

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 scmiddle.org . (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 st 2 nd 3 rd

Student Last Name	Student First Name	Birth Date	Grade
Previous School Attended	City & State of Previous School	Phone # & Fax # of Previous school	
		Phone: Fax:	

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).



Parent/Legal Guardian Signature

Date

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.

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*

Snow Canyon Middle School

9th Grade Registration 2016-2017

Student Name: _____

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 or Release Time plus 7 credits.

(Registration for students receiving Special Ed. Assistance will be done by the Special Ed. Department).

Course Catalog: Available online at www.scmiddle.org under the GUIDANCE link.

Honors Classes: Information available online at www.scmiddle.org under the PARENT link

REQUIRED CLASSES (4.5 Credits)

Science class (Choose one)

- 3240 Earth Systems (1.0)
- 3525 Honors Biology** (1.0)

Language Arts class (Choose one)

- 4090 Language Arts 9 (1.0)
- 4095 Honors Language Arts 9* (1.0)

Math class (Choose one)

- 5809M Secondary Mathematics 1 (1.0)
- 5809MH Honors Secondary Mathematics 1* (1.0)

Social Science class (Choose one)

- 6200 Geography For Life (.5)
- 6205 Honors Geography For Life* (1.0)

PE Class (Choose one)

- 7700 Physical Skills & Technique (.5)
- 7706 Physical Skills 1 (dance/yoga/water aerobics) (.5)

Required

- 8518 Computer Technology (.5)

Aides (must have a GPA of 3.0 or higher)

Can only choose one

- 6352 Media Aide (.5)
- 6351 Office Aide (.5)
- 6358 Peer Tutor (.5)
- 6353 Shop Aide (.5)
- 6350 Teacher Aide (.5)

Healthy Lifestyle

- 7770 Body Toning (.5)
- 7740 Weight Training (.5)
- 7741 Weight Training Adv. Fall Semester* (.5)
- 7742 Weight Training Adv. Spring Semester* (.5)

Career & Technology Education

- 8475 Clothing I (.5) \$\$
- 8535 Exploring Business and Marketing (.5)
- 8477 Food & Nutrition I (.5) \$\$
- 8675 Intro Communication Technology (.5)
- 8645 Intro to Manufacturing Technology (.5) \$\$
- 8603 Intro to Construction Tech (.5) \$\$
- 8436 Teen Living (.5)
- 8530 Word Processing Basic (.5)

ELECTIVES (Choose 3.5 Credits or 2.5 credits + Seminary)

Seminary

- 0200 Release Time (0) full year class

Fine Arts

- 1190 Art Foundations II* (.5) \$\$
- 1750 Band II Concert (1.0)
- 1811 Band III Symphonic* (1.0)
- 1610 Chorus I-Mixed (Beg/Int) (1.0)
- 1630 Chorus II-Mixed (Adv)* (1.0)
- 1670 Chorus II-Girls (Adv)* (1.0)
- 1160 General Art (.5) \$\$
- 1870 Guitar (Beg) (.5) (Must furnish own guitar & stand)
- 1760 Intermediate Orchestra (1.0)
- 1770 Percussion* (1.0) \$\$
- 1940 Social Dance (.5) (may count as Healthy Lifestyle credit)
- 1950 Theater Foundations I (.5)
- 1960 Theater Foundations II* (.5)
- 1970 Theater Foundations III (Performance)* (.5)

Electives (cannot choose more than one World Language)

- 3670 Aerospace Science (JROTC) (1.0)
- 4600 Chinese I (1.0)
- 4740 Spanish I (1.0)

Please talk to Mr. Strasmann if you are interested in Yearbook or visit scmiddle.org homepage

* = Pre-requisite

**=Must also have Honors Secondary Mathematics

\$\$ = Fee required

Select 4 Alternate Course Numbers

(Not already selected courses and no aides as alternates)

1 - _____ 3 - _____

2 - _____ 4 - _____

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

Student Signature

Parent Signature