

BUILDING _____
STUDENT'S GRADE _____

RIVER VALLEY SCHOOL DISTRICT
ENROLLMENT FORM

SCHOOL YEAR _____

DISTRIBUTION
Frassenei / Csanyi
Guidance Counselor Principal
Attendance Officer Nurse

SECTION I—STUDENT/PARENT DEMOGRAPHICS: TO BE COMPLETED BY PARENT/GUARDIAN

(Choose One)

STUDENT'S NAME _____ MALE / FEMALE
 First Middle Last Suffix

ADDRESS _____ PO Box _____
 Street #/Street Name (Physical Address Required)

City _____ Zip Code _____ County _____

BIRTHDATE: _____ BIRTHPLACE: STATE _____ CITY _____ COUNTRY _____

IF THE CHILD WAS BORN OUTSIDE OF THE U.S.A., PROVIDE THE DATE THE CHILD FIRST ENROLLED IN A U.S. SCHOOL? _____

FOR AN OUT-OF-STATE BIRTH, OR RE-ENTRY TO PA, PROVIDE THE MOST RECENT DATE THAT THE CHILD ENTERED PA _____

ETHNIC CODE: _____ NOT HISPANIC OR LATINO _____ HISPANIC OR LATINO

RACE CODE: _____ AMERICAN INDIAN/ALASKAN NATIVE _____ HISPANIC OR LATINO

 _____ ASIAN _____ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

 _____ BLACK/AFRICAN-AMERICAN _____ MULTI-RACIAL

 _____ WHITE

LANGUAGE OR DIALECT USED TO COMMUNICATE IN STUDENT'S HOME: ENGLISH _____ OTHER: _____

STUDENT RESIDING WITH: BOTH PARENTS MOTHER FATHER PARENT & STEP-PARENT / GRANDPARENT(S)
 GUARDIAN (provide court order or custody agreement) FOSTER PARENT (complete foster form)

ARE BIOLOGICAL PARENTS BOTH LIVING? FATHER: YES / NO and MOTHER: YES / NO

FATHER'S NAME: _____ MOTHER'S NAME: _____

Primary Parent / Guardian: _____ / _____					
Name	/	Relationship	Home Phone #	Cell #	Work #
Resident Adult #2: _____ / _____					
Name	/	Relationship	Home Phone #	Cell #	Work #
Email (optional) #1 _____			Email #2 _____		
IF STUDENT RESIDES WITH A GUARDIAN, a court order or custody agreement must be provided with the enrollment packet.					

IF PARENTS ARE SEPARATED OR DIVORCED:

ARE YOU PROVIDING A COURT ORDER DICTATING RIGHTS WITH THIS ENROLLMENT PACKET? _____ YES _____ NO

DATE OF MOST RECENT COURT ORDER: _____

Signature of Person Completing Enrollment Form

School Official Initials

SECOND PARENT CONTACT INFORMATION: Name _____

Address _____

Phone _____ Email _____

MILITARY: IS PARENT/GUARDIAN CURRENTLY AN ACTIVE DUTY MEMBER OF A BRANCH OF THE ARMED FORCES? (Army, Navy, Air Force, Marine Corp, Coast Guard and including full-time National Guard) _____ YES _____ No

EMERGENCY CONTACTS: in the event that a Primary Guardian/Parent cannot be reached, the school may contact these individuals for matters concerning my child; for example, emergency, sickness etc.

Contact 1: _____ / _____
 Name / Relationship Home Phone # Cell # Work #

Contact 2: _____ / _____
 Name / Relationship Home Phone # Cell # Work #

EDUCATION HISTORY:

HAS THIS STUDENT EVER ATTENDED THE RIVER VALLEY SCHOOL DISTRICT? (Previously BSSD) _____ YES _____ NO

IF YES, WHICH BUILDING AND WHAT YEAR? _____

MOST RECENT SCHOOL ATTENDED:

_____ LAST DATE ATTENDED: _____ GRADE LEVEL: _____
 Name of School/School District/Cyber School

_____ Street _____ City _____ State _____ Zip Code _____ County

DATE FIRST ENTERED 9TH GRADE (If Applicable) _____ SCHOOL DISTRICT _____

WAS STUDENT RECEIVING SPECIAL EDUCATION SERVICES? _____ DISABILITY TYPE(S) _____

DOES STUDENT HAVE AN IEP? YES / NO WAS STUDENT RECEIVING GIFTED SERVICES? _____ HAVE A GIEP? YES / NO

HAS THIS STUDENT EVER ATTENDED AN EARLY INTERVENTION (EI) PROGRAM IN PENNSYLVANIA (EXAMPLES: Pre-K, Head-Start, Intermediate Unit)? _____ YES _____ NO

LOCATION OF WHERE EI SERVICES WERE/ARE DELIVERED: _____ HOME _____ SCHOOL: _____

OTHER CHILDREN IN THE FAMILY UNDER AGE 21 LIVING IN THE HOUSEHOLD:

NAME FIRST/LAST	GENDER	DATE OF BIRTH	BUILDING ENROLLED (if in school)	SCHOOL GRADE

_____ PARENT/GUARDIAN SIGNATURE

_____ DATE

_____ SCHOOL OFFICIAL SIGNATURE

_____ DATE

SECTION II - ENROLLMENT: For BUILDING OFFICE use only

ENTRY/REENTRY DATE _____

HOMEROOM _____ TEACHER _____ ADVISOR _____ LOCKER # _____

DATE FIRST ENTERED 9TH GRADE (if not completed above) _____ SCHOOL DISTRICT _____

REQUIRED FOR ALL ENROLLMENTS -- GRADES K – 12

- _____ Birth certificate
- _____ Notarized copy of Birth Certificate
- _____ Baptismal certificate
- _____ Parent's affidavit (notarized)
- _____ Passport
- _____ Driver's License
- _____ Previously verified school records
- _____ Copy of record of Baptism – notarized or duly certified and showing date of birth

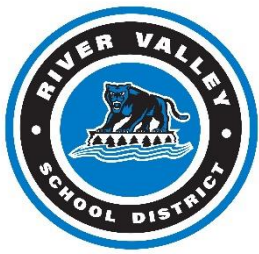
PROOF OF RESIDENCY PROVIDED? YES / NO

THREE forms of residency proof required for ALL enrollments

SECTION III: For DISTRICT OFFICE use only

STUDENT ID # _____ PA SECURE ID # _____ ENTRY/RE-ENTRY CODE: _____ Roll-over _____ Email _____

PIMS: District _____ School _____ State _____ County _____ GD 9 _____ IEP/GIEP _____ Special Fields: 167 _____ 217 _____



RIVER VALLEY SCHOOL DISTRICT
TRANSPORTATION INFORMATION

DISTRIBUTION
Frassenei / Csanyi

SCHOOL YEAR: _____

Student # _____

Start Date _____

Student's First Name _____	Last Name _____	Building _____	Grade _____
Parent or Guardian Name(s) _____		Home # _____	
Mailing Address (PO Box) _____		Cell #1 _____	
Street #/Street Name _____	(physical address required)	Cell #2 _____	
City _____	State _____	Zip Code _____	Work # _____

Will student ride bus to and from home? _____

Will student ride bus to and from a caregiver? _____

If caregiver, give name and address of caregiver _____

THE FOLLOWING INFORMATION IS MANDATORY FOR A BUS STOP ASSIGNMENT.

Give directions, **IN DETAIL**, from school to your home.

If known, AM Route #/Bus Stop: _____ PM Route #/Bus Stop: _____

KINDERGARTEN / PRE-K STUDENT BUS STOP PICK-UP

It is the parent/guardian's duty to designate someone to receive and be responsible for their kindergarten or pre-k child if they are unavailable. This person may be an older sibling, a neighbor, a neighbor's older child, or anyone the parent wishes to designate as a responsible individual for the child. This individual has to be at the bus stop in order for a kindergarten / pre-k student to be released from the bus, or the child will be taken back to the bus garage, and the parent will be notified to pick up the child there.

Please list the names of the individuals who may be responsible for your child. If any of those individuals are older siblings or older neighbor children currently enrolled in school, please give the grade level of the child. **A maximum of four (4) individuals, including parents/guardians, may be listed.**

Name: _____	Relationship: _____	Grade Level (if student): _____
Name: _____	Relationship: _____	Grade Level (if student): _____
Name: _____	Relationship: _____	Grade Level (if student): _____
Name: _____	Relationship: _____	Grade Level (if student): _____

The individuals listed above may be responsible to receive my kindergarten / pre-k child from the school bus in my absence.

Signature of parent or guardian: _____ Date: _____