



Welcome to the Saugerties Central School District

The Saugerties Central School District requires all school age children who are residents of the Saugerties School District, and who attend non-public schools, be registered with the district. This registration requirement is in effect whether the non-public school is located within the Saugerties district or not. The district provides services to these students, and must properly account for all expenditures.

Please note: Registering your child is separate from requesting transportation to a non-public school or to a daycare provider, each of which requires completion of the appropriate application.

April 1st is the deadline for submitting non-public school transportation requests and child care transportation requests for the following school year, as set forth by §3635(2) of the New York State Education Department.

The following documentation is required in order to register your child:

- Proof of Residency:** You must provide **two (2)** original copies that are current, and must contain the name of the parent/guardian and the physical address of the residence.
 - **Documents accepted:** Residential lease, deed, mortgage or other proof of home ownership, Notarized or signed statement or affidavit from a third party landlord, owner or tenant with whom you are sharing property, Notarized or signed statement from a third party establishing your physical presence in the District, Utility and/or home service bill (water, electric, gas, propane, oil, refuse/garbage, cable, phone), Insurance Policy (home owners, rental) - identifying your name and address, Property or School tax bill, Pay stub, Income tax form, Membership documents based upon residency, Voter registration documents, Driver's license, learner's permit or non-driver identification, State or other government issued identification, Documents issued by federal, state or local agencies (e.g., local social services agency, federal Office of Refugee Resettlement), Evidence of custody of the child, including but not limited to judicial custody orders or guardianship papers that demonstrate residency
- Proof of Date of Birth:** The child's birth certificate or passport
- Photo I.D. of the Parent/Guardian:** Government issued Driver's License or Non-Driver I.D. with name and photo

Completed registrations can be submitted via email to hstock@saugerties.k12.ny.us

- OR -

in-person at

310 Washington Avenue Ext, Saugerties, NY 12477

Hildebrandt Building

Hours of registration are by appointment Monday through Friday

Please call for an appointment.

(845) 247-6550 x9211

F: (845) 681-4241



SAUGERTIES CENTRAL SCHOOL DISTRICT

Call Box A

310 Washington Avenue Ext.
 Saugerties, New York 12477
 (845) 247-6500 Fax (845) 246-8364
 www.saugerties.k12.ny.us

Office Use Only			
Student Name: _____			
School: _____	Grade: _____	Effective Date: _____	Student #: _____
Out of District: _____	Non-Resident: _____	IEP/504: _____	ENL: _____ MV: _____

Non-Public School Name: _____

Legal Name: (Last, First, MI)			
Gender: Male / Female / Non-binary	Grade:	Nickname:	
Date of Birth:	Place of Birth: (Country, State, City)		
Is the student a US Citizen? Yes / No	If no, what was the student's last country of residence?		
Is the student and Immigrant? Yes / No	Date the student entered the US:		
Is the student and Migrant? Yes / No			
Is the student Hispanic/Latinx or of Spanish Origin? Yes / No			
STUDENT'S RACE (check at least one, you may check all that apply)			
___ White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa			
___ Black or African American – A person having origins in any of the Black racial groups of Africa			
___ 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 tribal affiliation or community attachment			
___ 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			
___ Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands			
Parent/Guardian Signature:			Date:



Household Information

Information of Rights of Parent from the Family Education Rights and Privacy Act (FERPA): An education agency or institution shall give full rights under the Act to either parent, unless the agency or institution has been provided with evidence that there is a court order, State statute, or legally binding document relating to such matters as divorce, separation, or custody that specifically revokes the rights.
PLEASE INFORM YOUR SCHOOL OF CHANGES IN CUSTODIAL ARRANGEMENTS

Main/Household Phone Number:

Parent/Guardian A (Student's PRIMARY Address)
 Contact Priority #1

Full Name	Parent/Guardian A's relationship to student (check one): <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other _____	
Physical Address	Custody of student (if not living with both parents): <input type="checkbox"/> Court appointed sole custody with Parent/Guardian A <input type="checkbox"/> Joint/legal Custody w/ primary physical w/ Parent/Guardian A <input type="checkbox"/> Joint/legal and joint physical with primary residence at P/G A <input type="checkbox"/> Informal, no court orders in effect	
City State/Zip		
On current/active Military Duty? Yes / No		
Mailing Address (if different)		
City State/Zip		
Cell Phone:	Work Phone:	Email:

Step-Parent at this address (if applicable)

Full Name	Cell Phone:
	Work Phone:

Parent/Guardian B
 Contact Priority #2

Full Name	Parent/Guardian B's relationship to student (check one): <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other _____	
Physical Address	Same residence as Parent/Guardian A? Yes / No If no, Student resides with this parent/guardian? Part time / No	
City State/Zip		
On current/active Military Duty? Yes / No		
Mailing Address (if different)		
City State/Zip		
Cell Phone:	Work Phone:	Email:

Step-Parent at this address (if applicable)

Full Name	Cell Phone:
	Work Phone:

All Siblings/Other Children Living at Primary Address

Full Name	Gender	Date of Birth	Grade	Present School	Relationship to Student

The student listed above will be enrolled immediately, or as soon as practicable, pending final determination by the District that the student is a resident of the District and is entitled to attend on a tuition free basis. Please be advised that in the event a family violates the residency requirement, the Saugerties Central School District has the right to bill back for tuition for the period of time that the student(s) attended District schools as non-residents.

I certify that I am a resident of the Saugerties Central School District.

Parent/Guardian Signature:	Date:
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