Spencer Center - New Student Registration - 2027.2028 School Year

Thank you for your interest in Spencer Center!

Student Name _____ Grade for 2027.2028 _____

(please print clearly)

Required Documents Checklist

Please Note: Registration Packet will not be processed without ALL of the following documents attached

- ☐ Photocopy of Student Birth Certificate/Passport
- ☐ Photocopy of Proof of Residence, please see below for acceptable documentation (see page 2 for date guidelines)
- ☐ Photocopy of Current Immunization Record (including MMR and TDap) or Legal Exemption of Vaccination Form
- ☐ Photocopy of Parental Proof of Identity (valid photo ID/passport) **Only legal parent/guardian may register student**
- ☐ Photocopy of Custody Agreement/Court Order required if parents are separated/divorced (if applicable)
- ☐ Photocopy of Court-ordered Guardianship papers, if student lives with someone other than a biological parent (if applicable)
- ☐ Photocopy of current, 2026.2027 Student Report Card
- ☐ Photocopy of current, 2026.2027 Student Transcript (incoming 9-11 grade students who are **not** in a CPS 7-12 or 9-12 building)
- ☐ Photocopy of Accommodations Plan (if applicable, 504, IEP, WAP (Written Acceleration Plan), WEP (Written Education Plan)
- ☐ Photocopy of Testing History (available through current school), or copy of eligibility letter from CPS Testing Department

- **Registration for CPS elementary families who leave East of I-75, and for CPS students entering Grades 7-9 (not in a 7-12 or 9-12 CPS school) will ONLY take place in-person during Registration event dates at Spencer Center.**
  - **NO electronic submissions will be accepted.**
  - **NO registration packets will be accepted without ALL of the required documentation.**
  - **NO copies will be made at any of the registration events.**

Spencer Center Registration Dates for the 2027.2028 School Year

Tuesday, January 12, 2027, 5:30pm - 7:30pm

Saturday, January 23, 2027, 11:00am - 1:00pm

Thursday, February 11, 2027, 5:30pm - 7:30pm

Wednesday, February 17, 2027, 5:30pm - 7:30pm

Spencer Center Inclement Weather Registration Date for the 2027.2028 School Year

*** Will only be held if a scheduled event date listed above is cancelled due to inclement weather ***

Monday, February 22, 2027, 5:30pm - 7:30pm

Event will be held at the CPS Board of Education, Banquet Room

Frequently Asked Questions?

* ***What is the process if there are limited seats in a specific grade level?***
A lottery, for any grade with more applicants than seats, will be run after all registration events have been completed.

* ***When will I be notified if my student receives a space at Spencer Center for the 2027.2028 school year?***
Phone calls will be made to all registered families, beginning mid-March 2027.

* ***What if a family is trying to decide between multiple schools?***
When a family receives a phone call notification of an available space, it is expected that the decision to attend Spencer Center has already been made.

* ***If we are a family who lives West of I-75, how do we apply for an elementary seat at Spencer Center?***
Families who live west of I-75 will register online via our school website, https://spencergifted.cps-k12.org, between February 1 - February 28, 2027.

* ***How do Out-of-District families apply to Spencer Center?***
All Open Enrollment occurs through the main CPS website from February 1 - February 28, 2027.

Proof of Residency Requirement

Proof of residency is required for all newly enrolling students and any student whose address changes. Residency includes the following: being physically present in a household for significant periods of time; where important family activities take place each day including sleeping, eating, working, relaxing and playing; where the parent/legal guardian receives mail or where the parent/legal guardian is registered to vote.

One item from the list below will meet the Cincinnati Public Schools proof of residency requirement:

- ☐ Homeowner/Renter Insurance Statement, dated within the last 12 months
- ☐ Property Tax statement, dated within the last 12 months and addressed to parent/legal guardian at the residence
- ☐ Gas/Electric/Water Statement **(not a cable or telephone bill)**, dated within the last 30 days
- ☐ Mortgage Statement, dated within the previous 60 days and addressed to parent/legal guardian at the residence
- ☐ Federal or State Income Tax Returns, dated within the last 12 months (**W-2 forms are not accepted**)
- ☐ Current Rental Agreement, signed by both the landlord and tenant, and including the landlord's contact information
- ☐ Any piece of mail dated within the last 30 days from the federal, state,or local government, such as Hamilton County Job & Family Services, Social Security Office, Child Support Enforcement Agency, etc.
- ☐ Construction Contract that includes a sworn statement describing the location of the house to be built and stating the parent's intention to reside there upon completion

***Please Note:** Any above Proof of Residency listing with a timeframe deadline, that timeframe applies to when the documents are submitted to Spencer Center. For example, a Duke Energy bill submitted at a registration event, must have a service date within 30 days of that specific registration event.

Welcome to CINCINNATI PUBLIC SCHOOLS

This box - CPS Use Only:

Student ID ☐☐☐☐☐☐☐☐☐

Entry Date ____/_____/_____
Entry Code_____
Homeroom _____

STUDENT REGISTRATION INFORMATION FORM

Important: Signature required at bottom of Page 5

School Year: _____ **Today's Date:** _____

School Name: _____ **School Code:** _____

Student Information

Please print and provide legal names.

Last Name: _____ **First Name**: _____ **Middle**: _____

Entering Grade Level: _____ **Gender (Check One):** ☐ **Male** ☐ **Female**

Home Address: _____ **Apartment Number:** _____

City: _____ **State:** _____ **Zip Code:** _____

Home Phone: _____ **Student Needs Transportation: (Circle) AM PM BOTH**

Is student Hispanic or Latino? ☐ **No** ☐ **Yes**
Race/Ethnic Code ☐ Black/African-American ☐White/Caucasian ☐Asian
(Must check all that apply.) ☐ American Indian/Alaskan Native ☐Native Hawaiian/Other Pacific Islander

Student's Birthplace: City_____ State _____ Country_____

Student's Birthdate ____/____/_____ (month/date/year – xx/xx/xxxx)

Birth Document Source _____ (birth certificate, passport, etc.; provide document)

Nationality _____

Date student was enrolled in U. S. schools: _____/____ (month/year – xx/xxxx)
Has student ever received English as a Second Language (ESL) or Bilingual services? ☐ No ☐ Yes
Is student a Foreign Exchange student? ☐ No ☐ Yes If Yes, enter I-94 number: _____

Cincinnati Public Schools is required to identify students whose parent is (or parents are) in the U.S. Armed Forces (Active Duty or Reserve status) or in the National Guard.
Parent/Guardian in U.S. Military or National Guard? ☐No ☐Yes

Parent's/Guardian's Name _____ Parent ☐ Guardian ☐

Parent's/Guardian's Resident School District (if not CPS)_____

Enrollment Reasons (Check One)
☐ From out of state / out of country
☐ From home school in Ohio
☐ From nonpublic school in Ohio
☐ From an Ohio public district or charter (community) school
☐ Not in Ohio public/charter schools since 2003
☐ First time in Ohio public school due to age
☐ Not newly enrolled in this district

If not a CPS district resident, select reason for applying:
☐ Open Enrollment
☐ Open Enrollment - Outside Ohio (Tuition)
☐ Out of District - Foster Placement
☐ Out of District - Homeless
☐ Out of District - Special Education
☐ CPS Employee - Employee ID Number: _____
☐ Other _____

Emergency Contacts

#1 Name: _____
Relationship to Student: _____
Cell Phone: _____

#2 Name: _____
Relationship to Student: _____
Cell Phone: _____

Primary Care Doctor & Phone: _____

Student's Name_____

Language

A completed language usage survey is required for all students upon enrollment in Ohio schools. This information will tell school staff if they need to check your child's proficiency in English. Answers to these questions ensure your child receives the education services to succeed in school. The information is not used to identify immigration status.

Communication Preferences

Indicate your language preference so we can provide an interpreter or translated documents at no cost when you need them. All parents have the right to information about their child's education in a language they understand.

In what language(s) would your family prefer to communicate with the school? _____

Language Background

Information about your child's language background helps us identify students who qualify for support to develop the language skills necessary for success in school. Testing may be necessary to determine if language supports are needed.

What language does this student speak most frequently? (primary language)_____

What language is most often spoken by adults at home? (home language) _____

What was this student's first language? (first language) _____

Prior Education

Responses about your child's birth country and previous education give us information about the knowledge and skills your child is bringing to school and may enable the school to receive additional funding for support for your child.

Has your child ever received formal education outside the United States? ☐ No ☐ Yes

If yes, how many years/months? _____/_____
Years Months

If yes, what was the language of instruction? _____

Has your child attended school in the United States? ☐ No ☐ Yes

If yes, when did your child first attend a school in the United States? _____/_____/_____
Month Day Year

Additional Information

Additional space needed? Use back of this page.

Share information to help us understand your child's language experiences and educational background.

Student's Name_____

Prior Education

Additional space needed? Use back of this page.

List student's previous schools, beginning with most recent school, including preschool:

School Name	Address (Street, City, State, Country)	Grades	From – To
School Name	Address (Street, City, State, Country)	Grades	From – To

Preschool Experience **(Check all that apply.)**

- ☐ **At a CPS preschool / Head Start program**
- ☐ **At a non-CPS Head Start program**
- ☐ **At a full-day, full-year childcare center**
- ☐ **At a part-time private preschool**
- ☐ **At a family childcare home**
- ☐ **At home**
- ☐ **Other**

Kindergarten Experience

- ☐ **Half day**
- ☐ **All Day**

Siblings

Additional space needed? Use back of this page.

Last Name_____First Name _____Middle Name_____

Gender - ☐ Male ☐ Female

School Attending _____ Grade_____ Age _____

Last Name_____First Name _____Middle Name_____

Gender - ☐ Male ☐ Female

School Attending _____ Grade_____ Age _____

Last Name_____First Name _____Middle Name_____

Gender - ☐ Male ☐ Female

School Attending _____ Grade_____ Age _____

Student's Name_____

Use additional pages as necessary.

Parent

☐Mother ☐Father ☐Guardian ☐Stepparent ☐Foster parent * ☐Grandparent ☐Surrogate Parent ☐Other

Last Name_____ Deceased? ☐ No ☐ Yes
First Name_____ District of Residence_____
Marital Status ☐ Married ☐ Unmarried ☐ Widowed District of Primary Residence _____
☐ Separated ☐ Divorced Resides with Student? ☐ No ☐ Yes

If you check Separated or Divorced, we require current legal documentation related to the children.

Address **_____
City _____State _____
Zip Code_____
Phone _____ Unlisted? ☐ No ☐ Yes
Cell Phone _____
Email Address _____

Employer _____
Work Address _____
Work Phone _____

Custodial Parent? ☐ No ☐ Yes
Legal Guardian? ☐ No ☐ Yes
Grandparent POA? *** ☐ No ☐ Yes
Caregiver Authorization? ☐ No ☐ Yes

Migrant Worker? ☐ No ☐ Yes
Receive School Mail (if not Custodial Parent)?
☐ No ☐ Yes

Parent

☐Mother ☐Father ☐Guardian ☐Stepparent ☐Foster parent * ☐Grandparent ☐Surrogate Parent ☐Other

Last Name_____ Deceased? ☐ No ☐ Yes
First Name_____ District of Residence_____
Marital Status ☐ Married ☐ Unmarried ☐ Widowed District of Primary Residence_____
☐ Separated ☐ Divorced Resides with Student? ☐ No ☐ Yes

If you check Separated or Divorced, we require current legal documentation related to the children.

Address **_____
City _____State _____
Zip Code_____
Phone _____ Unlisted? ☐ No ☐ Yes
Cell Phone _____
Email Address _____

Employer _____
Work Address _____
Work Phone _____

Custodial Parent? ☐ No ☐ Yes
Legal Guardian? ☐ No ☐ Yes
Grandparent POA? *** ☐ No ☐ Yes
Caregiver Authorization? ☐ No ☐ Yes

Migrant Worker? ☐ No ☐ Yes
Receive School Mail (if not Custodial Parent)?
☐ No ☐ Yes

* If **foster parent**, obtain a **current** copy of court order showing district of responsibility. Retain in cumulative file.
** If address is different from student's address; addresses required for natural or adoptive parents.
*** **If parent is not custodial, include copy of Grandparent Power of Attorney (POA) and Caregiver Authorization.**

Students With Special Needs **Student's Name**_____

Provide documents where needed.

Does child require mobility assistance? (i.e. wheelchair, etc.)	☐ No	☐ Yes
Has child ever had an ETR (Education Team Report)?	☐ No	☐ Yes
If **Yes**, is there an evaluation form available?	☐ No	☐ Yes
Did child receive Special Education and related services in most recent school?	☐ No	☐ Yes
Does this child have a current IEP (Individualized Education Program)?	☐ No	☐ Yes
Does child have a 504 Accommodation Plan?	☐ No	☐ Yes
If **Yes**, is there an ETR (Education Team Report) available?	☐ No	☐ Yes
Did child receive Gifted services in most recent school?	☐ No	☐ Yes
If **Yes**, is there a WEP or WAP (Written Education Plan; Written Acceleration Plan) available?	☐ No	☐ Yes

To Staff: If Yes to questions above, obtain copies of available documentation and forward to appropriate school staff.

Temporary Living Arrangements

The following questions address the McKinney-Vento Act 42 U.S.C.

Answers to these questions will help determine what services the student may be eligible to receive.

Is student's current address a temporary living arrangement?	☐ No	☐ Yes
Is this temporary living arrangement due to loss of housing or economic hardship?	☐ No	☐ Yes

If answer to both of these questions is Yes, the student is entitled to immediate enrollment.

Where is the student living now?

☐ In a motel or hotel ☐ Doubled up with family or friend
☐ In a homeless shelter ☐ Unaccompanied youth
☐ Other (a place not designed for ordinary sleeping accommodations)

To Staff: If Yes to questions above, fax this page and Page 1 to Project Connect: 513-363-3220.

FOCUS	**Do you have a FOCUS website account? ☐ Yes ☐ No**
FOCUS is a website where parents can see their child's grades, attendance, assignments, discipline and more.	If **No**, would you like to sign up for one? ☐ **Yes** ☐ **No** If **Yes**, give us your email address: _____

To Staff: If new FOCUS account, give copy of this page and Page 1 to FOCUS Coordinator at your school.

How Did You Hear About CPS?

☐ CPS Publication ☐ Billboards ☐ Radio
☐ CPS Website ☐ Letter or Postcard ☐ Printed Advertisement
☐ Friend or Relative ☐ Television News Story ☐ Newspaper Story
☐ CPS Staff Member ☐ CPS Event

To Staff: Please fax this page to CPS' Communications and Engagement Office: 363-0025.

I understand that any inaccurate information provided about this student on any page of this Student Registration Information Form may result in a change of grade level, a change of class, or an immediate transfer or withdrawal from this school.

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

Request to Restrict Privacy Information

Federal and Ohio laws prohibit Cincinnati Public Schools (CPS) from publicly releasing information about our students, except for designated "Directory Information." Per Board Policy No. 8330, **CPS defines Directory Information as the following:**

A student's name, school, grade level, parent-guardian's name, home address, telephone number, email address, participation in officially recognized activities and sports, and awards received

Under Ohio public records law, CPS is required upon request to provide the above Directory Information to any member of the public who requests it. CPS' primary purpose for releasing Directory Information is to highlight students' accomplishments.

Parents, legal guardians, or students age 18 or over may refuse to allow CPS to release Directory Information. **Please indicate if you wish to restrict CPS from releasing Directory Information on the student named below by checking the appropriate box and returning this form to your child's school.**

General Public Release (including to media, potential employers, colleges and universities, etc.)

☐ CPS **may not** release directory information about my child

Media Release

☐ CPS **may not** release photos and /or video/audio of my child

Military Recruiters

Per federal law, CPS must release the names, addresses and telephone numbers of high school students to military recruiters, unless the parent or legal guardian, or student age 18 or over, specifically objects.

☐ CPS **may not** release my child's name, address and phone number to military recruiters.

_____ _____

(Please Print) Student's Last Name First Name

Student's Birthdate _____/_____/_____

Month / Day / Year

Please check one:

☐ I am the student, and I am 18 years of age or older.

☐ I am the parent, guardian, or custodian of the student, and the student is under 18 years of age.

_____ _____ _____

Name (Please Print) Signature Date

Please Note: Student records may be routinely shared among Cincinnati Public Schools staff with a legitimate interest in a student's education. A CPS official is a person employed by CPS or a person CPS determines has a legitimate educational interest in a record. A person has a legitimate educational interest if there is a need to review a record in order to fulfill his or her professional responsibility.

Parents and/or eligible students who believe their rights under the Federal Education Rights and Privacy Act (FERPA) have been violated may file a complaint with:

Family Policy Compliance Office, U.S. Department of Education, 400 Maryland Avenue SW, Washington, D.C., 20202- 4605 Website: www.ed.gov/offices/OM/fpco

Informal inquiries may be sent to the Family Policy Compliance Office at this email address: FERPA@ed.gov

PARENT AUTHORIZATION TO RELEASE INFORMATION

I, _____ authorize the release of records pertaining to
(Please Print) **Name of Parent / Guardian or Student 18 years old**

_____ _____ _____
(Please Print) **Student's Last Name** **First Name** **Middle Initial**

Student's Birthdate _____ / ____ / _____ (month/date/year - XX/XX/XXXX)

From the following school or institution:

Most Recent School _____

Address _____

City, State, Zip Code _____

Telephone No. _____ Fax No. _____

Grade Level _____

The following records* should be released:

Transcript of subjects and grades
Attendance Record
Psychological or Other Individual Test Results
504 Accommodation Plan
English Language Proficiency Assessments
Special Education Records, including IEP, MFE or ETR, and behavior plan
Ohio Achievement and Graduation Test Results
Standardized Test Results
Gifted Assessments
Health Records

**** Records that cannot be withheld due to non-payment of fees or obligations: State test scores, Individualized Educational Program (IEP), IEP progress reports, Multifactored Evaluation (MFE) or Education Team Report (ETR), and immunization records.***

Release records to:

New School _____

Address _____

City, State, Zip Code _____

Telephone No. _____ Fax No. _____

I am authorizing the release of these records because (Check one):

☐ I am the subject of these records, and I'm 18 years of age or older.
☐ I am the parent, guardian or custodian of the subject of these records, and the subject is under 18 years.

Signature _____ **Date**_____

REQUEST FOR STUDENT RECORDS - STAFF USE ONLY

To Registrar:

Please send the records identified above for this student as soon as possible.
If records are not available, please return our request indicating the following:

☐ No Records Available. Reason(s):
_____

☐ Unable to Send Records. Reason(s):
_____

We would appreciate receiving additional information to enable us to meet the student's needs.
Thank you for your prompt cooperation.

_____ ____/____/____
CPS School Registrar Date

CPS enrollment start date for this school: _____/____/_____