

North Colonie Central Schools

Office of the Registrar
91 Fiddlers Lane
Latham, NY 12110

Phone: (518) 785-8591, x3135
Fax: (518) 783-0471 www.northcolonie.org

Dear Registering Family:

Welcome to the North Colonie Central School District!

Attached are the forms necessary to register your child(ren) for CPSE. Please fill them out completely providing all requested information. If you need assistance in completing the forms, please call us to discuss.

Please read the “Registration Checklist” carefully! This sheet lists all the required documents needed to register for CPSE services.

Upon completing all of the necessary forms, please either fax them to (518) 783-0471 or email to Courtneydicocco@ncolonie.org.

Sincerely,

Central Registrar

North Colonie Central Schools

REGISTRATION CHECKLIST

Items required at time of registration:

One of the following:

Deed or Mortgage

Or

Current Rental Lease Agreement

- A copy of a residential lease; deed; or mortgage statement;
- A statement by third-party landlord, owner, or tenant from whom the parent(s)/guardian(s) lease from or live with (either sworn or unsworn);
- Such other statement(s) by third party establishing the physical presence of the parent(s)/guardian(s) in the school district

Contract to Build/Buy a Home

(For September entrance into current school year only)

In the absence of the above, the following forms of documentation shall be considered for the purposes of determining residency; **(Documents must be current and originals. We will copy and return the original to you at your appointment.)*

- Pay stub from Employer;
- Income Tax Form;
- Utility or other bills;
- Membership documents based on residency (ex: library card)
- Voter Registration documents;
- Official driver's license, learner's permit or non-drive ID;
- State or other government issued ID;
- Documents issued by Federal, State or Local Agencies;
- Evidence of custody of the child(ren), including but not limited to judicial custody orders or guardianship papers

Documentation Necessary to Establish Student Age:

In addition to the foregoing documentation, the School District requires appropriate documentation sufficient to establish the age of the child(ren) being registered. The following documentation will be required at the time of registration:

- Certified transcript of a birth certificate or record of baptism; or if not available;
- A passport (including foreign passport)

North Colonie Central Schools

REGISTRATION CHECKLIST

If the foregoing documentation is not available to prove age, the School District will consider other documentary evidence, including but not limited to:

- Official driver's license;
- State or other government issued ID;
- School photo ID with date of birth;
- Consulate ID card;
- Hospital or Health Records;
- Military dependent identification card;
- Documents issued federal, state, or local agencies
- Court orders or other court-issued documents;
- Native American tribal documents;
- Records from non-profit international aid agencies and voluntary agencies

If relevant, additional documentation needed for school information:

- IEP (Individualized Education Plan) from previous school district
- Section 504 documentation from previous school district
- Last report card for placement purposed

Additional Information:

A health physical must be provided in order to attend school. The exam must have been performed within the 12 months prior to the child's start date in our school district. If a physical has not been performed, you are allowed 30 days from the start of school to obtain one. **"The Health Certificate/Appraisal Form"** is provided for your doctor's use. *Please note that the most current immunization records are **REQUIRED** in order to register your child(ren).*

Please have all enclosed forms completed prior to your registration appointment for efficiency.

North Colonie Central School District

91 Fiddlers Lane
Latham, NY 12110

Pupil Registration

(Please print neatly and complete all information)

For School Use ONLY - to be completed by office personnel only.

Registrar's Init. _____ School Attend _____

Student ID# _____ Household Cd _____

Start Date _____ Homeroom _____

Grade Level _____ Counselor _____

Data Entered By _____ Date _____

-- PART I --

Student Information

Please fill in the information below as it appears on the student's birth certificate

First Name: Middle Name: Last Name: Suffix

Primary Household Address

Address Information

Residential 911 Street Address (Required)

House/Building # Street Name Apt #
City State Zip

Mailing Address (if different)

House/Building/PO# Street Name Apt #
City State Zip

Daycare Transportation

Will your child need transportation to and from a daycare provider within the North Colonie CSD? Yes No
(NOTE: Agreement to provide transportation to and from daycare is contingent upon availability.)

(NOTE: If "Yes", a separate request for daycare transportation must be submitted directly to the Transportation Department. Forms are available from the Registrar, or may be submitted online at www.northcolonie.org/transportation }

Support Services

Has your child received special education service(s) or accommodation(s) through an:

Individual Education Plan (IEP)? Yes No

Section 504 Plan Only? Yes No

(Please print neatly and complete all information)

-- PART II --

Household Information (Please read carefully and answer all sections.)

Primary Household Information (non-custodial parent/guardian information is entered on a different form)

Parent/Guardian/Person in Parental Relationship Information (living at Primary Household)

First parent/guardian

Relationship to student:

First Name: Last Name: Suffix

Home Phone#: Cell#: Work#:

Phone numbers with extensions will not work with our auto-dialer system. Do NOT list phone numbers with extensions.

Second parent/guardian: (living at Primary Household)

Note: If second parent/guardian does not live with the child, do not complete this section.

Relationship to student:

First Name: Last Name: Suffix

Cell Phone#: Work#:

Phone numbers with extensions will not work with our auto-dialer system. Do NOT list phone numbers with extensions.

I agree that all information answered above is accurate and acknowledge that false information may result in denial of admission or revocation.

Parent/Guardian Signature: _____ Date: _____ / _____ / _____
(mm) (dd) (yyyy)

You may either e-mail this complete form to the Central Registrar of the North Colonie CSD or print this completed form and bring it with you to your registration appointment with the Central Registrar of the North Colonie CSD.

(please note, if you e-mail the form, you will still need to set up an appointment to meet with the Central Registrar of the North Colonie CSD to complete the registration of your child.)

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91 Fiddlers Lane
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Pupil Demographic Information

(Please print neatly and complete all information)

For School Use ONLY - to be completed by office personnel only.

Registrar's Init. _____	School Attend _____
Student ID# _____	Household Cd _____
Start Date _____	Homeroom _____
Grade Level _____	Counselor _____
Data Entered By _____	Date _____

-- **PART I** --

Student Information

Please fill in the information below as it appears on the student's birth certificate

First Name: Middle Name: Last Name: Suffix:

Date of Birth: Nickname: Gender: M F

Place of Birth: City State/Province Nation:

OFFICE USE ONLY: U.S. C BC: Yes No

Race/Ethnicity Category :

Please answer questions (1) and (2). PLEASE READ THEM BEFORE YOU RESPOND.

1.) Is the student Hispanic, Latino, or of Spanish Origin? Hispanic, Latino, or of Spanish origin means a person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.

- Yes, Hispanic
 No, not Hispanic

2.) Select one or more races from the following five racial groups [For question (2) Check (✓) all groups that apply to your child; check (✓) at least ONE box.]:

- AMERICAN INDIAN OR ALASKA NATIVE: A person having origins in any of the original people of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- ASIAN: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- BLACK OR AFRICAN AMERICAN: A person having origins in any of the the Black racial groups of Africa.
- WHITE: A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Living Arrangements: (Please check only one.)

- In permanent housing
 - In a shelter
 - In a hotel/motel
 - In a car, park, bus, train, or campsite
 - With another family or other person because of loss of housing or as a result of economic hardship (sometimes referred to as a "doubled-up")
 - Other temporary living situation (Please describe):
-

Immigration data:

Has the student emigrated from another country into the U.S.? Yes No

First day in U.S. schools (continuous enrollment)

Support Services

Primary language spoken at home (list only one):

Has your child been identified as Limited English Proficient or ever received English as a Second Language services? Yes No

Is the student the child of migrant workers?

Yes No

Is the student in Foster Care?

Yes No

Is the student a child of a parent or guardian who is a member of the Armed Forces and on full-time Active Duty? (Army, Navy, Air Force, Marine Corps, Coast Guard or full-time National Guard)

Yes No

(Please print neatly and complete all information)

-- PART II --

Household Information (Please read carefully and answer all sections.)

Primary Household Information (non-custodial parent/guardian information entered on page 4)

Parent/Guardian Information (living at Primary Household)

First parent/guardian

Relationship to student:

First Name: Last Name: Suffix:

Do you have legal custody of the student being registered? Yes No

Do you have primary physical/residential custody of the child? Yes No

Second parent/guardian: (living at Primary Household)

Note: If second parent/guardian does not live with the child, do not complete this section; instead, enter this information on page 4.

Relationship to student:

First Name: Last Name: Suffix:

Do you have legal custody of the student being registered? Yes No

Do you have primary physical/residential custody of the child? Yes No

Sibling Information (Birth through Grade 12) (If you need more space, please attach an additional sheet of paper.)

Sibling #1 Name: Gender: M F Date of Birth:

Grade Level: School to Attend: Student ID#:

Sibling #2 Name: Gender: M F Date of Birth:

Grade Level: School to Attend: Student ID#:

Sibling #3 Name: Gender: M F Date of Birth:

Grade Level: School to Attend: Student ID#:

Pupil Demographic Information (page 4)

Student Name: _____

(Please print neatly and complete all information)

Secondary Household Information (if applicable)

Parent/Guardian Information (NOT living at Primary Household)

Can pick up student? Yes No (court order must be provided) Relationship to student: _____

First Name: _____ Last Name: _____ Suffix

Home Phone#: _____ Cell#: _____ Work#: _____

Phone numbers with extensions will not work with our auto-dialer system. Do NOT list phone numbers with extensions.

Address Information

House/Building/PO# _____ Street Name _____ Apt # _____

City _____ State _____ Zip _____

School Information

Has the student attended a North Colonie CSD public school before? Yes No

If yes, what year? _____ If yes, what school did they attend? _____

School transferring from: _____

School Address: _____

Date first entered 9th Grade: (High School students ONLY) _____

Reason for leaving: _____

Has the student ever been expelled from school? Yes No

If yes, please give details: _____

NOTE: When a family moves from the district, a student's academic records will be forwarded to the new school upon request. Transcripts of courses and grades earned will be sent to any college or employer where your child has filed an application. Transfer of other records and student data, however, requires written parent/guardian permission.

I agree that all information answered above is accurate and acknowledge that false information may result in denial of admission or revocation.

Parent/Guardian Signature: _____ Date: _____ / _____ / _____
 (mm) (dd) (yyyy)

You may either e-mail this complete form to the Central Registrar of the North Colonie CSD or print this completed form and bring it with you to your registration appointment with the Central Registrar of the North Colonie CSD.

(please note, if you e-mail the form, you will still need to set up an appointment to meet with the Central Registrar of the North Colonie CSD to complete the registration of your child.)