

Westlake High School

New Student Registration



Items required to register a new student.....

The following information is required by law in order to enroll a new student. If any of these items are missing, we will not be able to complete the registration.

1. - **Withdraw Form/ Transcript/Report Card**—Obtained from previous school.
2. - **Registration Form**—Signed by the Custodial Guardian.
3. - **Custodial Guardianship Form**—This form must show proof of guardianship. A copy of the **DIVORCE DECREE** is required to establish physical and custodial rights (if this applies to you). If the student is not living with the custodial guardian, you must complete a **Power of Attorney form** or meet with Student Services at the Alpine School District Offices.
4. - **Birth Certificate**—You must bring the original birth certificate to be copied, We can no longer accept the wallet size birth certificates.
5. - **Immunization Records**—Students must be current on all immunizations before they will be allowed to register or select any classes (if shots are needed, contact the Public Health Department.)

10th - 12th Grade Students must have:

- 5 DTP/Dtap/DT/Td
- 1 Tdap or Td Booster
- 4 Polio
- 2 MMR
- 3 Hepatitis B (HBV)
- 1 Varicella Chickenpox
 - History of Disease OK, Parent must sign Pink Immunization Card
 - If student is 12 years old, 2 doses is required
- 2 Hepatitis A (HAV)

**** If your student has been out of the country within the last 6 months you will also need to have a TB test and have it checked to be negative before you register. This must occur after your student has entered into the U.S.**

6. - **Proof of Residency**— You need one of the following: Utility bill, lease agreement, or a purchase agreement. A notarized **Living with declaration of residence form** is required if you are living with a family member. This paperwork must be filled out before you can enroll. (Form available in the counseling office)
7. - **Special Education**—If your student has been serviced in Special Education classes, you will need to contact the previous school to obtain a current copy of his/her IEP.
8. - **Emergency Form**— Must be filled out and returned.
9. - **Internet Usage Form**—Must be filled out and returned.

❖ This packet must be completed and submitted to the counseling office in order for us to process your students' class registration. **New student registration is by appointment only.**

New Student Registration Summer Hours: Monday June 2, 2014 7:30 am – 1:00 pm Monday June 9, 2014 7:30 am – 1:00 pm Monday June 16, 2014 7:30 am – 1:00 pm Monday June 23, 2014 7:30 am – 1:00 pm No Registration during the month of July.	Westlake High School Counseling Office 99 N. 200 W. Saratoga Springs 801-610-8816 Fax 801-768-1098 Alpine School District Office 575 North 100 East, American Fork 801-610-8400 Student Services Debbie Hale, Room 240 801-610-8485 Public Health Department 151 N. University Ave., Provo 801-370-8700 Bus Information Transportation Office 801-640-8850
During the month of July, the Counselors will be available in the office on Mondays from 8:00 am – 12:00 pm.	

Alpine School District 2015-16 AB Calendar

August/September				
M	T	W	TH	F
		19 A	20 B	21 A
24 B	25 A	26 B	27 A	28 B
31 A	1 B	2 A	3 B	4 A
7 B	8 A	9 B	10 A	11 B
14 B	15 A	16 B	17 A	18 B
21 A	22 B	23 A	24 B	25 A
28 B	29 A	30 B		

October				
M	T	W	TH	F
			1 A	2 B
5 A	6 B	7 A	8 B	9 A
12 B	13 A	14 B	15 A	16 B
19 A	20 B	21 A	22 B	23 A
26 A	27 B	28 A	29 B	30 A

November				
M	T	W	TH	F
2 B	3 A	4 B	5 A	6 B
9 A	10 B	11 A	12 B	13 A
16 B	17 A	18 B	19 A	20 B
23 A	24 B	25 A	26 B	27 A
30 A				

December				
M	T	W	TH	F
	1 B	2 A	3 B	4 A
7 B	8 A	9 B	10 A	11 B
14 A	15 B	16 A	17 B	18 A
21 A	22 B	23 A	24 B	25 A
28 B	29 A	30 B	31 A	

January				
M	T	W	TH	F
				1 B
4 B	5 A	6 B	7 A	8 B
11 A	12 B	13 A	14 B	15 A
18 B	19 A	20 B	21 A	22 B
25 B	26 A	27 B	28 A	29 B

February				
M	T	W	TH	F
1 A	2 B	3 A	4 B	5 A
8 B	9 A	10 B	11 A	12 B
15 A	16 B	17 A	18 B	19 A
22 A	23 B	24 A	25 B	26 A
29 B				

March				
M	T	W	TH	F
	1 A	2 B	3 A	4 B
7 B	8 A	9 B	10 A	11 B
14 A	15 B	16 A	17 B	18 A
21 B	22 A	23 B	24 A	25 B
28 A	29 B	30 A	31 B	

April				
M	T	W	TH	F
				1 A
4 B	5 A	6 B	7 A	8 B
11 B	12 A	13 B	14 A	15 B
18 A	19 B	20 A	21 B	22 A
25 B	26 A	27 B	28 A	29 B

May				
M	T	W	TH	F
2 A	3 B	4 A	5 B	6 A
9 B	10 A	11 B	12 A	13 B
16 A	17 B	18 A	19 B	20 A
23 B	24 A	25 B	26 A	27 B
30 A	31 B			

1st Term

August 19 - October 23
 A Days = 22
 B Days = 22
 Total Days = 44

2nd Term

October 26 - January 12
 A Days = 22
 B Days = 22
 Teacher Comp = 1
 Total Days = 45

3rd Term

January 13 - March 18
 A Days = 23
 B Days = 22
 Total Days = 45

4th Term

March 21 - May 27
 A Days = 22
 B Days = 23
 Teacher Comp = 1
 Total Days = 46

Trimester 1

August 19, 2015 - November 13, 2015

Trimester 2

November 16, 2015 - February 26, 2016

Trimester 3

February 29, 2016 - May 27, 2016

August 14- Professional Development
 August 17-18- Teacher Contract Days
 August 18 - 7th/10th Grade Day (optional)
 August 19- First Day of School
 September 7- Labor Day
 October 15-16- Fall Break
 October 19- Professional Development
 November 25- Teacher Comp. Day
 November 26-27- Thanksgiving Break

Dec. 21 through Jan. 1- Christmas Break
 January 18- Martin Luther King Day
 February 15- Washington-Lincoln Day
 March 7- Professional Development
 April 4- Snow Make-up Day
 April 5- Teacher Comp. Day
 April 6-8- Spring Break
 May 27- Last Day of School
 May 30- Memorial Day

Alpine School District
**NEW STUDENT
 REGISTRATION FORM**



575 N 100 E
 American Fork, UT 84003
 (801) 610-8400
 Fax (801) 610-8516

Student's Name _____
(Last) (First) (Middle) (Known As)

SSN# _____ - _____ - _____ Date of Birth _____ Birth Place (City/State) _____
(optional)

Male Female Grade _____ Has your child ever attended school in Alpine School District? Yes No

School Last Attended _____ Address _____

Student transferred from: Circle One WITHIN DISTRICT OUT OF DISTRICT OUT OF STATE OUT OF COUNTRY*

*If out of country, which country? _____ Entry date in USA _____

Father's Email _____ Mother's Email _____

Student's Home Address _____
(City) (State) (Zip)

Name of Parent or Legal Guardian _____

STUDENT LIVES WITH <i>(Write Names)</i>	DOB	Foster	Step	<i>Circle Primary Phone #</i>		
				HOME PHONE	CELL PHONE	WORK PHONE
Father						
Mother						
Guardian						
Other						

Circle One

- Yes No Has your child lived in the US for the last 3 years?
- Yes No Has your child attended school in the US for the last 3 years?
- Yes No Do you have legal custody of the child you are registering?
- Yes No Is the child you are registering a foster child/ward of the court?
- Yes No Does this child have an Individualized Education Plan or is he/she receiving Special Education Services?
- Yes No Are you living with friends or relatives?
- Yes No Has your child ever been suspended/expelled from school?
- Yes No Is the primary language spoken in the home English? If no, what language is spoken? _____

Who speaks the non-English language? _____

I attest by this signature I am the custodial parent or legal guardian of the student above. I acknowledge that falsifying this record makes me subject to law.

Parent/Guardian Signature _____ Date _____

PLEASE TURN OVER AND FILL OUT BACK OF THIS FORM

OFFICE USE ONLY

Teacher _____ Track _____ Student # _____ Date Enrolled _____ Start Date _____

Skyward - NCLB Schedule Home Room Advisor Class List ESL Y or N

Immunizations - Complete In Process Birth Certificate Proof of Residency Legal Docs

Administrator Approval _____

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.

Westlake High School

Lux et Virtus "Light and Excellence"

Principal Fred Openshaw * Assistant Principals * Kristin Packer * Stacy Salmans * Chad Wilson

Date: _____

Previous School Name: _____

Address: _____

Phone: _____ Fax Number: _____

Please Fax Back a copy of the Official Transcript to: (801) 768-1098

This certifies that the student (s) named below have enrolled at Westlake High School. Please send the cumulative academic records through the date of withdrawal. Including:

- Official Signed Transcript
- Medical and Immunization Records
 - Standard Test Scores
- Withdrawal Date and Grades
- Special Education Records - IEP

Name: _____ DOB: _____ Grade: _____

Name: _____ DOB: _____ Grade: _____

The Federal Law 9931 allows for educational records to be sent to other educational agencies without the parent's signature. Remember that pursuant to Utah law, Federal law and the Utah State Board of Education, transcripts cannot be withheld due to the failure of the student to pay fines or other charges.

Westlake High School / Counseling Office

Attn: Ximena Johnson

99 North 200 West

Saratoga Springs, Utah 84045



1st _____

2nd _____

3rd _____

Parent Signature

**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.



Alpine School District

Secondary Student Computer & Internet Use Permission Slip

School: _____

Name: _____ Core Teacher (if applicable): _____
(Last, First, Middle)

Student ID #: _____ Date: _____

Recognizing the fundamental role technology plays in the 21st Century, Alpine School District supports and encourages the appropriate and responsible use of technology in student learning. Alpine School District will take reasonable measures to protect students and ensure that technology use aligns with educational objectives.

The current policy, including rules and regulations, is found at: [http://policy.alpinedistrict.org/policy/5225_Internet Wide Area Network Acceptable Use Rule](http://policy.alpinedistrict.org/policy/5225_Internet_Wide_Area_Network_Acceptable_Use_Rule) or may be obtained at any district school. It is the responsibility of the student and parent/guardian to understand the current policy.

By signing below, we (the parent and student) acknowledge we have read and agree to follow the rules and regulations associated with the Alpine School District Acceptable Use policy. Furthermore, we acknowledge these rules and regulations apply to both district and personal devices while on school property.

<p>Student's Signature: _____ Date: _____</p> <p>Parent/Guardian's Signature: _____ Date: _____</p>

As the parent/guardian of the student, I grant permission for my child to use the Alpine School District network in all the following ways: Internet services, Student Email, Google docs, and Other Services. This permission shall remain in effect unless changed explicitly by a guardian.

<p>Parent/Guardian's Signature: _____ Date: _____</p>



ALPINE SCHOOL DISTRICT
Student Media Release—School/District/External Publications and Web

Dear Parents/Guardians,

From time to time, your child's name and/or photo might be considered for publication/display in a web page or publication, school/district created or other external publication (media outlet, etc.). Please take time to review the Information Release Form and select all appropriate options. If your preference changes during the year, you are responsible for contacting the school and completing a new form. If you have any other questions, please contact the school before signing.

Please initial in the box(es) below to indicate you agree to give permission.

SCHOOL DISTRICT WEB & PUBLICATION RELEASE: (For publication in school/district printed publications and web pages/websites, Facebook, Twitter, and other social networks.)

_____ The school and district have permission to display my child's photo with first and last name attached.

I understand that this information will be available to anyone on the Internet/ World Wide Web.

Please note that this does not replace the District's Acceptable Use Policy or imply permission to use internet services.

EXTERNAL MEDIA WEB & PUBLICATION RELEASE: (For publication by media outlets such as newspapers, radio, television, etc.)

_____ External media outlets have permission to display my child's photo with first and last name attached.

_____ External media outlets have permission to interview my child for newspaper or television.

By signing below, I verify that I understand the above release and that I have indicated my preferences. By leaving a box empty, I am indicating that I do not wish for permission to be granted. If my preferences change during the school year, I will contact the school.

Parent/Legal Guardian Signature

Date

Child's Name (please print)

Child's Grade

Schools should keep the completed form on file at the school.

Apply Online!

Free and Reduced Meal Application

Go to

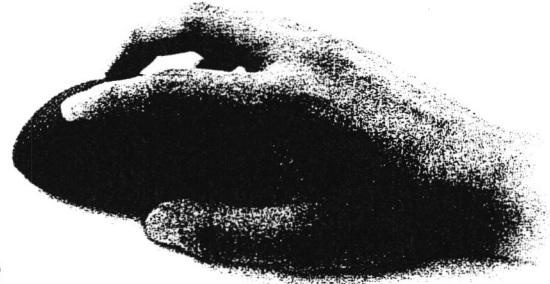
alpineschools.org

↳ Departments

↳ Nutrition Services

↳ Parents Zone

↳ Online Free & Reduced Application

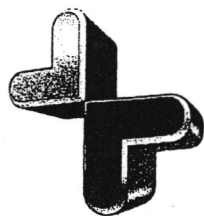


The advantage to applying online is that your application is processed within 24 hours. You will receive a letter within 3 to 5 days to let you know if you have been approved. You can also call Nutrition Services at 801-610-8037 or 801-610-8038 the following day to find out if you qualified.

Paper applications are available at all school offices.

These will take up to 10 days to process.

Easy Online Meal Payments



MyPaymentsPlusTM
K12 eManagement Solution

You can make payments to your student's meal account quickly and securely using **MyPaymentsPlus**.

Prepay with your credit card, debit card or e-check

Available 24/7 for your convenience

Free - no service fees

Free - access to purchase history and account balance information

Simply log on to www.MyPaymentsPlus.com and register to pay.