

**KINGSPORT CITY SCHOOLS ENROLLMENT FORM**

**Student:** \_\_\_\_\_ **Grade:** \_\_\_\_\_  Male  Female **SSN:** \_\_\_\_\_  
Last Name First Name Middle Name

If your child goes by something other than their first name, please enter here: \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  Check if unlisted

**Home Address:** \_\_\_\_\_  
Street Address (must be completed) City Zip Code County

**Check One:**  Home Address is Permanent  Home Address is Temporary **Please check if:**  Tuition Student  Zoning Exception

**Mailing Address:** (if different than home address) \_\_\_\_\_  
Street/PO Box City Zip

**Birth date:** \_\_\_/\_\_\_/\_\_\_ **Place of Birth** \_\_\_\_\_  
City County State Country

**Race:** (check all that apply)  White  Black/African American  Asian  American Indian/Alaska Native  Native Hawaiian or Pacific Islander

**Ethnicity:**  Hispanic  Not Hispanic **If your child was born outside the U. S.:** Date Entered U.S. \_\_\_/\_\_\_/\_\_\_ Date Enrolled in First U.S. School \_\_\_/\_\_\_/\_\_\_

What is the first language this child learned to speak?  English  Other \_\_\_\_\_ What language do people usually speak in the child's home?  English  Other \_\_\_\_\_

What language does this child speak most often outside of school?  English  Other \_\_\_\_\_

**FAMILY CONTACT INFORMATION**

**Child lives with:**  Both Parents  Mother  Father  Other \_\_\_\_\_ If other, check one:  Legal Custodial Agreement  Power of Attorney

**Parent/Guardian #1 :** \_\_\_\_\_  
First Name Last Name

Relationship to student:  Father  Mother  Step-Father  Step-Mother  Grandfather  Grandmother  Uncle  Aunt  Brother  Sister  Guardian  Other

Does the student reside full time with this parent/guardian?  Yes  No  Joint Custody in Separate Households

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_ Emergency Text: \_\_\_\_\_

Guardian 1 Email (one email only) \_\_\_\_\_ Employer: \_\_\_\_\_ Federal Employee?  Yes  No

Guardian 1 Spouse Name-if other than legal guardian(if applicable/not required) \_\_\_\_\_  This individual is allowed to pick my child up from school.

Best Contact Number for Spouse (If applicable/not required): (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Parent/Guardian #2 :** \_\_\_\_\_  
First Name Last Name

Relationship to student:  Father  Mother  Step-Father  Step-Mother  Grandfather  Grandmother  Uncle  Aunt  Brother  Sister  Guardian  Other

Does the student reside full time with this parent/guardian?  Yes  No  Joint Custody in Separate Households

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_ Emergency Text: \_\_\_\_\_

Guardian 2 Email (one email only) \_\_\_\_\_ Employer: \_\_\_\_\_ Federal Employee?  Yes  No

Guardian 2 Spouse Name-if other than legal guardian(if applicable/not required) \_\_\_\_\_  This individual is allowed to pick my child up from school.

Best Contact Number for Spouse (If applicable/not required): (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**In addition to the individuals listed above, please list up to 3 additional emergency contacts:**

_____	_____	_____	_____	<input type="checkbox"/> This individual is permitted to pick my child up from school.
Name	Relationship	Phone: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Phone: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
_____	_____	_____	_____	<input type="checkbox"/> This individual is permitted to pick my child up from school.
Name	Relationship	Phone: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Phone: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
_____	_____	_____	_____	<input type="checkbox"/> This individual is permitted to pick my child up from school.
Name	Relationship	Phone: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Phone: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	

**Please list in order of priority (1-4) where your child needs to go if school dismisses early:**

My child will be picked up \_\_\_\_\_  
 My child will walk to \_\_\_\_\_  
 My child will ride bus # \_\_\_\_\_  
 My child has permission to leave with \_\_\_\_\_

X \_\_\_\_\_ Please initial here to agree that you will read the Emergency Information section of the Student Handbook upon receipt and your child understands what to do if school is dismissed early.

**If anyone is prohibited from contacting or transporting your child, please list their name(s) below and provide documentation (court order, etc):**

\_\_\_\_\_

\_\_\_\_\_

**Certification and Student Handbook Acknowledgement**

I certify the above information to be correct. I hereby agree to read the Kingsport City Schools Student Handbook upon receipt, including the Code of Conduct. I hereby agree to abide by the rules and regulations set forth by Kingsport City Schools. I further acknowledge that if I do not understand any information contained in the handbook or code, I will contact the school and seek an explanation or clarification to ensure my understanding of the rules and regulations.

\_\_\_\_\_  
 Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Student Academic Data**

Name of Last School Attended: \_\_\_\_\_

Address: \_\_\_\_\_

If your child previously attended a school in Kingsport City Schools, check below:

Adams     Jackson     Jefferson     Johnson     Kennedy  
 Lincoln     Roosevelt     Washington     Robinson     Sevier

If your child attended a Pre-K program, please check below:

ECLC     KCS Headstart     Headstart     KCS Pre-K     Private/Other

If your child has previously received any of the following services, check below:

Special Ed     Resource     Speech     P/T     O/T  
 Section 504     ESL (English as a Second Language)

Please check here if your child participates in Imagination Library

**Family Education Rights and Privacy Act**

Consent is implied for the release of certain student information. To learn more about the types of information that may be released, please read the Family Education Rights and Privacy Act section of the Student Handbook. Contact the school, in writing, within ten (10) days if you do not consent to the release of the types of information listed in the Student Handbook.

X \_\_\_\_\_ Initial here to confirm that you will read the Family Education Rights and Privacy section of the Student Handbook upon receipt.

**Student Services Questionnaire**

Will your child be riding a school bus?  No  Yes, bus number \_\_\_\_\_

If yes, during which time:  AM only  PM only  Both AM and PM

*Information in this section helps determine services for which your child(ren) may qualify.*

Do you qualify as a migrant worker?  Yes  No

Where does your child stay at night? (*Please check one*)

- Home/apartment owned or rented by the parent(s)/guardian(s)
- With a relative or friend (family does not have a residence)
- In a shelter     In a motel     In an automobile     At a campsite
- In housing that is inadequate (i.e. no electricity, running water, etc.)
- Other housing (please explain) \_\_\_\_\_

With whom does the student live?

- One parent     Two parents     A legal guardian (other than a parent)
- Alone with no adults     An adult who is *not* the legal guardian
- One parent in the home of other relative(s)/friend(s)
- Two parents in the home of other relative(s)/friend(s)

**Middle School Registration Only**

Did your child leave his/her pervious school serving In or Out of School Suspension? Yes / No If yes, please explain:

Has your child been in any advanced classes? Yes / No If so, please list:

Has your child been in any remedial/resource or special education classes? Yes / No If yes, please list:

Approximate grade average for: English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_  
Please list math course: \_\_\_\_\_

Does your child want to become a member of: Band \_\_\_\_\_ Orchestra \_\_\_\_\_ Chorus \_\_\_\_\_  
What instrument? \_\_\_\_\_

I certify the above information to be correct:

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**High School Registration Only**

I agree to read the Kingsport City Schools Student Handbook upon receipt, including the Code of Conduct and agree to abide by the rules and regulations set forth by Kingsport City Schools. I further acknowledge that if I do not understand any information contained in the handbook or code, I will contact the school and seek an explanation or clarification to ensure my understanding of the rules and regulations.

\_\_\_\_\_  
Student's Signature

TENNESSEE CODE 49-6-3051 AMENDMENT STATES THAT STUDENTS ADJUDICATED FOR ONE OR MORE OFFENSES LISSTED BELOW MUST NOTIFY THE SCHOOL PRINCIPAL IN WIRITNG PRIOR TO ENROLLMENT.

- A.) Notwithstanding any law to the contrary, if a student has at any time been adjudicated delinquent for any offense listed in subsection (b), the parents, guardians or legal custodians, including the department of children's services acting in any capacity and a school administrator of any school having previously received the same or similar notice from the juvenile court or another source, shall provide to a school principal, or a principal's designee, the abstract provided under § 37-1-153 or § 37-1-154 or other similar written information when any such student: 1.) Initially enrolls in an LEA; 2.) Resumes school attendance after suspension, expulsion or adjudication of delinquency; or 3.) Changes schools within this state.
- B.) The parents, guardians or legal custodians, including the department of children's services acting in any capacity, shall provide notification as required by subsection (a) if the student has been adjudicated delinquent for: 1.) An offense involving: first degree murder; second degree murder; rape; aggravated rape; rape of a child; aggravated rape of a child; aggravated robbery; especially aggravated robbery; kidnapping; aggravated kidnapping; especially aggravated kidnapping; aggravated assault; felony reckless endangerment; or aggravated sexual battery. 2.) A violation of: voluntary manslaughter, as defined in § 39-13-211; criminally negligent homicide, as defined in § 39-13-212; sexual battery by an authority figure, as defined in § 39-13-527; prohibited weapon, as defined in § 39-17-1302; unlawful carrying or possession of a firearm. as defined in § 39-17-1307; carrying weapons on school property, as defined in § 39-17-1309; carrying weapons on public parks, playgrounds, civic centers and other public recreational buildings and grounds, as defined in § 39-17-1311; handgun possession, as defined in § 39-17-1319; providing handguns to juveniles, as defined in § 39-17-1320; or any violation of § 39-17-417 that constitutes a Class A or Class B felony; or 3.) An offense not listed in this subsection (b) for which a court has ordered school notification based on the circumstances surrounding the offense. Such information shall be shared only with employees of the school having responsibility for classroom instruction of the child, but such information is otherwise confidential and shall not be shared by school personnel with any other person or agency except as may otherwise be required by law. This written notification shall not become part of such child's student record.

I HAVE NEVER BEEN ADJUDICATED FOR ANY OF THE OFFENSES LISTED ABOVE:

\_\_\_\_\_  
Student's Signature