



NORTHERN LEHIGH SCHOOL DISTRICT KINDERGARTEN REGISTRATION FORM

NAME OF STUDENT _____
LAST FIRST MI SUFFIX

ADDRESS _____

PHONE # _____ SEX MALE FEMALE

DATE OF BIRTH _____ CITY & STATE (OR COUNTRY) OF BIRTH _____

GRADE _____ REQUESTED START DATE _____ DID STUDENT PREVIOUSLY ATTEND NLS? Y OR N

ETHNICITY (Please check all that apply)

- ASIAN
- AMERICAN INDIAN/NATIVE ALASKAN
- BLACK/AFRICAN AMERICAN
- HISPANIC/LATINO
- WHITE/CAUCASIAN
- NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER
- OTHER (Please specify) _____

PA SCHOOL ENTRY DATE _____

NAME OF FORMER SCHOOL _____

ADDRESS OF FORMER SCHOOL _____

IS STUDENT A MIGRANT? YES NO

INITIAL U.S. ENTRY DATE (IF FIRST TIME ENROLLING IN US SCHOOL) _____

WHAT IS THE STUDENT'S FIRST LANGUAGE? _____

WHAT LANGUAGE(S) IS/ARE SPOKEN IN YOUR HOME? _____

DOES STUDENT SPEAK A LANGUAGE OTHER THAN ENGLISH YES NO

SPECIFY _____

HAS THE STUDENT ATTENDED ANY US SCHOOL IN ANY 3 YEARS DURING HIS/HER LIFETIME? YES NO

NAME OF PREVIOUS SCHOOL(S)	STATE	DATES ATTENDED

DOES STUDENT CURRENTLY HAVE AN IEP? YES NO

DOES STUDENT CURRENTLY HAVE A GIEP? YES NO

DOES STUDENT CURRENTLY HAVE A 504 PLAN? YES NO

IS STUDENT A FOSTER CHILD? YES NO

(If YES, attach Certificate of Entrance that names foster parents.)

FOR OFFICE USE ONLY Kindergarten Registration

LOCAL ID# _____ STATE ID# _____ PS ID# _____ DATE _____

ENROLLMENT FOOD SERVICE/TECHNOLOGY TRANSPORTATION SPECIAL EDUCATION

ORIGINAL BIRTH CERT 2 PROOFS RESIDENCY IMMUNIZATIONS

REGISTRATION FORM BLACKBOARD CONNECT HEALTH QUESTIONNAIRE TRANSPORTATION FORM DENTAL/PHYSICAL

NORTHERN LEHIGH SCHOOL DISTRICT ENTRY FORM CONTINUED

____ FATHER OR ____ LEGAL GUARDIAN	____ MOTHER OR ____ LEGAL GUARDIAN
RESIDES WITH	RESIDES WITH
NAME	NAME
DAY PHONE	DAY PHONE
EMPLOYER	EMPLOYER
CELL PHONE	CELL PHONE
EMAIL	EMAIL
ADDRESS IF DIFFERENT FROM ABOVE	ADDRESS IF DIFFERENT FROM ABOVE
IF APPLICABLE:	IF APPLICABLE:
STEP-PARENT NAME	STEP-PARENT NAME
STEP-PARENT PHONE#	STEP-PARENT PHONE#
STEP-PARENT CELL #	STEP-PARENT CELL #
PERMISSION TO ACCESS STUDENT INFO Y OR N	PERMISSION TO ACCESS STUDENT INFO Y OR N

If guardian is other than mother or father, additional documents will be required. Limitation of contact/correspondence to non-custodial parent must be supported with court order.

EMERGENCY CONTACT	EMERGENCY CONTACT
RELATIONSHIP	RELATIONSHIP
NAME	NAME
PHONE #	PHONE #

OTHER CHILDREN LIVING IN HOUSEHOLD	OTHER CHILDREN LIVING IN HOUSEHOLD
NAME	NAME
DOB	DOB
SCHOOL ATTENDING	SCHOOL ATTENDING

OTHER CHILDREN LIVING IN HOUSEHOLD	OTHER CHILDREN LIVING IN HOUSEHOLD
NAME	NAME
DOB	DOB
SCHOOL ATTENDING	SCHOOL ATTENDING

PRINT PARENT'S NAME: _____

PARENT'S SIGNATURE: _____

DATE: _____

FOR OFFICE USE ONLY		
LOCAL ID# _____	STATE ID# _____	PS ID# _____
ENTERED BY: _____	DATE _____	

Dear Parent/Guardian:

The district has contracted with a service called Blackboard Connect which allows authorized school personnel to contact parents/guardians quickly via telephone using an automated system. There are four (4) basic types of calls that can be made from this system - community outreach, survey, attendance, and emergency.

Community outreach calls are calls that are made to announce something or let you know that a particular event is taking place at the school/district, such as parent-teacher conferences, band or choral concerts, standardized testing dates, etc. Community outreach calls are made to the **student's home telephone number**, which is contained in our student information system.

The second type of call is a **Survey** call that asks for a response to a question posed by the school/district. This type of call is used to gather parent/guardian opinion or information that will be used in decision making; again this type of call is only made to the **student's home telephone number**.

The third type of call is an **Attendance** call telling the parent/guardian that their child was not in attendance at school and asking them to contact the school nurse. This type of call is again made to the **student's home telephone number, but can be changed** to another telephone number stored in the Blackboard Connect contact's data record such as a parent/guardian's cell phone or work number if requested by the parent/guardian.

The last type of call that can be made is an **Emergency** call which is made to **all telephone numbers** contained in the Blackboard Connect system and additionally sent to two (2) different **e-mail addresses** and a **text message** to a PDA or cell phone... The emergency call will only be used in cases of a true emergency such as early school closure due to weather, mechanical or electrical failures, or threats of any type which force school/district closure.

The telephone numbers that are used by Blackboard Connect are the student's home telephone number, parent/guardian's work number, p/g mobile (cell) number, p/g alternate home phone number, p/g alternate mobile (cell) number, p/g alternate work phone number. These phone numbers **must be in a ten (10) digit format** (xxx-xxx-xxxx) and **no extensions** are allowed. Because an increasing number of parents/guardians are replacing their land line phones with cell phones, please make sure that the voice mail has been set up to take calls when your phone is off; otherwise the system will report it as a bad phone number to us.

Complete the attached form and return it to school with your child so that we may update our system with the latest information for contacting you using the Blackboard Connect system. If you have any questions please don't hesitate to call your child's school or e-mail connected@nlsd.org.

Thank you,

John Hrizuk
Director of Technology

Northern Lehigh School District

Blackboard Connect Parent/Guardian Contact Form

Student's Name (Last, First, MI): _____

Student's Grade: _____

Student's School: _____

Note: Telephone numbers must be 10 digits only (xxx-xxx-xxxx) , no extensions are allowed.

1. Student's Home Telephone Number: _____

2. Parent/Guardian's Work Phone Number: _____

3. Parent/Guardian's Mobile (Cell) Number: _____

4. Parent/Guardian's Alternate Home Phone Number: _____

5. Parent/Guardian's Alternate Mobile (Cell) Number: _____

6. Parent/Guardian's Alternate Work Number: _____

If you are hearing impaired and have TTY service please mark TTY behind the phone number that has that service.

Parent/Guardian's E-mail Address: _____

Parent/Guardian's Alternate E-mail Address: _____

Parent/Guardian's SMS Address: _____

(This is a mobile phone number as an e-mail address for text messaging to a cell phone or PDA. For example: 6105551212@mobile.verizon.net)

PLEASE NOTE: If you would like to use another telephone number *instead of the student's home phone number* for attendance calls please identify (using numbers 2-6 from the list above) which phone number (only one number) should be used for that purpose. _____