

# RSU# 54 Enrollment/Emergency Form

School: \_\_\_\_\_

Grade: \_\_\_\_\_

**A COPY OF THE STUDENT'S BIRTH CERTIFICATE MUST BE PROVIDED WHEN ENROLLING**

RSU# 54 Enrollment Forms and Emergency/Permissions Sheets are stored in secured locations.

This form must be signed before starting school. All student information on this form is required and is used for local, state and federal funding.

<b>-- Office Use Only --</b>	PS Student #:	State #:
Date of Entry:	Homeroom Teacher:	Birth Certificate certified by:
Immunization records:	If homeschool, % of day in school:	

Has this student been enrolled in RSU #54 before?  YES  NO

STUDENT NAME	LAST:	FIRST:	MIDDLE:
Date of Birth:	Gender:	Place of Birth:	Year of Graduation:
Home Phone:	Student Cell Phone:		
Town of legal Residence:			
Physical Address:	Mailing Address:		
City:	State:	Zip:	City: State: Zip:
Does student trace origins to Mexico, Puerto Rico, Cuba, Central and So America, and other Spanish cultures (regardless of race) Yes / No			
Race (circle all that apply) White Black-African American Asian American Indian Alaska Native Native Hawaiian-Other Pacific Islander Multi			
If student's US citizenship status is immigrant, enter US arrival date : _____ Enter date first enrolled in US School: _____			

**PREVIOUS SCHOOL INFORMATION**

School Attended:	Grade Level: _____	School Phone:
District Attended:	School Address:	

**HOMESCHOOL INFORMATION**

If the student is currently homeschooled, are they enrolling in RSU#54 <b>Part Time or Full time</b>	If part time, is homeschool application filed with the state? Yes / No
	Homeschool grade level

**MILITARY FAMILY CONNECTION**

If one or both parents are in the active uniformed service of the United States or within one year of medical discharge or retirement from active uniformed services, please circle one: **Active Duty / Full Time National Guard / National Guard or Reserve / Not Military Connected**

**HOMELESS STATUS**

If the student & immediate family are currently in a homeless situation, circle one: **In a shelter ~ Doubled up ~ Unsheltered ~ Motel/Hotel For Students Only**: If you are an Unaccompanied Minor, are you currently: **In a shelter ~ Doubled up ~ Unsheltered ~ Motel/Hotel**

**DAY CARE PROVIDER INFORMATION**

Name:	Phone:
Address:	
Day Care / Bus Instructions:	

**MEDICAL INFORMATION**

Doctor:	Phone:	Dentist:	Phone:	
Hospital preference? <b>No Preference</b>	<b>RF GH</b>	<b>Inland Hospital</b>	<b>MaineGeneral-Thayer Unit</b>	<b>MaineGeneral-Augusta</b>
Name of Health Insurance:	Policy and Group Number:			
<b>Copy of Immunizations on File: Yes No</b>				
<b>Specific Emergency Directions:</b>				

List special medical considerations the school should be aware of:

List allergies the school should be aware of:

**SPECIAL SERVICES**

Is the student currently receiving Special Education Services?	<b>Yes</b>	<b>No</b>
Does your child have a 504 Plan?	<b>Yes</b>	<b>No</b>
Has the student received Title 1 in the past?	<b>Yes</b>	<b>No</b>
Has the student received English Language Lerner (ELL) Services in the past?	<b>Yes</b>	<b>No</b>

**Contact  
Priority  
1**

<b>Name:</b>					<b>Relationship:</b> Mother 1/ Mother 2/ Father 1/ Father 2/ Guardian / Step Parent				
<b>Priority</b>	<b>Phone</b>	<b>Ext</b>	<b>Text</b>	<b>Automated calls?</b>	<input type="checkbox"/> Has or shares custody <input type="checkbox"/> Court Order Attached <input type="checkbox"/> Lives with student <input type="checkbox"/> Call for school pick up <input type="checkbox"/> Call in emergency				
<b>Mobile</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Home</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Work</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
<b>Mailing Address</b> <input type="checkbox"/> Same as student					<b>Email</b>				

**Contact  
Priority  
2**

<b>Name:</b>					<b>Relationship:</b> Mother 1/ Mother 2/ Father 1/ Father 2/ Guardian / Step Parent				
<b>Priority</b>	<b>Phone</b>	<b>Ext</b>	<b>Text</b>	<b>Automated calls?</b>	<input type="checkbox"/> Has or shares custody <input type="checkbox"/> Court Order Attached <input type="checkbox"/> Lives with student <input type="checkbox"/> Call for school pick up <input type="checkbox"/> Call in emergency				
<b>Mobile</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Home</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Work</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
<b>Mailing Address</b> <input type="checkbox"/> Same as student					<b>Email</b>				

**Contact  
Priority  
3**

<b>Name:</b>					<b>Relationship:</b> Mother 1/ Mother 2/ Father 1/ Father 2/ Guardian / Step Parent				
<b>Priority</b>	<b>Phone</b>	<b>Ext</b>	<b>Text</b>	<b>Automated calls?</b>	<input type="checkbox"/> Has or shares custody <input type="checkbox"/> Court Order Attached <input type="checkbox"/> Lives with student <input type="checkbox"/> Call for school pick up <input type="checkbox"/> Call in emergency				
<b>Mobile</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Home</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Work</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
<b>Mailing Address</b> <input type="checkbox"/> Same as student					<b>Email</b>				

**Contact  
Priority  
4**

<b>Name:</b>					<b>Relationship:</b> Mother 1/ Mother 2/ Father 1/ Father 2/ Guardian / Step Parent				
<b>Priority</b>	<b>Phone</b>	<b>Ext</b>	<b>Text</b>	<b>Automated calls?</b>	<input type="checkbox"/> Has or shares custody <input type="checkbox"/> Court Order Attached <input type="checkbox"/> Lives with student <input type="checkbox"/> Call for school pick up <input type="checkbox"/> Call in emergency				
<b>Mobile</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Home</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Work</b>		<b>x</b>	<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
<b>Mailing Address</b> <input type="checkbox"/> Same as student					<b>Email</b>				

**Additional Contact 1**

Name:		Relationship:			<input type="checkbox"/> Can pick up from school <input type="checkbox"/> Emergency Contact
Priority	Phone	Ext	Text	Automated calls?	
Mobile		x	<input type="checkbox"/>	<input type="checkbox"/>	
Home		x	<input type="checkbox"/>	<input type="checkbox"/>	
Work		x	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

**Additional Contact 2**

Name:		Relationship:			<input type="checkbox"/> Can pick up from school <input type="checkbox"/> Emergency Contact
Priority	Phone	Ext	Text	Automated calls?	
Mobile		x	<input type="checkbox"/>	<input type="checkbox"/>	
Home		x	<input type="checkbox"/>	<input type="checkbox"/>	
Work		x	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

**Please list brothers, sisters and all children living in the home.** (Attach another sheet of paper if additional space is needed.)

<b>Name (Last,First)</b>	<b>Age</b>	<b>Birthdate</b>	<b>School</b>	<b>FamilyID Office Only</b>
Name: _____	Age: _____	Birthdate: _____	School: _____	FamilyID: _____
Name: _____	Age: _____	Birthdate: _____	School: _____	FamilyID: _____
Name: _____	Age: _____	Birthdate: _____	School: _____	FamilyID: _____
Name: _____	Age: _____	Birthdate: _____	School: _____	FamilyID: _____
Name: _____	Age: _____	Birthdate: _____	School: _____	FamilyID: _____
Name: _____	Age: _____	Birthdate: _____	School: _____	FamilyID: _____

# Student Information Notices and Agreements

## Annual Review [2023-2024 School Year]

### STUDENT COMPUTER AND INTERNET USE

Student use of school computers, network and internet is provided to all RSU#54 students. The RSU community recognizes that the use of technology is essential to the success of our students education. Students are required to comply with the student computer and internet policy (IJNDB) and accompanying rules (IJNDB-R) and (IJNDB-E). **Full Policy is available online and copies are in every school office. By signing below, I agree to abide by the RSU#54 Acceptable Use Policy, and I assume responsibility for the device, charger and case.**

### DIRECTORY INFORMATION - (Annual Notice of Student Education Records Rights)

Under the federal Family Educational Rights and Privacy Act (FERPA), RSU# 54 has designated the following student information as directory information that can be made public at its discretion: name, participation and grade level of students in officially recognized activities and sports, height and weight of student athletes, dates of attendance in the school unit, and honors and awards received. However, parent(s)/guardian(s) and eligible students over 18 do have the right to request that directory information not be released.

- YES**, I do grant permission for directory information about my child to be released (this includes releasing honor roll information)  
 **NO**, I do not grant permission for directory information about my child to be released (honor roll information will not be released)

### INFORMATION ON RSU# 54 WEBSITE

RSU# 54 maintains a website to provide information about the schools, its programs and activities, and student and staff achievements. Maine law requires public schools to obtain written approval from parent(s)/guardian(s) prior to publishing personal information about students on the Internet. Such information may include: full names of students in connection with class rosters, honor rolls, awards received, and team/activity participant lists; group and/or individual photographs of students (no names will be used); individual student or class work (including but not limited to creative writing, research projects, art work, music performances, and audiovisual presentations).

- YES**, I do grant permission for my child's information to be published on the RSU# 54 website.  
 **NO**, I do not grant permission for my child's information to be published on the RSU# 54 website.

### OUTSIDE MEDIA

On occasion, RSU# 54 allows media outlets such as local newspapers, radio stations, and television stations to visit the school to report on school programs and activities. You have the right to deny permission for your child's name, picture, voice, or statements to be used by outside media. However, please note that permission is not required for events open to the public such as athletic events, concerts, performances, and graduation ceremonies.

- YES**, I do grant permission for the use of my child's name, picture, voice, and/or statement to be used by outside media.  
 **NO**, I do not grant permission for the use of my child's name, picture, voice, and/or statement to be used by outside media.

### FOR HIGH SCHOOL STUDENTS ONLY

The No Child Left Behind Act requires secondary schools to provide student names, addresses, and telephone numbers to both military recruiters and institutions of higher education upon request. Parent(s)/guardian(s) may prevent the release of student information to military recruiters and/or institutions of higher education, by checking the appropriate line(s) below. If the appropriate line is not checked or this signed form is not returned, the school is required by federal law to disclose the student's name, address, and telephone numbers to any military recruiters and/or institutions of higher education that request it.

### INFORMATION PROVIDED TO MILITARY RECRUITERS

- YES**, I do grant permission for my child's name, address, and telephone number to be released to military recruiters.  
 **NO**, I do not grant permission for my child's name, address, and telephone number to be released to military recruiters.

### INFORMATION PROVIDED TO INSTITUTIONS OF HIGHER LEARNING

- YES**, I do grant permission for my child's name, address, and telephone number to be released to institutions of higher education.  
 **NO**, I do not grant permission for my child's name, address, and telephone number to be released to institutions of higher education.

### NOTE TO PARENT(S)/GUARDIAN(S):

Permissions remain in effect until modified by the parent(s)/guardian(s). A signature is required below to modify any of the above permissions. This form may be requested at any time in order to make modifications.

***I give permission for RSU# 54 to provide necessary medical treatment for my child if he/she is injured or becomes ill at school. In the event I cannot be reached in an emergency, I give permission for RSU# 54 to transport my child to a medical facility to obtain medical care. I understand that RSU# 54 does not assume any financial responsibility for the provision of medical transportation and/or medical care, and any charges for such services remain my responsibility.***