



PILLAGER PUBLIC SCHOOLS

323 E. 2nd Street South, Pillager, MN 56473

www.isd116.org

Grades K-12 Enrollment Packet for Resident District Students

Please complete the following enrollment forms:

1. Pillager Public Schools Enrollment Information
2. Ethnic and Racial Demographic Designation Form
3. Student Transportation Information Form
4. Transcript Release Form- ISD #116 will request records from the previous school, enrollment is not complete until we have received student records.
5. Minnesota Language Survey
6. Please provide us with a copy of the Student's Birth Certificate

Completed forms may be dropped off at the school or sent in by mail, email or fax to:

Elementary School (K-4) Brenda Uselman Principal: Josh Smith 323 E. 2 nd Street South Pillager, MN 56473 Fax: 218-746-2134 Phone: 218-746-2111 Email: buselman@isd116.org	Middle School (5-8) Katie Schaefer Principal: Wade Mortenson 323 E. 2 nd Street South Pillager, MN 56473 Fax: 218-746-2153 Phone: 218-746-2112 Email: kschaefer@isd116.org	High School (9-12) Brittney Lunday Principal: Jason Savage 323 E. 2 nd Street South Pillager, MN 56473 Fax: 218-746-3406 Phone: 218-746-2113 Email: blunday@isd116.org
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Please note: Completed forms must be received a minimum of 3 days prior to enrollment to ensure all appropriate accommodations have been made.

FOR OFFICE USE ONLY

Today's Date: _____ Teacher: _____
Start Date: _____ Bus #: _____

PILLAGER PUBLIC SCHOOLS ENROLLMENT INFORMATION

STUDENT'S LEGAL NAME: _____
Last First Middle

GRADE _____ SEX M / F BIRTHDATE _____ PLACE OF BIRTH _____

The U.S. Department of Education requires the following information:

ETHNICITY: Hispanic or Latino? ☐ Yes ☐ No

RACE: ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian/Pacific Islander ☐ White

PRIMARY HOME LANGUAGE: _____

STUDENT LIVES WITH: ☐ Both Parents ☐ Father ☐ Mother ☐ Father and _____ ☐ Mother and _____
☐ Guardian ☐ Foster Parents ☐ Other, relationship _____

If student lives with only one parent, should the other parent receive school information? ☐ YES ☐ NO

☐ Please check here if there is legal documentation prohibiting the non-custodial parent from seeing this child at school or receiving any school information. Please send a copy of the legal documentation to be kept in the student's file.

CURRENT LIVING SITUATION: ☐ Home/Apartment ☐ With Family or Friends ☐ Shelter ☐ Hotel/Motel
☐ Other _____

STUDENT'S ADDRESS: _____

FAMILY/GUARDIAN INFORMATION (HOUSEHOLD ONE)

NAME _____ OCCUPATION _____

MAILING ADDRESS _____ CITY, STATE, ZIP _____

PHYSICAL ADDRESS _____
(If mailing address is a PO Box)

E-MAIL ADDRESS _____ NAME OF COUNTY YOU LIVE IN _____

NAME OF SCHOOL DISTRICT YOU LIVE IN _____ DISTRICT # _____

WORK PHONE _____ CELL PHONE _____ HOME PHONE _____

FAMILY/GUARDIAN INFORMATION (HOUSEHOLD TWO)

NAME _____ OCCUPATION _____

MAILING ADDRESS _____ CITY, STATE, ZIP _____

PHYSICAL ADDRESS _____
(If mailing address is a PO Box)

E-MAIL ADDRESS _____ NAME OF COUNTY YOU LIVE IN _____

NAME OF SCHOOL DISTRICT YOU LIVE IN _____ DISTRICT # _____

WORK PHONE _____ CELL PHONE _____ HOME PHONE _____

LIST SIBLINGS OR OTHER CHILDREN LIVING WITH THIS CHILD:

NAME

BIRTHDATE

GENDER

☐ M ☐ F☐ M ☐ F☐ M ☐ F**EMERGENCY INFORMATION**

NAME OF PERSON TO CALL IN CASE YOU CAN NOT BE REACHED

HOME PHONE

WORK PHONE

CELL PHONE

OTHER PERSONS AUTHORIZED TO PICK UP YOUR CHILD IF YOU ARE NOT AVAILABLE:

NAME

PHONE

NAME

PHONE

PREVIOUS SCHOOL INFORMATION

PREVIOUS SCHOOL ATTENDED:

ADDRESS:

Check if your child has been receiving any of the following services:

☐ Special Education or Individual Ed Plan ☐ 504 Plan ☐ Title 1- (Circle) Reading / Math / Both

We would like your child to gain the most from his/her school experience. To assist us accomplishing this, it is necessary to have a current health history. Please complete this section of the enrollment form. At any time throughout the school year, please notify the nurses office at (218)746-2114 of changes in your child's health, health care needs and of changes in phone numbers (home, cell, work, or emergency contacts) in the event we need to reach you.

1. Does the student have any health conditions?

YES

NO

If yes please explain

2. Does the student have any allergies?

YES

NO

If yes please list

Does the allergy require an EpiPen or other epinephrine device?

YES

NO

If yes the school requires an anaphylaxis emergency care plan to be on file in the nurse's office and updated annually. Please see the Health Services section of the Pillager school website for a form if one has not been provided to you by your medical provider.

3. Does the student take medication?

YES

NO

If yes please list

4. Will medication(s) be required at school?

YES

NO

If yes please see the Health Services section of the Pillager school website for the medication procedure process and the Medication Administration Authorization Form.

5. Does the student have special diet requirements?

YES

NO

If yes please explain

Before the school can deviate from the hot lunch program, the school will need a provider's order on file or dietary changes (e.g. lactose intolerance, gluten-free). The Special Diet Statement form is available in the Health Services section of Pillager school website if needed.

6. Does the student wear glasses and/or contacts?

YES

NO

Date of last eye exam

7. Before the student attends the first day of school, a copy of his/her immunization history or a notarized conscientious exemption form must have been received by the nurse's office.

PHYSICIAN

CLINIC

PHONE

DENTIST

CLINIC

PHONE

In the event of an accident or serious illness and I cannot be reached, by signing this form, I authorize the school to call the physician listed above and to follow his/her instructions. I also grant permission for the school to transport my child by ambulance to the nearest medical facility for treatment if needed. I understand I am responsible for related costs. I understand that the above information will be treated as confidential and will be used only as appropriate.

PARENT/GUARDIAN SIGNATURE

DATE



District Parent Letter

Dear Parent or Guardian:

In an effort to assist Minnesota districts in providing targeted programs and services to help all students succeed, districts are required by law to request more detailed student ancestry or ethnic origin information based on Minnesota's largest groups, beyond what has been collected on enrollment forms under federal law since 2008. Parents or guardians are not required to answer the federal questions (in bold) on the Ethnic and Racial Demographic Designation Form for their children. However, if you choose not to answer the federal questions (in bold), federal law requires schools to choose for you. State questions are labeled as "Optional" and schools will not fill in this information for you. Refusal to respond will not impact enrollment in the school.

As a result of the new law, you are asked to report your child's information. Starting with the 2019-2020 school year, all schools in Minnesota will collect this information using these updated categories. The Minnesota Department of Education will continue to incorporate feedback from the public into this form.

To report your child's information, please complete the enclosed form and return it with your registration packet. Note: You may choose to not indicate any of the more detailed selections by marking the "decline to indicate" option(s). You may also choose to mark an "other" option if you do not see your group represented. School staff are not required to assign students to these detailed groups.

Please complete and return the enclosed form with your registration packet. Thank you!

Ethnic and Racial Demographic Designation Form

Student's First Name: _____ Middle Name/Initial: _____ Last Name: _____

Date of Birth: _____ District: _____ School: _____

Schools are required to report ethnicity and race to the state and to the U.S. Department of Education. Because of recent changes to Minnesota state law, Minnesota disaggregates each category into detailed groups to further represent our student populations. Parents or guardians are not required to answer the federal questions (**in bold**) for their children. If you choose not to answer the federal questions (**in bold**), federal law requires schools to choose for you. This is a last resort—we prefer if parents or guardians complete the form. State questions are labeled as "Optional" and schools will not fill in this information for you.

This information helps improve teaching and learning for everyone and helps us accurately identify and advocate for students currently underserved. The information this form collects is considered private information. You can review the privacy notice to learn more about the purpose of collecting this information, how it will be used and not used, and how the detailed groups were identified. The privacy notice can be found in our [Frequently Asked Questions: Ethnic and Racial Designation Form](#).

Is the student Hispanic/Latino as defined by the federal government? The federal definition includes persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.¹

[You must select "yes" or "no" to this question.]

☐ **Yes** *[If yes, go to Question A.]*

☐ **No** *[If no, go to Question 1.]*

Optional Question A: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | | |
|--|---------------------------------------|--|--|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Guatemalan | <input type="checkbox"/> Salvadoran | <input type="checkbox"/> Other Hispanic/Latino |
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Mexican | <input type="checkbox"/> Spaniard/Spanish/ | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Ecuadorian | <input type="checkbox"/> Puerto Rican | Spanish-American | |

Go to Question 1.

[Select "yes" to at least one of the Questions (1-6) below.]

Question 1: Does the student identify as American Indian or Alaska Native as defined by the state of Minnesota? The state of Minnesota definition includes persons having origins in any of the original peoples of North America who maintain cultural identification through tribal affiliation or community recognition. [This question is needed to calculate state aid/funding.]

☐ **Yes** *[If yes, go to Question 1a.]*

☐ **No** *[If no, go to Question 2.]*

Optional Question 1a: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | |
|--|--|---|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Cherokee | <input type="checkbox"/> Other North American Indian Tribal Affiliation |
| <input type="checkbox"/> Anishinaabe/Ojibwe | <input type="checkbox"/> Dakota/Lakota | <input type="checkbox"/> Unknown |

Go to Question 2.

Question 2. Is the student American Indian from South or Central America?

☐ **Yes** [Go to Question 3.]

☐ **No** [Go to Question 3.]

Question 3. Is the student Asian as defined by the federal government? The federal definition includes persons 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.¹

☐ **Yes** [If yes, go to Question 3a.]

☐ **No** [If no, go to Question 4.]

Optional Question 3a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | | |
|--|-----------------------------------|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Chinese | <input type="checkbox"/> Karen | <input type="checkbox"/> Other Asian |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Filipino | <input type="checkbox"/> Korean | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Burmese | <input type="checkbox"/> Hmong | <input type="checkbox"/> Vietnamese | |

Go to Question 4.

Question 4. Is the student black or African American as defined by the federal government? The federal definition includes persons having origins in any of the black racial groups of Africa.¹

☐ **Yes** [If yes, go to Question 4a.]

☐ **No** [If no, go to Question 5.]

Optional Question 4a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Ethiopian-Other | <input type="checkbox"/> Somali |
| <input type="checkbox"/> African-American | <input type="checkbox"/> Liberian | <input type="checkbox"/> Other black |
| <input type="checkbox"/> Ethiopian-Oromo | <input type="checkbox"/> Nigerian | <input type="checkbox"/> Unknown |

Go to Question 5.

Question 5. Is the student Native Hawaiian or Other Pacific Islander as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.¹

☐ **Yes** [Go to Question 6.]

☐ **No** [Go to Question 6.]

Question 6. Is the student white as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.¹

☐ **Yes**

☐ **No**

Parent(s)/Guardian Name _____ Date _____

Parent(s)/Guardian Signature _____

Minnesota Language Survey

Minnesota is home to speakers of more than 100 different languages. The ability to speak and understand multiple languages is valued. The information you provide will be used by the school district to see if your student is multilingual. In Minnesota, students who are multilingual may qualify for a Multilingual Seal upon further assessment. Additionally, the information you provide will determine if your student should take an English proficiency test. Based upon the results of the test, your student may be entitled to English language development instruction. **Access to instruction is required by federal and state law. As a parent or guardian, you have the right to decline English Learner instruction at any time.** Every enrolling student must be provided with the Minnesota Language Survey during enrollment. Information requested on this form is important to us to be able to serve your student. Your assistance in completing the Minnesota Language Survey is greatly appreciated.

Student Information	
Student's Full Name: (Last, First, Middle)	Birthdate or Student ID:

	Check the phrase that best describes your student:	Indicate the language(s) other than English in space provided:
1. My student first learned:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	
2. My student speaks:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	
3. My student understands:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	
4. My student has consistent interaction in:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	

Language use alone does not identify your student as an English learner. If a language other than English is indicated, your student will be screened for English language proficiency.

Parent/ Guardian Information	
Parent/Guardian Name (printed):	
Parent/Guardian Signature:	Date:

* All data on this form is private. It will only be shared with district staff who need the information to best serve your student and for legally required reporting about home language and service eligibility to the Minnesota Department of Education. At the district and at the Minnesota Department of Education, this information will not be shared with other individuals or entities, except if they are authorized by state or federal law to access the information. Compliance with this request for information is voluntary.



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Transcript Release/Request for Student Records

Student Name: _____ has enrolled in grade _____ in our district.

Student Date of Birth: _____ Enrolled/Start Date: _____

Previous School Attended: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Fax: _____

Parent/Guardian Signature: _____ Fax: _____

(Federal Law, Buckley Amendment, Section 99.31, states that a written consent is not required for the release of education records to another educational institution.)

Please Include:

- * Transcripts of grades and test scores
- * Certified Copy of Birth Certificate
- * Health Records
- * Special Education Documentation and Current IEP
- * Psychological Assessments
- * MARSS Number (MN School)
- * Grad. Standards Test Scores
- * Attendance and Disciplinary Reports
- * Other Information that may be helpful in admission or placement of this student

Please fax or email current IEP and Evaluation immediately- Thank you!

Elementary School (K-4) Brenda Uselman Principal: Josh Smith 323 E. 2 nd Street South Pillager, MN 56473 Fax: 218-746-2134 Phone: 218-746-2111 Email: buselman@isd116.org	Middle School (5-8) Katie Schaefer Principal: Wade Mortenson 323 E. 2 nd Street South Pillager, MN 56473 Fax: 218-746-2153 Phone: 218-746-2112 Email: kschaefer@isd116.org	High School (9-12) Brittney Lunday Principal: Jason Savage 323 E. 2 nd Street South Pillager, MN 56473 Fax: 218-746-3406 Phone: 218-746-2113 Email: blunday@isd116.org
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2022-2023 PILLAGER SCHOOL DISTRICT CALENDAR

BOARD APPROVED
2/28/2022

JULY 2022

S	M	T	W	T	F	S
						1 2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

AUGUST 2022

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

SEPTEMBER 2022

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

OCTOBER 2022

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

NOVEMBER 2022

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

DECEMBER 2022

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

JANUARY 2023

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

FEBRUARY 2023

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

MARCH 2023

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

APRIL 2023

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

MAY 2023

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

JUNE 2023

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

First Day of School for Students: **September 6, 2022**
Last Day of School for Students: **June 2, 2023**

1st Semester: 86 days 2nd Semester: 86 days

Total Instructional Days = 172 Days

HOLIDAYS

Independence Day	July 4
Labor Day	September 5
Thanksgiving Break	November 24-25
Winter Break	December 24 - January 2
MLK Day	January 16
Presidents Day	February 20
Good Friday	April 7
Memorial Day	May 29

OPEN HOUSE

August 31 4:30pm - 7:00pm

NEW TEACHER ORIENTATION

August 23 & 24

STAFF DEVELOPMENT DAYS (No School for Students)

August 29,30,31 September 1
October 20, 24 January 20, 27

PARENT TEACHER CONFERENCES

January 23 12:00pm - 7:30pm
January 26 4:00pm - 7:30pm

POSSIBLE SNOW MAKEUP DAY (If Necessary)

January 27 March 17

SCHOOLS

PHONE

Early Childhood Center	218-746-3075
Pillager Elementary School	218-746-2111
Pillager Middle School	218-746-2112
Pillager High School	218-746-2113
Pillager District Office	218-746-3772

COMMENCEMENT MAY 26

KEY

- Regular Monthly Board Meetings 6:00pm
- Holiday or (No School)
- MEA Break for Students & Employees on 184-Day Contracts
- Semester Start/Stop Days
- Staff Development Day No School
- New Teacher Orientation
- Early Release Day 1:00pm