



NORTH STAR MONTESSORI ACADEMY

2022-2023 School Enrollment Form

For Office Use Only:

Date Received	Enrollment Date	UIC	District Code

PLEASE CHECK WHAT GRADE YOU ARE APPLYING FOR

Kindergarten
 1st – 5th Grade
 6th – 8th Grade
 9th -12th Grade

To enroll:

- 1) Complete registration form and corresponding pages.
- 2) Provide school with copies of:

a) Birth Certificate b) Immunization Record or Waiver c) Last Grade Report or Transcript

<u>STUDENT INFORMATION</u>		
Legal First Name, NOT Nickname	Middle Initial	Last Name & Suffix (Jr., II, etal) If Applicable
Residential Address	Preferred Nickname, If Applicable	Date of Birth (MM-DD-YYYY)
Home Phone	Secondary Phone	Child Resides with: Parents Mom Dad Other:
City/State/Zip	Previous School Attended & State	Birth Place
Student Grade for 2022-2023	School District of Residence	Gender (Circle One) Male/Female
<input type="checkbox"/> Check if Non-Resident or Foreign Exchange Student. If so indicate Visa Type: F1/Other		
Racial/Ethnic Information for Michigan Department of Education Statistics Primary and/or Secondary Number 1, 2, 3 for the one or More that Apply _____ American Indian or Alaska Native _____ Asian American (Far East, SE Asia, Indian) _____ Native, Guam, Samoa, or Other Pacific Islander _____ Black or African American _____ White _____ Hispanic or Latino (Cuba, Puerto Rico, South or Central America or other Spanish culture or origin)		

PARENT/GUARDIAN INFORMATION

First Contact Name/Relationship to Student	Second Contact Name/Relationship to Student
Address (If Different from Student) City, State, Zip Code	Address (If Different from Student) City, State, Zip Code
Email Address	Email Address
Occupation/Employer	Occupation/Employer
Phone-Work Mobile Home () () ()	Phone-Work Mobile Home () () ()

EMERGENCY CONTACT

FAMILY DOCTOR/MEDICAL

Emergency Contact Name/Relationship to student	Family Doctor Name
Address	Doctor's Office Phone
City/State/Zip Code	Special Medical Needs (E.G. Diabetes, Food Allergies):
Phone-Work Mobile Home () () ()	

Is Your Child Currently Taking Any Medications? Please Indicate Type and Dosage:

IMMUNIZATION CHECKLIST

Please attach a copy of your child's immunization record.
 Michigan law requires all children be immunized against vaccine-preventable diseases
 To enter kindergarten, 6th Grade, or a new school district in any grade.

Immunization	Required Doses
Diphtheria, Tetanus & Pertussis (DTap/DTP/DT/Td)	4 doses required. If a dose was not given in the last 10 years, a booster dose is required
Polio (OPV or IPV)	3 Doses are required
Measles/Mumps/Rubella (MMR)	2 Doses are required
Hepatitis B (HEPB)	3 Doses are required
Varicella (Chickenpox-required unless child has had Chickenpox) If your child has had Chickenpox disease, the Varicella vaccine is not required.	Has this student had Chickenpox? (circle one) Yes/No

SPECIAL SERVICES YOUR CHILD HAS RECEIVED AT PREVIOUS SCHOOL – CHECK ALL THAT APPLY

Special Education Services

<input type="checkbox"/> Speech Therapy	<input type="checkbox"/> Resource Room _____ hrs/week	<input type="checkbox"/> L.D.	<input type="checkbox"/> English as Second Language
<input type="checkbox"/> Social Work	<input type="checkbox"/> Self-contained classroom	<input type="checkbox"/> E.I.	What is primary language at home? <input type="text"/>
<input type="checkbox"/> Other	<input type="checkbox"/> Date of last L.E.P.C.	<input type="checkbox"/> E.M.I.	
		<input type="checkbox"/> Other	<input type="checkbox"/> G.A.T.E.S.

<p>How did you hear about North Star Montessori Academy?</p> <p>Does student have sibling(s) currently enrolled at NSA? Yes/No</p> <p>Does this student have sibling(s) also applying to NSA? Yes/No</p> <p>If yes to either, list those siblings at the space to the right</p> <hr/> <p>I attest that the information provided is complete and accurate to the best of my knowledge.</p> <hr/> <p>X</p> <hr/> <p>Parent/Guardian Signature _____ Date _____</p>	<p>Siblings enrolled/enrolling & next year grade</p>
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EQUAL EDUCATION OPPORTUNITY: North Star Montessori Academy does not charge tuition and does not discriminate in its pupil admissions policies or practices on basis of intellectual or athletic ability, measures of achievement or aptitude, status as a handicapped person, or any other basis not permitted by Michigan's public schools.