Student Registration Form
Middle and High School

# BELLINGHAM PUBLIC SCHOOLS

| Has your child ever attended Bellingham Public Schools? Yes No | If yes, please provide name of school(s) attended: | Dates attended: |
|---|---|---|

| Student Legal Last Name: | Legal First Name: | Legal Middle Name: | |
|---|---|---|---|
| Student Preferred Last Name: | Preferred First Name | Preferred Middle Name: | Birthdate(MM/DD/YY) |

Gender
Male
Female

Pref. Gender
Male
Female
Non-binary

Language Student

Language First Spoken By Student: Lang.

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Race Ethnicity Data Collection

Name of Student: _____

**Please select both ethnicity and race. Hispanic Yes or No, if yes select which one(s). Then select any any race(s) that may apply. Be sure to notice the bold categories prior to selecting the race(s).**

ETHNICITY

**Hispanic** ☐ **Yes** ☐ **No**

- ☐ Hispanic
- ☐ Argentine
- ☐ Bolivian
- ☐ Brazilian
- ☐ Chicano (Mexican American)
- ☐ Chilean
- ☐ Colombian
- ☐ Costa Rican
- ☐ Cuban
- ☐ Dominican
- ☐ Ecuadorian
- ☐ Guatemalan
- ☐ Guyanese
- ☐ Honduran
- ☐ Jamaican
- ☐ Mexican
- ☐ Mestizo
- ☐ Native
- ☐ Nicaraguan
- ☐ Panamanian
- ☐ Paraguayan
- ☐ Peruvian
- ☐ Puerto Rican
- ☐ Salvadoran
- ☐ Spaniard
- ☐ Surinamese
- ☐ Uruguayan
- ☐ Venezuelan
- ☐ Hispanic/Latino Write in _____

RACE

**Black/ African-American (continued on next page)**

- ☐ Black/ African-American
- ☐ African American
- ☐ African Canadian

Caribbean

- ☐ Anguillan
- ☐ Antiguan
- ☐ Bahamian
- ☐ Barbadian
- ☐ Barthélemois/Barthélemoises (Saint Barthélemy)
- ☐ British Virgin Islander
- ☐ Caymanian (Cayman Island)
- ☐ Cuba Dominican
- ☐ Dominican (Dominican Republic)
- ☐ Dutch Antillean (Netherlands Antilles)
- ☐ Grenadian
- ☐ Guadeloupian
- ☐ Haitian
- ☐ Jamaican
- ☐ Martiniquais/Martiniquaise
- ☐ Montserratian
- ☐ Puerto Rican
- ☐ Caribbean Write in _____

Central African

- ☐ Angolan
- ☐ Cameroonian
- ☐ Central African (Central African Republic)
- ☐ Chadian
- ☐ Congolese (Republic of the Congo)
- ☐ Congolese (Democratic Republic of the Congo)
- ☐ Equatorial Guinean
- ☐ Gabonese
- ☐ São Toméan
- ☐ Principe
- ☐ Central African Write in _____

**Black/ African-American (continued)**

RACE

East African

- [ ] Burundian
- [ ] Comoran
- [ ] Djiboutian
- [ ] Eritrean
- [ ] Ethiopian
- [ ] Kenyan
- [ ] Malagasy (Madagascar)
- [ ] Malawian
- [ ] Mauritian (Mauritius)
- [ ] Mahoran (Mayotte)
- [ ] Mozambican
- [ ] Reunionese
- [ ] Rwandan
- [ ] Seychellois/Seychelloise
- [ ] Somali
- [ ] South Sudanese
- [ ] Sudanese
- [ ] Ugandan
- [ ] Tanzanian (United Republic of Tanzania)
- [ ] Zambian
- [ ] Zimbabwean
- [ ] East African Write in _____

Latin American

- [ ] Argentine
- [ ] Belizean
- [ ] Bolivian
- [ ] Brazilian
- [ ] Chilean
- [ ] Colombian
- [ ] Costa Rican
- [ ] Ecuadorian
- [ ] El Salvadoran
- [ ] Falkland Islander
- [ ] French Guianese
- [ ] Guatemalan
- [ ] Guyanese
- [ ] Honduran
- [ ] Mexican
- [ ] Nicaraguan
- [ ] Panamanian
- [ ] Paraguayan
- [ ] Peruvian
- [ ] South Georgia/South Sandwich Islands
- [ ] Surinamese
- [ ] Uruguayan
- [ ] Venezuelan
- [ ] Latin American Write in _____

South African

- [ ] Botswanan
- [ ] Mosotho (Lesotho)
- [ ] Namibian
- [ ] South African
- [ ] Swazi
- [ ] South African Write in _____

West African

- [ ] Beninese
- [ ] Bissau-Guinean
- [ ] Burkinabé (Burkina Faso)
- [ ] Cabo Verdean
- [ ]
- [ ] Gambian
- [ ] Ghanaian
- [ ] Liberian
- [ ] Malian
- [ ] Mauritanian
- [ ] Nigerien (Niger)
- [ ] Nigerian (Nigeria)
- [ ] Saint Helenian
- [ ] Senegalese
- [ ] Sierra Leonean
- [ ] Togolese
- [ ] West African Write in _____

- [ ] Black Write in _____

**American Indian/Alaskan Native**

- American Indian/Alaskan Native
- Washington State Tribes
  - Chinook Tribe
  - Confederated Tribes and Bands of the Yakama Nation
  - Confederated Tribes of the Chehalis Reservation
  - Confederated Tribes of the Colville Reservation
  - Cowlitz Indian Tribe
  - Duwamish Tribe
  - Hoh Indian Tribe

Race Ethnicity Data Collection

Office of Superintendent of Public Instruction (OSPI)

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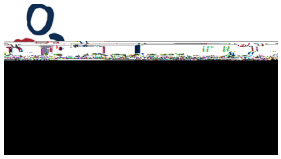

# ANNUAL STUDENT HEALTH CONCERNS DOCUMENT

Information on this form is to be filled out for each new school year and is designed to aid school staff in anticipating any health concerns that might affect your student's safety or learning. Checked health conditions will be shared with school personnel on a "need to know" basis.

Student Name: _____ School Year: _____

School: _____ Grade: _____ Birthdate: _____

If student needs medication during the school day, an Authorization for Medications at School Form is required.

## LIFE THREATENING CONDITIONS

The nurse must know of

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z Required for School
ŏ Required Child Care/Preschool

| Date MM/DD/YY | Date MM/DD/YY | Date MM/DD/YY | Date MM/DD/YY | Date MM/DD/YY | Date MM/DD/YY |
|---|---|---|---|---|---|
| | | | | | |

**Required Vaccines for School or Child Care Entry**

ŏ z DTaP (Diphtheria, Tetanus, Pertussis)

z Tdap (Tetanus, Diphtheria, Pertussis) (grade 7+)

ŏ z DT or Td (Tetanus, Diphtheria)

ó z Hepatitis B

ŏ Hib ( ŏ H/ (t a *

**Reference guide for vaccine trade names in alphabetical order**

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1306 Dupont Street
Bellingham, Washington 98225
(360) 676-6400

## Student Housing Questionnaire

The answers to the following questions can help determine the services this student may be eligible to receive under the McKinney-Vento Act 42 U.S.C. 11435. The McKinney-Vento Act provides services and supports for children and youth experiencing homelessness. (Please see reverse side for more information)

**If you own/rent your own home, you do not need to complete this form.**

**If you do not own/rent your own home, please check all that apply below.**

- In a motel
- A car, park, campsite or similar 2 (im)-3.002 (ilaoe2 (r)-2.992Tf (r)-2.992nq 0 0 P /MCII

**McKinney-Vento Act 42 U.S.C. 11435**

**SEC. 725. DEFINITIONS**

For purposes of this subtitle:

(1) The terms enroll and enrollment include attending classes and participating fully in school activities.

(2) The term homeless children and youths ±

a. Means individuals who lack a fixed, regular and adequate nighttime residence (within the meaning of section 103(a)(1)); and

b. Includes ±

i. Children and youths who are sharing the housing of othe4 (ti)2 792 reW* nBT/TT1 12 Tf

If you have questions about attendance or need support, please talk with your school principal.

## DID YOU KNOW?

- Starting in kindergarten, too many absences (excused and unexcused) can cause children to fall behind.
- By ninth grade, regular and high attendance is a better predictor of graduation rates than eighth grade test scores.
- Absences can affect the whole classroom if the teacher has to slow down learning to help children catch up.
- Being late to school may lead to poor attendance.
- Students can still fall behind if they miss just a day or two days every few weeks.
- Missing 10 percent (or about 18 days) increases the chance that your child will not read or master math at the same level as their peers.
- By sixth grade, absenteeism is one of three signs that a child may drop out of high school.
- By being present at school, your child learns valuable social skills and has the opportunity to develop meaningful relationships with other students and school staff.
- Absences can be a sign that a child is losing interest in school, struggling with school work, dealing with a bully or facing some other potentially serious dif culty.

## WHAT YOU CAN DO

- Set a regular bed time and morning routine.
- Prepare for school the night before, nishing homework and getting a good night's sleep.
- Find out what day and time school starts and monitor the school calendar closely.
- Don't let your student stay home unless they are truly sick. Keep in mind complaints of a stomach ache or headache can be a sign of anxiety and not a reason to stay home.
- Avoid appointments and extended trips when school is in session.
- Develop back-up plans for getting to school if something comes up. Call on a family member, a neighbor, or another parent.
- Keep track of your child's attendance. Missing more than nine days could put your student at risk of falling behind.
- Talk to your child about the importance of attendance.
- Talk to your child's teachers if you notice sudden changes in behavior. These could be tied to something going on at school.
- Encourage meaningful after-school activities, including sports and clubs.

## Excused absence criteria

3OHDVH UHIHU WR SROLF\ DQG SURFHGXUH IRU PRUH GH

1. Participation in school-approved activity or instructional program
2. Absence due to illness, health condition, family emergency, religious purpose, etc.
3. Absence for parental-approved activities
4. Absence resulting from disciplinary actions or short-term suspension
5. Extended illness or health condition
6. Excused absence for chronic health condition

For more information about the Becca bill and Common School Provisions Title 28A, visit app.leg.wa.gov/RCW.

Bellingham Public Schools has provided me with a copy of this attendance information for families.3OHDVH VLJQ DQG UHWXUQ WR \RXU VFKRRO RIÀF

PARENT/GUARDIAN SIGNATURE

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