



# HARDWICK ELEMENTARY SCHOOL

135 SOUTH MAIN STREET, P.O. BOX 515  
HARDWICK, VT 05843

PHONE: (802) 472-5411  
FAX: (802) 472-3325

PATRICK PENNOCK  
PRINCIPAL

Welcome to Hardwick Elementary School,

Thank you for taking the time to fill out these important forms for the registration of your student. Please see checklist to ensure that this process is completed smoothly.

- **Photo ID:** may be required for new students. Please have a valid driver's license or other ID ready.
- **New Student Registration Form:** Complete all sections applicable to your student on all pages, sign in all designated areas, and return. Please note, in the **Primary and Secondary Contacts** section, there are 4 sections for parents to accommodate who have 2 households, and may have a step parent or partner living with the student. Please use the **Alternative Emergency Contacts** section for folks other than parents, step parents or parent's partners, who we are allowed to contact if we cannot reach parents.
- The **center page** only needs to be signed if we **CANNOT** release a student's name or photo, such as a photo or printed Honor Roll list in the Hardwick Gazette and on our website.
- **Primary Home Language Survey:** Complete, sign, and return.
- **Student Custody Form:** If applicable, you may have to complete this form, sign, **AND** provide the school with copies of any legal documents which apply to custody, adoption, visitation/parental rights, temporary placement, etc.
- Provide a copy of student's **Birth Certificate\*** and a copy of student's most recent **Immunization Record\*** from his/her Primary Care Provider.
- **Proof of Residency:** is required for new families. Please see the attached document with examples.
- We have a copier at school to assist you as needed. We also accept faxed copies and our fax # is 472-3325.
- Families will be contacted as soon as possible with classroom placement. In the case of Kindergarten registration, letters will be mailed home in the late summer with placement and special events to get you and your student ready for school.

Kindly,  
Christine Gifford  
Registrar

\*Birth Certificate and Immunization record copies may be on file with your child's preschool.

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# OSSU School Entry Requirements

## Craftsbury, Lakeview, Hardwick, Hazen, Wolcott, Woodbury Schools

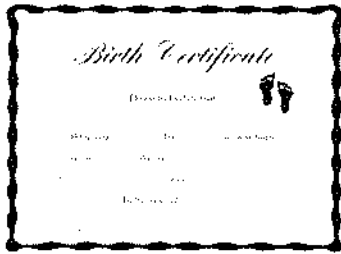
### Legal Proof of Age

Children must be 5 years or older as of September 1 for Kindergarten.

- \*Certified or copy of child's Birth Certificate

To get copies online, use this link for children born in Vermont:

<https://www.healthvermont.gov/health-statistics-vital-records/vital-records-population-data/birth>



Other possible accepted items are:

- \*Baptismal record
- \*Private Insurance Policy

### Health Requirements

- \*Annual Health forms completed
- \*Copy of Immunization Record
- \*Proof of recent Sports Physical (if playing school-sponsored sports)

### Proof of Residency

**One of the following items are required:**

- \*Current Tax bill
- \*Current mortgage or closing statement that reflects an in-district address and parent/legal guardian's name
- \*Formal lease or landlord's note stating in-district address and parent/legal guardian's name as lessee
- \*If residing with friends or family, a notarized letter stating an in-district address and the property owner's name and telephone number.

**Two of the following items are required:**

- \*Valid Vermont Driver License or valid Vermont ID card with an in-district address
- \*Current utility bill with name listed and physical address included
- \*Valid Insurance card, EBT card, library card or other ID with name.
- \*Valid vehicle registration card
- \*Bank statement for current month or last month

**OSSU reserves the right to require the full OSSU Residency Affidavit if needed.**

**Orleans Southwest Supervisory Union  
Hardwick Elementary School  
STUDENT REGISTRATION FORM**

Last updated 08/2015

This form is required for registration and enrollment of your child. Failure to complete and return this form will delay the registration process. Orleans Southwest Supervisory Union (OSSU) reserves the right to request proof of residency either at the time of enrollment or during the school year (the types of documents that will be accepted as proof of residency can be found on OSSU's Residency Verification Guidelines). Providing false information on any registration forms may result in unenrollment of your child in this school. Changes to any information contained within this form should be immediately reported to the school to ensure the school has the most accurate information about your child on file.

<b>STUDENT INFORMATION</b>	
<b>Student Full Name (First Middle Last):</b>	
<b>Student Preferred Name (Nick Name; optional):</b>	
<b>Student Home Phone:</b>	__ Unlisted Number
<b>Student Cell Phone (Optional):</b>	
<b>Physical Street Address (911):</b>	
<b>Physical City, ST, Zip (911):</b>	
<b>Mailing Street Address:</b>	
<b>Mailing City, ST, Zip:</b>	
<b>Town of Residence (Check one):</b>	<input type="checkbox"/> Craftsbury <input type="checkbox"/> Greensboro <input type="checkbox"/> Hardwick <input type="checkbox"/> Stannard <input type="checkbox"/> Wolcott <input type="checkbox"/> Woodbury <input type="checkbox"/> Other:
<b>Has student <u>ever</u> attended a school in OSSU?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: School Name: Dates Attended:
<b>Name of Last School Attended (K-12):</b>	
<b>Grade Level at Last Attended School (K-12):</b>	
<b>Services Received at Last Attended School (K-12):</b>	<input type="checkbox"/> IEP <input type="checkbox"/> 504 <input type="checkbox"/> EEE <input type="checkbox"/> EST <input type="checkbox"/> ELL <input type="checkbox"/> Other:
<b>Date of Birth (mm/dd/yyyy):</b>	
<b>Grade Level:</b>	
<b>Gender:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other:
<b>Ethnicity (Check one):</b>	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Race (Check all that apply):</b>	<input type="checkbox"/> American Indian / Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black / African American <input type="checkbox"/> Native Hawaiian / Pacific Islander <input type="checkbox"/> White
<b>Primary Language:</b>	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Chinese <input type="checkbox"/> French <input type="checkbox"/> Other:
<b>Migrant Status:</b>	<input type="checkbox"/> Non-Migrant <input type="checkbox"/> Migrant
<b>Homeless Status:</b>	<input type="checkbox"/> Not Homeless <input type="checkbox"/> Homeless <input type="checkbox"/> Homeless receiving services
<b>Is student in State care and custody?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please complete separate state placement form
<b>Siblings under the age of 21 (Name and birthdate):</b>	Name/DOB: <span style="float: right;">Name/DOB:</span> Name/DOB: <span style="float: right;">Name/DOB:</span> Name/DOB: <span style="float: right;">Name/DOB:</span>
<b>Internet Access:</b>	At times your child maybe asked to complete assignments using the internet. Does your child have access to the internet at home? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Transportation (K-12):</b>	What is the student's most common mode of transportation to and from school? <input type="checkbox"/> Bus <input type="checkbox"/> Walks <input type="checkbox"/> Car/Carpool <input type="checkbox"/> Other If Other provide details:
<b>Early Release Preference (K-12):</b>	What should the school do in the event of an early dismissal? <input type="checkbox"/> Send student home <input type="checkbox"/> Send home with older sibling <input type="checkbox"/> Send to Daycare <input type="checkbox"/> Other <span style="float: right;">If Daycare or Other provide details:</span>

**SCHOOL REGISTRATION FORM - Hardwick Elementary School - Page 2**

**PRIMARY GUARDIANS** (i.e. Legal Guardians who will receive school mail/notifications)

Parent/Guardian Name: _____ Relationship to Student: _____ Lives with student:     ___ Full-time ___ Part-time ___ N/A Legal Guardian:         ___ Yes ___ No Has custody of student?   ___ Yes ___ No Mailing Address:         ___ Check here if same as student  Mailing City, ST, Zip: _____ Home Phone:             Cell Phone: _____ Email: _____ Employer:               Work Phone:             ext: _____ Best Means of Daytime Contact:   ___ Home ___ Cell ___ Work	Parent/Guardian Name: _____ Relationship to Student: _____ Lives with student:     ___ Full-time ___ Part-time ___ N/A Legal Guardian:         ___ Yes ___ No Has custody of student?   ___ Yes ___ No Mailing Address:         ___ Check here if same as student  Mailing City, ST, Zip: _____ Home Phone:             Cell Phone: _____ Email: _____ Employer:               Work Phone:             ext: _____ Best Means of Daytime Contact:   ___ Home ___ Cell ___ Work
--	--

**SECONDARY GUARDIANS** (Other parents/guardians; only legal guardians receive school mail)

Parent/Guardian Name: _____ Relationship to Student: _____ Lives with student:     ___ Full-time ___ Part-time ___ N/A Legal Guardian:         ___ Yes ___ No Has custody of student?   ___ Yes ___ No Receive school mail?     ___ Yes ___ No Mailing Address:         ___ Check here if same as student  Mailing City, ST, Zip: _____ Home Phone:             Cell Phone: _____ Email: _____ Employer:               Work Phone:             ext: _____ Best Means of Daytime Contact:   ___ Home ___ Cell ___ Work	Parent/Guardian Name: _____ Relationship to Student: _____ Lives with student:     ___ Full-time ___ Part-time ___ N/A Legal Guardian:         ___ Yes ___ No Has custody of student?   ___ Yes ___ No Receive school mail?     ___ Yes ___ No Mailing Address:         ___ Check here if same as student  Mailing City, ST, Zip: _____ Home Phone:             Cell Phone: _____ Email: _____ Employer:               Work Phone:             ext: _____ Best Means of Daytime Contact:   ___ Home ___ Cell ___ Work
---	---

**Legal Information:** Is anyone forbidden access to the student? You must attach documentation, such as a court order or restraining order, to be honored

**ALTERNATE EMERGENCY CONTACTS**

List up to three people OTHER THAN primary or secondary guardians to be called if above contacts are not available

Name & Relationship	Phone 1/Type (h,w,c)	Phone 2/Type	Phone 3/Type

**SIGNATURE**

I certify that this information is true and correct. If any of the information contained on this form should change during the school year, I understand that it is my responsibility to inform Hardwick Elementary School immediately.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Orleans Southwest Supervisory Union  
Hardwick Elementary School**

**AUTOMATED NOTIFICATION SYSTEM**

OSSU uses an automated notification system called "Alert Solutions" to communicate school-related information by telephone and email, including:

**School- or OSSU-wide Emergency Messages:** occurrences that impact the health and safety of students and staff. These may include, but are not limited to: school closings or delays due to inclement weather, natural disasters, or other occurrences (e.g., lockdowns, building evacuations or police activity on or around campus). Visit [www.ossu.org](http://www.ossu.org) for more information on emergency notification procedures.

**School-based Important Messages:** important information that does not pertain to the entire supervisory union, including but not limited to school-, class-, bus-, or grade-level messages that need to go out prior to when the school opens or after school dismisses (e.g., principals sending messages about a delayed bus from a field trip or sporting event).

**Events & Announcements:** Principals or the Superintendent may communicate upcoming opportunities or events of educational value for students, parents/guardians, or staff (e.g., performances, staff meetings, testing, open houses, back-to-school events). The system will not be used to disseminate information on behalf of political candidates, political parties, religious organizations, or commercial events or products.

We recommend that parents/guardians include at least one phone number and email address for emergency and important school-based notifications. Because we are aware that using the system for the dissemination of non-essential messages could be irritating to some, parents/guardians have the choice to opt out of additional events and announcement phone calls.

In order to receive notifications quickly and efficiently, parents/guardians can indicate the best phone numbers and email addresses to be included for different times of day (work vs. home). Please carefully review the information listed below and make appropriate changes. Please allow up to three weeks for your information to be updated after it is returned to the school.

**OSSU AUTOMATED NOTIFICATION CONTACTS**

**EMERGENCY AND IMPORTANT SCHOOL NOTIFICATIONS**

Please enter up to three phone numbers and emails to be used for emergency and/or important notifications. Depending on the nature of the event or emergency, calls will be made to daytime/work numbers, or early AM/evening numbers.

<b>Notification Hours</b>	<b>Contact 1</b>	<b>Contact 2</b>	<b>Contact 3</b>
Business Hours (8-5)			
Early AM or Evening			
Email (any time)			

**TEXT MESSAGES**

I authorize OSSU to use the numbers above to send me mobile text messages:

Yes       No

**NON-EMERGENCY EVENTS & ANNOUNCEMENTS**

If you do NOT wish to receive non-emergency phone calls, please check here:

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Orleans Southwest Supervisory Union**

Hardwick Elementary School

**USE OF STUDENT DIRECTORY INFORMATION AND PHOTOS ANNUAL OPT-OUT FORM**

**ANNUAL NOTIFICATION**

The Family Educational Rights and Privacy Act (FERPA), a Federal law, requires that Hardwick Elementary School, with certain exceptions, must obtain your written consent prior to the disclosure of personally identifiable information from your child's education records. However, Hardwick Elementary School may disclose appropriately designated "directory information" without written consent, unless you have advised the school not to release this information.

Hardwick Elementary School has designated the following information as directory information:

- |  |   |
|--|---|
| <input type="checkbox"/> Student's name          | <input type="checkbox"/> Major field of study   |
| <input type="checkbox"/> Date of birth           | <input type="checkbox"/> Participation in officially recognized activities and sports |
| <input type="checkbox"/> Address                 | <input type="checkbox"/> Dates of attendance  |
| <input type="checkbox"/> Electronic mail address | <input type="checkbox"/> The most recent educational agency or institution attended   |
| <input type="checkbox"/> Telephone number        | <input type="checkbox"/> Weight and height of members of athletic teams               |
| <input type="checkbox"/> Photograph              | <input type="checkbox"/> Degrees, honors, and awards received                         |

Parents/Guardians have the right to choose whether your child's information is released or not. Please check the appropriate boxes below and return this form to Hardwick Elementary School before **October 1st**.

Parents, guardians, or eligible students who do not check a box, or who do not return this form, give their implied consent for release of directory information, consent to use of student photographs (grades K-12), consent to release directory information to the military (grades 9-12 only), and consent to release directory information to institutions of higher education (grades 9 & 12).

Please return this form directly to Hardwick Elementary School either in person or by U.S. mail. If you have more than one child in school, this opt out form must be completed for each child.

PLEASE MARK AN "X" NEXT TO EACH APPLICABLE STATEMENT BELOW:

ALL STUDENTS PK-12

I DO NOT consent to the release of directory information about the student named below for use in publications such as newspapers, public rosters for sports or honor roll, except as authorized by law.

I DO NOT consent to the release of photographs/video of the student named below for the use in publications such as newspapers, websites or internet.

ALL STUDENTS IN GRADES 9 - 12

I DO NOT consent to the release of directory information to the military about the student named below.

I DO NOT consent to the release of directory information about the student named below to colleges or institutions of higher education that request it

Student's Full Legal Name (Print): \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_

Student's School: Hardwick Elementary School

Student's Grade: \_\_\_\_\_

Parent/Guardian Full Legal Name (Print): \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

# Hardwick Elementary School

## Student Custody Form

Please complete this form to ensure that both the student's and parent's rights are protected.

Student(s) Name \_\_\_\_\_

Printed Name of Legal Guardian(s) \_\_\_\_\_ **and**

relationship to student(s) listed above \_\_\_\_\_

Student lives with:

- Both parents in the same home (legal parents as stated on student's birth certificate). Please stop here and sign below.

If parents are separated/divorced, legal custody\* is with: \_\_\_mother \_\_\_ father \_\_\_ joint \_\_\_ other

AND indicate below with whom the student(s) live(s). ***NOTE: Legal custody documents are required for registration.***

- Mother only
- Father only
- Mother and Step-Parent/Partner
- Father and Step-Parent/Partner
- Grandparent(s) or other family member(s)
- Foster Parent(s) Case manager name (if not listed above) \_\_\_\_\_
- Other (such as temporary placement)
- Joint custody agreements/arrangements, such as weekdays with one parent and weekends with another.

- 
- 
- \*Legal documents provided for student file if applicable.

(for office use only:) received by: \_\_\_\_\_ date: \_\_\_\_\_

**Signature:** I certify that this information is true and correct. If any of the information contained on the form should change, I understand that it is my responsibility to inform Hardwick Elementary School immediately.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_





## Primary/Home Language Survey for All Kindergarten and Incoming Students

**Instruction for schools in completing the survey:**

1. Interview the parents/guardians of **ALL** new Kindergarten and incoming students in grades K-12 and record all information requested.
2. Provide interpreting services whenever necessary.
3. Please check to see that **all questions** on the form are answered.
4. A copy of any survey with a language other than English should be referred to the EL Teacher for further screening to determine if the student is an **English Learner (EL)**.
5. Surveys for students identified as ELs should be faxed (802-828-6433) or mailed to:  
Jim McCobb, Title III/EL State Director, Vermont Agency of Education, 1 National Life Drive, Davis 5, Montpelier, VT 05620-2501.
6. Place the original survey form in the student's permanent file.
7. For questions contact Jim McCobb at james.mccobb@vermont.gov or via phone (802) 828-1533.

<b>Student Information (Parents/Guardians should complete this section.)</b>			
First Name:	Last Name:	Date of Birth (Month/Day/Year)	Gender:  F <input type="checkbox"/> M <input type="checkbox"/>
Country of Birth:	Date of Entry in U.S. (Month/Day/Year):	Date student first began <b>Kindergarten (or higher grade)</b> in any U.S. school (Month/Day/Year):	
Questions for Parents/Guardians		Response	
What is the native language of each parent/guardian?			
What language(s) are spoken in your home?			
Which language did your child learn first?			
Which language does your child use most frequently at home?			
Which language do you most frequently speak to your child?			
What other languages does your child know?			
<b>School Information (School Staff should complete this last section based on information gathered from parent/guardian.)</b>			
What school <b>will</b> the student attend?			
Beginning date in this school (Month/Day/Year):	What grade will the student enter?	Person Conducting Survey:	





## VERMONT MIGRANT EDUCATION PROGRAM REFERRAL FORM

Please complete and return to the address listed above.

Date completed \_\_\_\_\_

Referred by \_\_\_\_\_ School/Agency \_\_\_\_\_

Contact of person making referral: (phone) \_\_\_\_\_ (email) \_\_\_\_\_

Parent/Guardian/ OSY name \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Message Phone \_\_\_\_\_

**Please list all children/youth ages 0 to 22:**

Child:	Grade:	School:
Child:	Grade:	School:
Child:	Grade:	School:
Child:	Grade:	School:

**Please list all information that would help determine eligibility.**

*Answers to the following questions are especially relevant:*

What would be the best time to visit?:
Student's age/DOB (if Out of School Youth):
Moved from where? Moved to where?:
Directions to student housing (if not obvious):
Current occupation of parents or out-of-school youth:
Other useful information:





## MIGRANT EDUCATION ELIGIBILITY CRITERIA

An eligible student can of any race and/or ethnicity and speak any language. Staff from the Vermont Migrant Education Program will help families determine whether a family or student meets the eligibility requirements described below:

### *Who qualifies for our program?*

A child may qualify if the following apply:

- Child is under age of 22 has not graduated from high school or another accreditation program; and
- Child has moved across school district lines with a farmworker (parents, guardians, etc); and
- Parent/guardian has engaged in qualifying seasonal or temporary agricultural work.

### *Examples of Qualifying Work:*

- ✓ Dairy;
- ✓ Hemp;
- ✓ Poultry and livestock;
- ✓ Slaughterhouse, meat processing;
- ✓ Fruit and vegetable production, harvesting, processing;
- ✓ Greenhouse or plant nursery work including trees, plants, flowers;
- ✓ Field crop work for animal feed or human consumption;
- ✓ Working in the woods logging, maple sugaring, planting trees, Christmas treeing, etc.
- ✓ Working in the catching, raising, harvesting or initial processing of fish or shellfish.



### *For eligible students enrolled in school, VMEP offers:*

- Parent and school communication support. (Includes ensuring interpretation/translation is available to student/family.)
- School supplies and books
- Support for school enrollment including PK
- Referrals to afterschool, summer and health programs and services
- Information on post-secondary opportunities

