BELMONT-REDWOOD SHORES SCHOOL DISTRICT
Office of Student Services

NEW STUDENT REGISTRATION CHECKLIST
2008-2009 School Year

Name of Student _____ Grade _____ School _____

Instructions: All items below are needed to complete registration. I have read this checklist and I understand that my child will not be counted as admitted to the school until all items are completed and immunizations are up to date according to state regulations.

Note: The Belmont-Redwood Shores School District has limited space at each of the schools. This situation may require that students be assigned to a school other than the school of residency. Limited space also makes it necessary that the District insure that students attending our schools are residents of the District.

Parent/Guardian Signature _____ Date _____

1. ❑___ Parent's/Guardian's Driver's License (or other personal identification, as needed)

2. ❑___ Student's original birth certificate or passport

3. Proof of Residency Documents:
   - ❑___ a. Current original utility documents from two different sources. Installation papers or bills are acceptable.
   - ❑___ b. **One of the following:**

      1) Residents who are home owners:
         Grant Deed or current property tax bill

      2) Residents who are renters:
         Current rental or lease agreement

      3) Other living arrangements:
         (a) Deed, property tax bill, current rental or lease agreement of person with whom you are living and
         (b) Notarized Verification of Residency Form

4. ❑___ Student Registration Form

5. ❑___ Physical (mandatory within 18 months prior to entering 1st grade)

6. ❑___ Immunization record (polio, diphtheria, chickenpox, measles, mumps, rubella, & Hepatitis B is required; TB is optional) See attached immunization flyer. Some admissions may be conditional.

7. ❑___ Oral Health Assessment/Waiver Request Form

For Office use only: Secretaries, please check and date each item when it is received. Indicate dates of initial registration and completed registration below.

Completed Registration Date:
Registration was initiated on _____ Date

All items have been received and registration was completed on _____ Date _____ Time

_____
Signature of Principal or designee/Date

Attachment: Guide to Requirements of the California School Immunization Law Form