

Crescent Elementary School

11100 South 230 East - Sandy, Utah 84070 - Phone: 801-826-8200

Registration for 2014-2015 Kindergarten

It is important that we obtain an accurate count of all children qualifying for kindergarten in the Canyons School District for the 2014-2015 school year. If you have a child that will be five years of age on or before September 1, 2014, your child qualifies for next year's kindergarten program. *State law requires that all school districts in Utah abide by the same September 1st entrance cut-off date.* **You will be required, before enrollment, to provide the child's immunization record and a certified birth certificate** (not a photocopy).

If you know of a neighbor that has a qualifying kindergarten child, please share this information. Ask them to call the school for information on registering their kindergarten child. If you have any questions, please call our school office at 801-826-8200.

TO REGISTER YOUR INCOMING KINDERGARTEN STUDENT:

1. Please fill out the form on the back of this paper.
2. Please provide a birth certificate and immunization record showing current information. The immunization information can be updated before school starts when additional vaccinations are given.
3. Please provide proof of address such as utility bill, rental agreement, or closing papers of home for verification of living within our boundaries.
4. After completing the form on the reverse side, please return to the main office.

Sincerely,



Mrs. Shumard, Principal
801-826-8200

**(PLEASE FILL OUT NEW STUDENT REGISTRATION FORM ON
BACKSIDE OF THIS LETTER)**

CRESCENT ELEMENTARY – NEW STUDENT REGISTRATION

(Please Print)

School year: 2014 / 2015

Name must be the legal name on birth certificate:

Kindergarten ONLY: AM or PM Preference

Student Last Name _____ First _____ Middle _____

Sex: M ___ F ___ Birth Date ___ / ___ / ___ Grade _____ Goes by: _____

This address should be within the school boundaries or a permit must be on file:

Address _____ City _____ Zip Code _____

Home Phone # _____ Best Contact # _____ Email _____

#1 PARENT/GUARDIAN: Last _____ First _____ MI _____

Relationship: _____ Work # _____ Cell # _____

#2 PARENT/GUARDIAN: Last _____ First _____ MI _____

Relationship: _____ Work # _____ Cell # _____

Student lives with: _____ Both Parents _____ Mother/Step Father _____ Father/Step Mother
_____ Mother _____ Father _____ Guardian

Is this student: _____ Yes, Hispanic/Latino _____ No, Not Hispanic/Latino

What is the student's race: _____ American Indian or Alaskan Native _____ Asian
(Check One) _____ Black or African American _____ White
_____ Native Hawaiian or other Pacific Islander

If American Indian or Alaskan Native, please choose one of the following:

_____ North American Indian -- Tribal Affiliation _____
_____ Central or South American Descent of Indigenous People

First language spoken by student: _____ Preferred Language _____

All language commonly spoken in the student's home: _____

1. _____ Yes _____ No Has your child been living in the U.S. for the last 3 years?
2. _____ Yes _____ No Has your child been attending school in the U.S. for the last 3 years?
3. _____ Yes _____ No Do you have legal custody of the child you are registering?
4. _____ Yes _____ No Is the child you are registering a foster child/ward of the court?
5. _____ Yes _____ No Does student have an IEP or is he/she receiving Special Education Services?
6. _____ Yes _____ No Has your child ever attended school in the Canyons School District?

BROTHERS AND SISTERS NAMES (AGES 0 THROUGH 18 ONLY)

Name	Date of Birth	School Attending	Grade
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____

OFFICE USE ONLY: Household ID: _____ Student ID: _____ Today's Date: _____

Entry Date: _____ B/C: Y / N Immunizations: Y / N / Incomplete

Teacher: _____ Proof of Residency: Y / N Permit: Y / N Bus: Y / N