

WELCOME TO MILLER ELEMENTARY



Information required for registration:

- Birth Certificate (with seal)
- Immunization records or waiver
- (3) Proofs of residency

The
Leader in MeSM
great happens here

Love Learning, Excel in all we do, Achieve goals together, Do what is right

Principal, Jean Robinson
Secretary, Denise Newburn
Phone (734)753-4421 Fax (734)753-4270
School hours 8:40 a.m. to 3:40 p.m.

Huron Transportation (734)782-1418





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 you 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
25485 Middlebelt Road
New Boston, MI 48164
(734) 782-2716 Office

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

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

Huron High School
32044 Huron River Drive
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 at the number below.

Again, Welcome to the Huron School District.

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

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 educational 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.

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)

Brown Elementary School
 25485 Middlebelt Road
 New Boston, MI 48164
 (734) 782-2716 Office
 (734) 783-0326 Fax



Leadership

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

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 complete the student enrollment process. Because of the numerous state and local reporting guidelines, this process can be time-consuming and paper intensive. It is our hope that by providing you with this checklist the experience will be less cumbersome. Once you have completed the enclosed enrollment application forms, and gathered the 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 Consent and Agreements Form
- Proof of Residency Form
- Technology Use Agreement
- Student Emergency Contact Information

IF APPLICABLE:

- Affirmation of Prior Discipline Record
- Free/Reduced Meal Application (only 1 per family needed)
- Volunteer Online Criminal Record Check (if you wish to volunteer in the school-only 1 per family needed)
- Authorization to Administer Medication form

Required Documents:

- Original Birth Certificate (with raised seal), student passport or visa
- Driver's license of parent/legal guardian, passport or visa (must have photo on identification)
- Official Immunization Records or a Medical Immunization Waiver or a Non-Medical Immunization form
- Kindergarten Only:** Health appraisal/Vision & Hearing screening
- Address of the school your student last attended
- Proof of Residency - The following documents are required to prove residency:
 - Homeowner: Purchase agreement, closing papers or deed
 - Renter: Current lease/rental agreement
 - Property Tax Statement
- Certified copies of court orders or placement papers, if applicable (appointment of legal guardianship, divorce decrees, etc)

AND

- Two (2) different current utility bills: *Gas *Electric *Cable TV *Land line phone bill with the name and Huron School District address of the person enrolling the student
- OR**
- Moving company invoice or truck rental receipt validating address in district

In addition, report cards and/or transcripts are helpful when enrolling a student

Requirements for non-traditional living arrangements (if applicable):

- 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 recently 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 TV – 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 verification of utility activation may be submitted.

Note: Purchase of property in 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 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.

***And two (2) of the following:** Original current utility bill

Gas – Electric – Cable TV – 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 verification of utility activation may be submitted.

Note: Rental of property in 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, the Notarized Affidavit of Shared Residency must be obtained from our District office and completed 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's 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 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 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 (i.e. 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 resident 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

Our Mission: "Completely Committed to Kids!"



STUDENT ENROLLMENT FORM

Student Information Page 1 of 2

Please Print Clearly:

Registration Date Student Grade

Huron Resident Yes No
If non-resident, School District of residency?

FOR OFFICE USE ONLY:

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

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 student's race to be.

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

Phone for Notification calls (school closings, notifications, etc.) Cell Home Unlisted Student Birth Place (City/State)

Student 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 or apartment
 In 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

Cell phone Home Phone Unlisted Work Phone Ext Other

E-mail 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

Cell phone Home Phone Unlisted Work Phone Ext Other

E-mail address

STUDENT ENROLLMENT FORM
Student Information **Page 2 of 2**

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

E-mail address

Should the student be released to this parent? Yes No Has legal divorce/custody documents been provided? Yes No
 Should this parent be an emergency contact? Yes No
 Do you want duplicate copies of mailings sent to this parent? Yes No

School District Student is transferring from: (District and School Name)

Has the student had a long-term suspension or expulsion from another school district? Yes No
 If yes, you must complete the Affirmation of Prior Discipline record. Expulsion does not automatically disqualify a student from enrollment but Huron School District reserves the right to review the enrollment and determine the appropriateness of his/her enrollment.

Has the student ever been enrolled in a Special Education Program such as Speech, Title I, 504 Plan, Resource Room, etc...? Yes
 If yes, please explain and provide a copy of current IEP: No

Does your family need translation services for school information? Yes No

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

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 at which the student resides. I understand that it is my responsibility to inform the appropriate school office if and when any of the information set in this form changes.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (Print) _____

HURON SCHOOL DISTRICT

Our Mission: Completely Committed to Kids!"

STUDENT EMERGENCY CONTACT INFORMATION

MILLER ELEMENTARY

Office Use Only:

Grade	<input type="text"/>	School Year	<input type="text"/>
Teacher/Counselor	<input type="text"/>		<input type="text"/>

Please Print Clearly:

Student Last Name (Please Print)	First Name	Date of Birth (mm/dd/yy)
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

May your child be released to this contact? Yes No

Email address

() Cell Phone () Work Phone Ext () Home Phone

2)

Home address (if different than student's)

Relationship to child: Mother Father Other

May your child be released to this contact? Yes No

Email address

() Cell Phone () Work Phone Ext () Home Phone

3)

Home address (if different than student's)

Relationship to child: Mother Father Other

May your child be released to this contact? Yes No

Email address

() Cell Phone () Work Phone Ext () 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.

<input type="text"/>	<input type="text"/>	<input type="text"/>
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

(Student's name) _____ physically reside at

Address City Zip

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 (three (3) of the ten documents are needed to prove residency):

- | | | |
|--|--|--|
| <input type="checkbox"/> Drivers License | <input type="checkbox"/> Deed to Land/Property | <input type="checkbox"/> Gas bill or activation deposit receipt |
| <input type="checkbox"/> Passport/Visa | <input type="checkbox"/> Closing Documents | <input type="checkbox"/> Cable bill or activation deposit receipt |
| <input type="checkbox"/> Car Registration | <input type="checkbox"/> Purchase Agreement | <input type="checkbox"/> Home Phone bill or activation deposit receipt |
| <input type="checkbox"/> Voters Registration | <input type="checkbox"/> Current Property Tax bill | <input type="checkbox"/> Electric bill or activation deposit receipt |

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/children 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 my child/children will be immediately terminated, and I may be subject to prosecution under the laws of the State of Michigan.

Parent/Guardian Signature
Parent/Guardian Name (Printed) _____

Date

If you are a guardian enrolling a student, a copy of the "Original" Court documentation must be provided.

FOR OFFICE USE ONLY:
The above documents were verified by: _____
School District Employee

**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.