

Dixon High School

Enrollment Checklist



Onslow County Schools require documentation for student enrollment. The parent or legal guardian*, as appointed by the court, is the only person that can legally enroll a student. When enrolling a student, the parent or legal guardian will need to provide the following documents:

FOR OFFICE USE ONLY: (Staff initials required)

Student's Name _____ DOB _____

Last Name First Name Middle Name

Grade: 9th 10th 11th 12th

For Staff Only: (Circle Yes or No) **Items with an asterisk are needed for registration*

- * YES/NO **Proof of residence** in our district (current electric bill, water bill)
 - The proof of residence must be in the name of the parent or legal guardian or in the name of the friend or relative with whom you are residing.
 - If residing with a friend or relative, you must have a notarized statement with the name and address.
- * YES/NO **Birth Certificate**
- * YES/NO **Immunization Record** - *must be turned in 30 days after enrollment*
- * YES/NO **Photo Identification** of the parent or legal guardian
- YES/NO **Social Security Card** (if available)
- * YES/NO **Custody Papers** (if applicable)
 - *The legal guardian/custodian is the person or agency that has been awarded legal custody of the student (s) by a court. A notarized statement or power of attorney will not be accepted to transfer custody. Legal guardians/custodians will need to provide court ordered custody papers at the time of enrollment.
- * YES/NO **Student Registration Form**
- * YES/NO **Record Request Form**
- * YES/NO **Discipline Affidavit** (notarized) REQUIRED PRIOR TO STARTING SCHOOL
 - If NO is circled, do not accept the packet. Return to parent. The student will not be enrolled.
- * YES/NO **Health Assessment** (first time student to NC) - *must be turned in 30 days after enrollment.*
- * YES/NO **Transcript with withdraw grades** (if applicable) - *we will send records request to obtain transcript/records*
- * YES/NO **Special Education Records, IEP or 504** (if applicable)

This document must be presented to the school at the time of enrollment.

Enrollment documents have been verified during registration prior to parent/legal guardian exiting the campus.

Staff Signature: _____ Date _____

Parent/Legal Guardian Signature: _____ Date _____

ONSLOW COUNTY SCHOOLS REGISTRATION FORM

The domicile of a student under 18 years of age is presumed to be the domicile of his/her parents/legal guardian/custodian as defined by the General Statutes of North Carolina. *The legal guardian/custodian is the person or agency that has been awarded legal custody of the student (s) by a court. A notarized statement or power of attorney will not be accepted to transfer custody. Legal guardians/custodians will need to provide court ordered custody papers at the time of enrollment.

Registration Date:		School:		Social Security # (Optional):		Country of Birth:	
Student's Full Name:							
Ethnicity:		Race:		American Indian or Alaskan Native		Gender:	
<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino		<input type="checkbox"/> (check all that apply) <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Mother & Father		<input type="checkbox"/> Native Hawaiian/ Pacific <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Other		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Student Lives With:							
Address of Parent With Whom Student Resides:							
Does this student have an IEP?		Does this student have a 504?		Does an AIG Plan (DEP) exist for this student?		Does student have any health issues/concerns?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Specify all medications required on a daily basis:							
HOME LANGUAGE SURVEY OF STUDENT							
What is the first language the student learned to speak?				What language does the student speak most often?			
What language is most often spoken in the home? _____ Date first enrolled in any U.S school (Private or Public, but not Pre-K) _____							
Does a court order exist which restricts the student's contact with any person (s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, must provide court order _____							
Name and address of last school attended: _____							
Has this student ever attended another North Carolina School? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, what is the last North Carolina school attended and when did they leave? _____							
Mother's Name:		Father's Name:		Address:		Work #:	
Email:		Email:		Employer:		Home #:	
Address:		Address:		Cell #:		Work #:	
Employer:		Employer:		Cell #:		Work #:	
Cell #:		Home #:		Work #:		Work #:	
EMERGENCY INFORMATION (In case of emergency, other than parent)							
Contact Name:		Contact Name:		Physician Name:		Physician Number:	
Contact Phone:		Contact Phone:		Physician Name:		Physician Number:	
Please list Any School Age Siblings							
Student Name:		Student Name:		Student Name:		Student Name:	
Grade:		Grade:		Grade:		Grade:	
School Attending:		School Attending:		School Attending:		School Attending:	
PARENT ACKNOWLEDGEMENT							
I am aware that I must provide _____ within 30 calendar days to avoid suspension/exclusion of my child from school. I certify that all of the above is correct to the best of my knowledge. I have/have not received the Student Handbook, revised Discipline Policy and Bus Regulation Handbook. Athletic eligibility may be delayed and is conditional upon parent providing the required documents.							
Signature of Parent:				School Counselor/Designee Signature:			
** OFFICE USE ONLY **							
Grade Level:		Teacher:		AM Bus		PM Bus	
Health Assessment:		Logged in Book:		Enrollment Code:		Discipline Affidavit:	
Date Records Requested:		Report Card:		Withdrawal Form Presented:		Student ID #:	
AM Bus		PM Bus		Birth Certificate:		Immunization Record:	
Enrollment Code:		Discipline Affidavit:		Court Order:		Date of Order:	
Report Card:		Withdrawal Form Presented:		Photo ID of Parent/Legal Custodian:		Tuition Student	

DIXON HIGH SCHOOL

"HOME OF THE BULLDOGS"

160 Dixon School Road - Holly Ridge, NC 28445

Phone: 910-347-2958 - Fax: 910-347-3932

Email: Katherine.hardy@onslow.k12.nc.us

Curtis Ehmann
Principal

Nelson Blair
Assistant Principal

Stacy Morton
Assistant Principal

Joe Marks
Athletic Director

Yulissa Balsamo
Counselor (12th)

Courtney Abadiotakis
Counselor (10-11th)

Marc Hart
Counselor (9th-10th)

Kathy Hardy
Guidance Secretary

Kelly Hudler
Data Manager

Kim Edens
Secretary/Treasurer

To: Guidance/Data Manager at _____

Phone: _____ Fax: _____

The following student(s) have enrolled at our school. Please forward the following information as soon as possible:

Name: _____ Grade _____ DOB _____

Name: _____ Grade _____ DOB _____

Name: _____ Grade _____ DOB _____

I give permission to release the information listed below to Dixon High School.

Parent Signature: _____ Date: _____

- Transcript
- Custody Paperwork / Court Documents (If Applicable)
- Current Grades and Withdraw Date
- Immunization Records
- Birth Certificate
- Attendance
- Any Testing and Placement Data
- Copy of 504 plan (If Applicable)
- Exceptional Children's Records/Current IEP (If Applicable)
- Discipline Records

Thank you for your assistance.

Signature of School Official/Title

Parental consent is not required when records are requested by Authorized School Personnel to another school system. (Federal Law 99.31)

1st Request: _____

2nd Request: _____

3rd Request: _____

DISCIPLINE AFFIDAVIT



_____, appearing before the undersigned notary and being duly sworn, says that:

1. I am the **natural parent/legal guardian/custodian** (circle one) of _____, a transfer student presented for enrollment in the Onslow County Schools.
2. _____ **has/has not** (circle one) been adjudicated delinquent or convicted of a felony in the State of North Carolina or in any other State. If the student has been adjudicated delinquent/convicted of a felony, provide details: _____
3. _____ **is/is not** (circle one) currently under a period of expulsion from any public, private or charter school in the State of North Carolina or any other State. If the student is currently under a period of expulsion, provide details: _____
4. _____ **is/is not** (circle one) currently under a period of suspension from any public, private or charter school in the State of North Carolina or in any other State. If the student is currently under a period of suspension, provide details: _____

I am the adult with whom the student is residing and will make all decisions relating to the student's education including, but not limited to, any decisions relating to placement, services, field trips, medical treatment, grading and reporting, discipline, participation in extracurricular activities, and participation in athletics and I agree to be financially responsible for the student.

I understand that completion of this affidavit is required by statute and that if the information provided is false, the student may be removed from school. Removal from school shall be subject to the right of appeal in accordance with board policy.

I UNDERSTAND THAT I MAY BE FOUND GUILTY OF A CLASS I MISDEMEANOR AND MAY HAVE TO PAY THE ONSLOW COUNTY SCHOOLS AN AMOUNT EQUAL TO THE COST OF EDUCATING THE CHILD IF I HAVE PROVIDED FALSE INFORMATION IN THIS AFFIDAVIT.

Parent/Legal Guardian/Custodian Signature

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____.

(Official Seal)

Notary's Signature

My commission expires: _____, 20_____.

Legal Authority: NCGS 115C-366(a4)
