

HARTSELLE CITY SCHOOLS

APPLICATION FOR STUDENT ENROLLMENT

PLEASE PRINT

Must be completed by Parent or Legal Guardian

PLEASE PRINT

Last Name _____

First Name _____

Middle Name _____

Name to be Called _____

Home Address _____

City _____ City Limits ☐ Inside ☐ Outside

State: Alabama Zip Code: _____

Daytime Phone: _____ - _____ - _____

Date of Birth: ____ - ____ - ____

Gender: ☐ Male ☐ Female

*Social Security Number (voluntary) ____ - ____ - ____

Student ID: _____

Child Lives With: ☐ Both Parents ☐ Mother ☐ Father

Guardian: Relation _____

Race: ☐ American Indian ☐ Asian ☐ Black ☐ Hispanic☐ Multi Race ☐ Pacific Islander ☐ White ☐ Other _____

Special information about custody: _____

If custodial parent or guardian, please provide a copy of custody papers or guardianship papers

Mother/Guardian

Last Name _____

First Name _____

Middle Name _____

Home Address _____

Mailing Address _____

City _____

State _____ Zip Code _____

Daytime Phone _____ - _____ - _____

Alternate Phone _____ - _____ - _____

E-mail Address _____

Employer _____

Address/City _____

Employer Phone _____ - _____ - _____

Father/Guardian

Last Name _____

First Name _____

Middle Name _____

Home Address _____

Mailing Address _____

City _____

State _____ Zip Code _____

Daytime Phone _____ - _____ - _____

Alternate Phone _____ - _____ - _____

E-mail Address _____

Employer _____

Address/City _____

Employer Phone _____ - _____ - _____

Emergency Contact information - Persons to be contacted only if parents cannot be reached and have permission to check your child out of school:

Name	Phone _____ - _____ - _____	Relationship
Name	Phone _____ - _____ - _____	Relationship
Name	Phone _____ - _____ - _____	Relationship
Name	Phone _____ - _____ - _____	Relationship
Name	Phone _____ - _____ - _____	Relationship
Name	Phone _____ - _____ - _____	Relationship

Name and address of former school: School _____

Address _____ City _____ State _____ Zip _____

Signature of Person Completing Form _____ Relationship _____ Date _____

*Disclosure of your child's Social Security number (SSN) is voluntary. If you elect not to provide a SSN, a temporary identification number will be generated and utilized instead. Your child's SSN is being requested for use in conjunction with enrollment in school as provided in Ala. Admin. Code §290-3-1-.02(2)(b)(2). It will be used as a means of identification in the statewide student management system.

Has child ever attended a school in Hartselle City Schools? ☐ Yes ☐ No If yes, please give the Hartselle School last attended _____

Did child attend Pre-K/Kindergarten? _____ # of years child has been in school (excluding Pre-K/K) _____

List names of Siblings, Grade, and Schools they attend:

Name	Grade	School
Name	Grade	School
Name	Grade	School

Transportation: Please indicate mode of transportation

Morning: ☐ Bus Rider (# _____) **Morning:** ☐ Car Rider ☐ Extended Day Program (Elementary Only)
Afternoon: ☐ Bus Rider (# _____) **Afternoon:** ☐ Car Rider ☐ Drives personal vehicle (High School Only)

STUDENT LANGUAGE SURVEY

Was the first language your child learned English? ☐ Yes ☐ No
Can your child speak a language other than English? ☐ Yes ☐ No If yes, please specify _____
Which language does your child use most often when speaking with friends? ☐ English ☐ Other (specify) _____
Which language does your child use most often when speaking with parents or other family members? ☐ English ☐ Other (specify) _____
Which language do the parents use most at home? ☐ English ☐ Other (specify) _____

Was child receiving Special Education, Gifted, or 504 services at your previous school? ____ Yes ____ No (If yes, please circle one)

Does child have any pending disciplinary issues from their previous school? ☐ Yes ☐ No If yes, explain _____

Does child require daily-prescribed medication? ☐ Yes ☐ No - If yes, give name(s) of medication: _____

OPT-OUT INFORMATION

For grades K-6, please check below if you wish to opt-out of information being used by school affiliates. Any unchecked item allows the school to act on or administer any items listed below.

☐ I do not want my child's name listed with Honor Roll students in the newspaper ☐ I do not want my child's picture included on the school's website.
☐ I do not want my child's picture published in the newspaper and/or yearbook ☐ I do not want my child to receive corporal punishment.
☐ I do not want my name/phone number given to PTO to receive reminders/request for parent participation in school projects.

Note: For grades 7-12, if you wish to opt-out of any of the items listed above, please submit your requests in writing to the school office.

*Initials: _____ Final enrollment is conditional upon verification of proof of residency within the city limits of Hartselle and upon receipt of all documents listed for enrollment. Students will not be enrolled or placed in a class until all paperwork is completed and verified.

*Initials: _____ In the event your residence changes during the school year, you are required to submit new proof of residence documentation to your child's school within two weeks of your move. If phone contact information changes, please notify the school office immediately.

*Initials: _____ Should you move outside the Hartselle City Limits during the school year, and want your child to remain enrolled in Hartselle City Schools for the remainder of the year, you will be billed a prorated amount of Out-of-District Tuition for the remainder of the current school year. Failure to pay the tuition within 14 days will result in your child's withdrawal from Hartselle City Schools. Payment of pro-rated Tuition does not guarantee enrollment for the next school year. Students who live outside the city limits of Hartselle will be required to annually apply as an Out-of-District student.

*Initials: _____ I am aware that I may view the Code of Student Conduct on the hartselletigers.org website. ☐ I request a printed copy of the Student Code of Conduct.

*Initials: _____ **Providing false information is grounds for automatic withdrawal from Hartselle City Schools.**

It shall be the policy of the Hartselle City School System to provide nondiscriminatory basis educational opportunities for children. No person shall be denied the benefits of any education program or activity on the basis of race, color, disability, creed, national origin, age, or sex. Pursuant to the requirements of the 2001 No Child Left Behind Act and the McKinney-Vento Homeless Assistance Act, all homeless children, migrants, and English language learners must have equal access to the same free appropriate public education provided other children and youth. All programs offered by schools within the School System shall be open to all students in compliance with statutory and judicial requirements. The enrollment of homeless, migrant, and limited English proficient children shall not be denied due to any of the following barriers: lack of birth certificate; lack of school records or transcripts; lack of immunization records; lack of proof of residency; lack of transportation; unaccompanied; no guardian.

Approved for enrollment _____ Date _____