



Kindergarten Round-Up

Incoming Young Five and Kindergarten students will have the opportunity to experience time in a kindergarten classroom!

Date: April 12, 2018

Time: 8:30-6:00

Refreshments will be available!

Parents may register students all day—students wishing to participate in the kindergarten experience should arrive at 1:30 or 4:00.

To register students you must have the following:

- ◆ Proof of residency (license, lease, utility bill, etc.)
- ◆ Birth Certificate
- ◆ Immunization Record

All students enrolling in Kindergarten and Young 5s must be 5 years of age on/before December 1st.

Contact:

Barkell Elementary School
1201 N. Elevation Street
Hancock, MI 49930
(906) 487-9030

Schedule of Events:

8:30-6:00 Registration in the Science Room

8:30-6:00 Meet the teacher (Science Room)

8:30-3:00 Visit a school bus (Parking lot)

8:30-6:00 Tours of the school

2:00-2:30 Classroom Experience (Kinder. Room)

4:30-5:00 Classroom Experience (Kinder. Room)

2:30-3:00 Playground

5:00-5:30 Playground

Screening/ testing will be available at Round-Up. We will also offer screening on June 8th from 12:30-3:00. If neither of these dates work, please call the school to make an appointment for a different time.

Kindergarten Round Up



Registration packets are already available for pickup. Packets can be picked up in the office or downloaded from the school website. They will also be emailed to the parent list serve. Completed registration packets can be returned to the school office anytime or brought to Kindergarten Round-Up on April 11th.

Hancock Public Schools—Student Enrollment Form Grades Young Fives - 5th Grade

Child's Legal Name (as shown on birth certificate) _____

Grade Entering _____ Male Female Is this child a court placed foster child? Yes No

Birth Date _____ Place of Birth _____ Birth Status Single Twin Triplet

Address _____ Apt/Unit # _____ City _____ Zip _____

Township _____ Home Phone _____ Cell Phone _____

Primary Language used in your child's home _____

Is your child's native tongue a language other than English? Yes No

Immigration Date, if not born in U.S. _____

Number of full school years student has attended any U.S. School _____

Has your child ever attended Hancock Public Schools? _____

Resident School District:

___ 31010 Hancock ___ 31110 Houghton ___ 31140 Stanton ___ 31020 Adams ___ 07040 Lanse ___ 31130 Lake
Linden ___ 31100 Osceola ___ 07020 Baraga ___ 31030 Calumet ___ 31050 Chassell ___ Other _____

Ethnicity

Is this student Hispanic/Latino? (Choose only one)
 No, not Hispanic/Latino
 Yes, Hispanic/Latino—(A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)

Race

The question to the left is about ethnicity, not race. No matter what you selected, **please continue to answer the following** by marking **one or more** boxes to indicate what you consider your students race to be.
 American Indian/Alaska Native
 Asian American
 Native Hawaiian/Pacific Islander
 Black/African American
 White

Last School Attended _____ City/State _____

Please check: _____ Michigan Public School _____ Out of State Public School _____ Church/Private School _____ Preschool

Last Attended School Phone Number/FAX Number _____

Did your child receive any special education services at a previous school? Yes No N/A (if yes, please indicate the type of services received) Special Education Classes Speech OT/PT Social Work 504 Plan

Name of Primary Parent/Guardian Residing in the Home _____ Cell Phone _____

Place of Employment _____ Work Phone _____

Relationship: Father Mother Grandparent Guardian Self (Student Enrolling) Other _____

Email address _____

Name of Secondary Parent/Guardian Residing in the Home _____ Cell Phone _____

Place of Employment _____ Work Phone _____

Relationship: Father Mother Stepmother Stepfather Grandparent Guardian Other _____

Email address _____

Name of Parent Living Elsewhere _____ Residence Phone _____

Work Phone _____ Cell Phone _____

Address _____ Apt/Unit # _____ City _____ Zip _____

Have custody papers been provided to the district? Yes No Should this person receive mailings? Yes No

Status of Home-Living With: Mother and Father Mother Father

Mother and Stepfather Father and Stepfather Other

Custodial Parent (circle one) Father Mother Both Other _____

Custody Restrictions: _____

No residence available

Homeless

Student Health Information

Asthma Yes No Has an inhaler Yes No Where is it kept? _____

EPI Pen Yes No Where is it kept? _____

Allergies _____

Other Health

Alerts/Issues: _____

Emergency Contacts:

Name

Relationship

Phone Numbers

Other Children in the Family

Name (First & Last)	Birth Date	School of Attendance
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Yes No Is this student the youngest or only child from this household attending Hancock Public Schools?
- Yes No My child wears glasses/contacts.
- Yes No My child wears hearing aids.
- Yes No I give permission to administer first aid to my child. In case of an emergency, my child may be transported to the hospital. It is understood that all expenses incurred in such situations shall be my responsibility and not that of the Hancock Public School District nor any of the Board of Education members, administration, faculty, and other school personnel.

Items needed before your child will be registered.

- _____ I have provided a birth certificate with the state seal.
- _____ I have provided a proof of residency.
- _____ I have provided and immunization record. (If immunizations were done in Michigan, the school will print them.)

It is understood that this information will be used in a confidential and professional manner in the best interest of the child.

Parent/Guardian Signature _____ Date _____

G.G. Barkell Elementary School's Registration Date _____