

New Student Intake

Enrolled By (initials) : _____

Student's Name _____

Grade _____ Homeroom _____ First Day Attended _____

DOCUMENTS (all students):

- _____ Records Request Form
- _____ Registration Form
- _____ Birth Certificate
- _____ Computer Acceptable Use Policy
- _____ Multi-Use Permission Form
- _____ Dismissal Form
- _____ Emergency Medical
- _____ Health History
- _____ Immunization Record
- _____ Proof of Residency
- _____ Custody (letter)
- _____ Finger Imaging Form
- _____ Free / Reduced Meals Application
- _____ Language Survey
- _____ Student Handbook
- _____ DASL Setup

STAFF ROUTING:

- _____ DASL Verification
- _____ Monthly Report

- _____ Technology Director (name, grade)

- _____ Route to School Nurse
- _____ Route to School Nurse
- _____ Route to School Nurse
- _____ Rec'd appropriate document
- _____ Rec'd appropriate document
- _____ Rec'd & routed to cafeteria
- _____ Route to Food Services Director

DOCUMENTS (special needs): Route to relevant personnel: Psychologist, Nurse, Speech/Hearing, OT/PT, etc.

- _____ IEP / 504 Plan
- _____ Team meeting _____
- _____ Route to Admin Asst for Special Services
- _____ ETR / IEP Adoption form

Other circumstances: homeless mobile/transient court placement ESL

ORIENTATION:

- _____ Orientation with secretary
- _____ Orientation with principal
- _____ Orientation with guidance counselor
- _____ Orientation with peer/ambassador/mentor

INFORMATION (HANDOUTS):

- _____ Student/Parent Handbook
- _____ *Rec'd Sign-off form*
- _____ District calendar
- _____ Breakfast/Lunch costs; finger imaging
- _____ Community packet
- _____ Building-specific information:
 - _____ *Start / End Times*
 - _____ *Staff Contact Guide*
 - _____ *PTO / Parent Plus*
 - _____ *Athletics / extra-curricular*
 - _____ *Other*

STUDENT SCHEDULE:

- _____ Course needs, selections
- _____ Fees
- _____ Homeroom
- _____ Locker
- _____ Lock combination

ACCESS:

- _____ Computer log-in
- _____ Progress Book – student
- _____ Progress Book – parent
- _____ ID system for cafeteria
- _____ Infohio

TRANSPORTATION:

- _____ Walker
- _____ Bus Which Route _____
- _____ Driver Parking Permit _____

Student Name _____

Grade _____ **Teacher** _____

Please note the following information / comments on this new student . . .

There is no student information from the sending school at this time.

Student has an IEP

Student has a 504

Parent shared that the student struggled in the following areas . . .

Entry assessment scores:

Dibels / Reading Assessments _____

DRA (if applicable) _____

Math Assessments _____

OAA / OGT (if available) _____

Forward information to the following staff members:

_____ Classroom Teacher

_____ Intervention Specialist

_____ Guidance

_____ Principal

_____ Student Services

_____ Speech / Language Therapist

_____ Title I