

REGISTRATION CHECKLIST | STUDENT NAME _____

Must provide **original documents** to be copied and filed

REGISTRATION STARTS ONLINE at www.palmyraschools.com

Menu > Registration > New Student OnCourse Online Registration Portal

REGISTRATION IS BY APPOINTMENT ONLY

Appointments can only be made **after** you have completed your online registration.

All Registrations are processed at the Board of Education offices located at:

30 West Broad Street Palmyra, NJ 08065

Parent Information

Valid Photo ID *choose one*

- ☐ Driver's License
- ☐ State ID
- ☐ Passport

First Proof of Residency *choose one*

MUST BE IN PARENT/GUARDIAN'S NAME

If not please see **Special Circumstances** below

- ☐ Mortgage Statement
- ☐ Title/Deed
- ☐ City Tax Bill
- ☐ Formal Lease
- ☐ Rental Agreement

Second Proof of Residency *choose one*

MUST BE IN PARENT/GUARDIAN'S NAME

If not please see **Special Circumstances** below

- ☐ Utility Bill (Electric, Water, Internet, etc.)
- ☐ Credit Card Statement
- ☐ Bank Statement
- ☐ Vehicle Registration

**Students coming from Beverly/Riverton do not need to provide Residency Proof (Valid Photo ID still required)*

Special Circumstances

If Proof of Residency is NOT in your name, the Palmyra Resident MUST provide ID, Proof of Residency, and sign a school provided affidavit

Student Information

Proof of Birth *choose one*

- ☐ Birth Certificate
- ☐ Passport

SPECIAL CIRCUMSTANCES PLEASE BRING

- ☐ Custody Papers
- ☐ Foster Papers

Previous School Records

- ☐ Most Recent Report Card
- ☐ *For 9-12 Grade only* Transcripts
- ☐ Transfer Card A41 *from previous school in NJ*

Medical Records *bring all*

- ☐ Last physical, less than 1 year old
- ☐ Immunization Record

OR

- ☐ A45 Card *from previous school in NJ*

**If this is the student's first time in the country they must have a TB test and provide results*

Registrar: Kimberly Allen

Phone 856-786-9300 x1000

Fax 856-829-9638

Email

kallen@palmyra.k12.nj.us

In accordance with New Jersey State law (N.J.S.A. 18A:38-1 and 18A:7B-12), it is necessary to determine the residence of students entering the school district by answering the following questions:

I currently live in a: (please check the appropriate answer)

____ a. House that I own (address) _____
PLEASE PROVIDE PROOF OF MORTGAGE/DEED

____ b. House or apartment that I rent (address) _____
PLEASE PROVIDE A COPY OF YOUR LEASE

____ c. Hotel/ motel/ apartment

____ d. Shelter

____ e. Transitional housing facility

____ f. Domestic violence shelter

____ g. Runaway youth shelter

____ h. Home for adolescent school-age mothers

____ i. Migrant family dwelling

____ j. Family or friend's home out of necessity

Please print name/relation of the person with whom you are staying: _____

____ k. Family or friend's home by choice

Please print name/relation of the person with whom you are staying: _____

____ l. Other (please identify) _____

This statement is made under oath. I am aware that if any of the foregoing statements made in the Affidavit are willfully false, I may be subject to punishment. Additionally, I will be responsible for paying the Palmyra School District annual cost per pupil.

The Palmyra Board of Education has policies and procedures related to "Proof of Domicile" for students who attend our schools. The District shall only provide a free education to those students who are domiciled within the District or who otherwise qualify for a free education pursuant to the statutory and regulatory guidelines set forth in N.J.S.A. 18A:38-1 *et seq.* And N.J.A.C. 6A:22-1.1 *et seq.* A student shall be domiciled in the District "when he or she is living with a parent or legal guardian whose permanent home is located within the District." N.J.A.C. 6A-22-3.1. The home is permanent if "the parent or guardian intends to return to it when absent and has no present intent of moving from it..."*Id.* If the District discovers that a student is attending school whose parents are not domiciled within the District and who is not otherwise eligible for a free education, the District may apply for the student's removal and seek tuition reimbursement for the period of ineligible attendance with the provisions of N.J.S.A. 18A:38-1(b)(2).

Applicants who fraudulently allow a child of another to use his residence, or who fraudulently claim to have custody of a child, may be charged with a disorderly persons offense, N.J.S.A. 18A:38-1©. If the applicant is convicted of such an offense, the applicant may be fined up to \$1,000.00 and/or be imprisoned for up to 6 months.

Any false statements, answers or declarations contained in the Affidavit or in an application for admission may subject the applicant to criminal prosecution for the crime of false swearing, in violation of N.J.S.A. 2C:43-3. If convicted for such a crime, the applicant may be punished by a fine of \$10,000.00 and/or be imprisoned for up to 18 months.

I, the undersigned, hereby acknowledge that I have read & understood the contents of this notification

Print Name of Parent/Guardian

Signature of Parent/Guardian

Date

Acknowledgements

Checking this box indicates you acknowledge this information is available to view on our website: www.palmyraschools.com

<input type="checkbox"/> YES	Free & Reduced Lunch Form	PTA Information	Attendance Policy
	After School Program Application	PHSFEE Information	Dress Code Policy
	District Handbook	FERPA/8310 Statement	District Backpack
	School Calendar	Acceptable Use Policy	Social Media Pages

Step 1: Home Language Survey (Parent/Family Version)

Purpose: The home language survey is used solely to offer appropriate educational services ([U.S. ED EL Toolkit](#), Chapter 1). This survey is the first of three steps to identify whether or not a student is eligible to be identified as an English language learner (ELL). "Home" is defined as a student's current place of residence.

Student Information:

Student Name: _____ Date of Birth (YYYYMMDD): _____

Current Address: _____

Survey Questions:

1.) List all languages used in the student's home.

2.) Was the first language used by the student a language other than English?

_____ No _____ Yes

3.) Does the student speak or understand a language other than English?

_____ No _____ Yes

4.) When interacting with others at home (example: parents, guardians, siblings), does the student understand or use a language other than English **most of the time**?

_____ No _____ Yes

5.) When interacting with others outside the home (example: friends, caregivers), does the student understand or use a language other than English **most of the time**?

_____ No _____ Yes

The person completing this page must sign & date this document below.

- This survey must remain in the student's permanent file.
- If any language other than English is mentioned on this survey, the student must be referred to a qualified ELL specialist for additional language assessment.

Print Name of Parent/Guardian

Signature of Parent/Guardian

Date

Palmyra School District

301 Delaware Avenue | Palmyra | New Jersey | 08065

OFFICIAL RECORDS REQUEST FORM

Please print neatly

STUDENT INFORMATION				
Last Name		First Name		Middle Name
Street	City	State	Zip	Date of Birth
Previous School			Entering School – Please Send Information To	
<div>Name of School</div> <div>Street Address</div> <div>CityStateZIP</div> <div>Telephone NumberFax Number</div> <div>Date Left: Last Grade Attended:</div> <div><input type="checkbox"/> Public<input type="checkbox"/> Private</div>			<div><input type="checkbox"/> Palmyra High School 311 West 5th Street Palmyra, New Jersey 08065 856-786-9400 x3184 Fax: 856-786-3014</div> <div><input type="checkbox"/> Charles Street School 100 W. Charles Street Palmyra, New Jersey 08065 856-829-3601 x2002 Fax: 856-303-0481</div> <div><input type="checkbox"/> Child Study Team 301 Delaware Ave Palmyra, New Jersey 08065 856-786-9300 x1007 Fax: 856-829-9638</div> <div><input type="checkbox"/> Delaware Ave School 301 Delaware Ave Palmyra, New Jersey 08065 856-786-9300 x1007 Fax: 856-829-9638</div>	
Records to be Released				
New Jersey State ID #		Is student in and ESL or Bilingual program? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Has student ever been referred for Special Education Services? <input type="checkbox"/> YES <input type="checkbox"/> NO		If yes, please indicate the specific classification, if any:		
<ul style="list-style-type: none">Grades/Transcript InformationDistrict & State AssessmentImmunization & Medical RecordsSpecial Education Records (if applicable)Disciplinary RecordsAttendance RecordsSection 504 Plan (if applicable)				
Comments				

I hereby give my permission for release of the above records and for the school district to contact my child's former district for further information.

Print Name of Parent/Guardian

Signature of Parent/Guardian

Date

Print Name of Student (18 or above)

Signature of Student (18 or above)

Date

In addition to the release of the above records to which you consent, the prior District will be releasing the following mandated records for which your consent is not required: transcript of grades, health records, attendance records, child study team records and disciplinary records pursuant to **N.J.A.C. 6:3-6.5**.