



Davis School District

FARMINGTON HIGH SCHOOL

New Student Checklist information

Please provide the school with the following information when you come to enroll at Farmington High School.

1. A **PARENT/ LEGAL GUARDIAN** with Photo ID must be present at time of registration.

2. An **Original Birth Certificate**

3. Copy of **Complete Immunizations**

The following are state required

5 DTP/DtaP/DT – 4 doses if 4th dose was given on/after 4th birthday

4 Polio – 3 doses if 3rd dose was given on/after 4th birthday

2 Measles, Mumps, Rubella (MMR)

3 Hepatitis B

2 Hepatitis A

2 Varicella (Chickenpox) – history of the disease is acceptable, requires a signed document from healthcare provider

1 Tdap

1 Meningococcal

Or, an exemption form available at www.immunize-utah.org Must complete the online education module.

4. **PROOF OF RESIDENCY** – A list of required document options is available on the residency printable form.

5. **Does your student have an IEP or 504?** ☐ Yes ☐ No

If yes, you Must Provide a Copy of those Documents before your student can be registered.

6. **Student Information Card**- Must be completely filled out and signed by a parent.

7. **Guardianship Status Form** - *If Items 2- 5 on status form are check, legal documentations is required.*

8. **Registration Fees Must Be Paid Upon Enrollment** - Please see main office secretary for assistance.

Registration cannot be done until these dates and forms are provided.

**FARMINGTON HIGH SCHOOL
STUDENT INFORMATION FORM**

The District is requesting this information under the authority of PL 94-142, Title IV of the Civil Rights Law and State Administrative Rule R227-716 (1 to 5). This information will be handled confidentially and will be used only for the purposes noted in the law or rule. This information will not subject you to any unfair or discriminatory treatment.

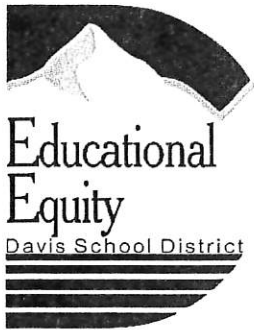
FOR SCHOOL USE ONLY:		Proof of Residence	Variance	Track	Birth Certificate	Special Concerns	Teacher	SSID
Student's Legal Last Name		Legal First Name		Middle Name	Suffix	Preferred Last Name	Preferred First Name	Date of Birth
								Grade in School
Male	Female	Ethnicity (Choose one): Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/>		Race (Choose one or more, regardless of Ethnicity): American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/>		If Born Outside U.S. What Country <input type="text"/> Date Entered U.S. <input type="text"/>		
School Last Attended		Address						
Father Guardian Information First Name Middle Name Suffix				Mother Guardian Information First Name Middle Name Suffix				
Last Name		City		State	Zip	Apt #	Primary Phone	
Address								
Mailing Address (if different)		City		State	Zip	Apt #	Secondary Phone	
Workplace:	Exl.	Economic Guardian		Yes	No	Economic Guardian		Yes
Work Phone:		Resides With		Yes	No	Resides With		Yes
		Mailings		Yes	No	Mailings		Yes
Email Address		Last 4 Digits of Ssn		for online lunch payment		Last 4 Digits of Ssn		
						for online lunch payment		
Other Guardian Information First Name Middle Name Suffix				Physical Status of Student Glasses/Contacts <input type="checkbox"/> Hearing Aid <input type="checkbox"/> Physical Problems <input type="checkbox"/> Daily Medication <input type="checkbox"/>				
Last Name				Health Problems:				
Address								
Mailing Address (if different)				Special assistance required for student to attend school:				
				Transportation <input type="checkbox"/> Adult Assistance <input type="checkbox"/> Wheelchair <input type="checkbox"/> Special Equipment <input type="checkbox"/>				
Workplace:				Physician				
Work Phone:				Phone Nbr				
Email Address				Special Programs student currently receives				
				504 <input type="checkbox"/> ESL <input type="checkbox"/> Spec Ed/Resource - Speech and Language <input type="checkbox"/> Title I <input type="checkbox"/>				
				Absence Notification				
				Email <input type="checkbox"/> Internet <input type="checkbox"/> Phone <input type="checkbox"/> No Notification <input type="checkbox"/>				
What language does your son or daughter speak most often at home?				What is the first language your son or daughter learned to speak?				
What language do you speak most often at home (parents or guardians)?				What is the first language you learned to speak (parents or guardians)?				

PLEASE FILL OUT BOTH SIDES

Emergency Contacts and Authorization to Pick Up (enter at least two)			
Contact (Other than guardian)	Relationship	Phone Nbr	Ext. Cell/Alt. Phone

Father Military/Federal Employment Information		Federal Facilities/Codes	
Military Active duty in Military: Yes No Date Activated: Military: US Military Non US Military Country: Branch: Air Force Air Force Reserve Air National Guard Army Army National Guard Navy Navy Reserve Other Coast Guard Reserve Rank: Unit:		3 - Hill Air Force Base Clearfield 4 - Orbital ATK Promontory North Plant Brigham City 5 - A N G Facility Salt Lake City Intl. Apt #1, SLC 6 - ARSR Site Francis Peak 7 - Dugway Proving Grds Tooele, Dugway 8 - Fed Depot Clearfield 10 - Fort Douglas Salt Lake City 11 - NG Facility Camp Williams, Lehi 12 - Tooele Army Depot Tooele 13 - VA Hosp 500 Foothill Dr - Ft Douglas Sta., SLC 15 - IRS 1160 West 1200 South, Ogden 16 - Orbital ATK, Inc. Bacchus Works Magna - Plant 81 17 - Army Reserve Center Salt Lake City 18 - Courthouse & Fed Office Bldg 25th St - Grant Ave - 24th St - Kiesel St., Ogden 19 - FAA Bldg 2150 W. Sixth St - N Intl. Apt., SLC 20 - Fed Office Bldg 125 S. State St - 1st S., SLC 21 - Forest Serv Bldg 507 25th - 504 24th - Adams St., Ogden 22 - Job Corps Cons Str (#323) Mill Springs - Weber Basin Ogden 23 - Frank E. Moss Courthouse 350 S. Main St., SLC 24 - Utah Defense Depot Ogden	
Employment at Federal Facility (see valid Federal Facilities/Codes on right side of form) Employed by contractor at Federal Facility on list (Hill Air Force Base, IRS)			
Employed at Federal Facility on list: Yes No		Contractor Name: Hours per day at facility:	
Federal Facility Name/Code:			
Mother Military/Federal Employment Information			
Military Active duty in Military: Yes No Date Activated: Military: US Military Non US Military Country: Branch: Air Force Air Force Reserve Air National Guard Army Army National Guard Navy Navy Reserve Other Coast Guard Reserve Rank: Unit:			
Employment at Federal Facility (see valid Federal Facilities/Codes on right side of form) Employed by contractor at Federal Facility on list (Hill Air Force Base, IRS)			
Employed at Federal Facility on list: Yes No		Contractor Name: Hours per day at facility:	
Federal Facility Name/Code:			
Other Military/Federal Employment Information			
Military Active duty in Military: Yes No Date Activated: Military: US Military Non US Military Country: Branch: Air Force Air Force Reserve Air National Guard Army Army National Guard Navy Navy Reserve Other Coast Guard Reserve Rank: Unit:			
Employment at Federal Facility (see valid Federal Facilities/Codes on right side of form) Employed by contractor at Federal Facility on list (Hill Air Force Base, IRS)			
Employed at Federal Facility on list: Yes No		Contractor Name: Hours per day at facility:	
Federal Facility Name/Code:			

Parent or Legal Guardian Signature		Date	
If translation services are needed please check the box and indicate the language.		Please provide the service <input type="checkbox"/> Language	



**Student Information Questionnaire
McKinney-Vento Eligibility
Davis School District**

This form is intended to address the McKinney-Vento Homeless Assistance Act 42 U.S.C.11435. This form helps **determine the services the student is eligible to receive.**

Is the student's current address a temporary living arrangement due to loss of housing or economic hardship?

Yes ☐

No ☐

If you answered YES please complete the remainder of this form and return it to the school office.

Which of the situations below apply to the student?

- ☐ H1 Student is sharing a residence with one or more families because of economic hardship.
- ☐ H2 Student is living in a motel or hotel.
- ☐ H3 Student is living in a shelter (domestic violence, emergency, or transitional housing units).
- ☐ H4 Student is living in a car, park, campground, or public place
- ☐ H5 Student is living in a place without adequate facilities (not designed for heat, electricity, water).
- ☐ H6 Student is seeking enrollment without an accompanying parent (not in foster care).

Student Name: _____ School: _____

Student ID# _____ Date of Birth: _____ Grade: _____ Gender: _____

Names and ages of siblings:

Parent Signature: _____

- **Please notify the school if your living status changes.**
- **If a false claim is made about your living situation, enrollment may be affected.**

Parents: Please call the Davis School District Education Equity Department if you need assistance or have questions concerning this form at (801) 402-8730.

School: Please return only those forms indicating a temporary residence to "District Homeless Liaison" at the District Office. Thank you.

Davis School District

Guardianship Status

Under Utah Law and Davis School District Policy, a child is eligible to attend a school if their parent or legal guardian resides within the school's boundaries. Exceptions to this may only be granted through the Boundary Variance process or the Student Services Department.

Student's Name _____

Student's Birth date _____

Please select the statement below which best describes your relationship to the student whom you wish to register at this school. A separate form must be completed for each child you are registering.

☐ * I am the parent (birth / adopted) of this child and this child lives with:

☐ Both Parents

☐ Mother

☐ Father

☐ I am the parent (birth/ adopted) of this child and am not currently married to the other parent:

☐ I have been awarded physical custody through the courts

☐ ** I am not listed on the birth certificate, but have established paternity

☐ **I am not the parent (birth or adopted) of this child. I am a relative or friend.

(Check only one)

☐ I have been awarded legal guardianship of this child through the court

☐ I have not been awarded legal guardianship of this child through the court.

☐ ***I am a foster or proctor parent.

Caseworker Name _____ Phone# _____

☐ None of the above statements describe my relationship to this child. (Please explain)

Your Name: _____ Address: _____

Your Signature: _____ Date _____

* A copy of the birth certificate is required

** To assist us in complying with court orders, please provide us with a copy of all legal documents.

*** DCFS, Foster Care or Youth Corrections placement requires a District Case Management Team staffing with the Caseworker, prior to enrollment.

All Foreign Exchange Students must process through Student Services

School Proof of Residency Procedures

To be enrolled in _____ School, families must present TWO forms of documentation showing that their primary residence (the house in which they live) lies within the school boundaries. We may ask families to periodically update their residency in order to keep our records current. The following documents may be used in determining residency:

All applicants must submit at least one document from Column A and one document from Column B OR two documents from Column B.	
Column A	Column B
Documents must include parent or legal guardian's name (custodial parent or parent student lives with most in cases of divorce), and physical address.	
<ul style="list-style-type: none"> • Rental/Lease Agreement • Purchase/Escrow Agreement • If you are living with another family, or you cannot provide either of the above: (1) provide a notarized statement from the person you are living with stating that you and your child(ren) live there, the address, and for what period of time, AND (2) a document showing that the person you are living with resides within district and school boundaries (see acceptable documents above); AND (3) one or more items from Column B showing you live at the location. <p><i>If the situation is temporary, once you have moved into your own home, you will need to bring in proof of residency for your new home.</i></p>	<p>Dated within the past 60 days:</p> <ul style="list-style-type: none"> • Utility bill (gas, electric, home telephone, cable, etc.) • Letter from approved government agency (assisted housing, food stamps, unemployment payment) • Payroll stub • Bank or credit card statement • Valid driver's license • Current vehicle registration or insurance • Valid Utah photo identification card • Medical billing or insurance information <p>Dated within the past year:</p> <ul style="list-style-type: none"> • W-2 form • Property tax bill

The following **do not** establish residency:

- Powers of Attorney
- Property owned in school district boundaries
- Letters from friends or relatives
- P.O. Box in school district boundaries

Student's Name: _____ Date: _____

Parent/Guardian Names: _____

Address of _____

Parent/Guardian: _____

If the student has a sibling currently attending this school for which Proof of Residency has already been presented, school staff may consider the prior documentation to be sufficient for this student.

Name of sibling currently attending this school: _____

Grade of sibling: _____

School staff must verify and make notation below

This proof of residency procedure does not apply to homeless students.
If you believe your family fits this exception, please ask school personnel for a Student Information Questionnaire

To be completed by school personnel

Type of document showing residency	Date on Document
1.	
2.	
3.	

School Staff Signature: _____

Date: _____



Farmington High School

New/Transfer Student Record Release

This certifies that the student named below has enrolled at Farmington High School.
Please forward the academic records to the date of withdrawal.

Student Name	Birthdate	Current Grade
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Name of School Last Attended	Date
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Address of School

Phone Number

Please include the following information:

- **Official Transcript**
- Cumulative Record or similar record
- Birth Certificate
- Medical and Immunization Records
- Pertinent Test Scores-Competency/End of Level Testing
- Withdrawal grades and date of withdrawal (if applicable)
- Explanation of Grading System
- Discipline/Safe School Information
- Special Education Records (if applicable)

The Federal Law 9931 allows for educational records to be sent to other educational agencies without the parent's signature requirement.

Please forward all records to:

Farmington High School
Attn: Registrar
548 West Glovers Lane
Farmington, Utah 84025

Records can be emailed to:

scloward@dsdmail.net

Thank you,
Farmington High Registrar
801-402-9079