

♥ Welcome to Kindergarten

Parents,

Welcome to Union Center Elementary School. We look forward to working with your child.

Your Child's Name: _____
(Please print)

What is the name your child likes to use: _____
(Example: Tom or Tommy)

Has your child attended preschool? YES _____ NO _____

Where? _____ How many years? _____

Here is some information you might find helpful:

1. It is recommended that your child should have a physical and dental exam. **This is optional.** If you choose to have one, return a copy to the school nurse by the first day of school.
2. Make sure your child's immunizations are up to date.
3. Bus service is available to all students.
4. A supply list and the cost of school fees will be available at Registration in August.
5. All Kindergarten students must be officially registered in August at school registration.

BEFORE YOU LEAVE TODAY MAKE SURE YOU HAVE:

- ✓ Completed Student Information and Emergency Forms
- ✓ Turned in your child's birth certificate, immunization record & proof of residency to be copied
- ✓ Signed up for an assessment time

Kindergarten Roundup Checklist



Welcome to Kindergarten Roundup,

Your Child's Name: *(please print)* _____

What is the name your child likes to use: _____

Before you leave please...

1. ____ Complete the Yellow Registration sheet
2. ____ Let us make a copy of your child's birth certificate.
3. ____ Let us make a copy of your residency verifications
4. ____ Let us make a copy of your child's immunization records.

Please return the Health Appraisal form by the first day of school in August.

(It is recommended that each child have a physical and dental exam. These forms should also be returned by the first day of school.)

Has your child attended preschool? Yes ____ No ____

Where? _____

How many years? _____

Bus service is available to all students.

**ALL KINDERGARTEN STUDENTS MUST BE OFFICIALLY REGISTERED IN AUGUST AT
SCHOOL REGISTRATION.**

ATTENTION: Please complete/correct the information
Union Center Elementary School

Form Completed by: _____
Date: _____

Last Name _____
First Name _____
Middle Name _____
Nick Name _____
Phone _____

DOB _____
Address _____
City/State _____

Email (student) _____

911 Address _____
City/State _____
County _____ Township _____
Cell Phone (student) _____

RACE American Indian or Alaskan Native Hispanic
 Black not of Hispanic Origin White not of Hispanic Origin
 Asian or Pacific Islander Multiracial

Grade _____
Gender Male Female

Guardian Information

Guardian Father Foster Parent Grandparent Mother Other Parents Court papers on file at school

Email _____

Text Messaging Address _____

Responsible for Book Fees _____

Father

Last Name _____
First Name _____
Address _____

Cell Phone _____
Phone _____

Mother

Last Name _____
First Name _____
Address _____

Cell Phone _____
Phone _____

Guardian (if other than parent)

Last Name _____
First Name _____
Address _____

Cell Phone _____
Phone _____

Paternal Employer

Employer _____
Address _____

Work Phone _____ Ext. _____
Pager _____

Maternal Employer

Employer _____
Address _____

Work Phone _____ Ext. _____
Pager _____

Guardian Employer

Employer _____
Address _____

Work Phone _____ Ext. _____
Pager _____

Emergency Contact Information

Last Name	First Name	Phone	Relationship
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Physician Information

Physician _____ Phone _____ Health Concerns _____

Sibling Information

Name	Grade	Name	Grade
------	-------	------	-------

Student has received special education services or has an Individualized Education Plan (IEP) Yes No

Specify _____

Get Your Text Messaging Email Address

To do this, you first need to determine the email address for that phone or PDA. This is a necessary step if you want to receive school delays and cancellations as a text message.

The first part of the email address is the phone number with area code (without spaces or dashes). The second part is based on the company providing the cell phone service:

AT&T	@txt.att.net
Boost Mobile	@myboostmobile.com
Cingular	@mobile.mycingular.com
Cricket	@email.uscc.net
Nextel	@messaging.nextel.com
Qwest	@qwestmp.com
Sprint	@messaging.sprintpcs.com
T-Mobile	@tmomail.net
Tracfone	@cingularme.com
US Cellular	@email.uscc.net
Verizon	@vtext.com
Virgin Mobile	@vmobl.com

Example: The phone number (555) 123-4567 on an AT&T cell phone would be entered as 5551234567@txt.att.net

Union Township School Corporation

Mr. John Hunter, ED. S.
Superintendent

Mr. Jack Birmingham, ED. S.
Assistant Superintendent

599 W 300 N, Suite A
Valparaiso, IN 46385
Phone:(219) 759-2531 ~ Fax: (219) 759-3250
www.union.k12.in.us
"Every Student, Every Day"

Residency Affirmation – NEW STUDENT(S)

This form must be completed in the presence of a Union Township School Corporation staff member when enrolling a NEW student. (Note: Students who reside in the same household and attend the same school may have their names entered on one form.) The parent(s) and/or legal guardian(s), or emancipated student, must provide acceptable documentation of "legal residence" within the boundaries of the Union Township School Corporation. In addition, an emancipated student must provide proof of emancipation.

The term "legal residence" means the primary and principal place of habitation of the parent(s)/guardian(s), or emancipated student, meaning that the residence where the parent(s)/guardian(s), or emancipated student in question eat their meals and sleep on a regular basis, receive their mail, and, if applicable, where the parent(s)/guardian(s), or emancipated student are registered to vote. According to Indiana Code, "legal residence" "...means a permanent and principal habitation that an individual uses for a home for a fixed or indefinite period, at which the individual remains when not called elsewhere for work, studies, recreation, or other temporary or special purpose."

Student's Name(s) _____

School _____ Grade Level(s) _____

Parent's Name (Please Print) _____

Guardian's Name (Please Print) _____

The "Legal Residence" for the above named student(s) is:

(Street Number and Street) (City) (State) (Zip Code)

I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT THE FOREGOING REPRESENTATIONS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature(s) _____ Date _____

Source Document(s) _____

(Ex. Mortgage paperwork, lease agreement, current utility bill, vehicle registration, driver's license, EOB from health insurance, etc.) To be completed by school personnel and must have the current address on it.

School Corporation Personnel – Signature

NOTICE: READ CAREFULLY: Knowingly falsifying this document is a violation of Indiana Code (L.C. 35-44-2), which is a Class D Felony. Falsifying this document will result in the affiant being billed and prosecuted in court, if necessary, for all back tuition, which may be due. Providing inaccurate and/or false information will result in immediate exclusion or withdrawal of your child/children from the Union Township School Corporation.

Board of Trustees

Robert Gilliana Jr., President Stacey Buehler, Vice President Julie Giorgi, Secretary
Michael Simatovich, Deputy Secretary Bob Tichy, Member



Home Language Survey (HLS)

The Civil Rights Act of 1964, Title VI, Language Minority Compliance Procedures, requires school districts and charter schools to determine the language(s) spoken in each student's home in order to identify their specific language needs. This information is essential in order for schools to provide meaningful instruction for all students as outlined Plyler v. Doe, 457 U.S. 202 (1982).

The purpose of this survey is to determine the primary or home language of the student. The HLS must be given to all students enrolled in the school district / charter school. The HLS is administered one time, upon initial enrollment, and remains in the student's cumulative file.

Please note that the answers to the survey below are student-specific. If a language other than English is recorded for ANY of the survey questions below, the LAS Links placement test will be administered to determine whether or not the student will qualify for additional English language development support.

Please answer the following questions regarding the language spoken by the student:

1. What is the native language of the **student**? _____

2. What language(s) is spoken most often by the **student**? _____

3. What language(s) is spoken by the **student** in the home? _____

Student Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ **Date:** _____

By signing here, you certify that responses to the three questions above are specific to your student. You understand that if a language other than English has been identified, your student will be tested to determine if they qualify for English language development services, to help them become fluent in English. If entered into the English language development program, your student will be entitled to services as an English learner and will be tested annually to determine their English language proficiency.

For School Use Only:

School personnel who administered and explained the HLS and the placement of a student into an English language development program if a language other than English was indicated:

Name: _____ Date: _____

Student Name _____

Grade _____

Date of Birth _____

Country of Birth _____

Parent Signature _____

Districts must collect race and ethnicity information on students and staff using a *two part question*. The respondent must answer both questions.

Race and Ethnicity: *(Note: Both Part 1 and Part 2 of the question must be answered.)*

Part 1: Ethnicity Is this individual Hispanic/Latino? *(Choose only one)*

No, not Hispanic/Latino

Yes, Hispanic/Latino *(A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.)*

Part 2: Race What is the individual's race? *(Choose one or more)*

American Indian or Alaska Native: A person having origins in any of the original peoples of North America and maintaining cultural identification through tribal affiliation or community recognition.

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, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.