

## Re-Enrollment Packet 2020-2021

### Paquete de Reinscripción

Date/Fecha: \_\_\_\_\_

Student Name/Nombre del Estudiante: \_\_\_\_\_

Current Grade/Grado Actual: \_\_\_\_\_ School Site/Asistiendo a la locación de: \_\_\_\_\_

#### The following documents are **NEEDED** for your student's registration

Los siguientes documentos son necesarios para poder reinscribir a su hijo/a.

\_\_\_\_\_ **Re-enrollment packet completely filled out and signed.**

*Paquete de reinscripción completamente llenado y su firma.*

\_\_\_\_\_ **Proof of Residency (you need one of the following): current utility bill, lease rental agreement or bank statement.**

*Prueba de residencia (uno de las siguientes): factura de utilidades actual, contrato de alquiler o estado de cuenta bancaria.*

\*\*Note: In order to keep our records up to date, please inform us when there has been an address or phone number has change.

*\*\*Nota: Para mantener nuestros registros al día, por favor infórmenos cuando ha habido un cambio de dirección o número de teléfono.*

#### Notice of Nondiscrimination Policy as to Students

Taylion Academy admits students of any race, color, nationality and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarships and loan programs and athletic and other school administered programs.

#### Aviso de política de no discriminación en cuanto a estudiantes

Taylion Academia admite estudiantes de cualquier raza, color, nacionalidad y origen étnico a todos los derechos, privilegios, programas y actividades generalmente concedidos o puestos a disposición de los estudiantes en la escuela. No discrimina sobre la base de de raza, color, origen nacional y étnico en la administración de sus políticas educativas, programas de becas, préstamos y políticas de admission y programas atleticos y otros de la escuela administrada.

## Re-Enrollment Form 2020-2021

Forma de Reinscripción

**Please update your information in the following sections**  
Por favor actualice su información en las siguientes secciones

### Student Information/ Información del Estudiante

**Student Name/Nombre del Estudiante:** \_\_\_\_\_

**Birth Date/Fecha de Nacimiento:** \_\_\_\_\_ **Age/Edad:** \_\_\_\_ **Current Grade/Grado Actual:** \_\_\_\_

**Address/Domicilio:** \_\_\_\_\_

**City/Ciudad:** \_\_\_\_\_ **Zip Code/Código Postal:** \_\_\_\_\_

**Student Home #/Telefono de casa:** \_\_\_\_\_ **Student Cell #/Celular del estudiante:** \_\_\_\_\_

**Student Email/Correo electrónico del estudiante:** \_\_\_\_\_

### #1 Parent or Guardian Information/ Información de Padres o Tutores

**Parent-Guardian #1 /Padre o Madre:** \_\_\_\_\_

**Address/Domicilio:** \_\_\_\_\_

**City/Ciudad:** \_\_\_\_\_ **Zip Code/Código Postal:** \_\_\_\_\_

**Home #/Telefono de casa:** \_\_\_\_\_ **Cell #/Telefono celular:** \_\_\_\_\_

**Parent Email/Correo electrónico de padre o madre:** \_\_\_\_\_

Continue/*continuación*

## #2 Parent or Guardian Information/ Información de Padres o Tutores

Parent-Guardian #2 /Padre o Madre: \_\_\_\_\_

Address/Domicilio: \_\_\_\_\_

City/Ciudad: \_\_\_\_\_ Zip Code/Código Postal: \_\_\_\_\_

Home #/Telefono de casa: \_\_\_\_\_ Cell #/Telefono celular: \_\_\_\_\_

Parent Email/Correo electrónico de padre o madre: \_\_\_\_\_

## Emergency Contacts (OTHER THAN PARENTS) Contactos de Emergencia (que no sean los padres)

Contact #1 Name /Contact #1 Nombre: \_\_\_\_\_

Home #/Telefono de casa: \_\_\_\_\_ Cell #/Telefono celular: \_\_\_\_\_

Relationship to student/Relación con el estudiante: \_\_\_\_\_

Contact #2 Name /Contact #2 Nombre: \_\_\_\_\_

Home #/Telefono de casa: \_\_\_\_\_ Cell #/Telefono celular: \_\_\_\_\_

Relationship to student/Relación con el estudiante: \_\_\_\_\_

I certify that all the statements and information give above are true and correct to the best of my knowledge.  
*Certifico que toda la información dada anteriormente y declaraciones son verdaderas y correctas a lo mejor de mi conocimiento.*

Parent-Guardian #1 Signature/Firma de Padre o Madres: \_\_\_\_\_ Date/Fecha: \_\_\_\_\_

Parent-Guardian #2 Signature/Firma de Padre o Madres: \_\_\_\_\_ Date/Fecha: \_\_\_\_\_

## 2020-2021 Additional Information

### Section A: Special Education Services

Note** If you answer "YES" to ANY questions in this section, you MUST complete Section B: Special Education Details.	
1. Has your child ever been referred and/or evaluated to receive Special Education Services?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Has your child ever attended a Special Education class?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Does your child have a current/active Individualized Education Plan (IEP)?	<input type="checkbox"/> YES <input type="checkbox"/> NO

By signing here, I certify that my child has NEVER received special education services of any kind. I further certify that my child does NOT have a 504 Plan.

Parent/Guardian Signature: \_\_\_\_\_

### Section B: Special Education Details

1. What was the date of your child's most recent IEP?	Month:	Year:
2. What type of services did your child attend? ( Check all that apply)		
<input type="checkbox"/> Speech <input type="checkbox"/> RSP <input type="checkbox"/> SDC <input type="checkbox"/> Adaptive PE <input type="checkbox"/> OT <input type="checkbox"/> PT		
<input type="checkbox"/> Other:		
3. What was the last date your child was in Special Education Class or received services?	Month:	Year:
4. School name and address where IEP was last evaluated or developed:		
Name:		
Address:		

#### Sign here and provide a copy of the IEP, including an exit IEP.

I understand I must submit all Special Education documentation, and/or 504 Plan with my child's Enrollment paperwork, and that without it my child cannot be enrolled in this school. I certify that all statements are true and correct to the best of my knowledge.

Parent/Guardian Signature: \_\_\_\_\_