



MOUNT ARLINGTON PUBLIC SCHOOLS STUDENT REGISTRATION & ENROLLMENT FORM

Pre-Kindergarten through Grade 8

District Registration Year: _____

Privacy and purpose. Information is collected for enrollment, student records, educational services, required state/federal reporting, and identification of supports to which a student may be entitled.

1. STUDENT INFORMATION

Legal Last Name	Legal First Name / Middle Name
Preferred/Chosen Name	Date of Birth (MM/DD/YYYY)
Birth City / State / Country	Gender ☐ Male ☐ Female ☐ Another identity: _____
Current Grade Entering	School Year
Previous School / District	Previous Grade
Date First Enrolled in U.S. School	Date First Enrolled in NJ School
Student Lives With:	Primary Residence Address

Is the student currently enrolled in another public/private school? ☐ No ☐ Yes

If so, School/District: _____

2. PARENT / GUARDIAN INFORMATION: Parent/Guardian 1

Full Legal Name	Relationship to Student
Home Address	Email Address
Primary Phone	Work/Alternate Phone
Preferred Communication Language	Interpreter Requested? ☐ No ☐ Yes
Does this parent live with the student? ☐ Yes ☐ No	Is this parent an educational Decision-Maker? ☐ Yes ☐ No

Parent/Guardian 2

Full Legal Name	Relationship to Student
Home Address	Email Address
Primary Phone	Work/Alternate Phone
Preferred Communication Language	Interpreter Requested? ☐ No ☐ Yes
Does this parent live with the student? ☐ Yes ☐ No	Is this parent an educational Decision-Maker? ☐ Yes ☐ No

Custody / court order affecting educational decision-making? ☐ No ☐ Yes (provide documentation as applicable)

3. RESIDENCY / ENROLLMENT ELIGIBILITY

Physical address where student resides: _____

Mailing address, if different: _____

Student's permanent home/domicile is in Mount Arlington School District: ☐ Yes ☐ No ☐ Unsure

Student resides with parent/guardian: ☐ Yes ☐ No

If no, name of person with whom student resides: _____ Relationship: _____

Is the student temporarily residing in the district? ☐ No ☐ Yes

Does any special circumstance apply? ☐ No ☐ Yes (check all that apply below)

- | | |
|--|--|
| ☐ Student is experiencing homelessness (see definition at the end of this document) | ☐ Student is living with a district resident who is not parent/guardian |
| ☐ Court order / DCF placement | ☐ Military-related relocation/special circumstance |

Note: NJDOE residency rules protect students' right to enroll in qualifying circumstances. The district will not condition enrollment on documentation that state law prohibits it from requesting.

4. RACE AND ETHNICITY

Ethnicity (select one): Federal/state reporting requires ethnicity to be collected separately from race.

- ☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Unknown / Not Provided

Race (select one or more):

- ☐ American Indian or Alaska Native ☐ Asian
- ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander
- ☐ White ☐ Unknown / Not Provided

If more than one race is selected, check all that apply. Race/ethnicity information is used for educational records and required reporting and is not used to determine eligibility for enrollment.

5. NEW JERSEY STATEWIDE HOME LANGUAGE SURVEY

IMPORTANT: The following Home Language Survey is required for all students ages 3–21. The completed survey must be retained in the student's school record.

Question 1: What was the first language used by the student?

Response: _____

Question 2: At home, does this student hear or use a language other than English more than half the time?

- ☐ YES ☐ NO

If YES, list language(s): _____

Question 3: Does the student understand a language other than English?

- ☐ YES ☐ NO

Question 4: When interacting with his/her parents or guardians, does the student use a language other than English more than half the time?

- ☐ YES ☐ NO

Question 5: When interacting with caregivers other than their parents or guardians, does the student use a language other than English more than half the time?

- ☐ YES ☐ NO

Question 6: Has the student recently moved from another school district/charter school where he/she was identified as a Multilingual Learner?

- ☐ YES ☐ NO

For district intake use: HLS administered by: _____ Date: _____

Method: ☐ Written ☐ Oral interview

If HLS indicates further review: ☐ Records Review Required ☐ ELP Screening Required (K–8, as applicable)

☐ Preschool process

6. LANGUAGE / COMMUNICATION INFORMATION

Language(s) spoken by student: _____

Language(s) spoken by parent/guardian at home: _____

Language in which parent/guardian prefers to receive school communications: _____

Interpreter/translation assistance requested: ☐ No ☐ Yes Language: _____

Does the student use a communication system other than spoken language? ☐ No ☐ Yes — Describe:

7. SPECIAL EDUCATION, RELATED SERVICES, AND SECTION 504

Has the student ever been evaluated for special education? ☐ No ☐ Yes ☐ Unknown

Does the student currently have an IEP? ☐ No ☐ Yes ☐ Unknown

Does the student currently have a Section 504 Plan? ☐ No ☐ Yes ☐ Unknown

Is the student currently receiving counseling or behavioral services?

☐ No ☐ Yes

If yes, describe services/provider: _____

Please provide copies of current IEP, 504 Plan, evaluations, eligibility determinations, and related-service records, if available.

8. MILITARY-CONNECTED STUDENT STATUS

Is the student a child of a member of the U.S. Armed Forces, National Guard, or Reserve?

☐ No ☐ Yes ☐ Prefer not to answer

If yes, current status (check all that apply):

☐ Active Duty

☐ National Guard

☐ Reserve

☐ Retired Military

☐ Other military-connected status

☐ Unknown / Prefer not to answer

Parent/Guardian military branch: ☐ Army ☐ Navy ☐ Air Force ☐ Marine Corps ☐ Coast Guard ☐ Space Force

☐ Other: _____

Military-connected status is collected to identify students who may qualify for services, supports, or required state/federal reporting. It is not an enrollment eligibility requirement.

9. HOUSING STABILITY / McKINNEY-VENTO

Does the student currently have a fixed, regular, and adequate nighttime residence? ☐ Yes ☐ No ☐ Unsure

If NO or UNSURE, please check the situation that best describes the student's current housing:

☐ Living temporarily with another family/person because of loss of housing, economic hardship, or similar reason

☐ Living in a motel/hotel or similar temporary accommodation

☐ Living in an emergency or transitional shelter

☐ Living in a car, park, public space, abandoned building, bus/train station, or similar place

☐ Living in another situation that is not fixed, regular, and adequate

☐ Awaiting placement / housing transition

Family definition: Under the federal McKinney-Vento Homeless Assistance Act, a child or youth is considered homeless when they lack a fixed, regular, and adequate nighttime residence. This can include children living temporarily with others because of loss of housing or economic hardship, in motels/hotels, shelters, cars, public spaces, or other places not intended for regular sleeping accommodations. Families do not need to be living on the street to qualify.

10. MIGRATORY STUDENT STATUS

Has the student or a parent/guardian participated in temporary or seasonal agricultural or fishing work that required a move across a school-district boundary within the past 36 months? ☐ No ☐ Yes ☐ Unsure

If yes/unsure, please contact the district for a confidential eligibility review.

Family definition: For federal Migrant Education Program purposes, a migratory child is generally a child who is, or whose parent/guardian or spouse is, a migratory agricultural worker or migratory fisher and who, in the preceding 36 months, moved across a school-district boundary in order to obtain or seek temporary or seasonal agricultural or fishing employment. A move made for this purpose may qualify even if the family has a permanent home elsewhere.

11. FOSTER CARE / OUT-OF-HOME PLACEMENT

Is the student currently in foster care or under the care/custody of the New Jersey Department of Children and Families?

☐ No ☐ Yes ☐ Unknown

If yes, Educational Decision Maker / Foster Parent / Agency: _____

This information may be used to coordinate educational rights, records, transportation, and support services.

12. TRANSPORTATION

Transportation requested: ☐ AM ☐ PM ☐ Both ☐ Parent/Guardian Transportation

Before and After Care: My child will attend before/after school care at the Mount Arlington Public Schools.

AlphaBest is the current before/after school care provider. While they are approved to use the district facilities, this company is not a part of the school district. For any needs regarding before and after school care, please contact the company directly.

☐ AM Care Only ☐ PM Care Only ☐ Both AM and PM Care

Please note: Only 1 bus stop can be assigned in the morning and in the afternoon regardless of how many days your child is attending the aftercare program.

13. EDUCATIONAL RECORDS / CONSENT TO REQUEST RECORDS

I authorize Mount Arlington Public Schools to request educational records from the student's previous school(s) for purposes of enrollment, educational planning, and continuity of services, consistent with FERPA and applicable law.

Previous school records requested: ☐ Yes ☐ No Date requested: _____ Staff initials: _____

Previous school contact: _____ Phone/Email: _____

14. PARENT / GUARDIAN CERTIFICATION

I certify that the information provided on this registration form is true and complete to the best of my knowledge. I understand that I must notify the district of changes that may affect enrollment, contact information, custody, or educational services. I understand that the district may verify residency and enrollment eligibility as permitted by law.

Parent/Guardian Name (print): _____

Signature: _____ Date: _____

Relationship to Student: _____

FOR DISTRICT USE ONLY

Registration document packet	
Registration packet	☐ Included ☐ Not Included
Emergency contact form	☐ Included ☐ Not Included
Universal Child Health Record	☐ Included ☐ Not Included
Title IA Right to Know Letter	☐ Included ☐ Not Included
Immunization requirements	☐ Included ☐ Not Included

Registration received	Date: _____ Staff: _____
Residency documentation (must be original documents) 1. Must provide 1: Property tax bills; deeds; contracts of sale; leases; mortgages; signed letters from landlords; and other evidence of property ownership, tenancy, or residency; 2. Must provide 3 (dated within the last 30 days): delivery receipts; and other evidence of personal attachment to a particular location; Voter registrations; licenses; permits; financial account information; utility bills	☐ Verified ☐ Pending ☐ Special Circumstance
Birth/age verification (must be original documents)	☐ Verified ☐ Pending
Immunization/health records	☐ Verified ☐ Pending ☐ Exempt/Other
Previous school records	☐ Requested ☐ Received ☐ N/A
IEP/504 review	☐ IEP ☐ 504 ☐ Neither ☐ Pending Review
Home Language Survey review	☐ Complete ☐ Records Review ☐ Screening/Follow-up
McKinney-Vento	☐ Yes ☐ No ☐ Pending
Migrant status	☐ Yes ☐ No ☐ Pending
Military-connected status	☐ Yes ☐ No ☐ N/A

APPENDIX A — FAMILY DEFINITIONS

Students with Disabilities / IEP: A student who has been evaluated and determined eligible under the Individuals with Disabilities Education Act (IDEA) and who has an Individualized Education Program (IEP). An IEP describes the student's educational needs, goals, special education, related services, accommodations, and other required supports.

Section 504: Section 504 of the Rehabilitation Act protects qualified students with disabilities from discrimination and may provide accommodations through a Section 504 Plan. A student may have a 504 Plan without being eligible for special education under IDEA.

Multilingual Learner (ML): A student who meets New Jersey's criteria for identification as a multilingual learner. The district uses the required New Jersey Home Language Survey, records review, and, when applicable, an English language proficiency screening process to determine eligibility.

Homeless / McKinney-Vento: A student who lacks a fixed, regular, and adequate nighttime residence. This may include living temporarily with others due to loss of housing or economic hardship, in a motel/hotel or shelter, or in a car, public space, or other place not intended for regular sleeping.

Migrant Student: A student who meets the federal Migrant Education Program definition, generally involving a recent qualifying move across a school-district boundary by the student or family to obtain or seek temporary or seasonal agricultural or fishing employment.

Military-Connected Student: A student connected to a parent/guardian who is serving in, or otherwise has a qualifying connection to, the U.S. Armed Forces, including the National Guard or Reserve, as applicable to state/federal reporting and program requirements.

Foster Care: A student who is in foster care or otherwise placed under the care/custody of the state child-welfare agency. Identification helps the district coordinate educational rights and services.

APPENDIX B — IMPORTANT NEW JERSEY REGISTRATION INFORMATION

New Jersey school districts must follow state residency and enrollment requirements. NJDOE states that districts may not require Social Security numbers, tax returns, or documentation of citizenship or immigration/visa status (except where specifically applicable under law) as a condition of enrollment. Students experiencing homelessness have additional enrollment protections. Families should contact the district if they have questions about residency or enrollment eligibility.

NJDOE references used in developing this form: N.J.A.C. 6A:22; N.J.A.C. 6A:15; McKinney-Vento Homeless Assistance Act; applicable federal and state reporting requirements.



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TRANSFER OF STUDENT RECORDS

Parents/guardians must complete this form if their child is transferring from another school.

To: _____ Date: _____

To Whom it May Concern:

_____ has registered in our school on

_____ in grade _____.

Please send the SID# (Student State Identification Number) academic records, standardized test scores, health records, discipline records, and if applicable, 504 or Child Study Team records.

Thank you,

Parent/Guardian Authorization for Release: _____

Relation to Child: _____

Date of Birth of Child: _____