall be guilty of a Class 4 misdemeanor and shall be liable to the school division in which the child was enrolled as a result of such false statements for tuition charges."

CAUTION: A student may attend a public school in Powhatan County only is he/she is living in Powhatan County with a natural parent, a person having legal custody by court order, or a court appointed guardian, and the student carries on the normal activities of daily living at the residence of that person.

I authorize Powhatan County School Board to verify the accuracy of the information on this form with governmental agencies, landlords, lenders, and other sources. I authorize the Powhatan County School Board to rely on and use any information received from such contacts. If any change occurs in my residency after I submit this form, I am responsible for immediately notifying my child's/children's school(s) of the change. Powhatan County School Board reserves the right to request updated verification of Powhatan residency at any time.

## Legal Parent/Guardian Signature Date

### For Office Use Only:

Student ID #	Enrollment Grade:		Enrollment Date:		
Transferring From:		District:			
Birth Certificate #: Place of Birth (City, State, Cour		ty):	Notarized Statement: 🗖 Yes 🗖 No		
Utility Bill Type:			Proof of Residency:		
Verified By:		Lease Deed Mortgage Statement			