

SCMS Registration Checklist for 2018-2019 School Year

Call 435-674-6474, Ext 303 or email Jennifer.morgan@washk12.org with questions and to make an appointment for registration.

The following must be presented for registration:

- A Parent/Legal guardian with a valid photo ID must be present at time of pre-registration. Proof of guardianship paperwork is required for any student not residing with biological parent/s listed on Birth Certificate.
- Birth Certificate - A copy of or the original
- Complete Immunization Record - A copy of or the original
- Proof of residence -The Parent/custodial parent or guardian with whom the student lives must provide proof of address when enrolling the student in school. Verifiable proof of address includes the following and must be dated within the last 60 days:
 - Utility bill (water, gas, TV, Power), Deed of house/lease agreement, Medical insurance card or document from a government agency stating your current physical address.

OR

 - If Parent/Guardian is subletting an apartment or home, or if more than one family shares a living space, the parent/guardian must present and affidavit or letter from the leaseholder or homeowner and attach any of the acceptable proofs of address listed above, along with a copy of a valid driver's license for that person.
- Completed student information and course request forms.
- Transfer grades and/or transcript from previous school attended.
(Only needed for registration once the school year has started)

Information regarding honors class requirements can be found on scmiddle.org under the parents menu. Honors class placement depends upon qualifications being met and if room is available in the honors classes.

Snow Canyon Middle School
1215 N Lava Flow Dr. St. George, UT 84770
STUDENT REGISTRATION FORM

Data Entry: _____ Address verified: _____
Immunizations: _____ Birth Certificate: _____
Records requested: _____ IEP / ELL
Transfer Grades: _____ Added to server: _____

STUDENT INFORMATION (PLEASE PRINT)					
Student's <u>Legal</u> last name		First	Middle	Preferred Name (if applicable)	
Gender	Birth date	Country of Birth	Grade	SSN (optional)	Home Phone
<input type="checkbox"/> M	<input type="checkbox"/> F	/ /			()
Home Street Address			City	Zip Code	
Mailing Address (if different)			City	Zip Code	

PARENT/GUARDIAN INFORMATION			
Father's Name	Place of Employment	Work Telephone	Cell Phone ()
Mother's Name	Place of Employment	Work Telephone	Cell Phone ()
Guardian's Name/Relationship (if other than natural parent)	Place of Employment	Work Telephone	Cell Phone ()
Student Lives With:	<input type="checkbox"/> Both Parents	<input type="checkbox"/> Father	<input type="checkbox"/> Mother
<input type="checkbox"/> Guardian (must have district approved guardianship established)			

IN CASE OF EMERGENCY			
Emergency Contact Name (to call if parent/guardian cannot be reached)	Home Phone	Cell Phone	Relationship to Student
	()	()	
	()	()	

List persons with phone number, <u>other than parent/guardian</u> who may check student out of school (student will ONLY be released to legal Parent/Guardian unless otherwise noted)		
Name:	Phone:	Relation to student:
Name:	Phone:	Relation to student:
Name:	Phone:	Relation to student:

ETHNICITY INFORMATION*	
Is the student Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	Ethnicity: <input type="checkbox"/> White <input type="checkbox"/> Pacific Islander/Hawaiian <input type="checkbox"/> Black/African American
*Failure to self identify will result in observer identification by SCMS <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaska Native (Tribe: _____)	
Previous School	Address, City, State
	Phone (if known) ()
	Fax (if known) ()

EMAIL ADDRESS (information will be sent electronically, including report cards. This is our main form of communication)	

My Child receives the following services (Please check all that apply)	<input type="checkbox"/> IEP	<input type="checkbox"/> 504/Heath care plan	<input type="checkbox"/> ELL	<input type="checkbox"/> Other _____
I desire a conference to discuss my student's special needs (i.e. Special Education, IEP, Medical, etc.)				<input type="checkbox"/> Yes <input type="checkbox"/> No
1. What was the primary language the student learned to speak? _____				
2. List all languages spoken or understood by student _____				
3. List all languages spoken in the home (Please do not include languages learned through foreign language programs) _____				
4. In what language do you need to receive communication from the school? _____				
5. Date entered into the U.S. school system _____				

*I acknowledge that I have reviewed or been given a copy of the Washington County School District Schools Policy and Grounds for Suspension and Expulsion as located in the School Handbook or online at scmiddle.org . (Initial)	
I certify that the above student is living with a natural parent or court-ordered guardian, and resides permanently in the attendance area of this school	
Patient/Guardian signature	Date

WASHINGTON COUNTY SCHOOL DISTRICT SAFE SCHOOLS CONDUCT STATEMENT

1. STUDENT AND PARENT/LEGAL GUARDIAN STATEMENT

The Student Applicant _____

A. Has Has Not had criminal charges filed against him/her in the past two years from the date on this statement. If so, please note the charges and explain.

B. Is Is Not the subject of a current criminal investigation. If yes, please note the charges and status.

(Parent/Legal Guardian's Signature) (Date) (Student's Signature) (Date)

Any omission, falsification, or misstatement will be considered a violation of the School District Safe Schools Policy.

2. PARENT/LEGAL GUARDIAN RELEASE FOR POLICE AUTHORITY STATEMENT

(Required for any student twelve (12) years of age or older if answer is yes in A or B of #1)

As parent/legal guardian of _____
(Student's name) (Student's date of birth)

_____ I authorize the POLICE AUTHORITY OF
(Student legal address during the last two years)

_____ to release the information requested below to (school)_____. It is understood that this information will be evaluated by the Washington County School District professional staff as part of the residency application process and will not be transferred to any other person or jurisdiction without parental permission. UTAH CODE 75-5-206 (i) (ii) UTAH CODE 53A-2-208 (3).

(Parent/Legal Guardian Signature) (Date)

Regarding (Student)_____ please list any criminal charges filed against him/her during the last two years and whether or not the student is currently the subject of any criminal investigation with your agency.

(Officer and Badge Number) (Police Department) (Date)

Washington County School District

Student Information Questionnaire

McKinney-Vento Eligibility

Washington County School District

This questionnaire is intended to address the McKinney-Vento Education Assistance Improvement Act 42 U.S.C. 11435. The answers to this questionnaire help determine the services the student is eligible to receive.

1. Is your current address a temporary living arrangement? _____ Yes _____ No
2. Is this temporary arrangement due to loss of housing or economic hardship? _____ Yes _____ No

If you answered YES to either of the above questions, please complete the remainder of this form.

If you answered NO to both questions, you may stop here.

Which of the situations below apply to the student?

- H1 Student is sharing a residence with one or more families temporarily.
- H2 Student is living in a motel or hotel.
- H3 Student is living in a shelter (domestic violence, emergency, or transitional housing units).
- H4 Student is living in a car, park, campground, or public place.
- H5 Student is living in a place without adequate facilities (running water, heat, electricity).
- H6 Student is seeking enrollment without an accompanying parent (not in foster care).

Student is “physically” living with a parent or guardian in the above situation? ____ Yes ____ No

Yes = Accompanied N = Unaccompanied

- **IF a false claim is made about your living situation, enrollment may be affected.**
 - ***Please notify the school if your living status changes.**
-

Please list all your children that will be enrolled in schools in the Washington County School District at this time:

Student's Name	Student's School	Grade	Gender	Date of Birth

Parent signature: _____ Today's Date: _____ *Form updated 5/2/2016*

*** Office Staff ** Please make enough copies for the parent to take to the other schools within our district. Thank you! Homeless Liaison*



Official Request for Education Records

SAFE SCHOOLS RELEASE OF RECORDS

(Enrollment in Washington County School District does not automatically guarantee activity/athletic eligibility. Utah High School activities Association transfer rules apply)

For office use:
Faxed _____
Mailed _____
Request: 1 st 2 nd 3 rd

Student Last Name	Student First Name	Birth Date	Grade
Previous School Attended	City & State of Previous School	Phone # & Fax # of Previous school	
		Phone: Fax:	

For office use:

Please fax or email the following records to 435-628-3289 or jennifer.morgan@washk12.org

Birth Certificate
 Immunization Records
 Transcript and Grades to date of leaving
 Test Scores
 Behavior records
 Special Education Records (IEP, Psych Eval)

Please send cumulative file and Sped records to:

Snow Canyon Middle School
Attn: Registrar
1215 N Lava Flow Dr
St George, Utah 84770
Phone: 435-674-6474

You are authorized to release records relative to my child's conduct, specifically: (1) suspensions; (2) expulsions; (3) safe school violations; and/or (4) truancy problems. It is understood that these records may be used as part of the application process. These records will be for the use of Washington County School District professional staff and will fall under the guidelines of the Family Education Rights and Privacy Act (FERPA).

<input type="checkbox"/> Urgent, student waiting to register. <input type="checkbox"/> At earliest convenience.
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Parent/Legal Guardian Signature _____ **Date:** _____

Federal Law 99:31 No parent or guardian signatures are required to send educational files to another bona fide educational agency.

Snow Canyon Middle School

9th Grade Registration 2018-2019

Student Name: _____

DIRECTIONS: In pencil circle your class choices below, enough to equal 8 credits or Release Time plus 7 credits. (Registration for students receiving Special Ed. Assistance will be done by the Special Ed. Department).

Course Catalog: Available online at www.scmiddle.org under the GUIDANCE link.

Honors Classes: Information available online at www.scmiddle.org under the PARENT link

REQUIRED CLASSES (4.5 Credits)

Science class

- 3240 Earth Systems (1.0)
3525 Honors Biology** (1.0)

Language Arts class

- 4090 Language Arts 9 (1.0)
4095 Honors Language Arts 9* (1.0)

Math class (1.0)

- 5809_M Secondary Mathematics 1 (1.0)
5809_{MH} Honors Secondary Mathematics 1* (1.0)

Social Science class

- 6200 Geography For Life (.5)
6205 Honors Geography For Life* (1.0)

PE Class (Choose one)

- 7700 Physical Skills & Technique (.5)
7706 Physical Skills 1 (dance/yoga/water aerobics) (.5)

Required

- 8594 Business Office Specialist (.5)

Aides (must have a GPA of 3.0 or higher)

- PRMT Peer Mentor (academic) (.5) (Math~LA~Spanish)
6352 Media Aide (.5)
6351 Office Aide (.5)
6358 Peer Tutor (.5)
6353 Shop Aide (.5)
6350 Teacher Aide (.5)

Healthy Lifestyle

- 7770 Body Toning (.5)
7782 PE Weight Training I (.5)
7741 Weight Training Adv. Fall* (.5)
7742 Weight Training Adv. Spring* (.5)

Career & Technology Education

- 8475 Apparel Design & Production 1 (.5) \$\$
8469 Fashion Design Studio (.5) \$\$
8477 Food & Nutrition I (.5) \$\$
8675 Intro Communication Technology (.5)
8645 Intro to Manufacturing Technology (.5) \$\$
8603 Intro to Construction Tech (.5) \$\$

* = Pre-requisite

**=Must also have Honors Secondary Mathematics

\$\$ = Fee required

ELECTIVES (Choose 3.5 Credits or 2.5 credits + Seminary)

Seminary

- 0200 Release Time (0) full year class

Fine Arts

- 1192 Art 2A (.5) \$\$
1191 Art 2B* (.5) \$\$
1750 Band II Concert (1.0)
1811 Band III Symphonic* (1.0)
1610 Chorus I-Mixed (Beg/Int) (1.0)
1630 Chorus II-Mixed (Adv)* (1.0)
1670 Chorus II-Girls (Adv)* (1.0)
1870 Guitar (Beg) (.5) (Must furnish own guitar & stand)
1760 Intermediate Orchestra (1.0)
1770 Percussion* (1.0) \$\$
1940 Social Dance (.5) (may count as Healthy Lifestyle credit)
1950 Theater Foundations I (.5)
1960 Theater Foundations II* (.5)
1970 Theater Foundations III* (.5)

Electives (cannot choose more than one World Language)

- 3670 Aerospace Science (JROTC) (1.0)
4600 Chinese I (1.0)
4610 Chinese II (1.0)*
4740 Spanish I (1.0)
4750 Spanish II (1.0)*
4SDI9 Spanish 5 DLI Honors (1.0)*

Select 4 Alternate Course Numbers

(Not already selected courses)

- 1 - _____ 3 - _____
2 - _____ 4 - _____

Signature indicates approval of registration for next year. Approved schedule changes will cost \$10.00 per class change.

Student Signature

Parent Signature

Public Education Online:

The statewide Online Education Program [www.schools.utah.gov/edonline] allows students to earn high school graduation credit through online providers. Students may access high quality online learning regardless of where they attend school, language, residence, family income, or special needs. This program allows students to acquire knowledge and technology skills for a digital world. Students can utilize technology to customize education and to learn in their own style, at their own pace. They can access learning virtually at any time and in any place. Students may accelerate academically. They can customize their schedules to better meet their academic goals. Quality learning options better prepare students for post-secondary education and vocational or career opportunities.

9th Grade Advisory Registration 2018-2019

★ Please select **2.0 credits ONLY** of Advisory classes for the 2018-2019 school year

Full Year Class, A and B day (Choose your 3 alternate classes at the bottom and you are done!): <input type="checkbox"/> Study Hall (2.0)			➡ Subtotal: _____
Full Year Classes: <input type="checkbox"/> Book Club on the Big Screen (1.0) <input type="checkbox"/> Study Hall (1.0) <input type="checkbox"/> Scrabble & Scattergories (1.0) <input type="checkbox"/> Chess (1.0) <input type="checkbox"/> Walking Warriors (1.0) <input type="checkbox"/> Sustained Silent Reading (1.0) <input type="checkbox"/> Music Practice (1.0)			➡ Subtotal: _____
Half Year Classes: <input type="checkbox"/> Book Club on the Big Screen (.5) <input type="checkbox"/> Study Hall (.5) <input type="checkbox"/> Scrabble & Scattergories (.5) <input type="checkbox"/> Chess (.5) <input type="checkbox"/> Walking Warriors (.5) <input type="checkbox"/> Sustained Silent Reading (.5) <input type="checkbox"/> Music Practice (.5) <input type="checkbox"/> Science Olympiad (.5)			➡ Subtotal: _____
Quarter Year Classes: <input type="checkbox"/> Art Club (.25) <input type="checkbox"/> Study Hall (.25) <input type="checkbox"/> Scrabble & Scattergories (.25) <input type="checkbox"/> Chess (.25) <input type="checkbox"/> Walking Warriors (.25) <input type="checkbox"/> Sustained Silent Reading (.25) <input type="checkbox"/> Creative Writing (.25) <input type="checkbox"/> Music Practice (.25)			
You may choose 4 Intramural classes ONLY—1 per quarter:			
Quarter 1: <input type="checkbox"/> Volleyball (.25) <input type="checkbox"/> Pickleball (.25)	Quarter 2: <input type="checkbox"/> Pickleball (.25) <input type="checkbox"/> Flag Football (.25)	Quarter 3: <input type="checkbox"/> Basketball (.25) <input type="checkbox"/> Soccer (.25)	Quarter 4: <input type="checkbox"/> Ultimate Frisbee (.25) <input type="checkbox"/> Outdoor Recreation (games, nature hike, outdoor ethics) (.25)
			➡ Subtotal: _____
			➡ TOTAL credits must equal 2.0: _____

Alternate Classes (Please list 3 alternate classes that were NOT chosen above, that will only be used if your first choice classes fill up. You may NOT choose Science Olympiad as an alternate.) 1 - _____ 2 - _____ 3 - _____
Signature indicates registration approval of Advisory classes for the 2018-2019 year. Student Signature: _____

Snow Canyon High School Diploma	Regents Scholarship Core Course of Study*	Regents Scholarship Requirements
<ul style="list-style-type: none"> • Language Arts: 4.0 credits • Math: 3.0 credits • Science: 3.0 credits • Social Science: 3.0 credits • Fine Arts: 1.5 credits • Physical Education: 1.5 credits • Health: 0.5 credits • CTE: 1.0 credits • Business Office Specialist: 0.5 credit • Financial Literacy: 0.5 credit • Electives: 13.5 Credits <p style="text-align: center;">Total: 32 Credits</p>	<ul style="list-style-type: none"> • Language Arts: 4.0 credits • Math: 4.0 credits (progressive) • Science: 3.0 credits (Biology, Chemistry, Physics) • Social Science: 3.5 credits • Foreign Language: 2.0 credits (9-12 grade) <p style="text-align: center;">PLUS SCHS GRADUATION REQUIREMENTS</p> <ul style="list-style-type: none"> • Fine Arts: 1.5 credits • Physical Education: 1.5 credits • Health: 0.5 credits • CTE: 1.0 credits • Business Office Specialist: 0.5 credit • Financial Literacy: 0.5 credit • Electives: 10 Credits <p style="text-align: center;">Total: 32 Credits</p>	<ul style="list-style-type: none"> • Complete the Regents Scholarship Core Course of Study • 3.3 GPA or higher • ACT score of 22 or higher • Fill out the FAFSA • Graduate from a Utah high School • Enroll in 15 college credits Fall semester after graduation (or meet deferment requirements) • Meet all deadlines <p>Up to \$400 in additional money can be earned by opening up a UESP account and depositing \$100 at ages 14, 15, 16, 17 and this program will match your contribution.</p> <p>**Award amounts vary and are subject to funding.</p>

*By completing the Regents Scholarship core course of study, students will be better prepared for college classes and be eligible for the Regents Scholarship.

Schedule Change Policy

Schedule changes will be made:

- The week before school starts through the first week of school
- The first week of second semester (after Christmas break)
- If a student does not have a complete schedule (less than 8 credits)
- If a student is physically unable (by a doctor's note) to participate in the class
- If a student was placed in the wrong course by mistake
- By teacher or counselor request

**\$10 Schedule
change fee
per class**

Schedules will NOT be changed for homeroom classes, advisory classes, or to be with friends.

All other schedule changes will be based on availability, as well as teacher, parent, and counselor permission.