

Winthrop Public Schools Registration Information Parent Information Center 101 Kennedy Drive Winthrop, MA 02152 Telephone (617) 846-5500 x7102 Fax (617) 539-0721

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All families registering a new student with the Winthrop Public Schools must bring the following required documents to the Parent Information Center as part of their registration process. Applications *cannot* be processed without these documents.

ALL of these:

- 1. Child's original birth certificate, or 1-94 form
- 2. Child's up to date immunization record (must include date of last physical) and TB status
- 3. Parent/Guardian's valid photo identification*
- 4. A utility bill dated within the last 60 days
- 5. A current mortgage statement dated within 60 days of registration for school or current lease /rental agreement that is signed and dated.

*US passport, US passport Card, US Military ID, Permanent Resident Card, Border Crossing Card, Driver's License or other state phot identity card issued by the Dept. of Motor Vehicles, Foreign Government issued Passport, Employment Authorization Card or identification Consular Card.

Any ID not listed must be reviewed and approved

Residency documents must be pre-printed with the name and current address of the student's parent/guardian.

The following may be used as **additional** proofs of residency:

- 1. Property tax bill dated within the last quarter
- 2. Government Section 8 agreement or notarized residency affidavit
- 3. W-2 form dated within the year or a payroll stub dated with the past 60 days
- 4. A bank or major credit card statement dated within the past 60 days
- 5. A letter from an approved government agency** dated within the past 60 days

**APPROVED GOVERNMENT AGENCIES: Department of Revenue (DOR), Children and Family Services (DCF), Transitional Assistance (DTA), Youth Services (DYS), Social Security or any communication on a Commonwealth of Massachusetts Letterhead.

Official Transcripts from previous schools will be requested to include school attendance and discipline. These are also required before incoming students can be registered. If the student has an Individual Education Plan (I.E.P.) it will also be requested if not brought in by the parent.

Before any student may register for a Winthrop Public School, the student's parent/guardian must prove legal, primary residence in the Town of Winthrop via the residency documents outlined above. These documents together with a photo ID are also required for any change of address.

Legal guardianship requires additional documentation from a court or agency. Residency fraud is a violation of Massachusetts state law and is subject to per diem fines for every day that a student attends school outside the district in which s/he legally resides.



Winthrop Public Schools **Registration Form**

Da	ate:
	Grade:

Student Information

Student Name:					
first	middle			last	
Date of Birth:	☐ Male ☐ Female ☐	Non-Binarv	Place of Birth:		
· · · · · · · · · · · · · · · · · · ·		- — J		city	state/country
Home				•	•
Address:	111			/_	
	apt#			<u>side</u> of Unite of entry into	•
. . .			· ·	•	
Child's Primary Language: _	Prima	ary Language	Spoken at Hom	e:	
Family Information:					
Name		Name			
Dolotionship		Dalational	n		
Relationship		Relationship	ų		
Home Address		Home Add			
If different		If different			
Home/Cell Phone		Home/Cell	Phone		
Email Address:		Email Addr	ess:		
Occupation:		Occupation:			
		Work Number			
Work Number If parents are congreted/divor	cod plassa give name of pe			N 7	
If parents are separated/divor	ced please give name of pe	erson with legal		y	school
If parents are separated/divor		erson with legal	l physical custod	.y	
If parents are separated/divor		erson with legal	l physical custod	y	
If parents are separated/divor	Age	erson with legal	l physical custod	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y If yes name of program:	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y If yes name of program:	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	J.Y	
If parents are separated/divor Siblings: Name Are you planning to enroll y If yes name of program: Name of Last School Child Attended:	Age your child in an after scho	erson with legal gram? School Info	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y If yes name of program: Name of Last School Child Attended:	Age your child in an after scho	erson with legal	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y If yes name of program: Name of Last School Child Attended: Location: Your old address:	Age your child in an after school Previous	erson with legal graph ool program? School Info	l physical custod rade () yes () no	y	
If parents are separated/divor Siblings: Name Are you planning to enroll y	Age /our child in an after school Previous city sta	erson with legal gram? School Info	l physical custod rade () yes () no rmation zip	zip	school

Home Language Survey

Massachusetts Department of Elementary and Secondary Education regulations require that *all* schools determine the language(s) spoken in each student's home in order to identify their specific language needs. This information is essential in order for schools to provide meaningful instruction for all students. If a language other than English is spoken in the home, the District is required to do further assessment of your child. Please help us meet this important requirement by answering the following questions. Thank you for your assistance.

Student Information		
		F M
First Name	Middle Name	Last Name Gender
Country of Birth	Date of Birth (mm/dd/yyyy)	Date first enrolled in ANY U.S. school (mm/dd/yyyy)
School Information		
/ /20		
Start Date in New School (mm/dd/yyyy)	Name of Former School and Town	Current Grade
Questions for Parents/Guard	lians	
What is the native language(s) of each	n parent/guardian? (circle one)	Which language(s) are spoken with your child? (include relatives -grandparents, uncles, aunts, etc and caregivers)
	(mother / father / guardian)	seldom / sometimes / often / always
	(mother / father / guardian)	seldom / sometimes / often / always
What language did your child first und		Which language do you use most with your child?
Which other languages does your chil	d know? (circle all that apply)	Which languages does your child use? (circle one)
	speak / read / write	seldom / sometimes / often / always
	speak / read / write	seldom / sometimes / often / always
Will you require written information fro language?	om school in your native	Will you require an interpreter/translator at Parent-Teacher meetings? Y N N
Parent/Guardian Signature:		/ /20
Χ		Today's Date: (mm/dd/yyyy)

Winthrop Public Schools Internet Acceptable Use Policy

The Winthrop Public Schools technology program recognizes the use of the Internet as a valuable research tool. Before using this tool students need to understand how to use it in an acceptable manner.

- The primary use of the Internet is for educational purposes
- Being able to use the Internet is a privilege, and your teachers and principal are the decision makers when it
 comes to whether you use it. If your behavior on the Internet is not appropriate, you may be suspended from its
 use.
- All Winthrop Public Schools have a filter installed on the server to prevent students from entering inappropriate sites (obscene, child pornography, harmful to minors) however, this software is not foolproof. Take responsibility for your own actions. If you find yourself at an inappropriate web site, you must minimize the browser window and notify the teacher immediately. Do not download, copy or tell any other students the location of any inappropriate material you may happen to find.
- You may not copy material and say that you wrote it yourself. Remember if you didn't write it you must identify where you found it.
- Any damage to the computers, how they are set up, or files that belong to others, will result in the loss of your privilege to use the Internet, and perhaps the computers themselves.
- You may not give <u>anyone</u> your password. Don't let anyone use your computer account for Internet activity unless you are working with them.
- You may not go to chat rooms or use email

The above are examples of inappropriate use. Since there can never be an all inclusive list, we fully expect that students do only those things necessary to complete their assignment. If a student is in doubt about something they want to do, they must first ask a teacher. Violations of this agreement also subject the student to additional school discipline as determined by the principal.

The Winthrop Public School System, along with the other organizations sponsoring this Internet link-up, will not be liable for the actions of anyone connecting to Internet through this hook-up. In addition, the Winthrop Public School System takes no responsibility for any information or materials that are transferred through Internet. Winthrop Public Schools makes no guarantee of reliability of the Internet connection, nor is it responsible for any loss or corruption of data while using this Internet connection. Winthrop Public Schools shall monitor use of the Internet and data stored in the machines to be sure that these rules are not being broken. Winthrop Public Schools can change these rules without immediate notice.

STUDENT

agreement. My teacher explained the important to follow all the rules of the responsibility and liability for the responsibility.	he rules of the agreement and I under the agreement and not to go to inapp	ow the rules I might lose the privilege of using
Print Student's Name	Student's Signature	
PARENT/GUARDIAN		
designed for educational purposes. the supervision of Internet access by	I understand that the Winthrop Publ	greement. I understand that this access is ic Schools will take all reasonable measures for my child misuse and/or abuse the Internet I
Violations of this policy by my chil child Internet access.	d will result in appropriate school di	scipline. I hereby give permission to allow my
Parent/Guardian's Name	Signature	
Date:		



Winthrop Public Schools Winthrop, MA 02152

Photo/Video/Writing/Art Work Release Form

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Our schools from time to time either photographs or videotapes school or classroom activities to keep our school/community informed of our various educational programs. Photos may be submitted to the local newspaper. Additionally, individual writing pieces and/or artwork may be submitted for publication in school, local or other publications as deemed appropriate by the teacher and/or administrator.

Please sign the following release form immediately, which gives us your permission to submit photos, writing, and/or art work. This form will become a permanent part of your child's registration form. Failure to return this form will exclude you child from video taping or photographing.

Photo/Video/V	Writing/Art Work Release Form	
NAME OF STUDENT		
Please read this Photo/Video Release For	m and sign below:	
limitation and to use such pictures and/or	Public Schools to Photograph/Video tape my child wing stories in connection with any of the work of the Winth my kind and I do hereby release the Winthrop Public Sorise in said regard.	rop
Parent/Guardian Signature	Date	

Student's	Name	Grade:
Please ans	swer BOTH questions 1 and 2.	
1. Is	s this student Hispanic or Latino? (Choo	ose only one)
N	No, not Hispanic or Latino	
	Yes, Hispanic or Latino (A person of Cuban, Nother Spanish culture or origin, regardless of	Mexican, Puerto Rican, Cuban, South or Central American, or race.)
2. W	What is the student's race? (Choose one	or more)
		e (A person having origins in any of the original peoples of Central America), and who maintains tribal affiliation or
		any of the original peoples of the Far East, Southeast Asia, or example, Cambodia, China, India, Japan, Korea, Malaysia, and, and Vietnam)
	Black or African American (A per	rson having origins in any of the black racial groups of Africa.
	Native Hawaiian or Other Pacific peoples of Hawaii, Guam, Samoa, or	Islander (A person having origins in any of the original other Pacific Islands.)
	White (A person having origins in North Africa)	any of the original peoples of Europe, the Middle East, or
Parent/Gu	ıardian Signature:	
Date:		

Winthrop Public Schools Emergency Forms

Grade	Teacher Name		Home Room #	
Student's Name				
	Last	First	Middle	
Address			Home Phone #	
Date of Birth	Sex:	Primary Languag	ge at Home	
Does your child have l	Health Insurance? Yes	No		
			lumber	
	· · · · · · · · · · · · · · · · · · ·			
If you don't have health inst contact the school nurse for	urance, Massachusetts has health insur more information about these program	rance plans that will provide uninsuns. All communications will be co	ared children with affordable health care (restrictions may a nfidential.	pply). Please
Mother/Guardian:			Home Phone	
Home Address			Cell Phone	
Work Address				
E-Mail Address				-
Father/Guardian			Home Phone	
Home Address			Cell Phone	
Work Address			Work Phone	
E-Mail Address				_
n parents are divorce	ed or separated, please list pe	erson with legal physical ci	ustody & submit a copy for our files.	
Name of brothers/siste Name of others who w	ers in school building	portation in the absence of p	parent/guardian:	
			Phone	
Name		Relationship	Phone	
In case of emergency, the so an emergency care facility i		ardian before calling student's prin	nary care provider/physician. Your child will be transported	d by ambulance
Physician Name			Phone	
			Phone	
	I not dispense any medication			
Please check all that a Heart Conditio ADD/ADHD (onDiabetes (Type I Ins	ulin Dependent)Ast	hmaMigrainesSeizure Disorder	
Diabetic Finger Stick	Testing? (You must a	provide your own Glucomet	er	
Allergies: List all/any	specific allergies	provide your own Graedine.	-	
Will your child have a	n EPIPEN at school for his/her	allergy?		
Hearing and Vision: S	Screenings are done randomly	during the school year and y	our child may or may not be screened. This inc	cludes H/V.
	re Preferential Seating			
Hearing Problems	Hearing Aids	Other		
			condition with appropriate personnel when needed the distribution of the condition of the condition of the condition of the condition with appropriate personnel when needed the condition with a personnel when needed the condition with a personnel when needed the condition with a personnel when the condition will be conditionally a personnel when the condition will be conditionally approximate the condition will be conditionally a personnel when the condition will be conditionally a personnel will be conditionally a personnel when the condition will be conditionally a personnel will be	
Donant/Cuardian Signatu	ro.		Data	

WINTHROP PUBLIC SCHOOLS

Winthrop, Massachusetts

CONSENT FOR DISSEMINATION OF STUDENT RECORD TO THE THIRD PARTY.

18 years of age)

I give permission for the following third	· · · · · · · · · · · · · · · · · · ·	of		
the parts of my childStudent's Name	's student record no	's student record noted below:		
THIRD PARTIES:				
REASONS FOR RELEASE OF RECORDS:				
STUDENT RECORD TO BE RELEASED:	PERMISSION <u>GRANTED</u>	PERMISSION <u>DENIED</u>		
Entire Record				
Transcript information (includes Identifying information, course Titles, grades/equivalent/level completed:				
MCAS, PSAT, SAT, etc scores				
Special Education Records				
Teacher and Counselor Evaluations & Comments				
Discipline and Attendance Records				
Other (specify)				
Extra Curricular Activities:				
Signature of Student or Parent/Guardian (Student's signature required if over	Student's Class	Date		



WINTHROP MIDDLE/HIGH SCHOOL

DATE_____

Please print name: Student's Signature:	-
If yes to either of the above, please explain: -	
Have you ever been arrested and/or convicted of a felony?* Yes No	
staff?* Yes No	iber of school

Section37L of the Massachusetts Educational Reform Act of 1993 states that "A student transferring into a local system must provide the new school system with complete school record of the entering student. Said record shall include but not be limited to any incident involving suspension or violation of criminal acts or any incident reports which such student was charged with any suspended act