

KIRBY SCHOOL DISTRICT 140 Enrollment Information Form

PLEASE PRINT

Student's name: _____
Last name
First name
Middle Initial

Address: _____ City: _____ Zip Code: _____

Home Phone number: () _____

Date of Birth: ____/____/____ Current Age: _____ Gender: Male Female

Student lives with: Both Parents Mother Father Mother/Stepfather Father/Stepmother
 Legal Guardian Other _____
Relationship to Student

Mother/Stepmother: _____ Work/cell number: () _____

Father/Stepfather: _____ Work/cell number: () _____

Guardian: _____ Work/cell number: () _____

Does student have an IEP? Yes No

Does student have a 504 Plan? Yes No

List siblings enrolled in SD 140:	Name	School	Grade
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Name of school last attended: _____ Phone number: () _____

Registration of a student who is not a resident is a fraudulent act. Parents or Guardians will be subject to the payment of retroactive tuition charges for non-resident students. I certify that I understand the residency requirement and that I know the penalty for fraudulent registration.

Signature of Parent/Guardian: _____ Date: _____

***** FOR OFFICE USE *****

Student ID: _____ Assigned School: _____ Entry Date: _____

Grade Level: _____ Room: _____ Fees: _____ Bus Status: _____ Area: _____

Records:	Submitted	Requested	NOTES:
Health	<input type="checkbox"/>	<input type="checkbox"/>	_____
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	_____
Academic	<input type="checkbox"/>	<input type="checkbox"/>	_____
Birth Cert.	<input type="checkbox"/>	<input type="checkbox"/>	_____
Residency	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADDRESS CHANGES

EMERGENCY/HEALTH INFORMATION FORM

STUDENT'S NAME _____	BIRTH DATE ____ / ____ / ____
ADDRESS _____	SCHOOL _____
HOME PHONE () _____	GRADE _____
FATHER _____	MOTHER _____
EMPLOYER _____	EMPLOYER _____
WORK PHONE _____	WORK PHONE _____
CELL PHONE _____	CELL PHONE _____

EMERGENCY CONTACTS

An emergency contact is someone who is able to pick up your child, in your absence, with your permission in the event of sickness, injury or an emergency at school. Please consider local contacts only.

NAME _____	NAME _____
RELATION _____	RELATION _____
PHONE _____	PHONE _____
PHONE _____	PHONE _____

EMERGENCY MEDICAL INFORMATION

Please list any medical diagnosis or health condition that applies to your child.

MEDICAL CONDITION _____	ALLERGIES _____
MEDICAL CONDITION _____	ALLERGIES _____
MEDICAL CONDITION _____	ALLERGIES _____

PLEASE LIST ALL MEDICATIONS TAKEN BY YOUR CHILD DURING SCHOOL HOURS AND AT HOME

MEDICATION _____	MEDICATION _____
MEDICATION _____	MEDICATION _____
SPECIAL HEALTH CONCERNS _____	

RELEASE

School Authorities have my consent to act in any emergency in securing the necessary aid and transportation for the preservation of my child's health.

Signature of Parent/Guardian _____ Date _____

KIRBY SCHOOL DISTRICT 140
Language and Race/Ethnicity Form

Student's Name: _____

Language

Student was born in the United States _____
City State

If not, which country? _____

Is the student a citizen of the United States? Yes No

Does the student speak another language other than English? Yes No

If yes, see reverse side for the Language _____ and Language Code _____

Race/Ethnicity

Hispanic/Latino (Choose one.):

- No, student is not Hispanic/Latino
- Yes, student is Hispanic/Latino

Race (Choose one or more regardless of ethnicity status selected above.):

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Multiracial

ETHNIC CODES

HISPA	Hispanic/Latino	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
Ameri	American Indian or Alaska Native	A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
ASIAN	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 Philippine Islands, Thailand, and Vietnam.
BLACK	Black or African American	A person having origins in any of the black racial groups of Africa.
HAWAI	Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
WHITE	White	A person having origins in any of the original peoples of Europe, Middle East, or North Africa.
MULTI	Multiracial	A student who represents more than one race.

LANGUAGE CODES

#	LANGUAGE	#	LANGUAGE	#	LANGUAGE	#	LANGUAGE
076	Afrikaans (Taal)	064	Estonian	008	Korean	004	Polish
103	Akan (Fante, Asante)	052	Ewe	142	Kpelle	023	Portuguese
042	Albanian, Gheg (Kosvo/Macedonia)	031	Farsi (Persian)	163	Krahn (Liberia, Cote 'de Ivoire)	084	Pueblo
153	Albanian, Tosk (Albania)	044	Finnish	120	Krio	027	Romanian
006	Algonquin	012	French	121	Kurdish	093	Romany (Gypsy)
165	American Sign Language	148	Fukien/Hokkien (Chinese)	074	Lao	035	Russian
105	Amharic	071	Ga	038	Latvian	013	Samoan
056	Apache	102	Gaelic (Irish)	122	Lingala	007	Serbian
010	Arabic	057	Gaelic (Scottish)	017	Lithuanian	150	Shanghai (Chinese)
026	Armenian	051	Gbaya	123	Luganda	075	Shona
110	Assamese	005	German	125	Lunda	132	Sikkimese
025	Assyrian (Syriac, Aramaic)	002	Greek	092	Luo	133	Sindhi
112	Bagheli	037	Gujarati	124	Luyia (Luhya)	134	Sinhalese
107	Balinese	115	Guyanese	162	Maay or Mai Mai	039	Sioux (Dakota)
054	Bemba	149	Hainanese (Chinese)	058	Macedonian	045	Slovak
067	Bengali	049	Haitian-Creole	059	Malay	096	Slovenian
116	Bisaya (Malaysia)	113	Hakka (Chinese)	060	Malayalam	164	Somali
152	Bosnian	080	Hausa	091	Maltese	135	Sotho
055	Bulgarian	161	Hawaiian	030	Mandarin (Chinese)	145	Sourashtra (Saurashtra)
015	Burmese	029	Hebrew	100	Mandingo (Mandinka)	001	Spanish
073	Cambodian (Khmer)	081	Hemba	138	Maori	046	Swahili
021	Cantonese (Chinese)	014	Hindi	078	Marathi	024	Swedish
036	Cebuano (Visayan)	068	Hmong	101	Mende	047	Taiwanese/Formosan/Min Nan
158	Chaldean	095	Hopi	072	Menominee	094	Tamil
108	Chamorro	019	Hungarian	146	Mien (Yao)	086	Telugu (Telegu)
147	Chaochow/Teochiu	085	Ibo/Igbo	140	Mina (Geser-Goram)	022	Thai
117	Chechen	070	Icelandic	141	Mongolian	137	Tibetan
097	Cherokee	130	Ilocano	061	Navajo	109	Tigrinya (Tigrigna)
065	Chichewa (Nyanja)	143	Ilonggo (Hiligaynon)	077	Nepali	154	Tongan
050	Chippewa/Ojibawa/Ottawa	062	Indonesian	040	Norwegian	104	Tuluau
087	Choctaw	083	Isoko	127	Okinawan	032	Turkish
043	Comanche	003	Italian	079	Oneida	018	Ukrainian
048	Creek	156	Jamaican	128	Oriya	033	Urdu
151	Croatian	011	Japanese	129	Orri (Oring)	155	Uzbek
098	Crow	139	Kache (Kaje, Jju)	099	Other	034	Vietamese
020	Czech	159	Kanjobal	106	Oulof (Wolof)	114	Welsh
041	Danish	063	Kannada (Kanarese)	160	Palauan	088	Winnebago
157	Dinlea (Turkish)	069	Kanuri	118	Pampangan	016	Yiddish
028	Dutch/Flemish	136	Kashi (Uyghur)	053	Panjabi (Punjabi)	126	Yombe
144	Efik	066	Kashmiri	131	Pashto (Pushto)	090	Yoruba
000	English	089	Kikamba (Kamba)	009	Pilipino (Tagalog)		
111	Eskimo	119	Konkani	082	Pima		

KIRBY SCHOOL DISTRICT 140
Tinley Park, IL 60477

Student Home Language Survey

Date _____

Student's Name _____ Sex: **M** **F**

Age _____ Birth Date _____ Place of Birth (Country) _____

School (Child will be attending in District 140) _____ Grade _____

Mother's Name _____ Father's Name _____

Home Phone _____ Cell Phone _____

Parent or Legal Guardian Signature

PLEASE COMPLETE ALL QUESTIONS. THANK YOU.

1. Is this your child's first year in the United States? (Circle One)	YES	NO
2. Was the <u>first</u> language your child spoke English? (Circle One)	YES	NO
3. Is a language other than English spoken in your home?	YES	NO
If yes, please list all languages other than English.		
4. Does your child speak a language other than English ? (Circle One)	YES	NO
If yes, what other language(s) does your child speak when talking to others? (Please list all languages other than English?)		
5. Which language does your child use most often when speaking to parents?		
6. Which language does your child use most often when speaking to friends?		
7. Has your child attended any other school prior to this one? (Circle One)	YES	NO
If YES: Name of School:		
City:	State:	Number of Years Attended:

For Office Use Only:

Student tested on _____, does not qualify for services. Semester: 01 02

ELL Screener Test Taken: Pre-IPT (01) WIDA Model (09) WAPT (10)

ELL Teacher's Signature

KIRBY SCHOOL DISTRICT 140

Administration Building
16931 South Grissom Drive
Tinley Park, Illinois 60477
Phone: (708) 532-6462 Fax: (708) 532-1512
Website: ksd140.org

XPEDITE® EMERGENCY NOTIFICATION SYSTEM

Kirby School District 140 uses the Xpedite® Emergency Notification System to quickly contact our parents with information regarding emergency closings, snow days, special events or news alerts. In order to contact you, please provide the following information:

Telephone Number (including area code) to be given to Xpedite®: _____

Please check the box below only if it applies to you:

I need to receive emergency notification alerts at an additional telephone number.

My secondary telephone contact information (including area code) is: _____

Student's Name (please print full legal name)

School student attends

Parent Signature

**If you would also like to receive emergency notifications by email,
please register for KSD 140 eNews at ksd140.org/KSD140eNews.asp**

PHOTO, VIDEO, and WEBSITE CONSENT FORM

Photo and Video Consent Form

Pictures of Unnamed Students: Students may occasionally appear in photographs and videos taken by school staff members, other students, or other individuals authorized by the Building Principal. The school may use these pictures, without identifying the student, in various publications, including the school yearbook, school newspaper, and school website. No consent or notice is needed or will be given before the school uses pictures of unnamed students taken while they are at school or a school-related activity.

Pictures of Named Students: Many times, however, the school will want to identify a student in a school picture. School officials want to acknowledge those students who participate in a school activity or deserve special recognition.

In order for the school to publish a picture with a student identified by name, **INCLUDING YEARBOOK**, one of the student's parents or guardians must sign a consent form. Please complete and sign the form below to allow the school to publish and otherwise use photographs and videos, with your child identified, while he or she is enrolled in Kirby School District 140.

(Return this form with your child's registration/enrollment packet.)

_____ I ***do*** grant consent to Kirby School District 140 **to identify a picture of my child by full name and/or the school he or she attends**, in any school-sponsored material, publication, video, or website.

_____ I ***do not*** grant consent to Kirby School District 140 **to identify a picture of my child by full name and/or the school he or she attends**, in any school-sponsored material, publication, video, or website.

This consent is valid for the **entire time** my child is enrolled in Kirby School District 140. I may revoke this consent at any time by notifying the Building Principal.

Signed Parent/Guardian's Name

Printed Parent/Guardian's Name

Date

Child's Name

Pictures of Students Taken by Non-School Agencies: While the school limits access to school buildings by outside photographers, it has no control over news media or other entities that may publish a picture of a named or unnamed student.

KIRBY SCHOOL DISTRICT 140
Tinley Park, Illinois

COMMUNICATION NETWORKS ACCESS FORM

The school district is pleased to offer students and staff access to communication networks as a means to enhance learning opportunities. However, users of district computer networks need to follow procedures established as part of the district's acceptable use policy. Individual users are responsible for their behavior and communications over those networks. Users are expected to comply with district standards. Supervisors and network administrators may review files and communications to maintain system integrity and insure that users are acting in a responsible manner. Users should not expect that files stored on district servers, hard drives, or disks will always be private. If the user is a student, a parent/guardian signature is required.

USER

As a user of Kirby School District 140 communication networks, I hereby attest that I understand the Terms and Conditions (as stated on the reverse side) and will comply with the adopted procedures.

User Name (Please Print)

School

User Signature

Date

PARENT/GUARDIAN

As a parent or legal guardian of a student using the district's communication networks, I grant permission for my child to access networked computer services such as electronic mail and the Internet. I understand individuals are responsible for appropriate use of such services and that I support upholding the Terms and Conditions (as stated on the reverse side). Further, I accept responsibility for supervision if and when my child's use of downloaded material is not in a school setting. I acknowledge that I am familiar with the District's procedures and rules for acceptable use as set forth in Administrative Policy 600.23.

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Date

Terms and Conditions

1. **Acceptable Use**—The original purpose of the Internet was, and largely still is, to support research and education in and among academic institutions in the United States by providing access to unique resources and the opportunity for collaborative work. The use of school computers must support education and research that is consistent with the educational objectives of Kirby School District 140. Use of another organization's network or computing resources must comply with the rules appropriate for that network. Transmission of any material in violation of any U.S. or state regulation is prohibited. This includes, but is not limited to: copyrighted material, threatening or obscene material, or any material protected by trade secret.
2. **Network Etiquette**—Users are expected to abide by the generally accepted rules of network etiquette. These include (but are not limited to) the following:
 - a. Be polite. Do not get abusive in your messages to others.
 - b. Use appropriate language. Do not swear, use vulgarities or any other inappropriate language. Illegal activities are strictly forbidden.
 - c. Do not reveal personal addresses, phone numbers, or passwords of students, teachers, administrators, or other staff of Kirby School District 140, including yourself.
 - d. Note that electronic mail (e-mail) is not guaranteed to be private. People who operate the system do have access to all mail. Messages relating to or in support of illegal activities may be reported to the authorities.
 - e. Do not use the network in such a way that you would disrupt the use of the network by other users.
 - f. All communications and information accessible via the network should be assumed to be private property (i.e., copyrighted).
 - g. Hate mail, harassment, discriminatory remarks, and other antisocial behaviors are prohibited on the network. Therefore, any messages should not contain profanity, obscene comments, sexually explicit material, expressions of bigotry or hate.
 - h. Subscriptions to electronic mailing lists are not allowed on Kirby School District 140 accounts.
 - i. From time to time, Kirby School District 140 administrators will make determinations on whether specific uses of the network are consistent with the acceptable use practice.
3. **Accuracy of Information**—Use of any information obtained via communication networks is at your own risk. Kirby School District 140 specifically denies any responsibility for the accuracy or quality of information obtained through District accounts. Information (including text, graphics, video, etc.) from Internet sources used in papers and reports should be cited the same as references to printed materials.
4. **Security**—Security on any computer system is a high priority, especially when the system involves many users. If you feel you can identify a security problem on the network, you must notify a supervisor or principal. Do not demonstrate the problem to other users. Users shall not intentionally seek information on, obtain copies of, or modify files, other data, or passwords belonging to other users, or misrepresent other users on the network. Attempts to gain unauthorized access to system programs or computer equipment will result in cancellation of user privileges. Downloading of information onto the hard drives of Kirby School District 140 computers is prohibited; all downloads must be to external media, such as flash drives, CD's or DVD's. Any user identified as a security risk or having a history of problems with other computer systems may be denied access to District computers.
5. **Vandalism**-Vandalism will result in cancellation of privileges as well as other sanctions cited in

the handbook. Vandalism is defined as any malicious attempt to harm, modify, or destroy computer hardware, data of another user, Internet, or any of the other networks that are connected to the Internet backbone. This includes, but is not limited to, the uploading or creation of computer viruses.

6. **Inappropriate Use**—Kirby School District 140 supervisors and administrators will deem what is appropriate use, and their decision is subject only to confirmation by the Kirby School District 140 Board of Education. The administration, faculty, and staff of Kirby School District 140 may request the suspension or termination of computer use of any user who violates these acceptable use practices. Violation of District procedure and rules will result in appropriate discipline up to and including expulsion from school or termination of employment.

KIRBY SCHOOL DISTRICT 140
16931 South Grissom Drive
Tinley Park, Illinois 60477

**PARENT'S OR GUARDIAN'S
CONSENT TO RELEASE OF INFORMATION**

Please Print:

Student's Name _____ Date of Birth: _____
Month Date Year

I hereby consent and request release of the following information to be mailed to:

RECEIVING SCHOOL/AGENCY:

FROM:

Name

Name

(School, Physician, Agency)

(School, Physician, Agency)

Address

Address

City, State, Zip

City, State, Zip

()

()

Telephone Number

Telephone Number

PERMANENT RECORD INFORMATION

TEMPORARY RECORD INFORMATION

- _____ Enrollment Card
- _____ Student Report Card
- _____ Health Record
- _____ Release of Information Form

- _____ Enrollment & Personal Data Sheet
- _____ Test Record Card
- _____ Student Grade Card
- _____ Psychological Report
- _____ Special Education Records
- _____ Other Anecdotal Records

I also agree to waive the ten (10) day
parental inspection period. *

* As the parent or guardian of the above
named student, you are entitled to inspect,
copy or challenge the contents of the
records, and to limit your consent to the
records designated above, or to specific
portions of such records.

Signature of Parent or Guardian

Relationship Date

Address

City, State, Zip

()

Telephone Number

