

## District Registrar

Plattsburgh CSD District Office

49 Broad Street Plattsburgh, NY 12901 Ph: (518) 957-6004 student.registration@plattscsd.org

Registration Grade Level:
Needs to have:

1. Birth Certificate

2. Immunization Records

## **Registration Form**

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(to be completed by the parent/guardian)  Situdent Information:  Last Name: First Name: Middle Initial: Date of Birth:  Student Address:  Student Homeless? Yes No Gender: M F Non-binary  Ethnicity (Circle)  White not of Hispanic Origin Black or African American Hispanic or Latino Asian  American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander Multiple Ethnicities:  Hispanic: Yes No Other:  Name used at home Place of Birth  Language(s) spoken at home Is your child currently receiving Special Ed Services (IEP)? Yes Preschool Day Care Provider Is your child currently receiving 504 Accommodations? Yes Previous free & reduced lunch program recipient? Yes No Is your child currently receiving AIS Services? Yes No Last District Attended Has your child been retained? Yes No Last Building enrolled in at PCSD:  Family Information: Check box if Parent/Guardian is on Active Duty: Parent #1 Parent #2  Parent/Guardian #1 Name: Parent/Guardian #2 Name:  Home Address
Last Name: First Name: Middle Initial: Date of Birth:  Student Address:  Is the Student Homeless? Yes No Gender: M_F_Non-binary  Ethnicity (Circle)  White not of Hispanic Origin Black or African American Hispanic or Latino Asian  American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander Multiple Ethnicities:  Hispanic: Yes No Other:  Name used at home Place of Birth  Language(s) spoken at home Is your child currently receiving Special Ed Services (IEP)? Yes No Preschool Day Care Provider Is your child currently receiving 504 Accommodations? Yes No Is your child currently receiving AIS Services? Yes No Last District Attended Has your child been retained? Yes No Last Building enrolled in at PCSD:  Family Information: Check box if Parent/Guardian is on Active Duty: Parent #1 Parent #2  Parent/Guardian #1 Name: Parent/Guardian #2 Name:  Home Address Home
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Amily Information: Check box if Parent/Guardian is on Active Duty: Parent #1 Parent #2  Parent/Guardian #1 Name: Parent/Guardian #2 Name:  Home Address Home Address
Parent/Guardian #1 Name: Parent/Guardian #2 Name: Home Address Home Address
Home Address Home Address
City State Zip City State Zip
Home # Cell # Home # Cell #
Employer Work # Employer Work #
Email Address Email Address
Emergency Contact Name: Home # Cell #
Relationship to child: Work #
Emergency Contact Name: Home # Cell #
Relationship to child: Work #
Additional siblings within the district:
Name Building Grade
Name Building Grade
RE THERE CUSTODIAL PAPERS?   Yes No   With whom does the student reside?
How will your child get to and from school? Walk Ride Other Restrictions?
School sponsored activities and field trips
Student has permission to take part in all school-sponsored trips, activities, & photo opportunities during the school year.
BIRTH CERTIFICATE  Please bring student's birth certificate to the building for registration.  STUDENT CANNOT BE REGISTERED WITHOUT A BIRTH CERTIFICATE
TTESTATION: The information provided herein is true and accurate.
Print Name Signature Date

(Person registering child)

Date

# PLATTSBURGH CITY SCHOOL DISTRICT

**Residency Verification** (to be completed by the Board of Education designee)

Residency is the domicile of the parent/legal guardian. It requires both physical presence in the District and the intent to remain there.

Registrants must provide at least two pieces of evidence to verify residency. Examples of acceptable documents are outlined below. The Board designee will identify and append copies of the documents provided.

- A deed or other proof of real property ownership
- o A lease or rental agreement
- o A utility bill in the parent/guardian's name which shows an address within the District
- The address on the parent/guardian's driver's license
- o A record of the parent/guardian's voter registration
- o A recent income tax return showing the parent/guardian's name and address within the District
- o A current paycheck stub showing the parent/guardian's name and address within the District
- O Documentation illustrating the parent/guardian is receiving public assistance benefits at an address within the District
- U.S. Department of Homeland Security documentation establishing District residence and U.S. resident status

### Shared Domicile

In the case of a person claiming residence by virtue of a shared domicile within the District, a notarized statement from a person with whom the family is sharing a home is not sufficient documentation. Further evidence of residency, as outlined above, is required.

#### Custodial Issues

The child's residence is assumed to be the District in which the custodial parent resides. A copy of the court order should be requested and kept on file in the school office. In the event a student's time is divided between the residences of both parents, the parents may choose either residence for the school of attendance. One school district is not required to transport the child to the other school district.

Certification of the Board Designee:						
Enrollment is approved for	, effective	·				
Student will be initially placed at		School.				
Student will be initially placed in grade, in		class.				
Signature of Designee	Date					