

2/15/23

Documents Needed for Registration
 Birth Certificate
 Proof of Residency
 Immunizations

Regional School Unit 16
3 Aggregate Road, Poland, Maine 04274
Tel. 207.998.2727

Elm Street School
 Minot Consolidated School
 Poland Community School
 Whittier Middle School
 Poland Regional High School

STUDENT REGISTRATION FORM

PARENT/GUARDIAN PLEASE COMPLETE THE FOLLOWING:

Registration Date: _____ Grade Entering: _____ Date of Birth: _____

Student's Full Legal Name: _____
Last First Middle

Home Address: _____

Mailing Address Number and Street or Road (if different from above): _____
Town Zip Code

Sex: Male Female Mother's Maiden Name: _____ Home Phone No: _____

Birth Information: City: _____ State: _____ Country: _____

Is Child a U.S. Citizen? Yes No If No, enter Date Entered U.S. _____ Date First Entered U.S. Schools: _____

Ethnicity: Caucasian/White Hispanic Asian/Pacific Islander African American/ Black
American Indian/Native Alaskan Please bring original Birth Certificate

Primary Language Spoken at Home: _____ TANF #: _____

English Proficiency: Native Speaker: Bilingual: Limited English Proficient:

Is child a State Ward? Yes No Is Child a State Agency Client? Yes No

Health Insurance? Do you have health insurance? Yes List Policy ID # below No

Maine Care – Insurance ID #: _____ Private – Insurance Policy #: _____

Are the Guardians of this student: Migrant workers? Yes No Military Parents? Yes No

Check one for Military: Active National Guard or Reserve Not Military Connected Unknown

Who Holds Legal Custody for this Child?

Please list Parent(s), Legal Guardian(s) and their relationship to the child (e.g. father, mother, step-father, step-mother, etc)

Full Name: _____ Relationship: _____

Mailing Address: _____

Tel. No. - Home: _____ Work: _____ Cell: _____ E-Mail: _____

No School Notification Phone No. to Call: _____

Full Name: _____ Relationship: _____

Mailing Address: _____

Tel. No. - Home: _____ Work: _____ Cell: _____ E-Mail: _____

No School Notification Phone No. to Call: _____

Full Name: _____ Relationship: _____

Mailing Address: _____

Tel. No. - Home: _____ Work: _____ Cell: _____ E-Mail: _____

No School Notification Phone No. to Call: _____

Who Does the Child Live With? *Check all that apply*

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Mother ____ Father ____ Other: _____ Legal Guardian **

**Legal Guardian Relation: _____.

If child resides with a legal guardian who is not the parent, a certified copy of the court order appointing the guardian must be attached. If a custodial parent/guardian wishes the school to comply with provisions of a court order restricting access to the child, a certified copy of the court order must be attached. If the student is an emancipated minor, A certified copy of the court order must be attached.

Other Living Arrangements: _____

Parent/Guardian declares the student is Homeless: _____

Other Children in Household: (List relationship as brother, sister, step-brother, step-sister, other)

Legal Name:	Age:	Grade:	School:	Relationship:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Emergency Contact Information: (List 3 people who may assume temporary care of your child (including Sitter) if you cannot be reached).

Name	Address	Phone	Relation	Sitter
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Parent/Guardian Certification of Residency:
I certify that the student named above lives at the residence address identified above.
If this residency information changes, I agree to bring it to the immediate attention of
Regional School Unit 16.

Required Proof of Residency Provided:
___ Utility Bill
___ Lease or Lease Agreement
___ Deed or Real Estate Tax Bill

Signature Date

Print Name

One of the above **are the only documents** that can be presented for proof of residency or person needs to go to Central Office
____ Registrar's Initials

CONTINUE FOR TRANSFER STUDENTS ONLY

Previous Enrollment Information (**Not for new 4YO or Kindergarten Registration**)

1. Previous School's Name, Address, Telephone No.:

2. Reason for transfer: _____

3. Has the child been previously enrolled in RSU16 schools? Yes ___ - If Yes, what year: ___ No ___

4. Does the child currently receive Special Services? Yes ___ - If Yes, check below: ___ No ___

Special Education ___ Title 1 ___ 504 ___ Gifted/Talented ___ Speech/Language ___ Migrant ___

Please Explain: _____

5. Has the child ever been retained? Yes ___ - If Yes, grade: ___ No ___

6. *Is the child currently:

Expelled from the school from which he/she is transferring? Yes ___ No ___

Suspended from the school from which he/she is transferring? Yes ___ No ___

7. *Did the child:

Withdraw from the school before an expulsion hearing? Yes ___ No ___

Withdraw from school before a suspension? Yes ___ No ___

*If the answer is Yes to 6 or 7 above, please attach a written statement of the circumstances. If the student has been expelled or suspended, or withdrew from school before an expulsion hearing or suspension, the student will not be allowed to enroll in RSU16 schools until the Superintendent has made a determination as to whether to admit the student, and if so, under what conditions. The applicant is hereby notified that the RSU16 school department, in accordance with 20-A.M.R.S.A., §6001-B, shall request all of the student's education and disciplinary records from the school he/she is transferring from. RSU16 may also request an oral or written report from the previous school as to whether the student has been expelled or suspended, or withdrew from school before an expulsion hearing or suspension.

If an applicant is allowed to enroll in RSU16 schools pending receipt of education and disciplinary records, such enrollment shall be considered conditional until the Superintendent has made a determination as to the student's disciplinary status in the previous school.