



Student Residency Form Form A(R)

Student First Name, Student Middle Name, Student Last Name, Date of Birth, Address, City, State, Zip Code, County, Legal Parent/Guardian 1 Name, Phone 1, Phone 2, Address, City, State, Zip Code, County

Residency and Address Verification (Parent/Legal Guardian) - Must Supply Documentation at Time of Enrollment Non-Government Items Must Be Dated Within the Last 60 Days. Government Items Must Be Dated for the Current Year.

Checkboxes for documentation: Rental Contract or Lease/Rental Receipts, Real Estate Contract Signed by All Parties/Real Estate Deed of Trust, Current Real Estate Tax Receipt, Current Mortgage Statement, Current Employment Document w/ Address (Payroll Check, W-4, etc.), Current Bank/Credit Card Statement, Current Gov't Acknowledgement of Address (Social Security Letter, Voter Registration, TANF Letter, Personal Property Tax Receipt, etc.), Sworn Statement or Affidavit Related to Residency (Form A-2)

Residency Determination:

Resides with parent in the school district. Resides with legal guardian in the School District (copy of court ordered guardianship must be attached.) A guardian may be appointed for the sole and specific purpose of school registration (SB944)

\*\*\*\*\*OR\*\*\*\*\*

If Unable to Meet Residency Requirements, is Student Eligible Due to Special Circumstances (Under Section 167 RSMo)?

Resides with a military guardian in the school district (SB944). Resides with other family members or resides within a military support community as a resident if one or both parents are stationed or deployed outside of Missouri. Homeless child (less than 21 years of age who lacks a fixed, regular, and adequate nighttime residence) including a child who is: currently residing at a motel, hotel, car, or at a campsite because home has been damaged or because of economic reasons. currently living in temporary housing arrangement due to economic hardship. currently living in a shelter. sharing the housing of other persons due to a loss of housing, economic hardship or similar reason. Explain if similar reason:

Address or Directions Regarding Housing:

Student is an orphan. Student has one living parent. Parents do not contribute to student's support. Agriculture (all four of the following conditions must be met: owns real estate of which 80 acres or more are used for agricultural purposes, parent's residence is on the real estate, at least 35% of the real estate is in the District, parent notified District on or before June 30 that student would be attending). Parent is a teacher under contract with the District (Board policy required - Section 167.151, 168.51, RSMo). Parent is a regular employee with the District (Board policy required -- Section 163.011 RSMo). Attending school not in pupil's district of residence as a participant in an inter-district transfer program established under a court-ordered desegregation program. A ward of the state and has been placed in a residential care facility by state officials.\* Has been placed in a residential care facility due to a mental illness or development disability.\* Has been placed in a residential facility by a juvenile court.\* Has a disability identified under state eligibility criteria if the student is in the District for reason other than accessing the District's educational program. Has transferred from an unaccredited school district.

\*The District of Residence will be billed for the local tax effort for students enrolled under these circumstances.

\*\*\*\*\*OR\*\*\*\*\*

Student may qualify under Relative Caregiver agreement (Have applicant complete top portion of Form A-3) Date of Relative Caregiver Meeting. Relative Caregiver Form Accepted, Relative Caregiver Form Denied, Referred for Waiver. Student Denied Admission (Have Applicant Fill Out Waiver Request Form A-4) Date of Denial. Waiver Requested, Date of Request, Date of Student Admission





**Affirmation Regarding Prior Discipline**

**Form C(R)**

*To Be Completed Prior to Enrollment of Student*

I, \_\_\_\_\_, having affirmed that I will tell the truth, do hereby state and depose as follows:

Parent/Guardian Name

I am the parent/guardian, or other person having custody or charge of \_\_\_\_\_, seeking to enroll in North Callaway R-1 School District, and am legally authorized to make educational decisions for the student.

Student Name

I hereby certify as follows (Check one and provide all additional information requested):

**WARNING: UNDER MISSOURI LAW, THE FAILURE TO PROVIDE TRUE, ACCURATE, AND COMPLETE INFORMATION TO EACH AND EVERY QUESTION AND SUBPART THERETO MAY RESULT IN YOUR BEING CHARGED WITH AND CONVICTED OF A CLASS B MISDEMEANOR.**

- The student has **NEVER** been suspended or expelled from any school in this state or any other state for any offense relating to weapons, alcohol, drugs, or the willful infliction of injury to another student.
- The student has been suspended and/or expelled from a school in this state or another state for one or more offenses relating to weapons, alcohol, drugs, or the willful infliction of injury to another student.

***For each and every suspension or expulsion, provide the following information:***

**Offense #1:**

Name of School District & School:	Date of Offense:
Date Suspension/Expulsion Began:	Date Suspension/Expulsion is Scheduled to End (or Ended):

Nature of Offense:

**Offense #2:**

Name of School District & School:	Date of Offense:
Date Suspension/Expulsion Began:	Date Suspension/Expulsion is Scheduled to End (or Ended):

Nature of Offense:

**CONTINUED ON BACK**



**Affirmation Regarding Prior Discipline**

*To Be Completed Prior to Enrollment of Student*

**Offense #3:**

Name of School District & School:

Date of Offense:

Date Suspension/Expulsion Began:

Date Suspension/Expulsion is Scheduled to End (or Ended):

Nature of Offense:

- I hereby swear or affirm all information I have provided in this document is true, accurate, and complete to the best of my knowledge.
- I hereby certify I have provided true, complete, and accurate information for each and every suspension and/or expulsion imposed upon the student for each and every offense relating to weapons, alcohol, drugs, or the willful infliction of injury to another student.
- I understand this registration document will be maintained as part of the student’s permanent scholastic record.
- **Furthermore, I understand if I have provided any false information in this document that I may be charged with and convicted of a Class B misdemeanor.**

Parent Name

Parent Signature

Date



**Student/Staff Ethnicity and Race Data Questionnaire** *Form E(R)*

The U.S. Department of Education (USDE) requires all state and local education institutions to collect information on the race and ethnicity of public school students and staff. The federal government has developed a new way to report ethnicity and race that includes new categories. The changes should provide a more accurate picture of the nation’s ethnic and racial diversity. The new data collection format will allow individuals of multi-racial background an opportunity to select categories that better represent themselves. It also allows Hispanic populations to more accurately describe themselves, helping school communities to better serve and support them.

**Part 1: Ethnicity**

**Is This Individual Hispanic/Latino? (Choose Only One)**

- No, not Hispanic/Latino
- Yes, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race).

**Part 2: Race**

**What is the Individual’s Race? (Choose all that Apply)**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

Student/Staff Name (please print)	Parent/Guardian/Staff Signature
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District staff and parents / guardians enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting –United States Federal Register (71FR 44866). Please answer both parts of the above question on the student’s or staff member’s ethnicity and race.