مرحبًا بكم في مدارس سينسيناتي العامة

المستندات التالية مطلوبة عند تسجيل الطفل للالتحاق بمدارس سينسيناتي العامة.

- حزمة معلومات تسجيل الطفل
- شهادة الميلاد أو جواز السفر
- سجل التعليم الخاص بالطفل
- أحدث تقرير مدرسي للطفل (غير مطلوب لمرحلة رياض الأطفال)
- برنامج التعليم الفردي/تقرير تقييم للطفل

- دفتر علامات الطفول من المدرسة المخول منها
- هوية تحمل صورة لولي الأمر/الوصي

أحد تزوير وثيقة أثبات إقامة وثيقة أو وثيقة أخرى مقدمة مسبقة (إذا كانت مقدمة قبل تزوير وثيقة إثبات إقامة وثيقة)

- إثبات الوصاية (يتعين على الوصي القانوني تقديم الوثائق القانونية للوصاية على الطفل).

يجب توفير وثيقة إثبات إقامة واحدة (1) على أن تحمل اسم الوصي.

مثال: عند الإيجار أو الرهن الحالي الذي لا يتزوير تاريخ صدوره 30 يومًا، أو فاتورة مرفقة بخلاف الكيل التلفزيوني، ووثيقة قانونية صادرة عن جهة حكومية أمريكية مثل دائرة الإيرادات الداخلية أو إدارة الضمان الاجتماعي أو وزارة شؤون المحاربين القدامى.

- الأقرار الخفي لولي الأمر/الوصي

يتعين على ولي الأمر/الوصي القانوني إتمام عملية التسجيل بنفسه. ويجب إلقاء جميع المستندات السابقة بحزمة معلومات تسجيل الطفل الكاملة.

هذا القسم مخصص للاستخدامات البديلة كلاً من: 1. مدارس

- اختيار المدارس - يرجى اختيار حتى خمس (5) مدارس:

1. ____________________________
2. ____________________________
3. ____________________________
4. ____________________________
5. ____________________________

شكراً لكم على اختيار مدارس سينسيناتي العامة!

Burnet Avenue, Cincinnati, OH 45219
To Be Completed By Cincinnati Public Schools Employee

1. **Check.** Confirm the following statements related to the administration of Ohio's language usage survey:

- [ ] The district or school presented the language usage survey, to the extent practicable, in a language and form that the parent or guardian understood.

- [ ] The district or school informed the parent(s) or guardian(s) of the form’s purpose. The language usage survey is used only to understand students’ linguistic experiences and educational background.

- [ ] The district or school reports information from the language usage survey in the appropriate Educational Management Information System (EMIS) records.

- [ ] For students enrolling from other U.S. schools and districts, school officials request previous language survey data and refer to the information when identifying English learners.

- [ ] Results of the language usage survey are kept with the student's cumulative records and follow the student if he/she transfers to another district or school.

2. **Record.** Indicate responses from the language background survey (page 2) in table below.

<table>
<thead>
<tr>
<th>Student's native language</th>
<th>What was this student’s first language?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student's home language</th>
<th>What language does this student speak most frequently?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Potential English learner</th>
<th>A language other than English is listed for any of the 3 questions in the language background section.</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Yes. Assess the student's English proficiency.</td>
<td>[ ] No. Do not assess the student's English proficiency.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Immigrant student status</th>
<th>Immigrant = Student born outside of U.S. and has attended U.S. schools for less than 3 years.</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Yes, the student is an immigrant child.</td>
<td>[ ] No, the child is not an immigrant child.</td>
</tr>
</tbody>
</table>

3. **Validate.** Complete the information below.

Signature of validating school employee

Date (mm/dd/yyyy)

Printed name of validating school employee

Name of school or school district
## Student Registration Information Form

**CPS Employee - Employee ID Number**

---

**Important:** Signature required at bottom of Page

### Parent Information

- **Name**
- **Gender** (Male/ Female)
- **Birth Date**
- **City**
- **State**
- **Zip Code**
- **Relationship to Student**

### Student Information

- **Birthdate**
- **School Name/ Code**
- **Entering Grade Level**
- **Enrollment Reasons (Check One)**
  - Resident School District (if not CPS)
  - Not in Ohio public/charter schools since 2003
  - From Ohio public charter school
  - From nonpublic school in Ohio
  - From outside Ohio (Tuition)
  - Outside Ohio (Special Education)
  - Other

### Additional Emergency Contacts

- **Relationship to Student**
- **Primary Care Doctor & Phone**
- **Cell Phone**

---

**Welcome to Cincinnati Public Schools**

---

**Student Registration Information Form**

---

**Teacher or Counselor**

---

**Parent/Guardian**

---

**Student**

---

**Parent/Guardian**

---

**Enrollment Reasons (Check One)**

---

**Additional emergency contacts? Use back of this page.**

---

**Emergency Contacts**

---

**CPS Employee - Employee ID Number**
Has your child ever received formal education outside the United States? ☐ Yes ☐ No
If yes, how many years/months? ________________________

If yes, what was the language of instruction? ☐ Yes ☐ No

If yes, when did your child first attend a school in the United States?
Day/Month/Year ________________________

Do you have any additional information to share about your child’s educational background?

Additional Information:

Share information to help us understand your child’s language experiences and educational background.

---

A completed language usage survey is required for all students upon enrollment in Ohio schools. This information will tell school staff if they need to check your child’s proficiency in English. Answers to these questions ensure your child receives the education services to succeed in school. The information is not used to identify immigration status.

Indicate your language preference so we can provide an interpreter or translated documents at no cost when you need them. All parents have the right to information about their child’s education in a language they understand.

In what language(s) would your family prefer to communicate with the school?

Language Preferences:

- [ ] Arabic
- [ ] Bengali
- [ ] Chinese
- [ ] French
- [ ] German
- [ ] Spanish
- [ ] Urdu
- [ ] Other ________________________ Language

If you choose Other, please specify ________________________

Additional Information:

Additional space needed? Use back of this page.

Share information to help us understand your child’s language experiences and educational background.

---

Has your child attended school in the United States? ☐ Yes ☐ No

If yes, has your child attended school in the United States? ☐ Yes ☐ No

If yes, what was the language of instruction? ☐ Yes ☐ No

If yes, were you the only Englishspeaking student? ☐ Yes ☐ No

If yes, when was your child born? Date ________________________

Additional Information:

Share information to help us understand your child’s language experiences and educational background.

---

What was this student’s first language? (first language)

What language is most often spoken by adults at home? (home language)

What language does this student speak most frequently? (primary language)

What was this student's first language? (first language)

Additional Information:

Share information to help us understand your child’s language experiences and educational background.

---

An additional language usage survey is required for all students upon enrollment in Ohio schools. This information will help school staff identify students who qualify for support to develop language proficiency.

Information about your child’s language background helps us identify students who qualify for support to develop the language skills necessary for success in school. Testing may be necessary to determine if language supports are needed.

If you have any questions or concerns, please feel free to contact your child’s teacher or principal.

_____________________________ Student’s Name

Additional Information:

Share information to help us understand your child’s language experiences and educational background.

---
### Prior Education

List student’s previous schools, beginning with most recent, including preschool:

<table>
<thead>
<tr>
<th>From – To</th>
<th>Grades</th>
<th>School Name</th>
<th>Address (Street, City, State, Country)</th>
</tr>
</thead>
</table>

### Kindergarten Experience

- **Half day/نص يوم**
- **All Day/يوم كامل**

### Siblings

<table>
<thead>
<tr>
<th>First Name/الاسم الأول</th>
<th>Last Name/الاسم الأخير</th>
<th>Gender/النوع</th>
</tr>
</thead>
<tbody>
<tr>
<td>Middle Name/الاسم الأوسط</td>
<td></td>
<td>Female/أنثى</td>
</tr>
<tr>
<td>Age/العمر</td>
<td>Grade/الصف</td>
<td></td>
</tr>
</tbody>
</table>

---

**Note:** Additional space needed? Use back of this page.
### Student's Name/الاسم الطالب

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Father/والد

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Mother/الأم

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Other/أخرى

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Guardian/وصي قانوني

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Custodial Parent/والد الحاضن

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Surrogate Parent/والد بالتبني

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Grandparent/الجد/الجدة

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

#### Foster parent/رفيعي رعاية

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Address/العنوان

<table>
<thead>
<tr>
<th></th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
<th>☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>City/المدينة</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State/الولاية</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zip Code/الرمز البريدي</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone/الهاتف</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cell Phone/الهاتف الجوال</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address/عنوان البريد الإلكتروني</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work Address/عنوان العمل</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work Phone/هاتف العمل</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### District of Residence/مقاطعة الإقامة

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### District of Primary Residence/مقاطعة الإقامة الأساسية

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Caregiver Authorization/تخويل مقدم الرعاية

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Grandparent POA/وصي قانوني

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Migrant Worker/عامل مهاجر

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Yes/نعم

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### No/لا

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Marital Status/الحالة الاجتماعية

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Divorced/متزوج

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
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- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Widowed/أرمل

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Separated/منفصل

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Widowed/أرمل

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Unmarried/لا

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Email Address/عنوان البريد الإلكتروني

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

### Work Address/عنوان العمل

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

- [ ] ☐
- [ ] ☐
- [ ] ☐
- [ ] ☐

**If you check Separated or Divorced, we require current legal documentation related to the children.**

*If foster parent, obtain a current copy of court order showing district of responsibility. Retain in cumulative file.*

**If address is different from student’s address; addresses required for natural or adoptive parents.**

***If parent is not custodial, include copy of Grandparent Power of Attorney (POA) and Caregiver Authorization.**

*If foster parent, obtain a current copy of court order showing district of responsibility. Retain in cumulative file.*
Questions Addressing McKinney-Vento Act

1. Does the student require mobility assistance? (i.e., wheelchair, etc.)
2. Has the student ever had an ETR (Education Team Report)?
3. Does this student have a current IEP (Individualized Education Program)?
4. Does the student have a 504 Accommodation Plan?
5. Did the student receive Special Education related services in most recent school?
6. Did the student receive Gifted services in most recent school?
7. If Yes, is there an evaluation form available?
8. Did the student ever have an ETR (Education Team Report)?
9. If Yes, is there an evaluation form available?
10. If Yes, was the special education related services during the most recent school year?

Temporary Living Arrangements

- Doubled up with family or friend
- Unaccompanied youth
- Participated with a family or friend
- Stayed with a friend or relative

If answers to both of these questions is Yes, the student is entitled to immediate enrollment.

To Staff:
If yes to questions above, fax this page and Page 1 to Project Connect: 363-3220.

If No, would you like to sign up for one?

To Staff:
If new PowerSchool account, give copy of this page and Page 1 to PowerSchool Coordinator at your school.
To Staff: Please fax this page to CPS’ Communications and Engagement Office: 363-0025.

I understand that any inaccurate information provided about this student on any page of this Student Registration Information Form may result in a change of grade level, a change of class, or an immediate transfer or withdrawal from this school.

_________________________ Parent/Guardian's Signature

Request to Restrict Privacy Information

Parents, legal guardians, or students age 18 or over may refuse to allow CPS to release Directory Information. Please indicate if you wish to restrict CPS from releasing Directory Information on the student named below by checking the appropriate box and returning this form to your child's school.
**Cincinnati Public Schools Student Registration**

<table>
<thead>
<tr>
<th>Information Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s Name/</td>
</tr>
<tr>
<td>(Print) Student's Last Name/</td>
</tr>
<tr>
<td>Date of Birth/</td>
</tr>
<tr>
<td>Signature/</td>
</tr>
</tbody>
</table>

**Purpose of Release:**

CPS may release directory information about my child to:

- Parents and guardians
- School personnel
- A person serving as an agent of the school
- Governmental agencies
- Accrediting organizations
- Organizations engaged in educating children

**Military Recruiters:**

Informal inquiries may be sent to the Family Policy Compliance Office at this email address: FERPA@ed.gov

**FERPA Violation:**

Parents and/or eligible students who believe their rights under the Federal Education Rights and Privacy Act (FERPA) have been violated may file a complaint with:

- www.ed.gov/offices/OM/fpco

**Consent:**

By signing below, I authorize the release of records pertaining to my child.

<table>
<thead>
<tr>
<th>Name (Print) Parent/Guardian or Student 18 years old/</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name/Last Name/ (Print) Middle Initial/</td>
</tr>
<tr>
<td>Date of Birth/</td>
</tr>
<tr>
<td>Address/</td>
</tr>
<tr>
<td>City, State, Zip Code/</td>
</tr>
<tr>
<td>Telephone No./</td>
</tr>
<tr>
<td>Fax No./</td>
</tr>
<tr>
<td>Grade Level/</td>
</tr>
</tbody>
</table>

**Please Note:**

- The school may release directory information about your child to the following categories:
  - Parents and guardians
  - School personnel
  - A person serving as an agent of the school
  - Governmental agencies
  - Accrediting organizations
  - Organizations engaged in educating children

- No directory information shall be released to the following categories unless the school has written permission from the parent/guardian:
  - Military recruiters

- Information may be released to
  - Governmental agencies
  - Accrediting organizations
  - Organizations engaged in educating children

**Check Box:**

- [ ] I am the student, and I am 18 years of age or older.
- [ ] I am the parent, guardian, or custodian of the student, and the student is under 18 years of age.

Please note: If you do not authorize the release of records, your student will not be able to participate in military recruitment activities.
The following records* should be released:

- Transcript of subjects and grades
- Attendance Record
- Psychological or Other Individual Test Results
- Accommodation Plan
- English Language Proficiency Assessments
- Special Education Records, including IEP, MFE or ETR, and behavior plan
- Health Records
- Gifted Assessments
- Standardized Test Results
- Gifted Assessments
- Ohio Achievement and Graduation Test Results
- Multifactored Evaluation (MFE) or Education Team Report (ETR)
- Immunization records

Release records to:

New School/:

Address/:

City, State, Zip Code/:

Fax No./:

Telephone No./:

I am authorizing the release of these records because (check one):

☐ I am the subject of these records, and I’m 18 years of age or older.
☐ I am the parent, guardian or custodian of the subject of these records, and the subject is under 18 years.

Signature/:

Date/:

CPS School Registrar/:

Date/:

CPS enrollment start date for this school/:

CPS Public Schools Student Registration

Registration at Cincinnati Public Schools requires a deposit of $25.

* Records that cannot be withheld due to non-payment of fees or obligations: State test scores, Individualized Educational Program (IEP), IEP progress reports, Multifactored Evaluation (MFE) or Education Team Report (ETR), and immunization records.