

Enrollment Form - Grass Lake High School

Grass Lake High School

School Year: 2010-2011 Grade:
 Principal: Brian Thompson Teacher:
 School Phone: (517) 522-5570

Instructions:

Fill this enrollment form out to the best of your ability.

Required fields are marked with a *.

Name, date of birth, and city of birth must match information on the student's birth certificate.

Student Information	<i>Please print clearly</i>
Student Name*	<i>as it appears on the birth certificate</i>
Preferred Name/Nickname	
Gender* <i>Circle one</i>	Male / Female
Date of Birth*	<i>must match birth certificate</i>
City of Birth*	<i>if not born in U.S.A. enter Country of birth</i>
Ethnicity* <i>Circle one</i>	Asian African-Am Caucasian Hispanic Latino Am-Indian/Alaskan-Native Other Pacific-Islander/Native-Hawaiian
Student Home Phone*	
Student Cell Phone	
Student Lives With	
Single Parent Household	Yes / No
Daily medications or other special medical considerations	
Hospital Preferred	
Allergies	
Medical Alert Information (Info for teachers and other office staff)	
Is a language other than English spoken in the home?* <i>Circle one</i> Yes / No If Yes, please indicate other languages on the line below.	
Languages spoken at home include:	
Student Address Information - Home address is where the student lives, mailing address is where school/district mailings will be sent	
Home Address*	
Home City*	
Home State*	
Zip Code*	
Mailing Street or PO Box	
Mailing City	
Mailing State	
Mailing Zip Code	

Office Use Only	ID#	UIC:
District Entry Date:	District Entry Grade Level:	School of Choice Y/N:
School Entry Date:	School Entry Grade Level:	District of Res:
Expected Graduation Year:	GAD Cohort Graduation Year:	Bus Needed Y/N:

Contact 1*

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	
Mailing Street/PO Box	
Mailing City, State Zip	
Employer	
Receive Separate Mailings: Y / N Legal Guardian: Y / N Custodial Parent/Guardian: Y / N	

Contact 2*

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	
Mailing Street/PO Box	
Mailing City, State Zip	
Employer	
Receive Separate Mailings: Y / N Legal Guardian: Y / N Custodial Parent/Guardian: Y / N	

Contact 3

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	
Mailing Street/PO Box	
Mailing City, State Zip	
Employer	
Receive Separate Mailings: Y / N Legal Guardian: Y / N Custodial Parent/Guardian: Y / N	

Contact 4

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	
Mailing Street/PO Box	
Mailing City, State Zip	
Employer	
Receive Separate Mailings: Y / N Legal Guardian: Y / N Custodial Parent/Guardian: Y / N	

The emergency contacts you supply in this section are the people/numbers that will be called after we have tried to contact the contacts listed on the previous page. By providing their information here, it is assumed that you are authorizing these contacts to pick your child up from school in the event of an emergency. These contacts will only be called for emergencies involving your child as an individual, not for school/district wide emergencies.

Emergency Contact 1*

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	

Emergency Contact 2*

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	

Emergency Contact 3

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	

Emergency Contact 4

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	

Emergency Contact 5

Name/Relationship	
Home Phone	
Work Phone	
Cell Phone	
Email	

Automated Calling System Emergency Numbers - used in the event of a school or district wide emergency, submit up to 6

Emergency Phone Number 1		
Emergency Phone Number 2		
Emergency Phone Number 3		
Emergency Phone Number 4		
Emergency Phone Number 5		
Emergency Phone Number 6		

The phone numbers and email addresses in this section are those that will be contacted for school cancellations and delays. They may also be use for: early dismissals, for school/district event change announcements, and for notification of other non-emergency school/district information as needed. If you do not supply any information, you will not receive any of the above notifications. Please submit only phone numbers and email addresses that are directly accessible by you, or another person. Numbers that require the entry of an extension, or email addresses that require verification, will not work. Only submit numbers and addresses that you actually want to have contacted.

Automated Calling/Notification System phone numbers - Submit up to 6 numbers to be called

Phone Number 1		
Phone Number 2		
Phone Number 3		
Phone Number 4		
Phone Number 5		
Phone Number 6		

Automated Calling/Notification System Email - Submit up to 3 email addresses to receive messages.

Email 1		
Email 2		
Email 3		

To be completed by parent/legal decision maker:

Emergency Dismissal

If an emergency dismissal becomes necessary, due to loss of power, extreme weather conditions, or other situations that may arise, students will be sent to their normal after school location. The district will send notification of an early dismissal to the phone numbers listed in the *Automated Calling System Emergency Numbers* section of this form (page 3), using the district's automated calling/notification system. In addition, notification will also be sent to local radio and television stations.

Parent/Student Handbook

I verify that I have read, or will read, and familiarize myself with the Parent/Student Handbook.

(found @www.grasslakeschools.com, under *Buildings, Grass Lake High School, Student Handbook*)

Parent/Legal Guardian Signature **Date**

Field Trip Permission

I hereby give permission for my child to attend any school sponsored field trips. This approval is considered to be permanent until further notice.

Parent/Legal Guardian Signature **Date**

Technology Acceptable Usage Agreement Responsibility Declaration

I have read the Grass Lake School District Technology Usage Agreement (found @ www.grasslakeschools.com) and agree to adhere to the privileges, responsibilities, and consequences as outlined.

Parent/Legal Guardian Signature **Date**