Springville Community School Registration (PK-12) 2020-2021

\*\*PLEASE FILL OUT COMPLETELY\*\*

**STUDENT INFORMATION:**

Student's Full Legal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

P.O. Open Enrolled

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Box\_\_\_\_\_\_\_\_\_ Male or Female into District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_

Child’s Race/Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Last attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Language Spoken in the Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Does Student Need Busing: Yes No

**PARENTS/GUARDIANS INFORMATION:**

**Father’s/Guardian’s Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #/PO Box: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer’s Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother’s/Guardian’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_\_\_

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #/PO Box: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer’s Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OTHER INFORMATION:**

Relationship

Emergency Contact #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To Student : \_\_\_\_\_\_\_\_\_\_

Relationship

Emergency Contact #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To Student : \_\_\_\_\_\_\_\_\_\_

Family Physician: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Dentist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daycare Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Students live with: \_\_\_\_both parents \_\_\_\_mother only \_\_\_\_\_\_\_father only \_\_\_\_\_other

**ADDITIONAL STUDENTS**:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Legal Name** | **M/F** | **Birthdate** | **Grade** | **Fees Paid** | **Lunch Money** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Has your child(ren) received any education/special classes within the last year. Check what applies**:

\_\_\_Speech \_\_\_\_Talented/Gifted\_\_\_\_ Resource\_\_\_\_ Title I Reading/Math \_\_\_ OT/PT \_\_\_Other

**Date Paid\_\_\_\_\_\_\_\_\_\_\_\_Check\_\_\_\_\_Cash\_\_\_\_\_\_Int.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Waiver Pending \_\_\_\_\_\_\_**

**Book Fees**: K-6 $55 7-12 $70 Instrumental Rental per Semester $30 Annually $50

**Chromebook Insurance:** 7-12 $50/Student or $90/Family

**PK Tuition**: PK3 $150 (1/2 day) PK3 (All day) $290 PK4 (All day) $175 PK4 (1/2 Day) Free PK5 (All Day) $310

**Breakfast:** PK-12 $1.70 Adult $1.90 **Lunch:** PK-5 $2.60 6-8 $2.70 9-12 $2.75 Adult $3.75

**Annual Activity Passes:** Student $75 Adult $100 Family $200 Senior Citizens (65 & Older) Free

**2020 – 21 Yearbook:** PK - 6 $15 7-12 $50

**If writing a check please write two separate checks for book fees and lunch money. Make checks payable to Springville Comm. School.**

Notice of Non-Discrimination

Students, parents, employees and others doing business with or performing services for the Springville Community School District are hereby notified that this school district does not discriminate on the basis of race, color, national origin, gender, sexual orientation, gender identity, socioeconomic status, disability, religion, creed, age (except for permitting/prohibiting students to engage in certain activities), political party affiliation, marital status, or genetic information in admission or access to, or treatment in, its educational programs and activities, or its employment practices. Any person having inquiries concerning the school district's compliance federal and/or state non-discrimination laws is directed to contact the school district’s compliance officer: Melissa Murphy, High School Guidance Counselor at 400 Academy Street, Springville, Iowa 52336, or 319-854-6196 from 7:45 a.m. to 3:45 p.m.who has been designated by the school district to coordinate the school district's efforts to comply with federal and/or state non-discrimination laws.