

NEW STUDENT REGISTRATION CHECKLIST

NAME: _____ ID#: _____

TRANSFERRED
FROM: _____

GRADE: _____ HOMEROOM ASSIGNMENT: _____

- _____ ENTERED IN COMPUTER
- _____ SIGNED AUTHORIZED RELEASE OF RECORDS FORM
- _____ THREE (3) PROOFS OF RESIDENCY
- _____ RECEIVED CUSTODY DOCUMENTS
- _____ SEND FOR RECORDS (DATE: _____)
- _____ RECEIVED RECORDS (DATE: _____)
- _____ MISSING GRADES TO TEACHERS
- _____ RECEIVED HEALTH RECORDS
- _____ IEP / TEAM REPORT ON FILE
- _____ REGISTRATION / RESIDENCY SENT TO TRUANCY OFFICER
- _____ RECEIVED STUDENT HANDBOOK
- _____ RECORDED IN REGISTRATION LOG BOOK
- _____ P149 LABEL - VERSION 5 _____ P 149 LABEL - VERSION 2
- _____ PERMANENT LABELS AFFIXED
- _____ RETURNED EMERGENCY MEDICAL FORMS
- _____ RETURNED LUNCH APPLICATION FORMS
- _____ DISADVANTAGEMENT RECORDED IN EMIS
- _____ NOTIFICATION TO NURSE
- _____ FILE COMPLETE