

# RUIDOSO MUNICIPAL SCHOOL DISTRICT

George Bickert, Ed.D.  
Superintendent

200 Horton Circle ~ Ruidoso, NM 88345  
Phone: (575) 630-7000 ~ Fax: (575) 257-4150

Jason Edmister,  
Associate Superintendent

## ENROLLMENT CHECKLIST General Screening

Student: \_\_\_\_\_ Parent: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

The following information is the responsibility of parents prior to enrollment. Students will be enrolled when all information is provided.

1. Enrollment Information form (attached) \_\_\_\_\_
2. School transcripts and/or withdrawal form showing grades in progress from last school attended; standardized testing \_\_\_\_\_
3. Birth Certificate Verification \_\_\_\_\_
4. Immunization records \_\_\_\_\_
5. Vision and Hearing screening (as appropriate) \_\_\_\_\_
6. Medical History (as appropriate) \_\_\_\_\_
7. Home Language Survey (Spanish or English attached) \_\_\_\_\_
8. If legal guardian, custody papers or power of attorney \_\_\_\_\_
9. If student receiving Special Education Services, Special Education records from last school attended (current Diagnostic Evaluation, current IEP) \_\_\_\_\_
10. If entering from residential treatment center/institution, exit report from facility \_\_\_\_\_
11. Student enrolled in other alternative programs? (Title I, Bilingual, etc.) \_\_\_\_\_
12. If student is entering grades 6 - 12, Enrollment Application form (attached) \_\_\_\_\_
13. Native American Students, please complete Title VII Eligibility Certification \_\_\_\_\_

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Class Assignment: \_\_\_\_\_

Other comments: \_\_\_\_\_

Date: \_\_\_\_\_ General Screening Committee Chair: \_\_\_\_\_

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## ENROLLMENT INFORMATION REQUIRED

Sierra Vista – 145  
White Mtn. Elem. – 160  
Ruidoso Middle – 130  
Ruidoso High – 139

### STUDENT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_  
(Legal name – should match birth certificate)

Preferred Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, and Zip: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City, State, and Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Mo/Day/ Yr

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Grade Level: \_\_\_\_\_

### **Ethnicity: (check one)**

**Because of Federal Reporting Requirements, we need the following information:**

Is this student Hispanic/Latino? (Choose only one) Yes \_\_\_\_\_ No \_\_\_\_\_

Primary Race: (you must choose one primary race code)

\_\_\_\_\_ Asian \_\_\_\_\_ Black \_\_\_\_\_ Caucasian \_\_\_\_\_ American Indian or Alaskan \_\_\_\_\_ Pacific Islander

Other Race: (you may choose up to 4 additional race codes)

\_\_\_\_\_ Asian \_\_\_\_\_ Black \_\_\_\_\_ Caucasian \_\_\_\_\_ American Indian or Alaskan \_\_\_\_\_ Pacific Islander

**(Hispanic is NOT a RACE selection. The above options are from Federal guidelines and are the only Choices)**

### **Tribal Membership: (Check One)**

_____ Not Applicable (00)	_____ Acoma (01)	_____ Cochiti (02)
_____ Isleta (03)	_____ Jemez (04)	_____ Jicarilla Apache (05)
_____ Laguna (06)	_____ Mescalero Apache (07)	_____ Nambe (08)
_____ Picuris (10)	_____ Pojoaque (11)	_____ San Felipe (12)
_____ San Idelfonso (13)	_____ San Juan (14)	_____ Sandia (15)
_____ Santa Ana (16)	_____ Santa Clara (17)	_____ Santa Domingo (18)
_____ Taos (19)	_____ Tesuque (20)	_____ Zia (21)
_____ Zuni (22)	_____ Other (23)	

Last School Attended: \_\_\_\_\_ Address: \_\_\_\_\_

Was student enrolled in special programs? \_\_\_\_\_ If yes, what program? \_\_\_\_\_  
(Speech, Bilingual, Title I, Special Education, etc.)

### **School District Use Only:**

Teacher \_\_\_\_\_ Bus Number: (a.m.) \_\_\_\_\_ (p.m.) \_\_\_\_\_

Date of Entrance in Ruidoso School District: \_\_\_\_\_

School of Entrance ID Number: (See list at top of form) \_\_\_\_\_

State Student ID Number: \_\_\_\_\_ Lunch ID: \_\_\_\_\_

Date of Withdrawal from Ruidoso School District: \_\_\_\_\_

Report Code: E \_\_\_\_\_ R \_\_\_\_\_ W \_\_\_\_\_

**Family Information**

Father / Guardian Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Business Name & Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother / Guardian Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Business Name & Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Student Resides with: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent's marital status: \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Divorced

If divorced, custody arrangements:  
\_\_\_\_\_  
\_\_\_\_\_

Other children enrolled in Ruidoso Schools:

<b>Name</b>	<b>Grade</b>
_____	_____
_____	_____
_____	_____

**The following may be contacted in case of an emergency and have permission to pick up my child: (list local persons, other than parent that we may contact if unable to reach parent).**

<b>Name</b>	<b>Phone</b>	<b>Relationship to student</b>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

\_\_\_\_\_  
**Parent/Guardian Signature** \_\_\_\_\_  
**Date**

*Addition information for Grades 6 - 12*

School Last Attended: \_\_\_\_\_  
\_\_\_\_\_ In District or \_\_\_\_\_ Out of District

If out of district, rationale for request: \_\_\_\_\_  
\_\_\_\_\_

1. Does this student have a juvenile probation record?  
No \_\_\_\_\_ (Skip questions a, b, c, and d: go on to question 2)  
Yes \_\_\_\_\_ (Answer questions a, b, c, and d)
  - a. Identify each delinquent act for which the student was referred to the JPO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - b. Were any of the acts listed involved with gang related activity? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - c. What were the conditions of probation? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - d. Who is the student's probation officer? \_\_\_\_\_  
Phone Number of J.P.O.: \_\_\_\_\_ County: \_\_\_\_\_
  
2. Has the student ever received school discipline for gang-related activities?  
No \_\_\_\_\_ (skip questions a and b and go on to question 3)  
Yes \_\_\_\_\_ (answer questions a and b)
  - a. Identify the school and school district: \_\_\_\_\_  
\_\_\_\_\_
  - b. State the infractions and discipline received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Has this student ever been expelled or given long term suspension from another school district?  
No \_\_\_\_\_ (skip questions a, b, c, and d – go on to question 4)  
Yes \_\_\_\_\_ (answer question a, b, c, and d)
  - a. Reason(s) for expulsion/long term suspension: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - b. Identify the school and school district: \_\_\_\_\_
  - c. Name of school official: \_\_\_\_\_ Phone: \_\_\_\_\_
  - d. Date of expulsion/ long term suspension: \_\_\_\_\_

3. Has this student been suspended for any reason from another school district?  
 No \_\_\_\_\_ (skip questions a and b and go on to question 5)  
 Yes \_\_\_\_\_ (answer questions a, b, and c)
- A. State the infractions and discipline received: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- b. Identify the school and school district: \_\_\_\_\_
- c. Name of school official: \_\_\_\_\_ Phone: \_\_\_\_\_
- d. Date of suspension: \_\_\_\_\_
4. Has this student been cited for attendance or truancy problems?  
 No \_\_\_\_\_  
 Yes \_\_\_\_\_
5. Has this student been placed in any special programs?  
 No \_\_\_\_\_  
 Yes \_\_\_\_\_ (Which level/ exceptionality /program?) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Within the last year, has the student attended any residential treatment program, in-patient program, out-patient program, etc.  
 No \_\_\_\_\_  
 Yes \_\_\_\_\_ (please explain) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
7. Please list any health problems we need to be aware of: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Certification: All information provided on this form is true and complete to the best of my knowledge. I understand that if this information is incorrect, I may face a delay in registration or denial of enrollment.**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student enrollment may take up to 5 working days or until we receive all necessary information.**