

# NEW STUDENT ENROLLMENT PACKET

Student Last Name	٨
Student First Name	٨
Grade <sup>^</sup>	
Requested Starting	DateA

# For Students Coming From:

- ★ Out of State
- **★** Surrounding County
- ★ Private or Homeschool
- **★** Out of Country

Enrollment forms are available in Arabic, English, Persian, Kirundi, Russian, Spanish, Swahili, Ukrainian. If English is not your first language, please contact the KCS Welcome Center at 865-594-1760 for translation services & processing.

Please have the New Student Enrollment Packet completed before you arrive to Enroll your student. Allow 30 minutes to process your Registration. School Tours are not available at this time.

# **Farragut Middle School**

200 West End Avenue Knoxville, TN 37934

Phone: 865-966-9756

**Fax:** 865-671-7048 **Registrar Email:** 

jennifer.sonnenschein@knoxschools.org

To	Enroll y	our si	tudent	i, all	documents	must
be	provide	at the	time	of r	egistration:	

New Student Enrollment Packet
Proof of Birth
(Birth Certificate, Passport or Adoption Papers)
Proof of Residency
(Current Utility Bill, Lease or Mortgage)
TN Immunization Form
(Out-of-State forms can be converted at Knox
County Health Dept 865-215-5150)
Student Physical
(Dated within 12 months prior to Enrollment;
due within 30 days)
Custody/Guardianship Papers*

## For proper Placement, please provide:

or proper riacement, please provide.
☐ Recent Report Card or Grades
□ IEP*
☐ 504 Service Plan*
☐ ESL/ELL Services*
☐ Psychoeducational Reports*

\*if applicable



# **Guardianship Confirmation Form**

Studen	It Name^
What is your relationship to the student?  Parent Guardian Foster	r Parent
If you are the parent, are you legally married     Married Separated Divorced	
3. Is this child subject to a Parenting Plan or Cu Yes (a copy is required to be submitted to the school No	•
4. Are there any Legal Protection Orders in place Yes (a copy is required to be submitted to the school No	
5. Are you sharing your current residence with s Yes No	someone? (Grandparents, in-laws, etc.?)
6. Is your current residence: Temporary or	Permanent?
Parent /guardian of the student named abov	e declares the above information correct.
Print Parent/Guardian Name^	
Parent/Guardian Signature^	

Date^

# KNOX COUNTY SCHOOLS NEW STUDENT ENROLLMENT

FOR OFFICE USE ONLY
Student ID
Homeroom
School
Bus Number

Enrollment Date:	Grade	e	
Student Name:			
Last Name	First Name	Middle Na	me
Student PIN Number:		Gender:	Female Male
		Ethnicity:	☐ Hispanic ☐ Non-Hispanic
		Race:	(check all that apply)
			Asian
			Black
			☐ American Indian ☐ Pacific Islander
			☐ White
Mother's Maiden Name:			☐ Reserve ☐ National Guard
		(if applicable)	☐ Active Military
	y. If the student has more than two guardi		
form for the other contacts.		and, produce does the addition	ar space provided at the end of the
Main Contact:		Contact:	
Relationship:	Rel	ationship:	
Address:		Address:	
MARKET - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10 - 1.10			
*Primary Phone #:	*Primary	Phone #:	
Emergency #:	Eme	orgency #:	
Employer:	F	Employer:	
Work #:		Work #:	
Other #:		Other #:	
*Cell:		*Cell:	
Primary E-mail:	Prima	ry E-mail:	
Alternate E-mail:	Alternat	te E-mail:	
*This is the telephone number that receives autom	ated telephone calls.		
Notes (Individuals other than parent/guard	dian who may pick up the child.)		
Name	Phone Number	's	
Name	Phone Number	's	
Name	Phone Number	's	
Name	Phone Number	rs	

Student	Name:	First Name				Middle Name
Alerts	(non-medical special instructions)			<del></del>		
School	History					
Pre-scho	pols attended (if kindergarten student):					
	Last school attended:					
	Address:					
	Other schools attended:					
Is this st	udent currently under suspension / expu	Ision from another school?		Yes		] No
Has this	student previously received Special Edu	ucation services?		Yes		] No
Has this	student previously received services un	der Section 504?		Yes		] No
Is this stu	udent currently receiving Special Educa	tion services?		Yes		] No
Is this stu	udent currently receiving services under	Section 504?		Yes		] No
If YES, list program(s):		-				
Does the	e student stay in any of the following	places at night? Check ar	y tha	at ap	ply:	
☐ ho	me/apartment owned or rented by the p	arent(s)/guardian(s)				
□ in a	a shelter					
☐ in a	a motel / hotel					
☐ in a	a car					
□ at a	a campsite					
□ina	another location that is not appropriate f	or people (e.g., an abandone	d bui	lding	, no ele	ectricity or running water)
☐ ten	nporarily with more than one family in a	house, mobile home or apart	ment	(bec	ause th	the family does not have a place of its own)
☐ oth	er (in an arrangement that is not fixed,	regular and adequate and is i	not d	escrit	ed by	the other choices)
Form con	npleted by			ny tanàna mandritry ny taona mandri		Date
Relations	hip to the student	en e				

#### KNOX COUNTY SCHOOLS

## PROOF OF RESIDENCE FOR SCHOOL ENROLLMENT

Student Name	Date of Birth	Current Grade Level
Student Name	Date of Birth	Current Grade Level
Student Name	Date of Birth	Current Grade Level
Student Name	Date of Birth	Current Grade Level
School student(s) zoned to attend		
Parent / Guardian Name		Phone
Current Address		Zip
Former Address		Zip
In order to verify residency within the attendance zon the past 60 days must be provided, showing the pa verification of residence.  Proof of Residence		Office box numbers are not acceptable for
Deed/Lease/Rental Agreement	Utility Bill	
□ Notarized Statement * See form on back		
★1f proof of residence is provided by a notarized state person's name and address. This person must also		
Name of Renter/Owner		Phone
Address of Renter/Owner		
<b>WARNING:</b> Falsification of any informate another person without actually residing there we school which serves the actual residence address	ill require that the student be withdrawn	
I, declare under penalty of perjury that the above info	(print name), the par	rent/guardian of the student named above,
residency changes, I will notify the school within two		300 1551de at the address given above. If
Signature of Parent / Guardian		Date
School Official's Signature		Date



# \*Proof of Residence for Knox County Schools

\_\_\_\_\_, hereby declare that the family of

Print Homeowner Name^	
	is presently living with me at
Print Student's Name^	
	until further notice.
Address^	
The Student's Family Includes:	
Cianatura of HamasuranA	
Signature of Homeowner^	
Date^	
TO BE COMPLI	ETED BY NOTARY PUBLIC
State of Tar	nnessee, County of Knox.
	lotary Public, thisday ofmonth, 20
Signature of Notary Public^	
	Seal of Notary Public^

# KNOX COUNTY SCHOOLS Student Medical Profile

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

	,	(First)	(Middle)
Grade: Home	eroom:		
Did the Student require medic	al care/hospitalization at birth	or at any other time?Yes	No. If yes, please explain:
Does the student require a dai	ily medical procedure performe	ed by a school nurse? If so explain:	
What medications, if any, does	s the student take?		
			s, please explain:
The student has a history of (C	Check any that apply): C= Cun	rent P= Past	
P P	C P	C P	C P
☐ ADD/ADHD	□ □ ADD/ADHD	☐ Down's Syndrome	☐ ☐ Shunts/hydrocephalus
Amputation(s)	☐ ☐ Celiac disease	☐ ☐ "G" / "J" feeding tube	s 🗆 🗆 Skin problems
☐ Asthma/reactive	☐ Cerebral palsy	☐ ☐ Heart defects	□ □ Stomach problems
airway disease	☐ Crohn's Disease	☐ Hemophilia	☐ ☐ Swallowing problems
Requires inhaler (Please provide school)	☐ Cystic fibrosis	☐ ☐ Migraine headache	☐ ☐ Tracheotomy
Allergies:	□ Diabetes	☐ Muscular dystrophy	☐ ☐ Traumatic Brain
Bee stings		☐ Spina bifida	Syndrome     Traumatic spinal injury
Food:		☐ ☐ Orthopedic problems	
Latex		☐ ☐ Sensitivity to light	☐ ☐ Other:
Requires Epi-pen (p	lease provide school)	☐ ☐ Seizure disorder	□ □ Other.
If any are checked above	e, please explain:		
s important for teachers and p	principals to have your child's	special medical information so that	any emergency can be handled
propriately. Summarize any s	pecial medical conditions:		
es your child require any spe	cial dietary accommodations?	If you answered yes and	you want your child to eat at school
ease obtain and have your chi	ld's doctor fill out the dietary a	ccommodations form.	

This form must be signed by all parents, KNOX COUNTY SCHOOLS ANDREW JOHNSON BUILDING regardless of whether your Student needs Special Ed Services.
To: Parents and/or Guardians of Students Who Are Entering or Withdrawing From Knox County Schools
From: Student Support Services
Re: Special Education Services Available Through Knox County Schools
Knox County Schools provides a full continuum of services for students who qualify for special education under the Individuals with Disabilities Education Improvement Act (IDEIA '04).  If you feel your child might require Special Education or other services and want Knox County Schools to provide those services, contact the school to which your child is zoned  Student Support Services at 594-1540.
If records are available for review or other information that the school might need in order to determine appropriate services for your child, please <u>sign and return</u> a release of information form available at your school so that we may review those records and plan services, if needed.
Thank you for your assistance in this matter.
Student Name
Parent/Guardian Signature

(Please return a signed copy of this form to the school and retain a copy for your files.)

White Copy — School Canary Copy — Parent

PP-155 (1/10)

Date Signed



# 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			
Otagont information			
First Name	Middle Name	Last Name	M F Gender
Country of Birth	/ / / / / Date of Birth (mm/dd/yyyy)	Date first enrolled in A	ANY U.S. school (grades K-12)
Date first entered the United States	This information gives us i	ISED TO IDENTIFY STUDENT'S IMMIGRATION insight into the knowledge and skills your child is bring the district to receive additional federal funding to	inging to our schools.
School Information			
/ /20 Enrollment Date in New School	Name of Former School and To	wn L	ast Grade attended
Questions for Parents/Guardi	ans		
<ol> <li>What is the first language th</li> </ol>	e student learned to speak?	Has this child ever received ELL (ESL)  Y  N  If yes, what year did this student 1st qu	I don't know.
What language does the stud of school?	dent speak most often outside	Will you require an interpreter/translate	
		If yes, what language?	
<ol><li>What language is most often</li></ol>	spoken to the student at home?	What is your preferred language for communications from KCS?	receiving emails and
Parent/Guardian Signature:			
х		/ /20 Today's Date: (mm/dd/yyyy)	

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 Parent Occupational Survey**

In order to better serve your child, our school district wants to identify students who may qualify to receive additional educational services, such as tutoring, school supplies, free or reduced-price lunch, summer camps, and other services. **The information provided below will be kept confidential**. Please answer the following questions and return this form to your child's school.

Today's Date	Parent/Guardian First & Last Name	
Student First Name	Student Last Name	)
School Name		Student Grade
1. Have you or an immediate far in any part of the United States,	mily member performed any of the jobs list in the past three years?	sted below temporarily or seasonally,
□ No		
☐ Yes. Check all that apply ar  ☐ Agriculture/Field Work (planting, picking, sorting crops; soil preparation irrigation; fumigation)  Total Months Worked:	□ Processing & Packaging (fruit, vegetables, chicken, eggs, pork, beef)  Total Months Worked:	Dairy/Cattle Raising (feeding, milking, rounding up)  Total Months Worked:
□ Nursery/Greenhouse (planting, potting, pruning, watering, harvesting)	☐ Forestry (soil preparation, planting, cutting trees; landscaping not included)	□ Commercial Fishing & Processing (catching, sorting, packing, transporting)
Total Months Worked:	Total Months Worked:	Total Months Worked:
2. In the past three years, has yo	our family moved to another state, city, sch	pool district, and/or county?
□ No □ Yes. How long have you resi Years	ided are your current address?  Months	Weeks
it you answered tes to question	ons 1 and 2, please complete the informati	on below.
Home Street Address		Apt#
City	State	Zip Code
Telephone Number	Best Day of Week & Time of	of Day to Call
For School Use Only: Please send survey w with the Tennessee Migrant Education Prog	rith two YES responses to your district migrant liaison. If	you have questions, call (931) 212-9539 to speak
Student State ID:	Enrollment Date:	District ID:



# Knox County Schools Student Media Release Form

and its employees, representatives and authorized media organizinterview and record my child and his/her likeness for use in audio, viand printed media. I also give Knox County Schools permission to release	deo, film or other electronic, digital ase photos or recordings of any type
I understand that neither Knox County Schools nor the news medicompensated for such rights. I am also aware that I will not receive morparticipation, and I waive any right to inspect or approve final use of r	ia has any obligation to use or be onetary compensation for my child's
I agree to release and hold harmless Knox County Schools, its staff, the from any liability or claims of damage, known or unknown, related to	
Please note if you opt out of the media release form, your child's pyearbook and classroom publications as part of directory informa otherwise. Additionally, if at any time you wish to withdraw your controller Affairs at 865-594-1905; however, any prior photos or recording the district's archive.	tion unless you notify the district sent, you may contact the Office of
Name of child's school:	
Parent/legal guardian:	
(print)	
(signature)	
Date:	



# STUDENT SCHEDULE FORM SY23/24

Student Name^		Grade <sup>^</sup>	First Day ^
ACADEMIC PLACEMENT			
A Standard Class Schedule is generated for all stude	ents uniess documen	tation is provided	
✓A Standard Class Schedule is generated for the standard Clas	or all students.		
<ul> <li>Special Education Services or Accommode</li> <li>Current Medical Diagnosis Attached</li> <li>Current 504 or IEP Attached</li> <li>Psychoeducational Report Attached</li> </ul>		<b>D</b> 504IEP	
Honors/Advanced Classes REQUESTED Report Card Attached Standardized Test Scores Attached	MathEnglish <sub>.</sub>	ScienceSocia	al Studies
ONE (1) MUSIC CLASS Please select one (1) Class below. Availability is bas	ed on staffing and stu	udent interest level.	
☐ General Music Studying the history, culture & s ☐ Vocal Music Singing as a group & an introduction ☐ Band Various Levels of playing Trombone, Barit ☐ Orchestra Various Levels of playing Bass, Cellon	on to Reading Music tone, Tuba, French Hori		ute, Percussion, Saxophone
FOUR (4) RELATED ARTS CLASSES, ROTAT Selections are subject to change based on staffing a		vel.	
Two (2) Required Electives:  PE Staying active and participating in team & Health Learning skills on making healthy cho			
Two (2) Additional Electives: rank your order of preference Art Exploring the elements & principles of art CTE Career & Technology Education Awaren Spanish Introduction to the language & exploration STEM Science, Technology, Engineering & Marchen	in drawing, painting, pri ess, college & career ex oration of the culture	ntmaking, 3-D art & cer kploration, advising & pl 8th grade Honors Span	lanning

### **ADDITIONAL NOTES**

Please list anything else you would like to communicate to your Student's Counselor.



504 Service Plan if Applicable

Psychoeducational Reports if Applicable

IEP if Applicable

# Official Request for Student Records

# **Farragut Middle School**

200 West End Avenue Knoxville, TN 37934 **Phone:** 865-966-9756

Fax: 865-671-7048

Registrar Email:

jennifer.sonnenschein@knoxschools.org

Student Name^	Parent/Guardian Signature^		
Grade <sup>^</sup>	Printed Name^		
Enrollment Date <sup>^</sup>	Today's Date^		
The above Student has enrolled at Farragut Middle School in Knoxville, TN.			
Please forward the following Records:  • TN Student PIN*:			
(*for TN students only^)  Birth Certificate Copy	Previous School Name^		
<ul> <li>Immunizations Copy</li> <li>Academic Transcripts</li> <li>Standardized Test Scores</li> </ul>	County^		
<ul> <li>Standardized Test Scores</li> <li>Current Schedule</li> <li>Current Grades</li> </ul>	City^	State^	
<ul><li>Attendance Records</li><li>Conduct Records</li></ul>	Phone <sup>^</sup>		
<ul> <li>Home Language Survey - ESL/ELL</li> <li>Language Proficiency Scores - ESL/ELL</li> </ul>	Fax^		
<ul> <li>Documentation of Exiting ESL/ELL</li> </ul>			

Email<sup>^</sup>

# \*\*\*Please Keep this Welcome FAQ for your Reference\*\*\* This will explain the Enrollment Process & Next Steps at FMS

## WELCOME FAQ: "I Enrolled my Student. Now what's next?"

We are happy to have you part of the Farragut Admirals Family. Once your Registration is fully complete, you can look forward to the following things. This FAQ will help answer many of your questions.

### What is ASPEN and why is it important?

ASPEN is the database the Knox County Schools (KCS) use for Student records. Login information for the ASPEN Parent Portal will be emailed to you by the KCS Help Desk. This will give you access to your Students assignments, grades and report cards. To contact the KCS Help Desk for assistance with your ASPEN Parent Portal, go to knoxschools.org > Families > Aspen Family Portal Support

### How do I register for a Chromebook and pay for optional Device Insurance?

A link will be emailed to you in August of each school year for your Chromebook. You will need your KCS Student Number (S# found in ASPEN) to complete the online form. (\*\*PLEASE NOTE\*\* you must put an "S" in front of your Student Number when you complete the Device Agreement.) The Cost for Optional KCS Device Insurance is \$20/student/school year. (\*\*PLEASE NOTE\*\* you have only 10 days after Registration to purchase Chromebook Insurance.) You can sign the Agreement and pay for Insurance by going to knoxschools.org/farragutms > 1:1 Device Information

#### **How will I receive School Notifications?**

Knox County Schools uses ParentSquare for school communication. You can download the free mobile app for iOS or Android or use the desktop version at parentSquare.com. ParentSquare will allow you to:

- Receive messages from the school via email, text or app notification
- Choose to receive information as it comes or all at once with a daily digest at 6pm
- Communicate in your preferred language
- Comment on school postings to engage with your school community
- Direct message teachers, staff and other parents
- Participate in group messages
- Sign up for parent-teacher conferences
- Send sign forms & permission slips, sign up to volunteer and more

#### How can I pay my School Fees?

Class Fees will be (1) sent home with your Student, (2) emailed to you, and (3) posted on your SchoolCash account. Please send in your fee money to your Student's Homeroom teacher. If you are not able to pay, please contact the FMS Office to discuss your situation. You will also receive a link for SchoolCash if you prefer to pay online, or you can set up your account at knoxschools.org > Families > Need to Know > SchoolCash

#### How can I pay for School Lunches?

KCS Nutrition Department accepts online payments through Linq Connect <u>lingconnect.com</u> Please visit the LINQ Connect FAQ page for info on creating an account, adding money or making a payment, setting

spending limits, reviewing meal purchase transactions, receiving "low balance" notifications, and applying for Free or Reduced-price meals. *knoxschools.org* > *Students* > *Nutrition* 

### What is my Student's Schedule? What School Supplies should I buy?

Your new student will receive a paper copy of their Schedule on their first day of attendance at FMS. All student schedules and grades will be posted on our school's database, ASPEN. The FMS website will list suggested School Supplies for each "Pod" (teams of Students organized by colors.) Your Student's First Period Class will indicate their Pod. To access the Farragut Middle School website, go to knoxschools.org/farragutms

### What are FMS School Hours? Is Bus Transportation provided?

The School Hours for FMS is 8:30am-3:30pm Monday-Friday. Doors open at 7:30am; students may not be in the building or on campus unsupervised after 4pm. KCS provides free bus transportation to your child's school. The only exception is for students who live within the Parent Responsibility Zone (PRZ). To find the Bus Stop closest to your home go to knoxschools.org > Families > Bus Stop Locator

### What Sports and Clubs do you offer?

There are lots of ways to get connected at FMS. Listen for announcements and look for fliers at school.

- FMS School Sponsored Sports: Cheerleading, Basketball, Dance, Track & Field.
- <u>FMS Clubs:</u> Admiral Crew, All Pro Dads, Artisans, Board Games, Book Club, Chess, Choir, Creative Writing, Embroidery, Fellowship of Christian Athletes, 4-H, Gene's Team, Guitar, Internationals, Karaoke, MathCounts, Math Olympiad, National Honor Society, Pets, Pokemon, Project U, Teens 4 Christ, Watercolor Club, and more!
- Middle School Community Sports: Baseball, Football, Golf-Boys, Lacrosse-Girls, Soccer-Boys, Swim & Dive, Tennis

### Who can I contact for Student support?

Each Grade has a School Counselor and a Principal to support Students academically as well as socially. You may contact your School Counselor regarding direct services (such as instruction, appraisal, advice, schedules, counseling) as well as available indirect support services (such as consultation, collaboration and referrals.)

•	FMS Head Principal	Mr. Adams	greg.adams@knoxschools.org
•	6th Grade Counselor	Ms. Partin	brooke.partin@knoxschools.org
•	6th Grade Principal	Ms. Schult	marie.schult@knoxschools.org
•	7th Grade Counselor	Ms. Blomstrom	mercedes.blomstrom@knoxschools.org
•	7th Grade Principal	Mr. White	brandon.white@knoxschools.org
•	8th Grade Counselor	Ms. Wright	melissa.wright2@knoxschools.org
•	8th Grade Principal	Ms. Hamlett	kimberly.hamlett@ knoxschools.org

### How can I make my Student's First Week a success?

Please ensure your child is set up for success by being well-rested, prepared for classes and on-time every day. If your child occasionally forgets something, you can drop off an item at the Drop-Off Table at the Front Office up until 9:30a. If you need to pick up your child early from school, Early Dismissal must be done prior to 3:00p and you must show an ID to sign them out. If you have any additional questions, please check the FMS website, email your School Counselor or contact our Main Office at 865-966-9756.

# **Welcome to the Farragut Admirals Family!**



# KCS offers Free & Reduced Lunches

At school there's always a meal ready to be served! An easy way to impact your child's learning is to ensure good meals. Good Nutrition helps students show up at school prepared to learn. Because improvements in nutrition make students healthier, students are likely to have fewer absences and attend class more frequently.

This quick and easy process lets us know if your child is eligible for free or reduced price meals. The information you submit is confidential and only used to determine eligibility for this program

### **Apply Online**

To apply, go to <a href="www.lingconnect.com">www.lingconnect.com</a> This interactive site will lead you through the process to apply for free & reduced breakfasts and lunches. *Please note:* When adding students to your account or applying for free/reduced-price meals, users will be prompted to select their school district. After typing in "knox" in the search bar, please choose "Knox County Schools (Knoxville, Tennessee)" from the options that appear.

### **Apply on Paper**

If you are unable to access this site, please request a paper Application (in English or Spanish) from your School Office. Your application can be mailed to KCS Nutrition Dept, Attn: Mona Underwood, P.O. Box 2188, Knoxville, TN 37901