FRONTIER CENTRAL SCHOOL DISTRICT

Non-Public School

Enrollment Application & Registration Form

Student Information:				Male Fe	male	Grade
	Last	First	Middle			
Child's Date of Birth: _	//	-	New:	Re	newal:	
Child's Legal Residence						
	House # &	Street Apt. #		City/town	Zip code	
Previous Address:	House # & Stre	et Ant #		City/town Z	Zin code	
Child's Ethnic Group:(circ		-	African American Hisp	•	•	Indian/Alaskan Native
Chiu s Linnic Group. (cire	ne un inui uppiy)		Native Hawaiian/Pacific Isl			muum/Atuskun Ivative
Entry Date to U.S. (if not b	oorn in U.S.)		Dominant Language:			
Interpretive Services Need	'ed:					
Country of Birth:			Years in U.S. Schools	÷		
School Name	Address				Grad	le
	at reside in the So	chool District, at	ompleting this Applicated the same address indicated Last			or guardian
W Phone:	C Phor	ie:	email address:			
Current Address:						
House	#. & Street Apt. #	City/town Zip code				
Own Lease/Rent Lengt	th of time livin	g there:				
If current address is lea	sed or rented,	provide full nan	ne, address and telephor	ne number(s) o	of each La	ndlord:
Most Recent Prior Add	ress:					
	House # &	Street Apt #			City/to	wn Zip code
Own Lease/Rent Lengt	h of time livin	a there:				

• Information of Parent/Gua	rdian # 2 :						
First 1	Middle		Le	ast			
Relationship to Student:							
W Phone:	C Phone:			email address:			
Parent/Guardian # 2 resides at	the same	address as	s Student'	? Yes No			
(If 'Yes' skip to •Additional P	arent/Gua	rdian Inf	ormation)	If 'No', provide current	address:		
Current Address: House No. & St	waat Ant No			City/town	7 in code		
Own Lease/Rent Length of ti					Σιρ τομε		
Does this address require stude							
2000 tino dudi ess require sud	·····	50. 100	110				
• Additional Parent/Guardi	an Inforr	nation:					
Student is living with (circle o	nly one):						
Both Parents Mother only Fath	er only Ar	n Agency	Alone G	uardian(s) A Spouse/Partn	ner Foster Parent (DSS-2999)		
Joint Custody Yes No No	te: A copy	of most re	cent court	document designating custo	dial parent/guardian is required.		
If you are not a parent of the c	hild, are y	ou a legal	guardian	? Yes No If yes, provide	de a copy of court documents.		
If you are not yet a legal guard	lian, do yo	ou plan to	file for g	uardianship? Yes No			
Have both natural parents tran	sferred per	rmanent c	custody ar	nd control of the child to y	you? Yes No		
Note: The District may requi	ire additio	onal writ	ten infor	mation if the child is not	living with either parent.		
• Sibling Information:							
NAMES OF SIBLINGS OF STUDEN	Γ DOB	GENDER	GRADE	CURRENT SCHOOL	SCHOOL FOR COMING YR		
		M F					
		M F					
	_	_ ''' '					
		_ M F		_			
• Emergency Contact Inform	ation:						
Emergency Contact Inform	<u>1411011</u> .						
. Name:			2.N	ame:			
Phone #s: Home:	Cell:		Pho	ne #s:Home:	Cell:		
Address:			Ad	dress:			
House # Street Apt. # City	v/town Zip c	ode		House # Street Apt. # C	City/town Zip code		
Relationship to child:			Rel	Relationship to Child:			

*Important Notice About the Rights of Non-Custodial Parents:

Employee Signature____

Non-custodial parents have a right to participate in their child's school programs and activities and to obtain information about their child's education on the same basis as a custodial parent/guardian of the child. An exception to this general rule is made when the District is provided with a court order that deprives the non-custodial parent of one or more of these rights.

In the absence of being provided with a court order that limits the rights of a non-custodial parent, the District will presume that the non-custodial parent has the right to request information concerning his or her child, and to participate in the child's school programs and activities on the same basis as a custodial parent/guardian of the child. Are you in possession of a court order that limits a non-custodial parent's access to the child, the child's school programs and activities, or the child's educational records? □Yes □No If you answered Yes, then you must attach a copy of the order to this application. I understand that with my failure to provide a court document designating custodial parent/guardian, the Frontier Central School District will not be held responsible for releasing my child, ______, to his/her alternate parent. Signature _____ If you answered 'No', and you believe that there is a reason why a child's non-custodial parent should not have access to the child, the child's school programs and activities, or the child's educational records, then it is your responsibility to apply for an appropriate court order. If you obtain such an order after the date of this application, you must promptly deliver a copy of the court order to the District's Registrar. *Certification and Authorization of Parent Completing this Application I, the undersigned, am the parent/guardian of the child listed on this Enrollment Application. I have completed this Application and provided the attached documents with the understanding that the District will rely upon the same to determine whether my child is legally entitled to enroll as a student of the District. I am aware that the provision of any false information or fraudulent documents to the District may constitute a crime. I further certify that I am a resident of the District, and that the information and documents provided in support of this Application are accurate and truthful. I authorize the request of student records from prior schools and give permission to the District to verify any and all information provided in support of this Application. I acknowledge that the District reserves the right to investigate, at any time, the accuracy of all information and documents that I have submitted or will submit in support of this Application. I also promise to promptly notify the District when any supporting information or document that has been provided to the District is no longer accurate or up to date. I understand that if the District discovers that my child is not a legal resident of the District, my child will not be permitted to attend District schools and I may be liable for the cost of education for each day he/she attended as a non-resident. Date: ___/___ Parent/Guardian Signature: Parent/Guardian Name (print): ______ District Employee and Date Received by Frontier Central School District

Date: ___/___