Applications will be accepted in the office starting April 14th.

Kindergarten Registration
2020 - 2021 School Year

Please bring the following documentation:

- Birth certificate
- Immunization record (TB shot is required)
- Proof of district residency

The child must have their 5th birthday by September 1, 2020.

Students currently enrolled at Orange Center pre-school must still register for kindergarten.

Las aplicaciones serán aceptadas en la oficina empezando 14 de abril.

Inscripción de Kinder
2020 - 2021 Año escolar

Por favor traiga la siguiente documentación al tiempo de matriculación:

- Acta de nacimiento
- Tarjeta de vacunas (Se requiere la vacuna de tuberculosis)
- Prueba de residencia en distrito

El niño/a necesita que cumplir 5 años de edad en o antes del 1 de septiembre del 2020.

Los estudiantes que estan matriculados en el pre-escolar tambien tienen que matricularse para el kinder.
Kindergarten

I would like my child to be considered for enrollment in the Dual Immersion Class.

( ) Yes  ( ) No

Student Name:______________________________

Parent/Guardian Signature:____________________

Kinder

Me gustaría que me hijo/a este considerado para la matricular en la clase de inmersión dual.

( ) Sí  ( ) No

Nombre de estudiante:__________________________

Firma de Padre/guardian:________________________
# Orange Center School District

## Student Registration Form

### INITIAL

**STUDENT INFORMATION:**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Date of Birth (Day/Month/Year)</th>
<th>Grade</th>
<th>Gender</th>
</tr>
</thead>
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<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<tr>
<th>Residence Address (IF DIFFERENT)</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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**ETHNICITY (Mark the ethnicity with which the student most closely identifies. Please check one):**

- [ ] Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)
- [ ] Not Hispanic or Latino

**WHAT IS YOUR CHILD’S RACE? (Please check up to five racial categories) The above part of the question is about ethnicity, not race. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your race to be.**

- [ ] American Indian or Alaskan Native (180)
- [ ] Korean (203)
- [ ] Vietnamese (204)
- [ ] Other Asian (299)
- [ ] Filipino (400)
- [ ] African American or Black (600)
- [ ] White (700) (Person having origins if any of the original people of Europe, North Africa, or the Middle East)
- [ ] Not Hispanic or Latino

### Please answer the following:

1. Was child ever retained? If yes what grade?

### PARENT INFORMATION:

**Name (Last, First, Middle):**

<table>
<thead>
<tr>
<th>Relationship:</th>
<th>Mother</th>
<th>Father</th>
<th>Other:</th>
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**Address: (If different from the student):**

**Email:**

**Relation:**

<table>
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<tr>
<th>Relationship:</th>
<th>Mother</th>
<th>Father</th>
<th>Other:</th>
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**Address: (If different from the student):**

**Email:**

**Relation:**

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<tr>
<th>Relationship:</th>
<th>Mother</th>
<th>Father</th>
<th>Other:</th>
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**Parent/Guardian - 1**

- [ ] Not a High School Graduate (14)
- [ ] High School Graduate (13)
- [ ] Some College (Includes AA degree) (12)
- [ ] College Graduate (11)
- [ ] Graduate School/Post Graduate Training (10)

**Parent/Guardian - 2**

- [ ] Not a High School Graduate (14)
- [ ] High School Graduate (13)
- [ ] Some College (Includes AA degree) (12)
- [ ] College Graduate (11)
- [ ] Graduate School/Post Graduate Training (10)

2019/2020
HOUSEHOLD INFORMATION:

Please select whether or not at least one parent/guardian of this student is active in the United States Armed Forces: □ YES □ NO

INTER-DISTRICT TRANSFER AGREEMENT:
Does your child have an Inter-District Transfer Agreement with another school District to attend OC? □ YES □ NO If Yes, what district?

RESIDENCE – Where is your child/family currently living? (Federally mandated by NCLB. Please check appropriate box)

- □ In a single family permanent residence (house, apartment, mobile home)
- □ In a motel/hotel (110)
- □ Doubled-up (sharing housing with other families/individuals due to economic hardship, loss or other reasons) (120)
- □ Unsheltered (car/campsite) (130)
- □ Other __________________________
- □ In a sheltered or transitional housing program (100)

Is the student in foster care? (190) □ YES □ NO Is the student living with another family member? Please provide caregiver affidavit (190) □ YES □ NO

OTHER CHILDREN LIVING IN THE HOME (AGES 0-18):

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>M / F</th>
<th>Name</th>
<th>Date of Birth</th>
<th>M / F</th>
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<td>3.</td>
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HOME LANGUAGE SURVEY:

1. Which language did your son/daughter learn when he/she first began to talk? __________________________

2. What language does your son/daughter most frequently use at home? __________________________

3. What language do you use most frequently to speak to your son/daughter? __________________________

4. Name the language most often spoken by the adults at home: __________________________

Has your child ever taken the CELDT/ELPAC exam (California English Language Development Test)? □ YES □ NO □ I don’t know

In what language do you prefer written communications from the school? □ English □ Spanish

EDUCATIONAL/ CUSTODIAL RIGHTS:

A. Can both parents pick up the student from school? □ YES □ NO*  
B. Do parents have shared (or joint) parental rights and responsibility regarding educational decisions for the student? □ YES □ NO*  
C. Is there an applicable Court Order barring either parent from indicated right? □ YES* □ NO

*It is your responsibility to provide the school with a copy of the documents.

SCHOOL INFORMATION

STUDENT’S PREVIOUS EDUCATION INFORMATION:

Last School Attended: ____________________________________________________________________________

Name of School / City / State / Phone No. Last Day of Attendance ___/___/___

Has the student ever been expelled or in the process of being expelled from any school? □ YES □ NO

If yes: Name of school: __________________________ Location: __________________________ Date: ___/___/___

Has the student been enrolled using a different last name? □ Yes □ No If yes, Name used: __________________________

PRESCHOOL INFORMATION: (Where did your child attend preschool?)

- □ Did not attend Preschool
- □ Orange Center Preschool
- □ Head Start
- □ Migrant School Readiness Program
- □ Other: ______________________________________

SERVICES/ PROGRAMS Has your child has previously received (Check all that apply):

Special Education: □ Resource (RP) □ Special Day Class (SDC) □ Speech/Language □ Hearing (DHH)

Other: □ 504 Accommodation Plan □ Gifted (GATE) □ Math Intervention □ Reading Intervention

□ Migrant □ Medical Health Plan □ English Language Development (ELD) □ Counseling

2019/2020
**HEALTH INFORMATION:**

**RELEASE FOR TREATMENT:**
If an emergency should arise that requires immediate attention, and you as the parents/guardians cannot be contacted, do you authorize the school to take whatever steps necessary to protect the health of this child? □ YES □ NO

Print Parent Name ___________________________ Parent Signature ___________________________ Date ________________

**MEDICAL CONTACT INFORMATION:**

Doctor: ___________________________ Phone: ___________________________ Dentist: ___________________________ Phone: ___________________________

Health Insurance: ___________________________ Policy #: ___________________________

**Identified Health Concerns (Check all that apply)**

<table>
<thead>
<tr>
<th>NONE</th>
<th>Comments</th>
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<tbody>
<tr>
<td>ADHD/ ADD</td>
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<tr>
<td>Allergies (Please list)</td>
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<td>Asthma Does your child require an inhaler? □ YES □ NO</td>
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<td>Diabetes (Describe Type)</td>
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<tr>
<td>Heart Problems</td>
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<td>Seizures (Describe type)</td>
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<tr>
<td>Social/ Emotional/ Behavioral/ Mental Health concerns (Describe)</td>
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<tr>
<td>Vision deficit that requires preferential seating</td>
<td></td>
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<tr>
<td>Hearing deficit that requires preferential seating</td>
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<td>Other:</td>
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**Does your child take any medications? □ YES □ NO** If yes, complete the following:

<table>
<thead>
<tr>
<th>Name of Medication</th>
<th>Dose/ Frequency</th>
<th>Physician</th>
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**EMERGENCY CONTACTS**

Who is authorized to pick up your child in the case of an emergency, and the parents cannot be reached? Students will be released **ONLY to those listed below.**

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship</th>
<th>Home Phone</th>
<th>Cell Phone</th>
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Raptor Visitor Management System: The Raptor system will allow us to track visitors, contractors, and volunteers in our schools and provide us with a safer environment for our students and staff. Upon entering a district building, visitors will be asked to present a valid state-issued ID, which will be scanned into the system. The Raptor system will check to ensure that registered sexual offenders are not entering our buildings. It is important to note that the Raptor system only scans the visitor's name, date of birth and photo for comparison with a national database of registered sex offenders.

Cell Phone Policy: California law permits students to carry cell phones, however, such devices shall be turned off except when being used for a valid instructional or other school-related purpose as determined by the teacher or other district employee, and at any other time directed by a district employee. Any device with a camera, video, or voice recording function shall not be used in any manner which infringes on the privacy rights of any other person. EC 49005.5. Texting, taking photos or video taping inside the school building during the school day is not allowed. Students may not wear ear pieces during the class time as they impede the student's ability to hear instructions and announcements. Because of the expense, loss, and discontinuity to learning environments, electronic devices should not be brought to school. Phones and electronic devices that are brought and lost or stolen are not the responsibility of the school or district and will not be replaced.

Pesticide Notification: Please be informed that the following pesticides may be used on Orange Center campuses during the school year: Central Garden & Pet Co Essentria, EPA-FIFRA 255, Syngenta Demand CS EPA-100-1056, Bayer Suspens SC EPA-432-763, Up-Cycle Pro 2.0 EC United Phosphorous EPA-70-306-19, Pyronyl UT-300 Central Garden & Pet EPA-89451-27, Syngenta Tandem EPA-100-1437, Syngenta Archer IRG EPA-100-1111, MGK Vandetta Nitro CR Gel Bait EPA-1021-2796, Syngenta Advion CR Bait EPA-100-1484, Syngenta Advion Ant Bait EPA-100-1498, Waterbury Co CR-100 EPA-179-1193, Syngenta Demon Max EPA-100-1218, Tergard SFR United Phosphorous EPA-70-306-5

Uniform Complaint Procedures: The Governing Board recognizes that the district has the primary responsibility to ensure compliance with applicable state and federal laws and regulations governing educational programs. The district shall investigate and seek to resolve any complaints alleging failure to comply with such laws and/or alleging unlawful discrimination, harassment, intimidation, or bullying in accordance with the uniform complaint procedures. The district shall use the uniform complaint procedures to resolve any complaint alleging unlawful discrimination, harassment, intimidation, or bullying in district programs and activities based on actual or perceived characteristics of race or ethnicity, color, ancestry, nationality, national origin, ethnic group identification, age, religion, marital or parental status, physical or mental disability, sex, sexual orientation, gender, gender identity, gender expression, or genetic information, or any other characteristic identified in Education Code 200 or 210. Penal Code 422.55, or Government Code 11335, or based on association with a person or group with one or more of these actual or perceived characteristics. Uniform complaint procedures shall also be used to address any complaint alleging the district's failure to comply with the prohibition against requiring students to pay fees, deposits, or other charges for participation in educational activities, the requirements for the development and adoption of a school safety plan, and state and/or federal laws in adult education programs, consolidated categorical aid programs, migrant education, career technical and technical education and training programs, child care and development programs, child nutrition programs, and special education programs.

Comprehensive Sexual Health Education and HIV Prevention Education: California state law requires that comprehensive sexual health education and HIV prevention education be provided to students at least once in middle school or junior high school and once in high school, starting in grade 7 (California Healthy Youth Act). Instruction will be medically accurate, age-appropriate and inclusive of all students and encourage students to communicate with parents, guardians or other trusted adults about human sexuality. All classroom discussions and materials will be taught by district contracted personnel. Written and audiovisual educational materials to be used in comprehensive sexual health and HIV prevention education are available for inspection. Parents/guardians have the right to request a copy of Education Code 51930-51935. Parents/guardians have the right to require their child from comprehensive sexual health or HIV prevention education, or research on student health behaviors and risks, provided they notify the district (Education Code 51930).

Network/Technology User Agreement: Your child is given access to the Internet/Internet and to electronic devices for educational purposes and in accordance with the District's rules and regulations. Review the regulations with your student, as referenced in the OC District Parent Handbook. Please understand the consequences if the provisions of the technology agreement are violated and do not hold the District liable for any damages. Parent and students expressly consent to searches of District provided electronic devices as a condition of obtaining and using District provided electronic devices. This document will serve as permission for your child while enrolled in the Orange Center School District through the 8th grade.

Student Photograph and Information: Orange Center School District would like permission to publish your child's work, descriptions of his/her accomplishments, and photo in school sponsored publications and videos, school sponsored social media, and school related press releases. This permission will allow your child to share his/her work with others and to be recognized. You reserve the right to revoke this permission at any time.

Automated Telephone Dialing System: I agree that Orange Center School District, may call or text me at the telephone number or numbers, including any wireless/cell numbers I provided. Permission is given allows you son/daughter(s) school to send message internal or external school district or school building news that includes, but is not limited to, individual student attendance cards, school information, activity schedules, and special meetings and occasions. Such calls will be made using an automated telephone dialing system and may involve voice calls or text messages and may be delivered by artificial or prerecorded voice message.

District Information Handbook: Yes, I have received and will review all the policies of the Orange Center School District Information Handbook. I will discuss district regulations and expectations with my child.

I have reviewed this document, and to the best of my knowledge, the information contained herein is true and complete. The undersigned declares under penalty of perjury that he/she is the parent, or legal guardian, of the above-named student and grants the above authorizations.

Signature of Parent/Guardian
Printed Name of Parent/Guardian
Date

Registration is not valid or complete without signature and date.

2019/2020
Orange Center School District

TK/Kindergarten
Request for Bus Transportation
Solicitud de Transporte en Autobús

Student Name/Nombre de Estudiante: __________________________________________________________

Address/Dirección: __________________________________________________________________________

Parent Name/Nombre de Padre: __________________________________________________

Name of other adult(s) who will pick-up the student at the bus stop: It is required by the District
that an adult who is on the emergency card be present at the bus stop.
Nombre de otro adulto (s) que recogerá al estudiante en la parada de autobus: Es requerido por el
Distrito que un adulto que esté en la tarjeta de emergencia esté presente en la parada de autobús

_________________________________________________________________________________________

_________________________________________________________________________________________

(Bus transportation is only provide within the school district boundaries)
(El transporte en autobús es sólo proveer dentro de los límites del distrito escolar)

If you plan on using school bus transportation to and from school, for your child it is important
that they ride the bus daily, if he/she fails to ride the bus without prior notification for five
consecutive days the bus stop will be eliminated from the bus route.

Si usted planea usar el transporte escolar de autobús hacia y desde la escuela, para su hijo/a, es
importante que el estudiante viaje en el autobús todos los días, si él / ella falta de viajar en el
autobús sin previo aviso durante cinco días consecutivos, la parada de autobús será eliminado de
la ruta de autobús.

BELOW IS FOR OFFICE USE ONLY

Bus #: ______  Driver: __________________________________________________

Teacher: ____________________________  Grade: ___________

ASP: _______
Orange Center School District

Interdistrict Transfer Application Procedures

Orange Center School welcomes students from neighboring areas. If your child does not live in the Orange Center School District boundaries, please follow the application procedures below:

- Obtaining an application for an interdistrict transfer from your school district of residence.
- Complete the application and submit it to your district of residence. The district of residence will then submit a copy of the form to Orange Center for approval.
- Approval and continuation will be based on the following: good attendance, proper conduct, acceptable grades and space availability.

Procedimientos de Aplicación de la Transferencia Inderdistrict

Escuela de Orange Center da la bienvenida a estudiantes de las áreas vecinas. Si su hijo no vive en los límites del Distrito Escolar de Orange Center, por favor siga los procedimientos de solicitud abajo:

- Obtener una solicitud de transferencia interdistrital de su distrito escolar de residencia.
- Complete la solicitud y enviela a su distrito de residencia. El distrito de residencia enviará una copia del formulario al escuela de Orange Center para aprobación.
- La aprobación y continuación se basará en lo siguiente: buena asistencia, conducta apropiada, grados aceptables y disponibilidad de espacio.