



Name of School Last Attended	Name of School District	Previous School Address (Street/PO Box, City, State, Zip)
Previous School Phone:	Fax:	
Are there any unpaid fines or fees at your child's previous school? Yes No		
Has student ever attended Ferndale School District? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of school attended	Date attended (month/year)

HEALTH INSURANCE
 Does your child have health insurance? Yes No
 Contact information may be shared with Whatcom Alliance for Healthcare Access (WAHA) to help with insurance Yes No

Has your child ever been under disciplinary action (suspension/expulsion/etc.) at another school? Yes No When? _____
 Reason: _____
 Does your child have a history of violent behavior? Yes No Explain: _____

Is there ANY court order(s) currently in effect pertaining to your child? (i.e., custody/parenting plans, school attendance orders, restraining orders, etc.) Yes No (If yes, legal papers must be on file with the school for enforcement)
 Please Explain: _____

Has your child ever qualified for or received **SPECIAL EDUCATION** services? Yes - Last year services received: _____ No
 Has your child ever qualified for or had a 504 plan? Yes No
 Has your child ever received Title/LAP services? Yes No If yes, Math Reading
 Has your child ever participated in: Gifted/Talented Title1 LEP/ELL Other _____
 Has your child ever been retained? Yes No If yes, at what grade level(s) _____
 Has your child ever received migrant services? Yes No

Does student attend childcare? Before school After school Before and after school

Child care provider	NAME	ADDRESS	PHONE NUMBER
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Additional child care arrangements (Please provide information to school in writing)

Please list other siblings attending Ferndale school district

LAST NAME	FIRST NAME	SCHOOL	GRADE

Consent for student's picture/video to be taken for news releases: Yes No
 I wish to become a parent volunteer: Yes No
 Permission for my phone number to be given to parent support group for projects: Yes No

VERIFICATION OF INFORMATION

The information on this form is true and accurate as of this date.
 I understand that falsification of information to achieve enrollment or assignment may be cause for revocation of the student's enrollment or assignment to a school in the Ferndale School District.

LEGAL PARENT/GUARDIAN SIGNATURE _____ DATE _____

Do Not Write in Shaded Area - For Office Use Only				Walker: Y N	Rides Bus # _____		
Student ID#	Entry Date	Sch Entry Code	Waiver/Overflow	Court Order	Medical Alert	Locker #	Records Requested



Ethnicity and Race Data Collection Form

PLEASE ANSWER QUESTIONS 1 A OR 1 B AND QUESTION 2.

SCHOOL: _____ STUDENT'S NAME: _____
(First) (Last)

Date of Birth: _____

Question 1. A. Is your child of Hispanic or Latino origin? (Check all that apply.)

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> CUBAN | <input type="checkbox"/> MEXICAN/MEXICAN AMERICAN/CHICANO |
| <input type="checkbox"/> DOMINICAN | <input type="checkbox"/> CENTRAL AMERICAN |
| <input type="checkbox"/> SPANIARD | <input type="checkbox"/> SOUTH AMERICAN |
| <input type="checkbox"/> PUERTO RICAN | <input type="checkbox"/> LATIN AMERICAN |
| | <input type="checkbox"/> OTHER HISPANIC/LATINO |

Question 1. B. Child is not Hispanic/Latino

- NOT** HISPANIC/LATINO

Question 2. What race(s) do you consider your child? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> AFRICAN AMERICAN/BLACK | <input type="checkbox"/> ALASKA NATIVE |
| <input type="checkbox"/> WHITE | <input type="checkbox"/> CHEHALIS |
| <input type="checkbox"/> ASIAN INDIAN | <input type="checkbox"/> COLVILLE |
| <input type="checkbox"/> CAMBODIAN | <input type="checkbox"/> COWLITZ |
| <input type="checkbox"/> CHINESE | <input type="checkbox"/> HOH |
| <input type="checkbox"/> FILIPINO | <input type="checkbox"/> JAMESTOWN |
| <input type="checkbox"/> HMONG | <input type="checkbox"/> KALISPEL |
| <input type="checkbox"/> INDONESIAN | <input type="checkbox"/> LOWER ELWHA |
| <input type="checkbox"/> JAPANESE | <input type="checkbox"/> LUMMI |
| <input type="checkbox"/> KOREAN | <input type="checkbox"/> MAKAH |
| <input type="checkbox"/> LAOTIAN | <input type="checkbox"/> MUCKLESHOOT |
| <input type="checkbox"/> MALAYSIAN | <input type="checkbox"/> NISQUALLY |
| <input type="checkbox"/> PAKISTANI | <input type="checkbox"/> NOOKSACK |
| <input type="checkbox"/> SINGAPOREAN | <input type="checkbox"/> PORT GAMBLE S'KLALLAM |
| <input type="checkbox"/> TAIWANESE | <input type="checkbox"/> PUYALLUP |
| <input type="checkbox"/> THAI | <input type="checkbox"/> QUILEUTE |
| <input type="checkbox"/> VIETNAMESE | <input type="checkbox"/> QUINALT THAI |
| <input type="checkbox"/> OTHER ASIAN | <input type="checkbox"/> SAMISH |
| <input type="checkbox"/> NATIVE HAWAIIAN | <input type="checkbox"/> SAUK-SUIATTLE |
| <input type="checkbox"/> FIJIAN | <input type="checkbox"/> SHOALWATER |
| <input type="checkbox"/> GUAMANIAN OR CHAMORRO | <input type="checkbox"/> SKOKOMISH |
| <input type="checkbox"/> MARIANA ISLANDER | <input type="checkbox"/> SNOQUALMIE |
| <input type="checkbox"/> MICRONESIAN | <input type="checkbox"/> SPOKANE |
| <input type="checkbox"/> SAMOAN | <input type="checkbox"/> SQUAXIN ISLAND |
| <input type="checkbox"/> TONGAN | <input type="checkbox"/> STILLAGUAMISH |
| <input type="checkbox"/> OTHER PACIFIC ISLANDER | <input type="checkbox"/> SUQUAMISH |
| | <input type="checkbox"/> TULALIP |
| | <input type="checkbox"/> YAKAMA |
| | <input type="checkbox"/> OTHER WASHINGTON INDIAN |
| | <input type="checkbox"/> OTHER AMERICAN INDIAN |

Parent/Guardian Signature: _____ Date: _____

(NOTE: Ethnicity and race categories used in Ferndale School District are the same as are used in all Washington school districts. They are required by the federal government, the Washington State Legislature and the Office of Superintendent of Public Instruction (OSPI).)

**Becca Notification and Attendance Requirements Agreement
Ferndale School District**

Student Information School Year

Student Name		Grad Year		Gender	
Student Number		Birthdate		Age	

Under state law (RCW 28A.225), students are required to attend school full-time, without unexcused absences, skips or tardies. When a student accumulates seven (7) days of unexcused absences in any month (one day consists of more than half a school day) or ten (10) days of unexcused absences in a school year may possibly result in a Becca Petition being filed with juvenile court where sanctions can be imposed. These sanctions may include essays, study club, community service, detention alternatives and detention. Parent fines may also be imposed of up to \$25.00 for each day of unexcused absence from school.

Communication

- I understand that for each day I have been absent from school, my parent/guardian will submit a written note, email or call the school within two (2) days of returning to school to have the absence excused.
- They must provide the reason for the absence.
- If no reason is provided or the reason does not meet the excused absence criteria which is defined in school Policy No. 3122P, the absence will be considered unexcused.

Unexcused:

- I understand that when I accumulate seven (7) days of unexcused absences in any month (one day consists of more than half a school day) or ten (10) unexcused absences in a school year, this will result in a Becca Petition being filed with juvenile court.
- I understand that if I miss twenty (20) consecutive days of school, I will be withdrawn from my school of attendance.

Excused:

- I understand that when I accumulate fifteen (15) days of excused absences in a year, a doctor's note may be required for every two days in a week of excused absences in order for them to be considered excused. Without a doctor's note, the absences may be considered unexcused.
- When twenty (20) consecutive absences have occurred, I will be withdrawn from school and a Becca Petition will be filed with juvenile court.

Withdrawal:

- I understand that if the School Secretary or Registrar does not receive a request for records within ten (10) days of my withdrawal, a Becca Petition will be filed with juvenile court.

Student Acknowledgement

I, _____, will attend all scheduled classes every day, on time, without any unexcused absences, skips or tardies.

Student or Legal Parent/Guardian Signature for student

Date

Parent/Guardian Acknowledgement

With my/our signature/acceptance below as the Guardian(s) of _____, I/we agree to send him/her to school every day, on time without unexcused absences, skips or tardies.

Legal Parent/Guardian Signature

Date

Legal Parent/Guardian Signature

Date

Excused absence criteria (Please refer to Policy No. 3122P for more details):

A. Participation in school-approved activity	B. Excused absences for chronic health condition
C. Absences due to illness, health condition, family emergency or religious purposes	D. Extended illness or health condition
E. Absences for parental-approved activities – REG Becca.2 Rev 6/2016	F. Absence resulting from disciplinary actions – or short-term suspension



Office of Superintendent of Public Instruction (OSPI)
Home Language Survey

The Home Language Survey is given to *all* students enrolling in Washington schools.

Student Name:	Grade:	Date:
Parent/Guardian Name _____ Parent/Guardian Signature _____		
<p>Right to Translation and Interpretation Services Indicate your language preference so we can provide an interpreter or translated documents, free of charge, when you need them.</p>	<p>All parents have the right to information about their child's education in a language they understand.</p> <p>1. In what language(s) would your family prefer to communicate with the school? _____</p>	
<p>Eligibility for Language Development Support Information about the student's language helps us identify students who qualify for support to develop the language skills necessary for success in school. Testing may be necessary to determine if language supports are needed</p>	<p>A RESPONSE OF A LANGUAGE OTHER THAN ENGLISH TO QUESTION #2 OR QUESTION #3 RESULTS IN AN ELL PLACEMENT TEST.</p> <p>2. What language did your child learn first? _____</p> <p>3. What language does your child use the most at home? _____</p> <p>4. What is the primary language used in the home, regardless of the language spoken by your child? _____</p> <p>5. Has your child received English language development support in a previous school? Yes___ No___ Don't Know___</p>	
<p>Prior Education Your responses about your child's birth country and previous education:</p> <ul style="list-style-type: none"> • Give us information about the knowledge and skills your child is bringing to school. • May enable the school district to receive additional federal funding to provide support to your child. <p><i>This form is not used to identify students' immigration status.</i></p>	<p>6. In what country was your child born? _____</p> <p>7. Has your child ever received formal education outside of the United States? (Kindergarten – 12th grade) ___Yes ___No</p> <p>If yes: Number of months: _____ Language of instruction: _____</p> <p>8. When did your child first attend a school in the United States? (Kindergarten – 12th grade)</p> <p>_____</p> <p>Month Day Year</p>	

Thank you for providing the information needed on the Home Language Survey. Contact your school district if you have further questions about this form or about services available at your child's school.

Note to district: This form is available in multiple languages on <http://www.k12.wa.us/MigrantBilingual/HomeLanguage.aspx>. A response that includes a language other than English to question #2 OR question #3 triggers English language proficiency placement testing. Responses to questions #1 or #4 of a language other than English could prompt further conversation with the family to ensure that #2 and #3 were clearly understood. "Formal education" in #7 does not include refugee camps or other unaccredited educational programs for children.

