

Central High School

New Student Enrollment Procedures

Welcome to Central High School! We are excited that you are interested in attending our school. The following steps need to be followed to ensure a smooth enrollment process for your student.

Step 1

Before a student can be considered for enrollment at Central High School, **the parent/guardian must obtain ALL** of the following items and submit them to the Central High School Student Services during the hours of 8:30 a.m.- 3:45 p.m. Monday through Friday. Enrollment applications are processed in the order in which they are received, thus timely submission of **COMPLETED** enrollment documents is very important.

REQUIRED FOR ALL STUDENTS:

- ____ 1. Parent/guardian **photo identification** and **Parenting Plan** (if applicable) showing custody.
- ____ 2. **Proof of residency**, such as lease, mortgage statement, KUB bill, that clearly shows the custodial parent/guardian resides in the Central High School zone. If the parent/guardian is renting a single family dwelling, he/she must have a notarized statement from the property owner, as well as a KUB bill or mortgage statement in the said owner's name.
- ____ 3. A copy of the **withdrawal form** from the previous school attended, with current grades.
- ____ 4. A **transcript of all courses taken for high school credit**, or in the case of a new 9th grader, a report card stating that the student has been "**promoted**" from the 8th grade.
- ____ 5. If the student has ever received **Special Education services**, the parent must provide copies of the most recent **IEP, Psychological Evaluation**, and any other appropriate records.
- ____ 6. A signed copy of the Knox County **Media Agreement/Medical Profile/Migrant Education Form**.

REQUIRED FOR NEW STUDENTS TO KNOX COUNTY SCHOOLS ONLY:

- ____ 7. A current **immunization card** issued from the State of Tennessee through the county health department or from your family physician in Tennessee (Knox County Health Department, 215-5000).
- ____ 8. A copy of the student's **Social Security Card**.
- ____ 9. A copy of the student's **Birth Certificate**.

Step 2

After you have submitted **ALL** of the required enrollment documents, you will be notified via phone when your student's enrollment has been approved.

Step 3

Once you have received notification of approved enrollment, Central High School will request official records from your student's previous school. Your student's schedule will be finalized once official records have been received. The timeframe for this varies but this step is absolutely essential in order to ensure that your student is properly scheduled. When this occurs, your student's School Counselor will schedule your student and your student will be ready to begin school.

KNOX COUNTY SCHOOLS
NEW STUDENT ENROLLMENT

FOR OFFICE USE ONLY	
Student ID	_____
Homeroom	_____
School	_____
Bus Number	_____

Enrollment Date: _____ Grade _____

Student Name: _____
Last Name First Name Middle Name

Social Security (optional) or
Student PIN Number: _____

Date of Birth: _____

Birthplace / City: _____

Birth County: _____

Birth State: _____

Birth Country: _____

Mother's Maiden Name: _____

Gender: ☐ Female ☐ Male

Ethnicity: ☐ Hispanic ☐ Non-Hispanic

Race: (check all that apply)

☐ Asian

☐ Black

☐ American Indian

☐ Pacific Islander

☐ White

Military Dependent: ☐ Reserve ☐ National Guard
(if applicable) ☐ Active Military

Related Students attending any Knox County Schools (in same household) -- Please include Last Name, First Name, and Birthdate

_____	_____
_____	_____

Please list all legal guardians individually. If the student has more than two guardians, please use the additional space provided at the end of the form for the other contacts.

Guardian 1	Guardian 2
Main Contact: _____	Contact: _____
Relationship: _____	Relationship: _____
Address: _____ _____ _____	Address: _____ _____ _____
*Primary Phone #: _____	*Primary Phone #: _____
Emergency #: _____	Emergency #: _____
Employer: _____	Employer: _____
Work #: _____	Work #: _____
Other #: _____	Other #: _____
*Cell: _____	*Cell: _____
Primary E-mail: _____	Primary E-mail: _____
Alternate E-mail: _____	Alternate E-mail: _____

**This is the telephone number that receives automated telephone calls.*

Notes (Individuals other than parent/guardian who may pick up the child.)

Name _____ Phone Numbers _____

Name _____ Phone Numbers _____

Name _____ Phone Numbers _____

Name _____ Phone Numbers _____

Student Name: _____
Last Name First Name Middle Name

Alerts (non-medical special instructions) _____

School History

Pre-schools attended (if kindergarten student): _____
Last school attended: _____
Address: _____
Other schools attended: _____

Is this student currently under suspension / expulsion from another school? ☐ Yes ☐ No

Has this student previously received Special Education services? ☐ Yes ☐ No

Has this student previously received services under Section 504? ☐ Yes ☐ No

Is this student currently receiving Special Education services? ☐ Yes ☐ No

Is this student currently receiving services under Section 504? ☐ Yes ☐ No

If YES, list program(s): _____

Does the student stay in any of the following places at night? Check any that apply:

- ☐ home/apartment owned or rented by the parent(s)/guardian(s)
- ☐ in a shelter
- ☐ in a motel / hotel
- ☐ in a car
- ☐ at a campsite
- ☐ in another location that is not appropriate for people (e.g., an abandoned building, no electricity or running water)
- ☐ temporarily with more than one family in a house, mobile home or apartment (because the family does not have a place of its own)
- ☐ other (in an arrangement that is not fixed, regular and adequate and is not described by the other choices)

Form completed by _____ Date _____

Relationship to the student _____

List additional contacts on the following page.



KNOX COUNTY SCHOOLS Home Language Survey

The Tennessee Department of Education requires *all* schools to identify the language of every student enrolled. This is accomplished by the Home Language Survey (HLS). This document is to be completed only **ONE TIME** at the student's initial enrollment into a school. If the student is a transfer student, schools must make every attempt to obtain the original HLS.

NOTE to registrar: If any language besides (or in addition to) English is given as an answer to questions 1-3, please give this document to the ELL teacher at your school (or who monitors your school) immediately.

Student Information

First Name _____ Middle Name _____ Last Name _____ M ☐ F ☐
Gender

Country of Birth _____ Date of Birth (mm/dd/yyyy) _____ Date first enrolled in ANY U.S. school (grades K-12) _____

Date first entered the United States

THIS FORM IS NOT USED TO IDENTIFY STUDENT'S IMMIGRATION STATUS.

This information gives us insight into the knowledge and skills your child is bringing to our schools.
This information may enable the district to receive additional federal funding to provide support for your child

School Information

_____/_____/20 Enrollment Date in New School Name of Former School and Town _____ Last Grade attended _____

Questions for Parents/Guardians

<p>1. What is the first language this child learned to speak?</p>	<p>Has this child ever received ELL (ESL) classes in another school?</p> <p style="text-align: center;">Y <input type="checkbox"/> N <input type="checkbox"/> I don't know. <input type="checkbox"/></p>
<p>2. What language does this child speak most often outside of school?</p>	<p>If yes, what year did this student 1st qualify for ELL?</p> <p>Will you require an interpreter/translator at Parent-Teacher meetings?</p> <p style="text-align: center;">Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>If yes, what language?</p>
<p>3. What language do people usually speak in this child's home?</p>	
<p>Parent/Guardian Signature:</p> <p>X _____</p>	<p>_____/_____/20 Today's Date: (mm/dd/yyyy)</p>

NOTE to ELL teacher: Please forward a copy of this form to the ELL Central Office. Place another copy in the student's green folder and the original in the purple file which is kept in the student's CR.



Tennessee Migrant Education Program – Occupational Survey

Your child may qualify to receive **free** educational services. Please answer the following questions to help us determine their eligibility. Once completed, return this form to the school.

STUDENT FIRST NAME:	STUDENT LAST NAME:	DATE:
SCHOOL:		GRADE:
PARENT/GUARDIAN NAME:		

1) In the past three years, have your children moved to another city, state, and/or country?

☐ Yes ☐ No

2) Do you or anyone in your immediate family currently work or have worked (in the past three years) in any of the following occupations?

☐ Yes ☐ No

a. If yes, please circle all that apply:



Processing & Packing
(fruit, vegetables, chicken, eggs, pork, beef, etc.)



Agriculture/Field Work
(planting, picking, and sorting crops; soil preparation; irrigation; fumigation; etc.)



Dairy/Cattle Raising
(feeding, milking, rounding up, etc.)



Nursery/Greenhouse
(planting, potting, pruning, watering, etc.)



Forestry
(soil preparation, planting, growing, cutting trees, etc.)



Fishing/Fish Processing
(catching, sorting, packing, transporting fish, etc.)

If you answered "yes" to the questions above, please continue. Otherwise, your form is complete.

3) How long have you been in this county in Tennessee?

WEEKS:	MONTHS:	YEARS:
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HOME ADDRESS:		
CITY:	STATE:	ZIP:
TELEPHONE (WITH AREA CODE):		

For school use only: If questions 1 and 2 are "yes," please send the survey to your district migrant liaison. If you have questions, call (931) 212-9539 to speak with the Tennessee Migrant Education Program.

School District:	Student State ID:	Enrollment Date:
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Knox County Schools Student Media Release Form

I, as the parent/guardian of _____, hereby give Knox County Schools and its employees, representatives and authorized media organizations permission to photograph, interview and record my child and his/her likeness for use in audio, video, film or other electronic, digital and printed media. I also give Knox County Schools permission to release photos or recordings of any type to news media outlets including, but not limited to, newspapers and television stations.

I understand that neither Knox County Schools nor the news media has any obligation to use or be compensated for such rights. I am also aware that I will not receive monetary compensation for my child's participation, and I waive any right to inspect or approve final use of materials.

I agree to release and hold harmless Knox County Schools, its staff, the Board of Education and assignees from any liability or claims of damage, known or unknown, related to such use.

Please note if you opt out of the media release form, your child's photograph will still be included in yearbook and classroom publications as part of directory information unless you notify the district otherwise. Additionally, if at any time you wish to withdraw your consent, you may contact the Office of Public Affairs at 865-594-1905; however, any prior photos or recordings of your child will remain part of the district's archive.

Name of child's school:

Parent/legal guardian:

(print)

(signature)

Date: _____

This information will be used by the school nurse to provide care for your child.