

REGIONAL SCHOOL DISTRICT NO. 7
BARKHAMSTED, COLEBROOK, NEW HARTFORD, NORFOLK
Post Office Box 656, Winsted, Connecticut 06098

Steven K. LePage
Superintendent of Schools
slepage@nwr7.org



James M. Gaskins
Director of Finance & Operations
jgaskins@nwr7.org

Welcome to Northwestern Regional School District No. 7!

Enclosed is a registration packet with the following necessary forms for enrollment:

- | | |
|---|--|
| <input type="checkbox"/> Authorization for Release of Records | <input type="checkbox"/> School Messenger |
| <input type="checkbox"/> Registration | <input type="checkbox"/> Additional Permissions |
| <input type="checkbox"/> Student Race & Ethnicity Questionnaire | <input type="checkbox"/> Student Acceptable Use Policy |
| <input type="checkbox"/> ESSA | <input type="checkbox"/> Current Immunizations |
| <input type="checkbox"/> Student Support Services | <input type="checkbox"/> Health Forms (3) |
| <input type="checkbox"/> Transportation Request | <input type="checkbox"/> CT Health Assessment* |

**If moving here from out-of-state, provide a copy of your child's most recent physical & immunizations from their current doctor. Follow up with a CT doctor is required.*

In addition to these forms, the following is required:

- ☐ Proof of Residency: Legal document(s) proving eligibility to enroll in NWR7.
See the Proof of Residency Requirements page for details.
- ☐ Student's Birth Certificate

Please return your packet of materials to:

Michelle Derochick
School Counseling Clerical
Assistant/Registrar

Northwestern Regional School District #7
100 Battistoni Drive
Winsted, CT 06098
mderochick@nwr7.org

Once we have received all of the required documents, you will be contacted to continue the registration process. Questions? Contact Michelle Derochick at (860) 379-8525 x2506

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PROOF OF RESIDENCY REQUIREMENTS

Per Connecticut State Law, "residency must be permanent, provided without pay, and not for the sole purpose of obtaining school accommodations."

To register as a student in Northwestern Regional School District #7, the following requirements must be fulfilled:

- Residency in one of the district towns: Barkhamsted, Colebrook, New Hartford, Norfolk; or
- Acceptance to our high school's Agricultural Education Program when residing in a participating sending town; or
- Residency in either East Hartland or West Hartland, along with completed registration in the Hartland school district.

Registering students/families must provide ONE of the following documents:

- Current mortgage statement; or
- Copy of current lease, signed and dated by both landlord and tenant; or
- Signed/dated home purchase agreement

If the above documents are unavailable, TWO of the following documents must be provided:

- Copy of property deed
- Current utility bill or work order showing service installation address
- Cable, satellite or internet provider bill
- Current proof of government benefits showing an address (disability, SNAP, etc.)
- A valid driver's license/non-driver ID with current address (no stickers)
- Change of address confirmation from the post office
- Property tax bill
- Current homeowner's or automobile insurance policy
- Current payroll stub
- Current bank or credit card statement
- Current letter from a government agency (e.g., military, Social Security)

Residency Affidavit

If you reside in someone else's home, or rent month-to-month with no lease, you must submit a notarized [Affidavit of Property Owner/Host](#) form. The host MUST adhere to the guidelines above.

If you have any questions regarding the proof of residency guidelines, please contact:
Michelle Derochick at 860-379-8525 x2506 or mderochick@nwr7.org.

****Residency and the student's eligibility to remain in Northwestern Regional School District #7 is subject to review at any time.****

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Authorization for Release of Records

In compliance with Public Law 93-380, I hereby authorize Northwestern Regional School District to release/obtain all health, scholastic, and any other pertinent records, including special education records, 504 plans, PPT recommendations and psychological reports concerning:

Student Name _____ Date of Birth _____ Grade _____

_____ Release to: _____ Obtain from:

Name of School/Agency

Street Address

City, State, Zip code

Phone Number/Fax Number/Email

Signature of Parent or Guardian

Relationship to Student

Date

Please send all educational records to Michelle Derochick, 100 Battistoni Dr., Winsted, CT 06098
mderochick@nwr7.org 860-379-8525 x2506

ENTRANCE GRADE: _____ START DATE: _____ SCHOOL YEAR 20____ - 20____
FROM WHICH PREVIOUS SCHOOL: _____ STATE: _____

NORTHWESTERN REGIONAL SCHOOL DISTRICT 7 REGISTRATION

This form must be filled out by a legal parent, legal guardian or other legal decision maker.

ABOUT THE CHILD

☐ Male

☐ Female

☐ Non-Binary

Last Name: _____

First Name: _____ Middle Name: _____

Date of Birth: _____ Place of Birth: _____

Home Phone: (____) _____ Student's Cell Phone: (____) _____

Home Street: _____

Home City: _____ Home State: _____ Home Zip Code: _____

Mailing Street: _____

(If different)

Mailing City: _____ Mailing State: _____ Mailing Zip Code: _____

ABOUT THE PARENTS

Child live with [check all that apply]

☐ **Father:** Last name: _____ First name: _____

Street: (if different from student) _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Employer: _____ Work Phone: (____) _____

Best Day Time Phone: (____) _____ ☐ Receives 2nd mailing, ONLY if NOT living with student

Email Address: _____

☐ **Mother** Last name: _____ First name: _____

Street: (if different from student) _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Employer: _____ Work Phone: (____) _____

Best Day Time Phone: (____) _____ ☐ Receives 2nd mailing, ONLY if NOT living with student

Email Address: _____

☐ **Guardian:** Last name: _____ First name: _____

Street: (if different from student) _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Employer: _____ Work Phone: (____) _____

Best Day Time Phone: (____) _____ ☐ Receives 2nd mailing, ONLY if NOT living with student

Email Address: _____

☐ **Other:** Last name: _____ First name: _____

Street: (if different from student) _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Employer: _____ Work Phone: (____) _____

Best Day Time Phone: (____) _____ ☐ Receives 2nd mailing, ONLY if NOT living with student

Email Address: _____

PLEASE CONTACT YOUR CHILD'S SCHOOL IF THE INFORMATION ABOVE CHANGES!

LEGAL RESTRICTIONS

Are there any restraining orders, custodial agreements or other legal actions pending? Y N [Circle one]

Please explain: _____

Please submit a copy of the restraining orders or other pertinent documents. If this information changes, please notify your child's school immediately

EMERGENCY CONTACTS (*Someone outside of the immediate household*)

Name: (last, first) _____ Relationship to child: _____

Phone: (____) _____ Check which this number is Home Phone ☐ Cell Phone ☐

Name: (last, first) _____ Relationship to child: _____

Phone: (____) _____ Check which this number is Home Phone ☐ Cell Phone ☐

Name: (last, first) _____ Relationship to child: _____

Phone: (____) _____ Check which this number is Home Phone ☐ Cell Phone ☐

MEDICAL CONTACTS

Physician's Name: _____ Telephone: (____) _____

Dentist's Name: _____ Telephone: (____) _____

PLEASE NOTE: THAT IN ORDER TO REGISTER YOUR CHILD, YOU MUST PROVIDE THE FOLLOWING:

1. PROOF OF RESIDENCY
2. HEALTH/IMMUNIZATION INFORMATION
3. BIRTH CERTIFICATE

Parent/Guardian: _____ Date: _____

PLEASE CONTACT YOUR CHILD'S SCHOOL IF THE INFORMATION ABOVE CHANGES!

REGIONAL SCHOOL DISTRICT NO. 7
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Post Office Box 656, Winsted, Connecticut 06098
(860) 379-1084

Steven K. LePage
Superintendent
slepage@nwr7.org



James M. Gaskins
Director of Finance and Operations
jgaskins@nwr7.org

August 2023

Dear Parents and/or Guardians:

I am writing to inform you about the regulation from the U.S. Department of Education (USDE) regarding mandated collection of data and ethnicity for public school students. The USDE has developed a form to collect and report race and ethnicity which includes their racial and ethnic categories.

These categories were developed in order to provide a more accurate picture of the nation's ethnic and racial diversity. This will provide the opportunity for individuals to be more accurately identified in racial and ethnic classifications and in more than one racial category.

We are asking parents and guardians to complete the brief form on the reverse side of this letter in order to update the information on your child/children's race and ethnicity. This data will be used to comply with federally-mandated reporting requirements. It is important to note, however, that your individual child's data will not be released.

If you have any questions about the collection of race and ethnicity data, please contact High School Principal Gary Franklin or Middle School Principal Fran Amara.

Sincerely,

Steven K. LePage
Superintendent of Schools

STUDENT RACE AND ETHNICITY QUESTIONNAIRE

Please answer the following questions about your child.

**You may refuse to answer these questions, but in this event a school district staff member will need to make the identification for you.*

Child's Name: _____

Is this child Hispanic/Latino? **Y** **N**

What is the child's race?

(Check all that apply, even if you answered Y to the Hispanic/Latino question)

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or other Pacific Islander
- ☐ White

Parent/Guardian Signature: _____ Date: _____

Definitions:

Hispanic/Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South American (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 Philippines Islands, Thailand and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the Hawaii, Guam, Samoa or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

NORTHWESTERN REGIONAL SCHOOL DISTRICT 7

Every Student Succeeds Act (ESSA) & Language Information

A federal law, the Every Student Succeeds Act (ESSA), requires districts to report on the following:

MILITARY

A parent/guardian of the child is a member of the Armed Forces on active duty or serves on full-time National Guard duty.

Y **N**

IMMIGRATION

Was your child born **IN** the United States or Puerto Rico?

Y **N**

- If you answered **NO** to the above question, has your child attended school in the United States for **3 or more full academic years**?

Y **N**

FAMILY LANGUAGES

What is the primary language spoken in the home? _____

What language is MOST spoken by the student? _____

First language the child learned: _____

What is the language the child first spoke? _____

Student's Name: _____

Parent's/Guardian's Signature: _____ **Date:** _____

NORTHWESTERN REGIONAL SCHOOL DISTRICT 7

Student Support Services

Student's Name: _____ Grade: _____

Student's Date of Birth: _____

Please circle the answer to the following questions:

1. Is your child identified as Special Education: Y N

If yes, what services did your child receive? _____

2. Any prior Special Education Services? Y N

3. Is there a current IEP on file at the previous school? Y N

4. Is your child receiving tutoring services at the previous school? Y N

5. Is there a current 504 plan on file at the previous school? Y N

If yes, what services did your child receive? _____

Parent/Guardian _____ Date: _____

Signature

NORTHWESTERN REGIONAL SCHOOL DISTRICT 7
NEW STUDENT
TRANSPORTATION REQUEST

Student Name: _____

School: _____ Grade: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number: (____) _____

Pickup Address: _____

Pickup City: _____

Drop off Address: _____

Drop off City: _____

Beginning Date: _____

Parent/Guardian: _____ Date: _____
Signature

BOE Business Office Approval Date: _____

BOE Business Office Signature: _____

Note: This form must be completed and filed with the Business Office.

SchoolMessenger is our system-wide phone, email and SMS (text) messaging system which allows you to receive important school related information such as weather cancellations, delays, general and emergency school announcements.

Please complete the attached form.

STUDENT CELL PHONE NUMBER:

- 1) Please list your child's cell phone if you give permission for them to receive calls and/or text messages.
- 2) Depending on your data plan with your provider a service charge may apply

PRIMARY PHONE NUMBERS:

- 1) **Please DO NOT list a student's cell phone number as a primary or emergency number.**
- 2) You can list up to two primary phone numbers.
- 3) Because this is an automated system extensions cannot be called.

EMERGENCY PHONE NUMBERS: These number are only called when the Superintendent of Schools deems that there is an emergency.

- 1) **Please DO NOT list a student's cell phone number as a primary or emergency number.**
- 2) **Please DO NOT list any of the *two primary phone numbers as an Emergency contact.***
Primary phone numbers are automatically called.
- 3) Because this is an automated system extensions cannot be called

EMAILS:

- 1) **Please DO NOT enter a student's list a student's person or school email address**
- 2) You can list up to four email addresses: two parents/guardians and two others.

SMS/Text Messaging:

- 1) **Please DO NOT enter a student's cell phone number.**
- 2) Depending on your data plan with your provider a service charge may apply
- 3) **If you want to receive texts to a cell phone, you MUST opt-in from mobile phone listed on the attached sheet by sending "Y" or "Yes" to 67587.**

You can change this information anytime by contacting your child's school secretary.

If you have any questions, please contact tech support at powerschoolsupport@nwr7.org

11/18/22

Student's Name: _____ Grade: _____

Student Cell: (____) _____ If you give permission for your child to receive calls and/or text messages.

PRIMARY PHONE NUMBERS: **Please DO NOT list a student's cell phone number.**

Primary Phone 1: Name: _____ (____) _____

Primary Phone 2: Name: _____ (____) _____

EMERGENCY PHONE NUMBERS: **Please DO NOT list a student's cell phone number.****Please DO NOT repeat any Primary Phone Numbers listed above.**

Emergency Phone 1: Name: _____ (____) _____

Emergency Phone 2: Name: _____ (____) _____

Emergency Phone 3: Name: _____ (____) _____

Emergency Phone 4: Name: _____ (____) _____

EMAILS: **Please DO NOT list a student's personal or school email address.**

Father's/Guardian's Name: _____

Email Address: _____

Mother's/Guardian's Name: _____

Email Address: _____

Other Email 1: Name: _____

Email Address: _____

Other Email 2: Name: _____

Email Address: _____

SMS/Text Messaging: **Please DO NOT list a student's cell phone number.**

Father's/Guardian's Cell: Name: _____ (____) _____

Mother's/Guardian's Cell: Name: _____ (____) _____

Other Cell: Name: _____ (____) _____

Please return this form to your child's school secretary.



NWR7 STUDENT ACCEPTABLE USE POLICY (AUP)

100 BATTISTONI DRIVE
WINSTED, CT 06098
860.379.8525

Student Name _____

(Print Last name, First name)

Grade Level _____

Graduation Year _____

Street Address _____

Town and Zip _____

Agreement Technology Access to the internet and school internal network resources is provided to all NWR7 students on a variety of electronic devices. It is intended to leverage technology for academic tasks like research, writing, testing, and online learning, while also practicing responsible online behavior and proper computer usage. Our objective is to foster educational excellence through resource sharing, innovation, and communication. The Board of Education endorses the use of the internet to offer a wide range of valuable and diverse resources to its users. While the Board strives to filter out inappropriate content to the best of its abilities, it recognizes that it is not possible to completely eliminate access to such material. Each user is responsible for their online behavior. In cases of security or technical breaches, or if inappropriate content is inadvertently accessed, it is essential to report this to the relevant staff member without delay.

Agreement Chromebook This agreement pertains to the utilization of an NWR7 issued Chromebook, charger, and protective case, which is assigned to the student, along with corresponding network and internet access, which is designed to support the educational objectives of Regional School District No. 7. It adheres to policy 6150 and the Acceptable Use Policy (AUP) 6141, as established by the Board of Education and managed by the IT Department of NWR7. BOE policies can be viewed <https://www.nwr7.com/board-of-ed/policies>.

The Chromebook is intended to facilitate the District's 1:1 computing initiative, and may be employed for all academic activities related to NWR7's curriculum. The device will remain in the possession of the student, and this agreement will remain in effect as long as the student is enrolled in NWR7. Upon graduation or departure from the district, the device must be returned in good working condition and free from damage or intentional modification, or the student will assume financial responsibility for device restoration or replacement. Students are to bring the device to school each day, fully charged.

Details of the Student Agreement:

- The student is required to care for and maintain the device in a reasonable condition and is financially responsible for any damage incurred. Any damage must be reported immediately to NWR7's IT Department for assessment, at which time a bill may be issued for repair. Equipment failure that is inherent to the system is excluded from this agreement. The device must not be loaned to others, nor should it be physically altered in any manner.
- Modifications to the operating system are strictly prohibited, including changes to system files, configuration settings, or any alterations that could affect the device's performance, security, or

characteristics. The IT Department of NWR7 can restore the device to its original state if necessary.

- The user is expected to exhibit responsible behavior in alignment with the mission, culture, and functions of NWR7, as well as to maintain responsible conduct regarding the electronic information environment at all times, including both local and internet content.
- The user agrees to adhere to the established school technology rules and policies as detailed in NWR7's Acceptable Use Policy, and is expected to uphold the integrity and security of the school network.

Student Agreement Acknowledgement

I acknowledge my obligation to adhere to the Acceptable Use and Chromebook Agreement Policy of NW Regional School District No. 7, along with the associated procedures and guidelines. I understand that technology access is intended solely for educational purposes. Furthermore, I recognize that any breach of these terms is considered unethical and may be regarded as a criminal act. Should I violate this policy or its related procedures and guidelines, my access privileges may be rescinded, and the administration may implement disciplinary measures or seek legal recourse as deemed appropriate.

Student Signature _____ **Date** _____

Parent Agreement Acknowledgement

As the parent or legal guardian of the student mentioned above, or as a student aged 18 or older, I hereby acknowledge that I have thoroughly read, comprehended, and agree to adhere to all the guidelines outlined, including the Chromebook and Acceptable Use Policy, as well as all related policies accessible on the website at <https://www.nwr7.com/board-of-ed/policies>. I grant permission for my child or myself, if I am a student aged 18 or older, to utilize technology services and to receive an account. Furthermore, I confirm my consent for my child or myself to use personal technology, and I affirm that the information provided in this form is accurate. I recognize that any infractions of the school's policies, procedures, and guidelines by my child may lead to the revocation of access privileges, disciplinary measures, and/or other consequences.

I authorize my child or ward to access technology services. I understand that my child or ward may be held accountable for any violations. I accept the responsibility of guiding internet usage, establishing and communicating standards for my child or ward to follow when selecting, sharing, or exploring information and media. As the parent or guardian, I consent to my child or ward's use of personal technology within the school environment. I acknowledge that I will comply with the Chromebook guidelines and the policies 6141 & 6150 of the NWR Board of Education as listed on their website.

Additionally, I agree to indemnify Regional School District No. 7 against any damages incurred by my child or ward, including those resulting from non-deliveries, mis-deliveries, service interruptions, unauthorized use, data loss, and exposure to potentially harmful or inappropriate content or individuals associated with the use of NWR7's technological resources.

This agreement remains in effect for the duration of my child or ward's enrollment in the Regional School District No. 7.

Parent Signature _____ **Date** _____



NWR7 CHROMEBOOK ACCIDENTAL INSURANCE POLICY

Regional School District no.7
100 Battistoni Drive
Winsted, CT 06098
860.379.8525

Dear Parent/Guardian,

NWR7 Chromebook Insurance

NWR7 is offering an optional, school managed, Chromebook insurance program to cover accidental damage for the academic year of 2025-2026. Due to the ever increasing cost of technology, accidental insurance can provide a layer of financial protection should your child's Chromebook incur damage. At present, a new chromebook cost the school approximately \$325.00, including the required GSuite for Education site license.

Coverage Details

The annual fee for one Chromebook is \$30.00, including charger, and covers two incidents of damage, including one loss. Damage to a chromebook could be a cracked screen, keyboard with missing keys, depleted battery, malfunctioning microphone, wifi card, or other issue. Coverage is for a period of one year, with open enrollment until September 30th, 2025.

Coverage Exceptions

Coverage may be denied if the student willfully defrauds, conceals, or misrepresents any material information about the cause of the damage or loss of the device. Cosmetic damage, self-repair attempts, device alterations, tampering, or lost or stolen device are also grounds for dismissal of claim. All repairs are done at NWR7. Malfunctions due to normal wear and tear are not counted as an incident.

To Purchase

To purchase insurance, please complete the included form and submit with payment to Northwestern Regional School District No. 7, 100 Battistoni Drive, Winsted, CT 06098. ATTN: CB Insurance. No cash payments are accepted. Coverage is non-refundable.

If you do not wish to purchase insurance, incurred fees for damage will be the responsibility of the designated family, per current practice, as detailed in our "NWR7 Chromebook User Agreement" form. All fees are required to be paid by the end of each term.

We hope you will take this opportunity to secure coverage for your child's school Chromebook. This document and other forms are available at [NWR7.com](https://www.nwr7.com)

Thank you,
IT Department

AGREEMENT FORM - CB ACCIDENTAL INSURANCE

Student Name _____
(Print Last name, First name)
Grade Level _____ Graduation Year _____
Street Address _____
Town and Zip _____
Phone number _____

Coverage Year: 2025-2026
Enrollment open until September 30, 2025

☐ YES - I wish to enroll in NWR7's Chromebook Accidental Insurance Policy.

Cost \$30.00 /year

Payment Payment can be made to Regional School District no.7, and mailed or delivered to: NWR7 Business Office, 100 Battistoni Drive, Winsted, CT 06098. ATTN: Chromebook Insurance

Parent Agreement Acknowledgement

Parent Signature _____ Date _____

NORTHWESTERN REGIONAL SCHOOL DISTRICT 7

ADDITIONAL PERMISSIONS

Media Release

Honor Roll

Each quarter, the school system and the media regularly releases the names of students that made the honor roll at Northwestern Regional School District #7. If you don't want your child's name listed in a publication or other media, you must opt out.

____ Yes, my child's name MAY BE USED in media stories for honor roll purposes.

____ No, my child's name MAY NOT BE USED in media stories for honor roll purposes.

Events and Activities

The school system and the media regularly photograph and tape events, activities and success stories at Northwestern Regional School District #7. If you don't want your child's image used in a publication or other media, you must opt out.

____ Yes, my child's name MAY BE USED in media stories

____ No, my child's name MAY NOT BE USED in media stories.

Release of Information

In accordance with Section 8528 of the Act titled Elementary and Secondary Education Act of 1965 (ESEA), this school is required to provide names, addresses and phone numbers of high school students to institutions of higher education as well as military recruiters. A high school student aged 18+ or the parent of a student under 18 may request the information not be released without prior written parental consent.

Military Release

I give permission to the school to release the name, address and phone numbers of the student to military recruiters.

Yes ____ No ____

Higher Education Release

I give permission to the school to release the name, address and phone numbers of the student to higher education institutions.

Yes ____ No ____

Parent/Guardian: _____ **Date:** _____
Signature

7/20/2010

6150

Appendix

Regional School District No. 7

NOTICE OF NON-PARTICIPATION

If you DO NOT want your son or daughter to have network access, including access to the Internet, or if you wish to prevent his or her image from being posted on the school or district website, please return this form to:

Media Director
Northwestern Regional High/Middle School
100 Battistoni Drive
Winsted, Connecticut 06098

School _____

Name of Student _____

Address _____

Phone _____

☐ As the parent or legal guardian of _____,
I do not grant permission to use the Regional School District No. 7
Network or its network resources, including the Internet.

☐ As the parent or legal guardian of _____,
I do not grant permission for my child's image to appear on the school or
District website, wiki, blog, or any other form of open electronic
communication.