

Ruidoso Municipal School District

200 Horton Circle ~ Ruidoso, NM 88345

Phone: (575)257-4051 ~ Fax: (575)257-4150

Bea Etta Harris, Ed. D.
Superintendent

Patty White, M. Ed.
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. *Attached for your information are the student dress code and "Notification of Rights under FERPA".

1. Enrollment Information form (attached) _____
2. Home Language Survey (Spanish or English attached) _____
3. School transcripts and/or withdrawal form showing grades in progress from last school attended; standardized testing _____
4. Copy of Social Security Card _____
5. Copy of Birth Certificate _____
6. Immunization Records _____
7. Vision and Hearing screening (as appropriate) _____
8. Medical History (as appropriate) _____
9. If legal guardian, custody papers or power of attorney _____
10. If student receiving Special Education Services: Special Education records from last school attended (current Diagnostic Evaluation , current IEP) _____
11. If entering from residential treatment center/institution: exit report from facility _____
12. Student enrolled in any additional programs? (Title I, Bilingual, etc.) _____
13. If student entering grades 6 -12: Enrollment Application form (attached) _____
14. Student Computer Use and Internet Access (grades 3 -12 attached) _____
15. Native American Students, please complete Title IX Eligibility form(attached) and provide a copy of CIB for qualifying individual _____
16. Student/Parent Handbook confirmation page (included in packet) _____
17. Speech Screening – Kindergarten, Second grade and Fourth grade (attached) _____
18. K-5 Field Trip Permission Form (attached) _____
19. Dress Code _____
20. Notification of Rights under FERPA _____

Class Assignment:

Other comments:

Date: _____ General Screening Committee Chair: _____

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Enrollment Information

Required

Nob Hill - 115
Sierra Vista - 145
White Mtn. Elem. - 160
Ruidoso Middle - 130
Ruidoso High School -139
Gavilan - 001

Student Information

Student Name: _____ Grade: _____

(Last, First, Middle Initial)

Mailing Address: _____ City, State, and Zip: _____

Physical Address: _____ City, State, and Zip: _____

Home Phone: _____ Social Security Number: _____

Date of Birth: _____ Place of Birth: _____
Month / Day / Year

Gender: Male _____ Female _____ Grade Level: _____ Currently on Medicaid: Yes _____ No _____

Ethnicity: (check one)

_____ C - Anglo/Caucasian _____ A - Asian or Pacific Islander
_____ B - Black _____ I - American Indian or Alaskan Native
_____ H - Hispanic _____ O - Other

If Ethnicity is I, please indicate Tribal Membership: (Check One)

_____ Not Applicable (00) _____ Acoma (01) _____ Cochiti (02)
_____ Isleta (03) _____ Jemez (04) _____ Jicarilla Apache (05)
_____ Laguna (06) _____ Mescalero Apache _____ Nambe (08)
_____ Navajo (09) _____ 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) _____

Report Code: E _____ R _____ W _____

State Student ID Number: _____ Lunch ID: _____

Date of Withdrawal from Ruidoso School District: _____

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: _____

Parents marital status: _____ Married _____ Single _____ Separated _____ Divorced

If divorced, custody arrangements:

Other children enrolled in Ruidoso Schools:

Name	Grade

Physician's Name: _____

Address: _____

Phone: _____

Significant medical history: _____

Allergies: _____

In case of emergency, please contact: (list local persons, other than parent that we may contact if unable to reach parent.)

Name	Phone	Relationship to student
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

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.

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HOME LANGUAGE SURVEY

Parent Questionnaire of Home Language to be filled out by Parent/Guardian

Name of Student: _____
(Last) (First) (Middle)

School: _____ Grade: _____

Federal guidelines require schools to determine the language(s) spoken at home by each student. This information is essential in order for schools to provide meaningful instruction for all students. Your cooperation in helping us meet this important requirement is requested. Thank you for your help. Please circle one (1) response for each question.

1. What language(s) did your child speak first?

English _____

Spanish _____

Apache _____

Other: _____

2. What language(s) does your child use most at home?

English _____

Spanish _____

Apache _____

Other: _____

3. In what language(s) do you speak to your child?

English _____

Spanish _____

Apache _____

Other: _____

4. What language is most often spoken by the adults in your home?

English _____

Spanish _____

Apache _____

Other: _____

Signature of Parent/Guardian

Date