



MUSD#20 2018-2019 Elementary School Enrollment Packet Checklist

Student: _____ **Student ID#:** _____
Teacher: _____ **Grade:** _____ **Enter Date:** _____

TO BE STAPLED TO THE FRONT OF THE CUM FOLDER

Enrollment form	___ Yes	___ No	
PHLOTE	___ Yes	___ No	
Birth Certificate	___ Yes	___ No	
If no, was a B.C. letter given?	___ Yes	___ No	
(If parent does not provide Birth Certificate, we need to give them a requirement letter. Date letter was given: _____. If the B.C. is not received within 30 days, we may need to contact Law Enforcement and suspension is possible)			
Immunization Document (Shot Records)	___ Yes	___ No	

TO BE GIVEN TO HEALTH OFFICE OR ESS DEPT

Health Office Checklist	___ Yes	___ No	
Health Information and Emergency Medical Referral	___ Yes	___ No	
IEP or 504 Documentation	___ IEP	___ 504	___ N/A

OUR DOCUMENTATION (LOOSE IN CUM FILE)

Documentation for Custody/Foster Care/Adoption/etc.	___ Yes	___ No	___ N/A
Parent ID	___ Yes	___ No	
Form 506 (Title VII Student Eligibility Cert)	___ Yes	___ No	___ N/A
Certificate of Indian Blood	___ Yes	___ No	___ N/A

OTHER DOCUMENTATION FILED IN OFFICE NOTEBOOKS

Student Sign In /Out Form	___ Yes	___ No	
Open Enrollment Form	___ Yes	___ No	___ N/A
Proof of Residence Form	___ Yes	___ No	
Type of Document Given _____			
Parent Acknowledgement and Permissions Form:	___ Yes	___ No	
Handbook Verification	___ Yes	___ No	
Dress Code	___ Yes	___ No	
Closed Campus	___ Yes	___ No	
Code of Conduct	___ Yes	___ No	
Bullying, Harassment, Cyber Bullying, Intimidation	___ Yes	___ No	
Health Office Expectations	___ Yes	___ No	
Designation of Directory Information	___ Yes	___ No	
Media Release/ Yearbook Authorization	___ Yes	___ No	___ YB only
BYOD	___ Yes	___ No	
Permission for Student Use of Technology	___ Yes	___ No	
Google Apps for Education	___ Yes	___ No	
AUP (Technology Resource/Computer Usage)	___ Yes	___ No	
Student Surveys	___ Yes	___ No	
School and Parent Involvement Guidelines	___ Yes	___ No	
Library Usage Form (given to Librarian)	___ Yes	___ No	
Impact Aid	___ Yes	___ N/A	
McKinney Vento Form	___ Yes	___ N/A	

PREVIOUS SCHOOL RECORDS

Records request (Date sent _____)	___ N/A
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Person Checking Folder: _____ Date: _____