



PLATTSBURGH CITY SCHOOL DISTRICT

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

<u>Registration Grade Level:</u> _____
Needs to have: 1. Birth Certificate 2. Immunization Records

Registration Form

(to be completed by the parent/guardian)

Student Information:

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	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
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
HAS STUDENT EVER ATTENDED THE PLATTSBURGH CITY SCHOOL DISTRICT?			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 Address												
City State Zip	City State Zip												
Home # Cell #	Home # Cell #												
Employer Work #	Employer Work #												
Email Address	Email Address												
Emergency Contact Name: Relationship to child:	Home # Cell # Work #												
Emergency Contact Name: Relationship to child:	Home # Cell # Work #												
Additional siblings within the district:													
<table border="0"> <tr> <td>_____</td> <td>Name</td> <td>_____</td> <td>Building</td> <td>_____</td> <td>Grade</td> </tr> <tr> <td>_____</td> <td>Name</td> <td>_____</td> <td>Building</td> <td>_____</td> <td>Grade</td> </tr> </table>		_____	Name	_____	Building	_____	Grade	_____	Name	_____	Building	_____	Grade
_____	Name	_____	Building	_____	Grade								
_____	Name	_____	Building	_____	Grade								
ARE THERE CUSTODIAL PAPERS? Yes No With whom does the student reside? _____													
How will your child get to and from school? Walk ___ Ride ___ Other ___ Restrictions?													
<u>School sponsored activities and field trips</u>													
Student has permission to take part in all school-sponsored trips, activities, & photo opportunities during the school year. Yes No													

BIRTH CERTIFICATE

Please bring student's birth certificate to the building for registration.

STUDENT CANNOT BE REGISTERED WITHOUT A BIRTH CERTIFICATE

ATTESTATION: The information provided herein is true and accurate.

Print Name

Signature
(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**
- **A lease or rental agreement**
- **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**
- **A record of the parent/guardian's voter registration**
- **A recent income tax return showing the parent/guardian's name and address within the District**
- **A current paycheck stub showing the parent/guardian's name and address within the District**
- **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 _____