



HURON SCHOOL DISTRICT

Our Mission: “Completely Committed to Kids!”

Dear Parent/Guardian:

It is our pleasure to welcome you to the Huron School District family. We are delighted that you have selected our District for your child and are confident that he/she will thrive in our exceptional and enriching educational environment.

This “Student Enrollment Packet” contains our District’s enrollment forms, as well as a checklist of the documents required for admission. Our goal is to make the enrollment process as straightforward as possible and believe that the information provided will assist you in completing the required forms. Should have any questions on the forms, please feel free to contact your school building below or our District office at the number below.

Brown Elementary School
25485 Middlebelt Road
New Boston, MI 48164
(734) 782-2716 office

Miller Elementary School
18955 Hannan Road
New Boston, MI 48164
(734) 753-4421 office

Renton Jr. High School
31578 Huron River Dr.
New Boston, MI 48164
(734) 782-2483 office

Huron High School
32044 Huron River Dr.
New Boston, MI 48164
(734) 782-5360 counseling office
(734) 782-1436 main office

You may obtain additional information about our curriculum, services and activities by calling the District Administration office or website listed below.

Again, welcome to the Huron School District!

District Administration Offices: (734) 782-2441
Hours: Monday-Friday 7:30 a.m. to 3:45 p.m.
District website: www.huronschools.org

Transportation Dept. (734) 782-1418

Nondiscrimination Policy

It is the policy of the Huron School District not to discriminate on the basis of race, color, religion, national origin, age, sex or handicap in its education programs, activities or employment policies.

Inquiries regarding compliance and/or grievance procedures may be directed to the Civil Rights Coordinator, Office of the Superintendent, Huron School District.

Welcome to the Huron School District. It is our desire that your family's experience with Huron Schools will be one of fulfillment, enrichment and exceptional opportunities. Below is a checklist of the required documents and information necessary to start the student enrollment process. Because of the numerous state and local reporting guidelines, this process can be time-consuming and paper intensive. Once you have completed the enclosed enrollment application forms, and gathered the enrollment required documentation, you will need to contact your school to schedule an appointment. During the enrollment appointment, staff will review your student's enrollment materials and discuss any further documentation needs based on your unique circumstances.

STUDENT AGE: In order to receive funding from the State of Michigan, students must be at least five (5) years old by December 1st and less than twenty (20) years old on September 1st for the enrolling year. **The enrollment process must be completed in person by a parent or legal guardian.**

Required forms:

- Student enrollment form
- Student emergency contract information
- Request for Release of Educational Records
- Language Survey
- Proof of Residency Form

The following forms will be sent home with your child on the first day of school and need to be completed and returned to school:

- Free and reduce meal application (only 1 per family required)
- Authorized to Administer Medication (if applicable)
- Technology Use Agreement
- Student Consent and Agreements
- Volunteer Online Criminal Record Check (if you wish to volunteer in the school/attend field trips)
- Affirmation of Prior Discipline Record

Required documents:

- Original birth certificate (with raised seal), student passport or visa
- Official immunization records (all Kindergarteners **must** be compliant with immunizations before they can start school). See enclosed memo regarding how to obtain a non-medical waiver from Health Department.
 - Immunization waiver form (if applicable)
- Kindergarten Only:** Health appraisal, vision and hearing screening
- Address of the school your student last attended.
- Driver's license of parent/legal guardian, passport or visa (**must have photo on identification**)
- Certified copies of court documents/placement orders, if applicable (appointment of legal guardianship, divorce papers, etc.)
- In addition, report cards and/or transcripts are helpful when enrolling a student.
- Proof of residency – The following documents are require to prove residency (**3 different proofs are required**):
 - Homeowner: Purchase agreement, closing papers or deed
 - Renter: Current lease/rental agreement
 - Property tax statement

AND

- Two (2) different current utility bills (gas, electric, cable TV, land line phone bill) with the name and the Huron School District address of the person enrolling the student

OR

- Moving company invoice or truck rental receipt validating address in district

Requirement for non-traditional living arrangements (if applicable): The following forms can be obtained by calling our District office at 734-782-2441.

- Notarized Affidavit of Shared Household Residency
- Notarized Affidavit of Relative Guardianship

Additional forms may be required at the building level.

Michigan law provides that, in order to complete and maintain enrollment, a parent or guardian must be a resident within the geographical boundaries of the Huron School District. The following lists the verification of residency required for enrollment:

Homeowner – If you own a home or are purchasing a home in the Huron School District, we expect the following:

- **Proof of home ownership:** If you currently own or have purchased a home in the district, you need to produce a copy of a deed or closing statement in the name of the person seeking to enroll the student. If you have yet to purchase your home, but have a pending purchase agreement with a closing date, this will need to be reviewed before enrollment. **AND**
- **Two (2) of the following:** Original current utility bill (gas, electric, cable, land line phone bill) with the name and Huron School District address of the person enrolling the student. If you have not yet received utility bills, two (2) verification of utility activation may be submitted.

Note: Purchase of property in the Huron School District must be for the purpose of a primary residence. Purchasing a residence within the boundaries does not, solely constitute living within the boundaries.

Renting/Leasing – If you are renting property within the Huron School District, we expect the following:

- **A signed lease** in the name of the person seeking to enroll the student. All leases may be reviewed annually at registration or at the request of the District.
- **Two (2) of the following:** Original current utility bill (gas, electric, cable, land line phone bill) with the name and Huron School District address of the person enrolling the student. If you have not yet received utility bills, two (2) verification of utility activation may be submitted.

Note: Rental of property in the Huron School District must be for the purpose of a primary residence. Leasing a residence within the boundaries does not, solely constitute living within the boundaries.

Affidavit or Shared Household Residency – If you reside with a Huron School District resident within the District, an Affidavit of Shared Residency must be obtained from the school office, **must be notarized**, as well as the following:

A. The Huron School District resident:

- Must meet the residency requirements as a homeowner or renter as listed above.
- Must ensure that their residence is the primary residence of parent or legal guardian as well as the student.

B. The person living with the Huron School District resident:

- Must present a valid driver’s license, state-issued picture identification or passport of the person enrolling the student.

Note: Living with a Huron School District resident in the Huron School District must be for the purpose of a more suitable home.

Living with a Relative-Notarized Affidavit

- If you are enrolling a student who is a relative it must be substantiated with a notarized Affidavit of Relative Form, which can be obtained from our District offices. This is subject to review by the school staff with the possibility of an interview.
- A relative may enroll a student who is not their child if the child is living with them because the parents are unable to provide a suitable home.
- The relative must be complete the Affidavit of Relative Form. This form must be notarized, and signed by the parent or legal guardian.
- The student can provide a supporting letter or referral from an outside entry verifying the need to live with the relative and a plan to return the child to the parent(s) if applicable (ie, counselor, therapist, clergy, doctor, caseworker, etc...)
- The school staff may review such requests and ask the relative to meet with school staff to substantiate the reason(s) that the parent(s) cannot provide a suitable home.
- Students will not be enrolled for "Educational Purposes only" (MCL 380.1148)
- This enrollment option is only valid for one (1) year and **must be** renewed.

Homeless students – In accordance with the McKinney-Vento Homeless Education Assistance Improvements Act (2001) and the Huron School District Board of Education Policy 5111.01 students who meet the federal definition of "homeless" have the right to enroll in school immediately, even if they do not have the required documents. Residency documentation for all categories will be processed at the school where the student is enrolling. The matters involving enrollment and residency are under the direct supervision of the Superintendent. The Superintendent's office may assist, review or investigate any matters in this regard with Central and/or Building Administrators as needed.

District Employees – Children of Huron School District employees are eligible to attend the Huron Public School District.

- In accordance with MCL 388.1606(6)(1), children of District employees may also enroll if the student is the child of a regular school employee who is under contract with the Board of Education either through a Master Contract Agreement or individual contract, and excludes annual supplemental agreement holders who do not fall within the definition of a regular employee.
- This exception shall cease to exist when the parent or legal guardian ceases to be an employee of the District. Under such circumstances, a student may finish the current academic trimester without payment of tuition, or approval from his/her residence district, if the parent or legal guardian discontinues employment with the District after the membership count day.
- Placement of students is based upon available space and assigned staff.

**HURON SCHOOL DISTRICT
32044 HURON RIVER DRIVE
NEW BOSTON, MICHIGAN 48164**

Date

REQUEST FOR RELEASE OF EDUCATIONAL RECORDS

Requested from/Name of School:
Address:
City/State/Zip:

Fax Number

The below name student has enrolled in our School District. Please send CA-60 with all cumulative records: Transcripts, attendance, health, test scores, Special Education records, and Social and Psychological records to the school checked below. Note: High School students require an "Official" Transcript with Seal

Student Last Name	First Name	Date of Birth (mm/dd/yy)
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Brown Elementary School
25485 Middlebelt Road
New Boston, MI 48164
(734) 782-2716 Office
(734) 783-0326 Fax



Miller Elementary School
18955 Hannan Road
New Boston, MI 48164
(734) 753-4421 Office
(734) 753-4270 Fax

Renton Jr. High School
31578 Huron River Drive
New Boston, MI 48164
(734) 782-2483 Office
(734) 783-0327 Fax

Huron High School
32044 Huron River Drive
New Boston, MI 48164
(734) 782-1436 Office
(734) 783-1534 Fax

Parental permission is no longer required when records are requested by authorized school personnel in compliance with "Federal Education Rights & Privacy Act, Final Rule on Educational Records, Federal Register, June 17, 1976, Volume 42, No. 118, Page 24675.

PLEASE COMPLETE THE FOLLOWING & RETURN A COPY OF THIS FORM WITH RECORDS TO THE ADDRESS ABOVE

School Transfer Weapons Free School Zone Statement

In order to comply with Public Act 328, please verify that the above named student **has or has not** been suspended or expelled from school for a weapons, arson, or criminal sexual conduct violation subsequent to January 1, 1995.

Above named student **has not** been suspended or expelled from our District.

Above named student **has been** suspended or expelled for one of the below named violations, please attach an explanation as to the current status of the student. In accordance with Michigan Public Act 328, Huron School District's Board of Education shall permanently expel a pupil who possess a weapon in a weapon-free school zone, commits an arson violation, or a sexual assault violation. Students expelled under this policy are expelled from all Michigan school districts unless in an appropriate alternative education program.

Violation/Infraction (check one)

Weapons Possession

Arson

Sexual Assault

Date of Violation:

Date of Expulsion:

Name of Sending School

Date

Signature of Sending School Official

HURON SCHOOL DISTRICT

Our Mission: Completely Committed to Kids!"

STUDENT ENROLLMENT FORM

Student Information Page 1 of 2

FOR OFFICE USE ONLY

School: _____
UIC # _____
Date of Entry: _____
Verification Document: _____
Teacher/Counselor: _____
Testing for RESA Bilingual Program Yes

Please print clearly:

Registration Date Student Grade

Huron Resident Yes No

If non-resident, School District of residency?

STUDENT INFORMATION:

Last Name (as it appears on birth certificate)

First Name (as it appears on birth certificate)

Middle Name

Suffix

Date of Birth (mm/dd/year)

Gender

Male Female

Home Language

Primary Language

Ethnicity

Is this student Hispanic/Latino? (choose only one)

- No not Hispanic/Latino
- Yes Hispanic/Latino (a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race)

Race

The question to the left is about ethnicity, not race. No matter what you selected, please continue to answer the following by marking one or more boxes to indicate what you consider your students' race to be.

- American Indian or Alaska Native Native Hawaiian or Pacific Islander
- Asian Caucasian/White Black/African American

Phone for notification calls (school closings, notifications, etc.)

Cell Home

unlisted

Student Birth Place (city/state)

Student's home address

City

Zip

Student lives with both parents mother only father only parent and step parent other _____

In a single family dwelling either rented or owned by his/her family with another family in their house/apartment a shelter, motel, car or campsite

MALE HEAD OF HOUSEHOLD:

Last Name

First Name

Middle Initial

Relationship to student (circle one)

- Birth Parent Adoptive Parent
Step-father School Guardian
Court Appointed Guardian Other _____

Cell Phone

Home Phone

Unlisted

Work Phone

Ext.

Email address

FEMALE HEAD OF HOUSEHOLD:

Last Name

First Name

Middle Initial

Relationship to student (circle one)

- Birth Parent Adoptive Parent
Step-mother School Guardian
Court Appointed Guardian Other _____

Cell Phone

Home Phone

Unlisted

Work Phone

Ext.

Email address

IF STUDENT "DOES NOT" RESIDE WITH "BOTH BIRTH" PARENTS:

Parent living elsewhere: Birth Mother Birth Father Both birth parents deceased Deceased Deceased Other

Last Name First Name Middle Initial

Address City State Zip

Cell Phone Home Phone Unlisted Work Phone Ext.

Email address

Should the student be release to this parent? Should this parent be an emergency contact? Has legal divorce/custody documents been provided? Do you want duplicate copies of mailings sent to this parents?

School District student is transferring from:

School District Name of school

Has the student had a long-term suspension or expulsion from another school district? If yes, you must complete the Affirmation of Prior Discipline record.

Has the student ever been enrolled in a Special Education Program such as Speech, Title I, 504 Plan, Resource Room, etc?

If yes, please explain and provide a copy of current IEP

Does your family need translation services for school information?

Please list all other siblings, ages, grade levels and present schools

Table with columns: Last Name, First Name, Age, Grade Level, Present school (if applicable)

I certify that the information provided is true and accurate, and the address given on this and all enrollment forms is the legal residence of the parent/guardian enrolling the student and is the residence of which the student resides.

Parent/Guardian signature Date

Parent/Guardian Name (print)

HURON SCHOOL DISTRICT

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STUDENT EMERGENCY CONTACT INFORMATION

MILLER ELEMENTARY

Office Use Only: Grade School Year
 Teacher/Counselor

Please Print Clearly:

Student Last Name (Please Print) First Name Date of Birth (mm/dd/yy)

Student Address:

EMERGENCY CONTACTS: (PLEASE PRINT and list in the order you wish to be called, with Parent/Guardianship first)

1) _____
 Home address (if different than student's) _____
 Relationship to child: Mother Father Other _____ Email address _____
 May your child be released to this contact? Yes No
 () _____ () _____ Ext _____ () _____
 Cell Phone Work Phone Home Phone

2) _____
 Home address (if different than student's) _____
 Relationship to child: Mother Father Other _____ Email address _____
 May your child be released to this contact? Yes No
 () _____ () _____ Ext _____ () _____
 Cell Phone Work Phone Home Phone

3) _____
 Home address (if different than student's) _____
 Relationship to child: Mother Father Other _____ Email address _____
 May your child be released to this contact? Yes No
 () _____ () _____ Ext _____ () _____
 Cell Phone Work Phone Home Phone

If you would like additional contacts, please add the same information to the back of this sheet.

MEDICAL AUTHORIZATION:

In case of an accident or serious illness, if the school is unable to contact me, I hereby authorize the school to take my child to the nearest hospital emergency room/clinic or physician. I/we authorize the attending physician and/or hospital personnel to take action and give treatment they deem advisable for our child's comfort and well-being. I/we agree to pay for any expenses incurred by the emergency.

Physician's Name Physician's Phone Number Hospital Preference

Does your child have any major health problems of which we should be aware?

Such as: (Check all that apply and be sure to complete an Authorization to Administer Medication Form)

Asthma Bee Sting Allergy Diabetes Epilepsy Epi Pen Hay Fever Heart Condition Hemophilia
 Inhaler Peanut Allergy Seizures Skin disorder ADHD/ADD

Food Allergy-please explain

Other conditions that may require treatment or hospitalization

Current medications/treatments: _____

Signature Parent/Guardian

Date

Parent/Guardian Name (Print) _____

PLEASE CALL YOUR SCHOOL OFFICE TO REPORT ANY CHANGES ON THIS FORM DURING THE SCHOOL YEAR

HURON SCHOOL DISTRICT

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PROOF OF RESIDENCY

Please print clearly:

I _____, declare that I, and my child

_____ physically reside at

Student's name	City	Zip
Address		

Michigan and that I have no other residence than the address listed on this affidavit.

I have also provided the following documents to prove my residency has been established in the Huron School District, Michigan:

- Driver's license of parent/legal guardian, passport or visa (**must have photo on identification**)
- Proof of residency – The following documents are require to prove residency (**2 different proofs along with photo ID are required**):
 - Deed to land/property
 - Utility bill/activation deposit receipt
 - Passport/Visa
 - Closing documents
 - Cable bill/activation deposit receipt
 - Car registration
 - Purchase agreement
 - Home phone bill/activation dep. receipt
 - Voter's registration
 - Current property tax bill
 - Electric bill/activation deposit receipt
- Certified copies of court documents/placement orders, if applicable (appointment of legal guardianship, divorce papers, etc.)

I declare that I reside at this residence and will be available for contact by Huron School District at this address. I also declare that I am in compliance with Section 340.385 of the State of Michigan General School Laws. These laws state: "The purpose for which a child is placed in a licensed home or in the home of relatives in the school district **must be for the purpose of establishing a suitable home and not for an educational purpose.**"

I understand that if statements made on this affidavit change, my application will be open for review as to the continued enrollment of my child(ren) in the Huron School District. I also understand that if my address changes, I will immediately notify the school district, complete a Change of Address form and provide the necessary proofs of residency. I further understand that if the statements made on this affidavit are false, the enrollment of by child(ren) will be immediately terminated, and I may be subject to prosecution under the laws of the State of Michigan.

Parent/Guardian signature	Date
Parent/Guardian name (printed) _____	

- If you have a guardian enrolling a students, a copy of the "original" court documentation **must be** provided.

FOR OFFICE USE ONLY: The above documents were verified by: _____ School District Employee signature
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**STATE BOARD OF EDUCATION
APPROVED HOME LANGUAGE SURVEY***

The Huron School District is collecting information regarding the language background of each of its students. This information will be used by the district to determine the number of children who should be provided bilingual instruction according to Sections 380.1151 – 380.1158 of the School Code of 1976, Michigan's Bilingual Education Law. Would you please help by providing the following information?

Thank you very much for your cooperation.

Name of Student _____ Grade _____ Age _____

School Building: **Miller Elementary School**

1. Is your child's native tongue a language other than English?

Yes

No

What is that language? _____

2. Is the primary language¹ used in your child's home or environment a language other than English?

Yes

No

What is that language? _____

Signature of Parent or Guardian _____ Address _____ Date _____

¹"Primary language" means "the dominant language used by a person for communication."

*Translation of this survey form in Spanish, Arabic, French, Italian and Ojibwa is available at the Office of Field Services.