

Registration Checklist (Summer)

Student: _____ Grade: _____ NCWise #: _____

Has student ever attended school in NC? ____ Yes ____ No In Cumberland County? ____ Yes ____ No

If yes, LAST school attended: _____ School year: _____

***Please check if Homeless or an Unaccompanied youth? ____ yes ____ no**

- Current Custody** – By Cumberland County School Board policy, a student must reside with the custodial parent or court-appointed guardian to enroll in our system. If the parents are separated or divorced we must have a copy of the custody agreement. Legal custody must be court-appointed and signed by a judge. Our school system **does not** recognize any form of **power of attorney or notarized statements** for guardianship purposes. If extenuating circumstances, please discuss with a school counselor.
- Photo ID of Parent** – must be a current valid driver's license or military ID
- Proof of Address** – You must provide proof that you reside in our school zone. Acceptable proof is as follows: current electric/gas bill, deed of trust, renting contract/lease with contract information of agent.
- Birth Certificate**
- School Records** - Transcripts, report card, discipline record, attendance
 - IEP and psycho-educational test results or 504 Plan , if applicable**
- Immunization Record**

FOLLOWING FORMS COMPLETED BY PARENT:

- Request for School Records (if previous school was out of county)
- Oath of Affirmation (*Needs to be Notarized*)
- Language Survey Card
- Exceptional Children's Form
- Student Race and Ethnicity Collection Form
- Indian Education Title VII Eligibility Certificate

MUST BE COMPLETED BY COUNSELOR DURING REGISTRATION:

- 30 Day Missing Data Form
- Testing Data Summary
- Provide parent with Parent Portal letter (new student out of county/state ONLY)

Registration completed by: _____ Date Enrolled: _____
(*Must Have Name of Counselor Completing Registration*)



GRAY'S CREEK HIGH SCHOOL

5301 Celebration Drive
Hope Mills, N.C. 28348
Phone: 910-424-8589
Fax: 910-424-7411

Request for Student Records

(Please return a copy of this request when sending records)

Please fax the following documents to 910-424-7411: (check all that apply)

- A complete transcript; including course grades credits and attendance
- Course in progress; grades and attendance at withdrawal
- An interpretation of your grading system
- Standardized test scores, including 3rd through 8th grade EOG and computer skills
- Copy of birth certificate
- Copy of health and immunization records
- Medical and psychological reports
- IEP and psycho-educational test results or 504 Plan, if applicable
- Pending disciplinary action; please state the offense and the action to be taken

**If necessary, please forward to your Exception Children's Department for EC records.*

- Cumberland County Schools please forward the cumulative folder through the courier (only if box is checked)

First Name	M I	Last Name	Today's Date
Student ID # MM-DD-YYYY	Date of Birth 09, 10, 11, or 12	Grade	
Name of Last School Attended			
Address of Last School Attended			
City	State	Zip Code	

Wherever there is a "blank box" or a "check box", please key in the requested information. When the task is completed, please print this form and bring it with you at your appointment.

Note: By law, Parent/Guardian signature no longer required.

Guidance Office Use Only:

Record Requested on: _____

OATH OF AFFIRMATION UPON ADMISSION

I, _____, do solemnly swear (or affirm) that my child, _____, 1) is not currently under suspension or expulsion for any reason from attendance at a private or public school in this or any other state, 2) is currently under a term or suspension or expulsion from a school for conduct that could have led to a suspension or an expulsion from the local school administrative unit and has been identified as eligible for special education and related services under the Individuals with Disabilities Act; 3) is not currently serving a disciplinary reassignment to an alternative school or educational program in lieu of a long term suspension, 4) has not been convicted of a felony in this or any other state.

I UNDERSTAND THAT IF IT IS FOUND THAT THE INFORMATION CONTAINED IN THIS AFFIDAVIT IS FALSE, THE LOCAL BOARD MAY REMOVE THE STUDENT FROM SCHOOL. IF IT IS FOUND THAT I WILLINGLY AND KNOWINGLY PROVIDED FALSE INFORMATION IN THIS AFFIDAVIT, I COULD BE CHARGED AND FOUND GUILTY OF A CLASS 1 MISDEMEANOR AND BE REQUIRED TO PAY THE LOCAL BOARD AN AMOUNT EQUAL TO THE COST OF EDUCATING THE STUDENT ABOVE DURING THE PERIOD OF ENROLLMENT.

This the _____ day of _____, 20_____.

Parent/Legal Custodian Signature

Parent/Legal Custodian Signature

Sworn to and subscribed before me

This the _____ day of _____, 20_____.

Notary Public Printed Name/Signature

My Commission Expires: _____

Gray's Creek High School



Special Education Information for Registration

Date: _____ Student's Name: _____

Has this student ever been identified in the exceptional children's/special education program?

Yes No

Is this student currently identified in the exceptional children's/special education program?

Yes No

If yes, please check the area of Identification:

- AG-Academically Gifted
- AU-Autistic
- BED-Behaviorally Emotionally Disabled
- MD-Mentally Disabled (EMD, S/PMD, TMD)
- OI-Orthopedically Impaired
- OHI-Other Health Impaired
- SLD-Specific Learning Disabled
- S/L-Speech/Language Impaired
- VI-Visually Impaired
- Other: _____

Do you have a copy of the student's IEP? Yes No

Where ever there is a "blank box", "option box", or "check box", please key in the requested information. When the task is completed, please print and bring it with you at your appointment.

_____ Parent/Guardian Signature

Student Race and Ethnicity Collection Form

Directions: Please complete Sections 1, 2, and 3.

Section 1

Student's Name _____ NCWISE # _____

Parent/Guardian Name _____

Parent/Guardian Signature _____ Date: _____

Section 2: Student's Ethnicity

You must **select one (1)** from the following choices (circle one only):

- a. Hispanic/Latino

Note: Hispanic or Latino means a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic/Latino or Latino."

Or

- b. Not Hispanic/Latino

Section 3: Student's Race

You must **select one (1) or more** races from the following five racial groups.
(Circle all that apply):

- a. *American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.*
- b. *Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.*
- c. *Black or African American. A person having origins in any of the Black racial groups of Africa.*
- d. *Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.*
- e. *White. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.*

U.S. DEPARTMENT OF EDUCATION
OFFICE OF INDIAN EDUCATION
WASHINGTON, DC 20202
TITLE VII STUDENT ELIGIBILITY CERTIFICATION
Elementary and Secondary Education Act, Title VII, Part A, Subpart 1

Parents: Please return this completed form to your child's school. In order to apply for a formula grant under the Indian Education Program, your child's school must determine the number of Indian children enrolled. Any child who meets the following definition may be counted for this purpose. You are not required to complete or submit this form to the school. However, if you choose not to submit a form, the school cannot count your child for funding under the program. This form will become part of your child's school record and will not need to be completed every year. This form will be maintained at the school and information on the form will not be released without your written approval.

Definition: Indian means any individual who is (1) a member (as defined by the Indian tribe or band) of an Indian tribe or band, including those Indian tribes or bands terminated since 1946, and those recognized by the State in which the tribe or band reside; or (2) a descendent in the first or second degree (parent or grandparent) as described in (1); or (3) considered by the Secretary of the Interior to be an Indian for any purpose; or (4) an Eskimo or Aleut or other Alaska Native; or (5) a member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

NAME OF CHILD _____ Date of Birth _____
(As shown on school enrollment records)

School Name _____ Grade _____

NAME OF TRIBE, BAND OR GROUP _____

Tribe, Band or Group is: (check one)

Federally Recognized, Including Alaska Native State Recognized Terminated Organized Indian Group Meeting #5 of the Definition Above

Name of individual with tribal membership: _____

Individual named is (check one): Child Child's Parent Child's Grandparent

Proof of membership, as defined by tribe, band, or group is:

A. Membership or enrollment number (if readily available) _____ **OR**

Other (explain) _____

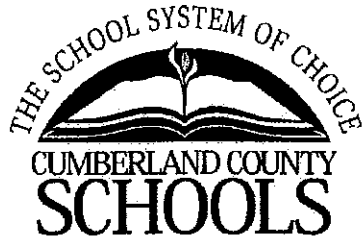
Name and address of organization maintaining membership data for the tribe, band or group:

I verify that the information provided above is accurate:

PARENT'S SIGNATURE _____ DATE _____

Mailing Address _____ Telephone _____

Notice: Public Reporting Burden Notice on Reverse Side



Cumberland County Schools

P.O. Box 2357
Fayetteville, North Carolina 28302
910-678-2300
April 26, 2016

As of May 2014, North Carolina created a State Board of Education policy stating, "Students should be enrolled in school immediately and should not be denied access to school while schools validate documents required to register." Therefore, we are enrolling your child _____ on _____ at _____ High School for the _____ school year.

The items indicated below should be submitted to Guidance:

- | | |
|------------------------------------|--|
| Transcript/Final Report Card _____ | Date provided to counseling office _____ |
| Current school year schedule _____ | Date provided to counseling office _____ |
| Birth Certificate _____ | Date provided to counseling office _____ |
| Shot Records _____ | Date provided to counseling office _____ |
| Custody Paperwork _____ | Date provided to counseling office _____ |
| Proof of Address _____ | Date provided to counseling office _____ |
| Discipline Records _____ | Date provided to counseling office _____ |
| Attendance Records _____ | Date provided to counseling office _____ |

I, _____ understand that I must **submit the materials indicated above, no later than 30 calendar days after enrollment.** I also recognize that the **missing materials might impact my child's grade placement, class schedule, ability to participate in athletic activities, and/or career progression.**

(Parent Signature)

(Counselor/Registrar/Principal Signature)

Date Missing Paperwork is Due to Counseling Office

Data Managers must have official approval documentation that the student has been given credit for the course before entering reason/exemption codes in the file.

SCHOOL NAME: _____ SCHOOL CODE: _____

STUDENT NAME: _____ GRADE: _____ POWERSCHOOL ID: _____

TEST TO BE ENTERED:			EXAMPLE:		
PowerSchool TEST	TEST DATE	REASON CODE	PowerSchool TEST	TEST DATE	REASON CODE
READING 08	05/01/		READING 08	5/1/2014	H
MATH 08	05/01/		MATH 08	5/1/2014	H
SCIENCE 08	05/01/		SCIENCE 08	5/1/2014	H
MATH I			MATH I	6/1/2014	S
BIOLOGY			BIOLOGY	1/1/2015	S
ENGLISH II			ENGLISH II	6/1/2015	S

Completed by: _____ Date: _____

Entered in Reason Code file by: _____ Date: _____

NOTES:

The date you will use for the EOG will be 05/01/YYYY. This will be the year they should have taken the EOG.

The date you will use for the Fall EOC will be 01/01/YYYY.

The date you will use for the Spring EOC will be 06/01/YYYY.

Reason Code List for the 2015-16 School Year Only

Reason codes identify the reason or other special circumstance a test score is not included in a student's record. Some reason codes will be exported via ACCTEST and may be used by the NCDPI/Accountability Services software. Use the 1st day of the month as the test date.

A = Absent from the test.

B = First year limited English proficient (LEP 1st Year).

G = Student was approved by the NCDPI for a medical exception. Code G must be manually entered into PowerSchool for the student's historical record.

H = Transfer without an end-of-grade (EOG) assessment score (e.g., grade 8 ELA/reading and math EOG scores). This reason code must not be used for end-of-course (EOC) assessments.

M = Student participated in an alternate assessment (i.e., **NCEXTEND1**).

S = Student transferred from out of state or from a non-public school, and the principal authorized course credit as having participated in the test.