



## REGISTRATION CHECKLIST

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

|  |                                                                |
|--|----------------------------------------------------------------|
|  | <b>FORMS TO BE COMPLETED</b>                                   |
|  | 2-Admission Application/ Family Information                    |
|  | 3-Health History Form/Nursing Services Permission              |
|  | 4- Acknowledgement & Consents                                  |
|  | Acceptable Use Policy                                          |
|  | Chromebook Expectations                                        |
|  | Asbestos Management Plan                                       |
|  | Local Field Trip                                               |
|  | Media Release                                                  |
|  | 5-Authorized to Pick Up Form                                   |
|  |                                                                |
|  | <b>ANNUAL REQUIRED MEDICAL FORMS</b>                           |
|  | Universal Child Health Record (to be completed by doctor)      |
|  | Dental Form (to be completed by dentist)                       |
|  | <b>OPTIONAL MEDICAL FORMS (if applicable)</b>                  |
|  | Medication Authorization                                       |
|  | Asthma Action Plan                                             |
|  | Severe Allergy/EpiPen Action Plan                              |
|  | Diabetic Medical Management Plan                               |
|  | <b>NEW STUDENTS</b>                                            |
|  | Transportation Form (B6T) – if you live 2-20 miles from school |
|  | Records Request (new students grades 1-8)                      |
|  | <b>COPIES OF DOCUMENTS NEEDED</b>                              |
|  | Birth Certificate (new students or if not on file)             |
|  | Immunization Record (updated annually)                         |
|  | Insurance Card (front and back – updated annually)             |
|  | <b>FINANCIAL</b>                                               |
|  | Financial plan with treasurer                                  |