



MOUNT VERNON CITY SCHOOLS RECORDS REQUIRED TO ENROLL

Student Name: _____

School: _____

Date of Enrollment: _____

The following items are required before your student may attend classes at Mount Vernon City Schools.

Driver's License or Photo Identification: Must have photo identification of legal guardian.

Proof of Residency: The following may be used as residency: utility bill, must be either gas, electric or water, purchase agreement for new home, lease agreement for rental property, rental or homeowner's insurance policy or statement, voter registration card, driver's license or state ID with current district address, tax bill, paycheck/employer letter (on employer letterhead), or motor vehicle registration.

Custody Papers: Must have current custody papers. If custody papers are in process we must have notification from the courts stating this.

The following items are required to attend school and must be provided within 14 days of enrollment in Mount Vernon City Schools.

Birth Certificate: (Official State Certified) – Must have within 14 days of entry, as per Ohio Revised Code 3313.672. If not received by the 14th school day, the school shall notify the law enforcement agency having jurisdiction of the possibility that the pupil may be a missing child as defined in Revised Code Section 2901.50. The child will either be withdrawn or tuition payment will be collected.

DATE DUE: _____

Health Records: Must have within 14 school days of entry, as per Ohio Revised code 3313.671. If not received by the 14th school day, the student will no longer be allowed to attend school until we do receive health records.

DATE DUE: _____

Other: _____

I understand the above and will supply the needed papers to comply with the deadlines of all Ohio Laws and Mount Vernon City Schools Board Policy mentioned above.

Parent/Guardian Signature: _____

Date: _____ Phone: _____



MOUNT VERNON CITY SCHOOLS REGISTRATION

SCHOOL YEAR: _____

Student Information

Student Legal Name: _____
(as appears on birth certificate) *First* *Middle* *Last*

Preferred Name: _____

Student address: _____ City: _____ Zip Code: _____

Mailing address: _____ City: _____ Zip Code: _____

Phone: _____ Unlisted? **Y** **N** Alternate Phone: _____

Birth date: _____ City of birth: _____ Social Security Number: _____

Gender M: ___ F: ___ U.S. Citizen **Y** **N** Entering grade: _____

Resident Student

Open Enrollment

Foster/Court Placed

Has student previously attended school in Mount Vernon City Schools? **Y** **N**

If yes, Grade: _____ Year: _____

Is your child currently expelled or suspended from another school? **Y** **N**

Last school attended: (include preschool if in kindergarten) _____

School Address: _____ City: _____ State: _____ Zip Code: _____

School district: _____ Phone: _____ Fax: _____

Family History

Please list this student's school age brothers and sisters:

<u>Sibling First Name</u>	<u>Sibling Last Name</u>	<u>Living with Student</u>		<u>Grade</u>	<u>School</u>
_____	_____	Y	N	_____	_____
_____	_____	Y	N	_____	_____
_____	_____	Y	N	_____	_____
_____	_____	Y	N	_____	_____
_____	_____	Y	N	_____	_____
_____	_____	Y	N	_____	_____

Office use only

Student I.D.: _____ Building: _____

Admission date: _____ (first day of attendance)

Open enrollment pending from: _____ to _____
(School) *(School)*

Special Ed. /IEP: **Y** **N** Speech: **Y** **N** Gifted Services: **Y** **N** KCCC (HS only) : **Y** **N** CRC: **Y** **N**

Biological parent's marital status: married separated divorced widowed never married

Father Name: _____
(Father on birth certificate)

Address: _____
(If different from student)

City: _____ State: _____ Zip: _____

Phone: _____

Legal custody, if applicable

Mother Name: _____
(Mother on birth certificate)

Address: _____
(If different from student)

City: _____ State: _____ Zip: _____

Phone: _____

Legal custody, if applicable

Complete if other than parent has legal custody

Legal Guardian Name: _____

Address: _____ City: _____ State: _____ Zip: _____
(If different from student)

Phone: _____

____ Step-parent ____ Guardian ____ Grandparent ____ Relative ____ Other (specify) _____

Please mark one item in each of the two sections below.

Homeless Status Element:

- ____ Not Applicable
- ____ Homeless Shelter – A student residing in a homeless shelter (either emergency or transitional) because there are no other living accommodations available. Should a student subsequently be placed in a foster home or a facility for neglected or delinquent children or youth, he/she should no longer be considered homeless.
- ____ Unsheltered – A student who is temporarily staying in unsheltered situations (i.e. cars, trailer parks, camping areas, abandoned buildings, bus or train stations, etc.) because he/she lacks adequate living accommodations. Those living in trailer or camping areas on a long-term basis in adequate accommodations should not be considered homeless.
- ____ Doubled – Up – A student who is sharing housing with other families or individuals because of a loss of housing or other similar situations.
- ____ Hotel/Motel – A student temporarily living in hotels or motels because he or she lacks adequate permanent housing.

Homeless Unaccompanied Youth Element (A homeless student not in the physical custody of a parent or guardian):

- ____ Not Applicable – only to be used if not applicable was reported in the Homeless Status Element
- ____ No
- ____ Yes

Available to volunteer at school? ____ Yes ____ No

Signature of Parent/Legal Guardian

Date



Student Name: _____

Is your child an "Immigrant Student"? Yes No

Per Section 3301(6) of the Elementary and Secondary Education Act, an immigrant student is a student who is age 3 through 21; was not born in any State; and has not been attending one or more schools in any one or more State for more than 3 full academic years.

Is your child Hispanic/Latino Element? Yes (Hispanic/Latino) No (Hispanic/Latino)

Racial/Ethnic Group Element (check all that apply) biological father and mother of child

- White, Non-Hispanic: People who have origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black or African American, Non-Hispanic: Persons having origins in any of the black racial groups in Africa
- Hispanic/Latino: Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race. (Valid only when the race/ethnic data was not re-collected or the Hispanic/Latino element is yes)
- Asian: Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaskan Native: Person having origins in any of the original peoples of North and South American (including Central America) and who maintain tribal affiliation or community attachment.
- Native Hawaiian or Other Pacific Islander: Persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Is your child "Limited English Proficient"?

Yes – Limited English Proficient student who has been enrolled in US schools for more than 180 days OR previously exempted from taking the spring administration of either of the State’s English language arts assessments (reading or writing)

No – The student is not Limited English Proficient

Limited English Proficient – enrolled in US schools for the first time. A recently arrive Limited English Proficient student who has been enrolled in US schools for no more than 180 school days AND NOT previously exempted from taking the spring administration of either of the State’s English language arts assessments (Reading or Writing).

If LEP, list the languages that your child speaks _____

Has student attended any other school in Ohio? **Y** School: _____ **N**

Native Language (required, check one) This is often the language spoken at home but should denote the primary language spoken by the student at the onset of speech.

- | | | | |
|--------------------------------------|------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> English | <input type="checkbox"/> Cantonese | <input type="checkbox"/> Korean | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Trigriyan | <input type="checkbox"/> Albanian | <input type="checkbox"/> Creole(French) | <input type="checkbox"/> Laotian |
| <input type="checkbox"/> Serbo Croat | <input type="checkbox"/> Ukrainian | <input type="checkbox"/> Amharic | <input type="checkbox"/> German |
| <input type="checkbox"/> Navajo | <input type="checkbox"/> Somali | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Portuguese |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Hmong | <input type="checkbox"/> Spanish | <input type="checkbox"/> Cambodian |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Romanian | <input type="checkbox"/> Tagalog | <input type="checkbox"/> Other |



MOUNT VERNON CITY SCHOOLS AFFIDAVIT OF CURRENT RESIDENCY

*** NOTICE***

The yearly tuition rate for Mount Vernon School District is: \$5,017.07 in state.

The making of a false statement on this form for the purpose of enrolling a child without tuition is a criminal offense as follows:
O.R.C 2913.02 Theft by Deception and O.R.C. 2913.13 Falsification and may be punishable as a felony according to the amount of tuition owed.

1. Parent/Guardian Name: _____
2. Student Name: _____ Student School: _____
3. Address: _____
City: _____ State: _____ Zip Code: _____
4. Phone number: _____
5. Verify current address by attaching a copy of one of the following:

Utility bill, must be either gas, electric or water, purchase agreement for new home, lease agreement for rental property, rental or homeowner's insurance policy or statement, voter registration card, driver's license or state ID with current district address, tax bill, paycheck/employer letter (on employer letterhead), or motor vehicle registration.

Signature: _____ Date: _____

6. **ONLY COMPLETE THE SECTION BELOW IF YOU ARE UNABLE TO PRODUCE THE DOCUMENTS SPECIFIED IN #5, because you are living with family or friends. You must provide the information requested below (in a, and b) at the time of registration each school year.**

(a) Residency Affidavit – to be completed by person providing housing

I certify by providing proof of residency as listed above in #5 that I am the owner or tenant of the dwelling located at the address listed above in #3. I further certify that I am the owner or tenant of the dwelling located at the address listed above in #3. I further certify that the persons listed above in #1 & #2 actually reside at this dwelling and are not maintaining a separate residence, as that term is defined for public school admission, elsewhere. I certify that the above information is true and accurate and acknowledge that the Mount Vernon City School District may use any legal means to verify my address. I realize that should any of the above statements be false, I may be liable for any penalties for which the law provides. I further acknowledge that this certification is valid only for the _____ (current) school year.

Signature of Owner/Tenant Date

Print Name of Owner/Tenant and Phone Number

Sworn to and subscribed before me
Notary Public _____
This _____ day of _____, 20____.

Commission Expires: _____

(b) Oath of Residency – to be completed by parent or guardian registering student

I, the parent/guardian of the student listed in #2 hereby certify that I have established residency, on a full-time basis, in the Mount Vernon City School District and am not maintaining a separate residence, as that term is defined for public school admission, elsewhere. I am aware that the Mount Vernon City School District may use any legal means necessary to verify that I am living at the address stated in #3 and acknowledge that if any of the above statements are false, I am liable for any penalties that the law may provide. Further, if any of this information is false or if I move out of the district, I agree to pay the tuition costs of \$ 27.87 per day/per student) to cover the period during which the student listed in #2 illegally attended the Mount Vernon City Schools.

Signature of Legal Guardian Date

Print Name of Legal Guardian and Phone Number

Sworn to and subscribed before me
Notary Public _____
This _____ day of _____, 20____.

Commission Expires: _____



MOUNT VERNON CITY SCHOOL DISTRICT (IRN: 044420)
REQUEST FOR TRANSFER OF STUDENT RECORDS

Resident Open Enrollment Foster/Court Placed Other _____

Student Name: _____

Birth Date: _____ Grade: _____ Start Date: _____

Previous School: _____

Previous School Fax: _____

Parent/Guardian: _____

Address: _____

Home Phone: _____ Cell Phone: _____

The Parent/Guardian of the above student has requested enrollment in the Mount Vernon City School District. Please forward the selected information as soon as possible.

- | | | |
|--|---|--|
| Birth Certificate | IEP/ETR/504 (if any) | Custody/Other Legal Documents |
| Attendance Records | Course/Grade History | Health/Immunization Record |
| Transcript of Grades | ACT/SAT Scores - HS | OGT Scores – 10 th – 12 th |
| KRA – Kindergarten | OAA – 3 rd – 8 th | Third Grade Guarantee – K-3 rd |
| OTELA – (English 2 nd Language) | | |

Please send records by mail, fax or email to:

Mount Vernon City Schools
Attn: Debi Doup
300 Newark Road
Mount Vernon, OH 43050

Fax: (740) 393-5949
Email: dedoup@mvcasd.us

Special Education records can be faxed or emailed to Sabrina Wicker at:

Mount Vernon City Schools
Attn: Sabrina Wicker
300 Newark Road
Mount Vernon, OH 43050

Fax: (740) 393-5946
Email: swicker@mvcasd.us