

SEASHORE LEARNING CENTER CHARTER SCHOOL - 2011 / 2012 REGISTRATION

Kindergarten – 4th Grade

Module _____ Grade _____ Teacher _____

STUDENT INFORMATION: (PLEASE PRINT CLEARLY)

Full Name _____ Nickname _____ Social Security _____ - _____ - _____

Birth Date ____/____/____ Age on September 1st _____ Sex: M or F Birthplace _____

Home Address _____

City _____ Zip _____ Home Phone _____

Ethnicity: (Check One) Native American~ Asian/Pacific Islander~ Black, Non-Hispanic~ Hispanic~ White~

E-Mail Address(s): (1) _____ (2) _____

All campus-wide information will be sent to you via e-mail. If your e-mail address changes, please notify us immediately.

Please contact your network administrators and be sure to let them know to whitelist the esc2.net domain on their spam filters. This will prevent esc2.net e-mails from being blocked.

If you do not have an e-mail address, please check box.

PARENTS / LEGAL GUARDIAN INFORMATION:

1. Full Name _____ Relationship _____ Home Phone _____

Home Address _____ Cell Phone _____ Birth Date ____/____/____

Work Place _____ Work Phone _____ Ethnicity _____ Speaks English: Yes / No

2. Full Name _____ Relationship _____ Home Phone _____

Home Address _____ Cell Phone _____ Birth Date ____/____/____

Work Place _____ Work Phone _____ Ethnicity _____ Speaks English: Yes / No

Emergency Phone Numbers (Other Than Parents):

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Special Pick-Up Instructions: _____

Does your child have any medical issues SLC should be aware of? If so, what _____

New Student Information

Previous Schools	Address	Grade

Has your child ever been retained? Yes No If so, what grade and for what reason? _____

Did your child participate in any of the following special programs? If so, please indicate.

Gifted & Talented Yes No Title I Yes No Bilingual/ESL Yes No
Special Education Yes No Speech Yes No Migrant Ed Yes No

Do you believe your child is eligible to participate in any of the above programs? If so, which program(s)? _____

Does the student have a documented history of a criminal offense, juvenile court adjudication, or discipline problem under TEC Chp. 37, Sub. A.?
(Check One) Yes No SLC reserves the right to exclude students with histories of such misconduct under TEC 12.111(a)(6).

I give permission for my child to receive a vision and hearing screening and to be checked for diabetes as required by Texas law. Screenings will be performed by licensed physicians, nurses or state certified examiners. (Check One) Yes No

Students are at times involved in activities that are videotaped or photographed. Sometimes the videotape or photograph is used by the media, for school promotional materials, displayed on our website, or shown to parent organizations. I give SLC permission to videotape or photograph my child in school activities. (Check One) Yes No

If I cannot be contacted in case of emergency, I hereby authorize the individuals listed on the SLC emergency card to be notified at the school's discretion.

SLC is a DRUG-FREE, WEAPON-FREE, VIOLENCE-FREE school. I understand that the SLC handbook explaining the Student Code of Conduct and consequences to students who violate school policy is required to be signed by both parent and child. It is available at islandfoundation.com. I understand that my child will be subject to school discipline and possibly to criminal prosecution if he/she is found to have violated SLC's Student Code of Conduct, which prohibits the use, possession, sale, or distribution of illicit drugs and alcohol. SLC has "Zero Tolerance" for the possession of weapons and involvement in any violent act on school premises or at any school activity.

Failure to sign this form does not exempt your child from compliance with the laws, policies, rules, and regulations of the state and school. All the information we ask for is required to complete the student record. Please fill this form out accurately and sign it.

Signature of Parent/Guardian _____ Date _____

New Student Registration: Date Received _____ Time _____ Date Entered SLC _____