

### STUDENT RE-ENROLLMENT FORM

*This form is only used for students who previously attended Ravenna Coeymans Selkirk CSD.*

School Year: _____	Anticipated Start Date: _____	Date Received: _____
Student ID: _____	Previous enrollment: _____	Date Enrolled _____
	<small>Building                  Grade                  End Date</small>	

**Student Name:** \_\_\_\_\_ **Gender:**  M  F

First                                  Middle                                  Last

**Date of Birth:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ School Year when student first entered Grade 9 (if applicable): \_\_\_\_\_

**The answer you give below will help the district determine what services you or your child may be able to receive under the McKinney-Vento Act. Students who are protected under the McKinney-Vento Act are entitled to immediate enrollment in school even if they don't have the documents normally needed, such as proof of residency, school records, immunization records, or birth certificate. Students who are protected under the McKinney-Vento Act may also be entitled to free transportation and other services.**

Please check if any of the following apply to your child's living situation:

- My child and I are living with a friend, relative, or someone else because we lost our home and cannot afford housing.
- My child and I are staying in a hotel, motel or seasonal campground due to lack of alternative housing accommodations.
- My child and I are living in an emergency shelter, transitional shelter, or domestic violence shelter.
- My child and I are taking shelter in a vehicle, abandoned building, or public place unintended for sleeping accommodations.
- My child is living with an adult that is not their parent or legal guardian due to family homelessness.
- My child and I are have no fixed location for shelter and are moving from place to place.
- My child and I are living in housing that is lacking running water or electricity.
- I am a student living with a friend, non-parental relative, or someone else because I have been abandoned or denied housing by my parent/legal guardian.

**If you have checked any of the above boxes, please STOP completing this form and contact the registrar (518-756-5200 x6014) for support while registering your child.**

- None of the above scenarios apply. My child and I are living in a fixed, regular, and adequate residence.

PLEASE SELECT THE REASON FOR RE-ENROLLMENT:	Please provide these documents:	Registrar Use Only
		Rc'd/Notes
<input type="checkbox"/> Family has moved back to the RCSCSD District	<b>Two proofs of new residence:</b> ___ Mortgage Statement ___ Signed Lease Agreement ___ Purchase Contract ___ House Deed ___ School or Property Tax Bill/Receipt ___ Notarized Landlord Affidavit ___ Driver's License with <b>Current</b> Address ___ Vehicle Registration or Insurance Card ___ Utility, Phone, or other Bill (30 days) ___ Documents issued by federal, state, or local agency ___ Voter Registration Card ___ Other (Please describe):	
<input type="checkbox"/> Primary physical custody has changed	<b>Updated custody documentation or Custodial Affidavit</b>	
<input type="checkbox"/> Family is homeless & selecting RCS as district of attendance	<b>Housing Information Form</b>	
<input type="checkbox"/> Student attended a private or charter school after previously attending RCS		
<input type="checkbox"/> Other:		

Please check if any of the following have changed, and provide the information requested:		
<input type="checkbox"/> New or updated IEP or 504 Plan	Copy of most recent document	
<input type="checkbox"/> Declassification of IEP	Copy of most recent document	
<input type="checkbox"/> AIS services	Subject(s):	
<input type="checkbox"/> Counseling or other special support	Description:	
<input type="checkbox"/> Significant injuries or health changes	Updated medical history & health appraisal forms	
<input type="checkbox"/> Received additional immunizations	Updated immunization records	
<input type="checkbox"/> Custody or Order of Protection	Copy of most recent court document	

The following forms must be provided:		
<input type="checkbox"/> Release of Student Records Consent Form		
<input type="checkbox"/> Information Update Form (provided by registrar)		

I affirm that the information and documents provided in the process of re-enrolling my child for school are accurate. I understand that I am responsible for updating the Ravena Coeymans Selkirk Central School District if any of this information changes, and that I may be required to provide additional documentation at that time.

\_\_\_\_\_  
Signature of Registering Parent/Guardian

\_\_\_\_\_  
Date