



CONNEAUT AREA CITY SCHOOLS

"Home of the Spartans"

Required Forms must be presented at time of Registration

Student Registration Checklist

Student Name _____ Date Enrolled _____

Homeroom Teacher _____ Room # _____ Grade _____

- Birth Certificate*
- Custody Papers* (please send copy to Student Services)
- Emergency Medical Authorization Form* (Please give to Nurse)
- Home Language Survey send to Director of Curriculum
- Immunization Records (Please give to Nurse)
- Mark in Entry/Withdrawal Book
- Parent/Guardian Photo Identification
- Proof of Residency – Two (2) required and Statement of Residency Form.
- Registration Form*
- Request for Records Form
- Special Education or 504 records copied and copy sent to Special Services
- AUP Form (Enter help desk ticket to Tech Dept. to create student account.)

*Please enter data in SIS

Middle/High School Only

- Add to Student Information for 9 week period
- Enter grades in course detail
- Locker and Book Assignment
- Schedule
- Transcript

Notified

- Classroom Teacher
- Food Service – Free/Reduced Meal Form
- Language Office
- Special Services
- Student Services
- Technology
- Transportation

Other

- All Documents Received
- Entered in Student Information

REV: 2020

230 Gateway Ave.
Conneaut OH 44030

Phone: 440-593-7200
Fax: 440-593-6253
Website: www.cacsk12.org