

Welcome to Mountain View High School "Home of the Bruins"

665 West Center Orem, Utah 84057

Guidance Center Phone: 801-610-8161; FAX: 801-227-2460

Please call for an appointment and allow at least one hour for registration process.

Required documents to bring for enrollment:

BIRTH CERTIFICATE REQUIRED

UNOFFICIAL TRANSCRIPT and WITHDRAWAL FORM Needed for proper placement.

If school is in session, bring a completed withdrawal form from your transfer school with complete address.

If transferring within Alpine School District, student only needs withdrawal form while school is in session

SPECIAL ED/RESOURCE students are required to bring a copy of their current IEP and psychological evaluation.

IMMUNIZATIONS: (State Law) Verification of immunizations is REQUIRED at time of registration.

ALL students: 5 DTP (one Tdap after age 7), 4 IPV/OPV Polio, 2 MMR (after age 1), 2 Hepatitis A , 3 Hepatitis B, Varicella (chicken pox)- if age 13 at time of first dose, two doses needed (4 weeks apart).

Tuberculosis Clearance:

All foreign students and U.S. students who have been living abroad for 6+ months: must take TB test in the USA within the last 90 days - takes 3 days to be read

Proof of TB required if student was born outside of USA/Canada and has been living in the USA less than 5 years.

For immunizations or questions, call Utah County Health Department at 801-851-7043

Located at 151 South University Ave Suite #1900 Provo, UT

Hours- M,T,F 8am-4:30pm; W- 8am-7pm; TH 9am-4:30pm

GUARDIANSHIP: Completed papers REQUIRED at time of registration.

A. Student living with legal custodian parents - no papers needed. **HOWEVER** in divorce cases, paperwork needs to show who the legal physical custodian parent is. When student lives with non-custodial parent, Power of Attorney papers need to be completed. Papers available at **Alpine School District*** or MVHS.

B. Student not living with legal custodian parents- Call **Alpine School District*** to establish guardianship. Foreign exchange students need to clear through **Alpine School District.***

C. Foster/State Custody students - Call 801-610-8183 for clearance form. Located at 1581 W 1000 S in Orem.

BOUNDARY: (west of State Street and south of 400 North in Orem) Completed papers REQUIRED at registration. If in SPORTS, please ask about sports eligibility.

A. **Within MVHS boundary:** Bring address verification where you physically live (rental agreement or utility bill). **Cannot accept driver's license, check, etc. The verification needs to connect boundary home to guardian.** Are you **living with another family?** Completed, notarized ASD form is required. The form is available in the MVHS Guidance Center

B. **Out of MVHS area:** Request for Out-of-Area Transfer form is required, available in MVHS Guidance Center.

***Alpine School District Student Services : 575 N. 100 E. American Fork, Utah Phone 801-610-8474 or 801-610-8486**

Mountain View High School New Student Information

For Office Use: JH TB RS LR

Student # _____

New Previous _____

BC T-WD IMM-TB G B-OOA LW

Date of Entry _____

Student Legal Name (Birth Certificate Name) _____

First

Middle

Last

Grade 10 11 12

Male Female Date of Birth _____ Place of Birth _____ Current Age _____

Social Security Number _____ (optional)

NAMES of Legal Guardians student lives with	Foster	Step	Home Phone	Cell Phone	Work Phone
<input type="checkbox"/> Father					
<input type="checkbox"/> Mother					
<input type="checkbox"/> Guardian					
<input type="checkbox"/> Other					

Guardian E-Mail Address _____

(Providing an email address grants permission for ASD to contact via email)

Student Address _____

Mailing Address (if different from above) _____

If your parent/legal guardian cannot be reached, please list a family member of neighbor:

Name _____ Phone _____

School last attended _____ Date of withdrawal _____

Address of school above _____

(This is important for requesting records) Street _____ City _____ State _____ Zip _____

Has your student ever attended school in Alpine School District? Yes No School _____ Grade _____

Student transferred from: Within the district Out of the district Out of State

Out of country What country? _____ Entry Date _____

Circle Yes or No:

Yes No Has your student been living in the U.S. for the last 3 years?

Yes No Has your student been attending school in the U.S. for the last 3 years?

Yes No Is the primary language spoken in the home English? If no, what language is spoken? _____

Who speaks the non-English language? _____

Yes No Do you have a health problem that we should be aware of at this time? List _____

Yes No Do you have legal custody of the student you are registering?

Yes No Are you living with friends or relative?

Yes No Is the student you are registering a foster student/ward of the state?

Yes No Does your student have an Individualized Education Plan (IEP) or is the student receiving Special Education Services?

If yes, please bring a copy of the current IEP and testing to MVHS before placement in IEP classes.

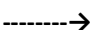
Yes No Has your student ever been suspended/expelled from school?

If yes, explain _____

I hereby certify that the information is true and correct to the best of my knowledge. Any falsification of the information above may result in the cancellation of the transfer or opportunity to attend school in Alpine School District.

Signature of Parent or Legal Guardian _____ Date _____

Enrollment Approved Denied Administration Signature _____ Date _____



Federal Legislation is now requiring more detailed reporting for student ethnicity and race. As a result, Alpine School District asks that you help us comply with this legislation by answering the following questions:

ETHNICITY: Is this student Hispanic/Latino?

Yes, Hispanic/Latino (a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

No, Not Hispanic/Latino

RACE: What is this student's race? (Choose one or more)

American Indian or Alaska Native (a person having origins in any of the original peoples of North, South or Central America and who maintains tribal affiliation or community attachment)

If checked, please indicate which Tribe or Band _____

Asian (a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including; Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand and Vietnam)

Black or African American (a person having origins in any of the black racial groups of Africa)

Native Hawaiian or Other Pacific Islander (a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)

White (a person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

I understand that the district is required to report the above information for all students, but I refuse to declare a race for my student. I understand that district personnel will do their best to determine my child's race and report that determination.

ALPINE SCHOOL DISTRICT GUARDIANSHIP STATUS

Under Utah Law 53A-2-202, a child is eligible to attend school if their parent or legal guardian resides within the school's boundaries. If the school is a closed school, exceptions may only be granted by applying through the "Out of Area Committee" at the Student Services Department in the District Office.

Please read carefully and select the statement below which best describes your relationship to the student whom you wish to register at this school. A separate form must be completed for each child you are registering.

Student's Name: _____ (Birth Certificate Name)

1. ____ I am a foster parent or proctor parent.
2. ____ I am the parent (birth or adopted) of this child and am not currently married to other parent, but I have been awarded Physical Legal Custody through the court.*
3. ____ I am not the parent (birth or adopted) of this child. I am a relative or friend. (Please choose one of the following)
 - a. ____ I have been awarded legal guardianship of this child through the court. **
 - b. ____ I have not been awarded legal guardianship of this child through the court.
4. ____ The above named child lives with both parents and I am the parent (birth or adopted) of this child.
5. ____ None of the above statements describe my relationship to this child. (Please describe your relationship to this child)

Your Name: _____
(Please print)

Your Signature: _____ Date _____

(By signing this document, I attest that the above information is true and correct. I acknowledge that any falsification of information makes me subject to penalty of law).

* To assist us in complying with court orders, you **must** provide us with a copy of the most recent **legal court documents before your student can enroll in school.**

** Verification of court order or DCFS placement must be provided prior to child being enrolled.