

# SCMS Pre-Registration Checklist for 2016-2017 School Year

## The following must be presented for pre-registration:

- A Parent/Legal guardian with a valid photo ID must be present at time of pre-registration. Proof of guardianship paperwork is required for any student not residing with biological parent/s listed on Birth Certificate.
- A copy of or the original birth certificate
- A copy of or the original complete immunization record.
- Proof of residence** The Parent/custodial parent or guardian with whom the student lives must provide proof of address when enrolling the student in school. Verifiable proof of address includes the following and must be dated within the last 60 days:
  - Utility bill (water, gas, TV, Power), Deed of house/lease agreement, Medical insurance card or document from a government agency stating your current physical address.
  - If Parent/Guardian is subletting an apartment or home, or if more than one family shares a living space, the parent/guardian must present an affidavit, or letter from the leaseholder or homeowner and attach any of the acceptable proofs of address, along with a copy of a valid driver's license for that person.
- Completed student information and course request forms.

Submit forms and all documentation to SCMS registrar. Call 435-674-6474, Ext 303 with questions.

Once all documentation and forms are submitted, the student will be added to Powerschool (WCSD student information system) for next year. You will receive our summer mailer that will have information on paying fees and picking up schedules in the fall.

**Snow Canyon Middle School**  
1215 N Lava Flow Dr. St. George, UT 84770  
**STUDENT REGISTRATION FORM**

STUDENT INFORMATION (PLEASE PRINT)					
Student's <u>Legal</u> last name		First		Middle	Preferred Name (if applicable)
Gender	Birth date	Country of Birth	Grade	SSN (optional)	Home Phone
<input type="checkbox"/> M	<input type="checkbox"/> F	/ /			( )
Home Street Address			City	Zip Code	
Mailing Address (if different)			City	Zip Code	
PARENT/GUARDIAN INFORMATION					
Father's Name		Place of Employment		Work Telephone	Cell Phone ( )
Mother's Name		Place of Employment		Work Telephone	Cell Phone ( )
Guardian's Name/Relationship (if other than natural parent)		Place of Employment		Work Telephone	Cell Phone ( )
Student Lives With:		<input type="checkbox"/> Both Parents	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Guardian (listed above)
IN CASE OF EMERGENCY					
Emergency Contact Name (to call if parent/guardian cannot be reached)			Relation to student	Home phone	Cell phone
				( )	( )
				( )	( )
List persons with phone number, <u>other than parent/guardian</u> who may check student out of school (student will ONLY be released to legal Parent/Guardian unless otherwise noted)					
Name:			Relation to student:	( )	
Name:			Relation to student:	( )	
Name:			Relation to student:	( )	
ETHNICITY INFORMATION*					
Is the student Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No		Ethnicity: <input type="checkbox"/> White <input type="checkbox"/> Pacific Islander/Hawaiian <input type="checkbox"/> Black/African American			
*Failure to self identify will result in observer identification by SCMS <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaska Native (Tribe: _____)					
Name of Previous School Attended		Address, City, State		Phone (if known) ( )	
				Fax (if known) ( )	
EMAIL ADDRESS (Information will be sent electronically, including report cards. This is our main form of communication)					
My Child receives the following services (Please check all that apply)			<input type="checkbox"/> IEP	<input type="checkbox"/> 504/Heath care plan	<input type="checkbox"/> ELL <input type="checkbox"/> Other _____
I desire a conference to discuss my student's special needs (i.e. Special Education, IEP, Medical, etc.)					<input type="checkbox"/> Yes <input type="checkbox"/> No
1. What was the primary language the student learned to speak? _____					
2. List all languages spoken or understood by student _____					
3. List all languages spoken in the home (Please do not include languages learned through foreign language programs) _____					
4. In what language do you need to receive communication from the school? _____					
5. Date entered into the U.S. school system _____					
*I acknowledge that I have reviewed and been given a copy of the Washington County School District Schools Policy and Grounds for Suspension and Expulsion as located in the School Handbook or online at <a href="http://scmiddle.org">scmiddle.org</a> . ( Initial)					
I certify that the above student is living with a natural parent or court-ordered guardian, and resides permanently in the attendance area of this school					
Patient/Guardian signature				Date	

# WASHINGTON COUNTY SCHOOL DISTRICT SAFE SCHOOLS CONDUCT STATEMENT

## 1. STUDENT AND PARENT/LEGAL GUARDIAN STATEMENT

The Student Applicant \_\_\_\_\_

A. Has Has Not had criminal charges filed against him/her in the past two years from the date on this statement. If so, please note the charges and explain.

B. Is Is Not the subject of a current criminal investigation. If yes, please note the charges and status.

\_\_\_\_\_  
(Parent/Legal Guardian's Signature) (Date) (Student's Signature) (Date)

Any omission, falsification, or misstatement will be considered a violation of the School District Safe Schools Policy.

## 2. PARENT/LEGAL GUARDIAN RELEASE FOR POLICE AUTHORITY STATEMENT

*(Required for any student twelve (12) years of age or older if answer is yes in A or B of #1)*

As parent/legal guardian of \_\_\_\_\_  
(Student's name) (Student's date of birth)

\_\_\_\_\_ I authorize the POLICE AUTHORITY OF  
(Student legal address during the last two years)

\_\_\_\_\_ to release the information requested below to (school)\_\_\_\_\_. It is understood that this information will be evaluated by the Washington County School District professional staff as part of the residency application process and will not be transferred to any other person or jurisdiction without parental permission. UTAH CODE 75-5-206 (i) (ii) UTAH CODE 53A-2-208 (3).

\_\_\_\_\_  
(Parent/Legal Guardian Signature) (Date)

Regarding (Student)\_\_\_\_\_ please list any criminal charges filed against him/her during the last two years and whether or not the student is currently the subject of any criminal investigation with your agency.

\_\_\_\_\_  
(Officer and Badge Number) (Police Department) (Date)



# Official Request for Education Records

## SAFE SCHOOLS RELEASE OF RECORDS

(Enrollment in Washington County School District does not automatically guarantee activity/athletic eligibility. Utah High School activities Association transfer rules apply)

For office use:

Faxed \_\_\_\_\_

Mailed \_\_\_\_\_

Request: 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup>

Student Last Name	Student First Name	Birth Date	Grade
<b>Previous School Attended</b>	<b>City &amp; State of Previous School</b>	<b>Phone # &amp; Fax # of Previous school</b>	
		<b>Phone:</b>	
		<b>Fax:</b>	

For office use:

**Please fax the following records for registration to 435-628-3289**

Birth Certificate

Immunization Records

Transcript and Grades to date of leaving

Test Scores

Behavior records

Special Education Records (IEP, Psych Eval)

**Please mail cumulative file and Sped records to:**

**Snow Canyon Middle School**

**Attn: Registrar**

**1215 N Lava Flow Dr**

**St George, Utah 84770**

**Phone: 435-674-6474**

You are authorized to release records relative to my child's conduct, specifically: (1) suspensions; (2) expulsions; (3) safe school violations; and/or (4) truancy problems. It is understood that these records may be used as part of the application process. These records will be for the use of Washington County School District professional staff and will fall under the guidelines of the Family Education Rights and Privacy Act (FERPA).

**X**

**Parent/Legal Guardian Signature**

**Date**

Federal Law 99:31 No parent or guardian signatures are required to send educational files to another bona fide educational agency.

# Washington County School District

## Student Information Questionnaire

### McKinney-Vento Eligibility

## Washington County School District

This questionnaire is intended to address the McKinney-Vento Education Assistance Improvement Act 42 U.S.C. 11435. The answers to this questionnaire help determine the services the student is eligible to receive.

1. Is your current address a temporary living arrangement? \_\_\_\_\_ Yes \_\_\_\_\_ No
2. Is this temporary arrangement due to loss of housing or economic hardship? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered YES to either of the above questions, please complete the remainder of this form.

**If you answered NO to both questions, you may stop here.**

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Which of the situations below apply to the student?

- H1 Student is sharing a residence with one or more families temporarily.
- H2 Student is living in a motel or hotel.
- H3 Student is living in a shelter (domestic violence, emergency, or transitional housing units).
- H4 Student is living in a car, park, campground, or public place.
- H5 Student is living in a place without adequate facilities (running water, heat, electricity).
- H6 Student is seeking enrollment without an accompanying parent (not in foster care).

**Student is “physically” living with a parent or guardian in the above situation?** \_\_\_\_ Yes \_\_\_\_ No

**Yes = Accompanied      N = Unaccompanied**

- **IF a false claim is made about your living situation, enrollment may be affected.**
  - **\*Please notify the school if your living status changes.**
- 

**Please list all your children that will be enrolled in schools in the Washington County School District at this time:**

Student's Name	Student's School	Grade	Gender	Date of Birth

Parent signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_ *Form updated 5/2/2016*

*\*\* Office Staff \*\* Please make enough copies for the parent to take to the other schools within our district. Thank you! Homeless Liaison*

# Snow Canyon Middle School

## 8<sup>th</sup> Grade Registration 2016-2017

Student Name: \_\_\_\_\_ Sex: M F Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Did either of your parents/legal guardian graduate from College?  Yes  No

**DIRECTIONS:** In pencil circle your class choices below, enough to equal 8 credits.  
 (Registration for students receiving Special Ed. Assistance will be done by the Special Ed. Department).  
**Course Catalog & Course Videos:** Available online at [www.scmiddle.org](http://www.scmiddle.org) under the GUIDANCE link.  
**Honors Classes Requirements:** Academic & Effort grades need to be "B" or higher in subject area, and good attendance. Documentation does not need to be turned in. For more information visit [www.scmiddle.org](http://www.scmiddle.org)

### REQUIRED 5.0 CREDITS

**Language Arts**

- 4080 Language Arts 8 (1.0)
- 4086 Language Arts 8 Honors (1.0)

**History**

- 6120 U.S. History (1.0)
- 6125 U.S. History 8 Honors (1.0)

**Integrated Science**

- 3220 Integrated Science 8 (1.0)

**Math Class (1.0)**

- 5808 8<sup>th</sup> grade Mathematics (1.0)
- 5808H 8<sup>th</sup> grade Mathematics Honors (1.0)

**Other Required Course**

- 7650 Intermediate Fitness (1.0)

### Electives (choose 3.0 elective credits)

**Fine Arts** (all Fine Arts classes require an additional fee)

- 1100 Art Foundations I (.5)
- 1190 \*Art Foundations II (.5)
- 1750 Band II Concert (1.0)
- 1610 Chorus I-Mixed (Beg/Int.) (1.0)
- 1630 \*Chorus II-Mixed (Adv.) (1.0)
- 1670 \*Chorus II-Girls (Adv.) (1.0)
- 1870 Guitar (Beg) (.5) (Must furnish own guitar & stand)
- 1760 Intermediate Orchestra (1.0)
- 1770 \*Percussion (1.0)
- 1950 Theater Foundations I (.5)
- 1960 \*Theater Foundations II (.5)

**Career & Tech. Ed**

- 2020 Digital Literacy (Computer Skills) (.5)
- 8630 Exploring Technology (Shop) (.5)
- 8430 FACS Exploration (Life Skills) (.5)

**Electives**

- 4260 Film (.5)
- 4SDI8 \*Spanish 4 DLI Honors

\* Prerequisite Required

**Healthy Lifestyles**

- 7770 Body Toning (.5) (Recommended for girls)
- 7740 Weight Training (.5)
- 7742 \*Weight Training Adv. Spring Semester (.5)

\*\*\*If you are interested in Yearbook please visit the [scmiddle.org](http://scmiddle.org) homepage for an application.

**Note:** Students that have not earned the appropriate credit from 7<sup>th</sup> grade may have one or more elective classes dropped from their schedule and enrolled in GRASP or Learning Strategies.

**Select 4 Alternate Course Numbers**  
 (not already selected courses)

1 - \_\_\_\_\_                      3 - \_\_\_\_\_

2 - \_\_\_\_\_                      4 - \_\_\_\_\_

Alternates are used as substitute classes in the event that a student does not receive their first class choice.

Signature indicates approval of registration for next year. **Approved** schedule changes will cost \$10.00 per class change.

\_\_\_\_\_

Student Signature

\_\_\_\_\_

Parent Signature