

# CARROLL MIDDLE SCHOOL NEW STUDENT ENROLLMENT

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Student's Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: IN Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender: M F

U.S. Citizen? Yes No If no, what country: \_\_\_\_\_ /U.S. Entry Date: \_\_\_\_\_

Parent/Guardian 1 First Name: \_\_\_\_\_ Parent/Guardian 1 Last Name: \_\_\_\_\_

Parent/Guardian 1 E-mail Address: \_\_\_\_\_

Has your student ever been enrolled in a NACS school before? Yes No

Does your student have an active IEP (special education) or 504 plan? Yes No

Has your student been suspended/expelled from his/her former school in the past year? Yes No

Are you applying for free/reduced lunches & textbook assistance? Yes No

Former School: \_\_\_\_\_ City/State: \_\_\_\_\_ Date Left: \_\_\_\_\_

If enrolling in 6th grade, please provide the middle school your student would have been attending:

Phone #: \_\_\_\_\_ Counselor/Contact: \_\_\_\_\_

FYI - Upon entering school, all students must meet Indiana State law requirements for immunization. Please note that the law provides for exclusion from school for failure to comply with the immunization law, unless a parent provides a written religious or medical objection.

*Minimum Dosage is as follows: DIPHTHERIA, TETANUS, PERTUSSIS – 4 Doses \*\*3 doses acceptable if the third dose was administered at age 6 or older. ORAL POLIO – 3 Doses MEASLES, MUMPS, RUBELLA - 2 Doses; Effective August/2006 – Hepatitis B series required for grades 9, 10, and 12*

## I. ENROLLMENT FORMS

A. Personal Health

B. Home Language (only if coming from out of state)

C. Race/Ethnicity (only if coming from out of state)

D. Custody (as needed)

## II. COPY OF BIRTH CERTIFICATE

## III. COPY OF CURRENT (up to date) IMMUNIZATION RECORDS

## IV. COPY OF ONE OF THE FOLLOWING AS PROOF OF RESIDENCY:

Current Utility Statement (gas, water or electric)

Signed rental agreement with dates of residency

Closing statement from purchase of home: If in the process of building or purchasing a home you will need a Move-In Affidavit from the Superintendent's (Central) office

## V. A copy of your driver's license matching the residency address within 30 days of enrollment. Please be aware if you don't provide a copy within 30 days of enrollment your student will not be able to return to school until we receive it.

## VI. Please contact the CMS office @ 260-637-5159 to set up an appointment to complete the remainder of the registration process. Information for registering your student online will be provided.

## CMS Verification of Residency

Student's Name: \_\_\_\_\_

I am the parent/legal guardian of the above named child who resides with me within the NACS district at:

Address	City	Zip
---------	------	-----

Parent(s)/guardian(s) of all new students registering for school in Northwest Allen County Schools must provide a driver's license with current address to verify residency. **The driver's license must have the same address on it as one of the documents below.**

I am providing proof of residency with my driver's license and one of the following documents: (Please note that parent/guardian's name must be on one of the documents listed below)

1. Receipt for bill paid to a utility company (gas, electric, or water) for service to the residence listed above
2. Signed rental agreement for the residence listed above.
3. Signed Move-In Affidavit from Central Office verifying that you are moving into/building a residence within the Northwest Allen County District. (\*\*see below)
4. Signed Live-With Affidavit from Central Office verifying residence with third party (\*\*see below)

I understand that falsification of any information or documents, either written or verbal, relative to this verification of residency will result in a recommendation for expulsion of the above named student.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

**\*\*If you are in the process of building or moving into a home in the NACS district, you must first go to NACS Central Office to obtain the Move-In Affidavit. Please bring your driver's license and the purchase agreement with the address of the new home on it or a letter from the builder on the builder's letterhead stating the estimated move-in date and address of the new home.**

**\*\*\*If a student and parent are residing in the home of a third party within the NACS attendance area, they must first go to NACS Central Office to verify residency and sign the Live-With Affidavit. Both the property owner and parent are required to present picture identification. The property owner must also bring proper verification of residence (gas, electric, or water bill). **These affidavits can only be completed at the central office on/after July 20th.** Please contact CMS prior to this date so we can walk through the registration process with you.**

**NACS Central Office is located at 13119 Coldwater Road. The phone number is 637-3155. Please call in advance to confirm summer hours of operation.**

Student's Grade: \_\_\_\_\_

Student's Last Name: \_\_\_\_\_

Student's First Name: \_\_\_\_\_

**Race/Ethnicity Reporting**  
**Northwest Allen County Schools**

The federal government is changing the way schools report race and ethnicity information, so all school records must be updated. Please answer both of the questions below.

**Part 1: Ethnicity**

Is this individual Hispanic/Latino? (Choose only one)

- No, not Hispanic/Latino**
- Yes, Hispanic/Latino:** A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.

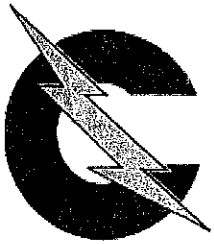
**Part 2: Race**

What is the individual's race? (Choose one or more)

- American Indian or Alaska Native:** A person having origins in any of the original peoples of North America and maintaining cultural identification through tribal affiliation or community recognition.
- Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American:** A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Parent/Guardian Name: \_\_\_\_\_

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



Office Use: ELEM School: \_\_\_\_\_

# Carroll Middle School 2020-2021

## 6th Grade ACADEMIC Course Selection Sheet

Student FIRST Name: \_\_\_\_\_ Student LAST Name: \_\_\_\_\_

All students will participate in the following academic classes. Accelerated and elective course descriptions are located on the back of this sheet. Academic course selections do not require teacher recommendation.

- Science
- Social Studies
- PE/Art/Computers Rotation
- Study Hall
- Elective class (Band, Choir, Band/Choir, General Music/Course TBD)

Elective classes were selected earlier this spring. If you did not choose an elective class, please contact CMS at (260) 637-5159 to speak with a counselor.

If your student receives support through the ENL program, his or her schedule will be adjusted to allow space for an ENL class.

Please make a selection for English and Math below. If you are interested in an accelerated course, you must obtain a teacher initial for placement. NWEA percentiles can be based on fall, winter, or spring scores of the current school year.

\_\_\_ **Language Arts/Reading 6 Block**

\_\_\_ **Pre-AP Language Arts 6/Reading 6 Block\***

\*Must meet at least one qualification (teacher initial/score below)

\_\_\_ NWEA Reading score at/above 85%ile

\_\_\_ CogAT verbal score at/above 95%ile

\_\_\_ Teacher recommendation (based on daily class performance)

\_\_\_ **Math 6**

\_\_\_ **Accelerated Math 6\***

\*Must meet at least one qualification (teacher initial/score below)

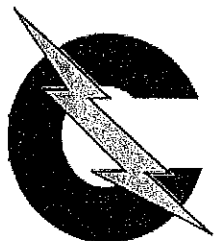
\_\_\_ NWEA Math score at/above 85%ile

\_\_\_ CogAT Math score at/above 95%ile

\_\_\_ Teacher recommendation (based on daily class performance)

I acknowledge that my student will participate in the courses designated above.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Office Use: ELEM School: \_\_\_\_\_

## Carroll Middle School

2020-2021

### 6th Grade ELECTIVE Course Selection Sheet

Student FIRST Name: \_\_\_\_\_ Student LAST Name: \_\_\_\_\_

**Please select one of the following courses for your 6th grade schedule. Selections are subject to change depending on student need. Academic courses will be selected later this spring.**

#### \_\_\_\_ **Band 6**

If Band, what instrument do you play? \_\_\_\_\_

Duration: full year

Prerequisite: fifth grade level band instruction and/or instructor approval

Band stresses total musicianship and enjoyment in music making. Grades are based on participation, practice time, performance attendance, and some playing quizzes. The 6th Grade Band performs at four concerts a year after school and the weekend ISSMA Band Contest.

#### \_\_\_\_ **Choir 6**

Duration: full year

Prerequisite: an enjoyment of singing and willingness to learn more musical concepts

6th grade choir students will learn proper vocal technique while singing several different styles of music including concert choir, pop and gospel. Students will also learn the basics of reading music, rhythm, and the system of Sol-feggio (do, re, mi). Students will be required to perform in after school concerts, as well as the ISSMA contest which occurs on a Saturday.

#### \_\_\_\_ **Band/Choir 6**

What instrument do you play? \_\_\_\_\_

Duration: full year

Prerequisite: 5th grade band instruction or band director's approval, an enjoyment of singing and willingness to learn more musical concepts. Band/Choir students participate in both band and choir. Students alternate days between band and choir.

#### \_\_\_\_ **General Music (18 weeks)/Course TBD (18 weeks)**

Duration: one semester per course

Students will actively participate in class through a variety of musical experiences. The following musical concepts will be integrated within the class: rhythm, melody, harmony, and form. Students will practice these concepts by singing, playing, creating, and listening. The main objective of this class is to involve students in a positive musical experience. The other half of the school year will be in a course TBD based upon staffing.

If your student receives support through the ENL program, his or her schedule will be adjusted to allow space for an ENL class.

I acknowledge that my student will participate in the courses designated above.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_