

VANLUE LOCAL SCHOOL
Kindergarten Enrollment Form

This information requested will become part of your child's school history and is for the use of school personnel only.

School Year: 20____-20____

Student Legal Name:

Last: _____ First: _____ Middle: _____

Address (with PO Box if applicable): _____

City/Zip: _____

County of Residence: _____

Ethnic Origin (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Asian | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> Black or African American (Non-Hispanic) | <input type="checkbox"/> Multiracial |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> White (Non-Hispanic) |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | |

If applying for Open Enrollment elsewhere, what school district are you applying to? _____

Male Female

DOB: ____/____/____ Student's Birth City and State: _____

Custodial Parents/Guardians Names:

Telephone No.: (____) _____ - _____

Email: _____

Are parents/guardians an active military member? Yes No
If yes, what branch of service? _____

Please check with whom is the child living with:

- | | |
|--|--|
| <input type="checkbox"/> One Parent (natural, adoptive, step) | <input type="checkbox"/> Foster |
| <input type="checkbox"/> Two Parents (natural, adoptive, step) | <input type="checkbox"/> Grandparent/s |
| <input type="checkbox"/> Legal Guardian | <input type="checkbox"/> Other _____ |

Are there custody papers? Yes No

If yes, legal papers must be presented to the school and any time there has been a change to those orders.

Has your child attended preschool? Yes No

If yes, preschool attended: _____

Please continue by filling out the ODE's Language Usage Survey.

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____

Appendix A: Language Usage Survey

Parents and Guardians: Please only complete this page of the survey. The back of this form will be completed by the school. A completed language usage survey is required for all students upon enrollment in Ohio schools. This information will tell school staff if they need to check your child's proficiency in English. Answers to these questions ensure your child receives the education services to succeed in school. The information is not used to identify immigration status.

Student Name: <i>(First Name and Last Name)</i> _____	Student Date of Birth: <i>(mm/dd/yyyy)</i> _____
<p>Communication Preferences Indicate your language preference so we can provide an interpreter or translated documents at no cost when you need them. 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>Language Background Information about your child's language background 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>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 languages are used in your home? _____</p>
<p>Prior Education Responses about your child's birth country and previous education give us information about the knowledge and skills your child is bringing to school and may enable the school to receive additional funding to support your child.</p>	<p>5. In what country was your child born? _____</p> <p>6. Has your child ever received formal education outside of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many years/months? _____ If yes, what was the language of instruction? _____</p> <p>7. Has your child attended school in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when did your child first attend a school in the United States? _____ / _____ / _____ Month Day Year</p>
<p>Additional Information Please share additional information to help us understand your child's language experiences and educational background.</p>	
<p>Parent/Guardian First Name: _____ Parent/Guardian Last Name: _____</p> <p>Parent/Guardian Signature: _____ Today's Date: <i>(mm/dd/yyyy)</i> _____</p>	

Thank you for providing the information above. Contact your school or district office if you have questions about this form or about services available at your child's school. Translated information about schools' civil rights obligations to English learner students and limited English proficient parents can be found here: <https://www2.ed.gov/about/offices/list/ocr/ellresources.html>



(Appendix A, continued)

*****COMPLETED BY SCHOOL EMPLOYEE*****

1. **Check.** Confirm the following statements related to the administration of Ohio's language usage survey:

- The district or school presented the language usage survey, to the extent practicable, in a language and form that the parent or guardian understood.
- The district or school informed the parent(s) or guardian(s) of the form's purpose. The language usage survey only is used to understand students' linguistic experiences and educational background.
- The district or school reports information from the language usage survey in the appropriate Educational Management Information System (EMIS) records.
- For students enrolling from other U.S. schools and districts, school officials request previous language survey data and refer to the information when identifying English learners.
- Results of the language usage survey are kept with the student's cumulative records and follow the student if he/she transfers to another district or school.

2. **Note.** Record additional information to assist the review of the language usage survey.

3. **Record.** Indicate responses from the language usage survey in the table below. Refer to the Language Usage Survey Annotations on page 2 for item-specific guidance.

<p>Student's native language See Language Usage Survey Question 2. Report for <u>all</u> students in EMIS.</p>	_____
<p>Student's home language See Language Usage Survey Question 3. Report <u>only</u> for English learners in EMIS.</p>	_____
<p>Potential English learner See Language Usage Survey Questions 2-4.</p>	<input type="checkbox"/> Yes. Assess the student's English proficiency. <input type="checkbox"/> No. Do not assess the student's English proficiency.
<p>Immigrant student status See Language Usage Survey Questions 5-7. Report for <u>all</u> students in EMIS.</p>	<input type="checkbox"/> Yes, the student is an immigrant child. <input type="checkbox"/> No, the student is not an immigrant child.

4. **Validate.** Complete the information below.

Signature of validating school employee

Date (mm/dd/yyyy)

Printed name of validating school employee

Name of school or school district