REYNOLDS SCHOOL DISTRICT STUDENT REGISTRATION CHECKLIST

A co	οу	of these items must be att	ached to this form	Name:
	1	Birth Certificate		Grade:
	2	Immunization Records		
	3	Proof of Residency (e.g., mort cell phone bill, verification of Note: We do not accept a Dri	social services, paystu	•
			•	e top right of the page. If a form is not
applic	abl	e to your student's situation, pl	ease indicate " <u>N/A</u> " a	t the top of the form.
	F	orm 1 - Authorization for Releas	se of School Records	
	F	orm 2 - Student Registration Fo	rm	
	Form 3 - Special Education Questionnaire			
	Form 4 - Student Residency Questionnaire			
	Form 5 - Registration Statement (Act 26)			
	Form 6 - Home Language Survey			
	Form 7 - Acceptable Use of Internet Agreement Form			
	Form 8 - Consent/Release of Photographs and Videotape of Students			
	Form 9 – Physical and Dental Exams (Grades K, 3, 6, 7 and 11)			
	Form 10– Fluoride Program (Elementary School Only)			
MISC	ELL	ANEOUS DOCUMENTATION – C	Custody agreements, I	egal Guardianship, Living with Resident
	1. Copy of Custody Agreements or Court Orders on custody / legal guardianship			
	 Affidavit of Residency – Notarized statement that the student is living with a district resident other than the parent(s) 			
[] 3	Listing of County Services (M Behavioral Health)	ental Health, Childrer	and Youth Services, Juvenile Probation,
For S	ch	ool Use Only - Records Rec	eived:	
		☐ 1. Academic	□ 2. Health	☐ 3. Special Education