



Cayuga ISD

New Student Registration Packet



Welcome to Cayuga!
We are so glad to have you join the Wildcats!

A parent or guardian MUST accompany the NEW student to enroll.

Below is a checklist of all items needed to enroll a new student.

- Copy of Drivers License of the Parent or Guardian enrolling student.
Address on drivers license must be current AND in the Cayuga School District.
- Proof of Residency - Must be presented BEFORE enrollment.
*Copy of a current utility bill with your physical address as the service location .
We CANNOT use a cell phone bill for proof of residency.*
- Guardianship papers if the student does not live with parents.
- Transcript, withdrawal form and/or last report card from previous school.
- Copy of Birth Certificate.
- Copy of Social Security Card.
- Immunization Records.
- Special Program Records (504, Special Education, GT).
- Completed Registration Packet.



CAYUGA ISD Student Registration Form

SCHOOL YEAR

STUDENT ID NUMBER

ASSIGNED LOCKER NUMBER

GRADE AGE AS OF SEPT 1ST ORIGINAL ENTRY DATE STUDENT CELL NUMBER

[Input fields for student information]

[Input fields for school year, student ID, and locker number]

FIRST NAME

MIDDLE NAME

LAST NAME

[Input fields for first, middle, and last name]

DATE OF BIRTH (DD/MM/YYYY)

SOCIAL SECURITY NUMBER

SEX

RACE

SUFFIX (JR., SR)

[Input fields for birth date, SSN, sex, race, and suffix]

PHYSICAL ADDRESS

CITY

STATE

ZIPCODE

[Input fields for physical address, city, state, and zip code]

MAILING ADDRESS

CITY

STATE

ZIPCODE

[Input fields for mailing address, city, state, and zip code]

PARENT / GUARDIAN NAME

DATE OF BIRTH (DD/MM/YYYY)

RELATION TO STUDENT

[Input fields for parent/guardian name, birth date, and relation]

PARENT / GUARDIAN ADDRESS

CITY

STATE

ZIPCODE

[Input fields for parent/guardian address, city, state, and zip code]

CELL PHONE

HOME PHONE

EMPLOYMENT

WORK PHONE W/ EXT

[Input fields for cell phone, home phone, employment, and work phone]

PARENT / GUARDIAN NAME

DATE OF BIRTH (DD/MM/YYYY)

RELATION TO STUDENT

[Input fields for second parent/guardian name, birth date, and relation]

PARENT / GUARDIAN ADDRESS (IF DIFFERENT THAN ABOVE)

CITY

STATE

ZIPCODE

[Input fields for second parent/guardian address, city, state, and zip code]

CELL PHONE

HOME PHONE

EMPLOYMENT

WORK PHONE W/ EXT

[Input fields for second parent/guardian cell phone, home phone, employment, and work phone]

EMERGENCY CONTACT 1

PHONE

[Input fields for emergency contact 1 name and phone number]

EMERGENCY CONTACT 2

PHONE

[Input fields for emergency contact 2 name and phone number]

EMERGENCY CONTACT 3

PHONE

[Input fields for emergency contact 3 name and phone number]

**** STUDENTS WILL ONLY BE RELEASED TO THE PERSON OR PERSONS LISTED ON THIS FORM ABOVE**

PARENT INITIALS

[Input field for parent initials]



CAYUGA ISD Student Registration Form

STUDENT ID NUMBER

NOTES

STUDENT NAME

DOCTOR PREFERENCE

PHONE

HOSPITAL PREFERENCE

CITY

LIST ANY KNOWN ALLERGIES, MEDICAL PROBLEMS AND MEDICATIONS TAKEN DAILY

SIBLING NAME

GRADE

SIBLING NAME

GRADE

SIBLING NAME

GRADE

LIST ANY SPECIAL EDUCATION PROGRAMS(GT, SPECIAL ED., CHAPTER 1)

PREVIOUS SCHOOLS ATTENDED

BUS ELIGIBILITY

BUS ROUTE

PARENT EMAIL ADDRESS

Email address are used to set up your parent portal account. Cayuga ISD does not send routine emails and your email is for internal use only.

The information contained in the this form is required for a permanent school record pf your child and will be available to school personnel. Presenting false documents, records or information is a violation of state law and may subject you to tuition costs for your child.

I certify that the information given above is correct. I authorize the school to contact the persons named on this form and the above named Physician to render such treatment as may be necessary in an emergency of said child. In the event Parents, Physician or other persons named cannot be contacted, school officials are hereby authorized to take whatever action is necessary in their judgement for the health of the above child. I will not hold the school district financially responsible for emergency care and/or transportation.

PARENT OR GUARDIAN SIGNATURE

DATE



School Year

Date	Name of Student	
Grade	Date of Birth	Social Security Number
Name of School, District - City and State of School		

Dear Registrar,

The student listed above was previously enrolled in your school district and is now enrolling in Cayuga ISD. Please send the following information :

- Current Report Card
- Transcript of Grades
- Birth Certificate
- Social Security Card
- Cumulative Records
- Original Home Language Survey
- State Assessment Records
- Immunization Records
- Special Education/504 Records
- Athletic Eligibility (Records of Last Physical Performed if applicable)

According to the Final Regulations-Family Educational Rights and Privacy Act (Buckley Amendment) dated June 17, 1976; it is no longer required to obtain written consent to release records for the purpose of enrolling in school. It states that school officials, including teachers within the educational institution and officials of other schools in school systems in which the student may intend to enroll, may receive a student's record without a written consent for such release.

Thank you for your help. If you have any questions please contact :

Jessica Gonzales - PEIMS Coordinator -903-928-2102 ext. 022 or fax 903-928-2163

Lisa Krumnow - Elementary Secretary - 903-928-2295 fax 903-928-2646

Sydney Davis - Middle School Secretary - 903-928-2699 fax 903-928-2646

Leticia Bird- High School Secretary - 903-928-2294 fax 903-928-2646

<u>Cayuga Office Use Only</u>		
School Phone Number	School Fax Number	TREx
		Yes No
Date of Fax	Time of Fax	Out of State or Other Notes



School Year
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COMPLETION OF THIS FORM IS VOLUNTARY AND WILL NOT AFFECT YOUR CHILD'S ENROLLMENT.

The State of Texas requires schools to collect data relating to the enrollment of students who may have special circumstances. This collection is done to allow schools the ability to monitor and provide services accordingly. This questionnaire is intended to address the McKinney-Vento Act 42 U.S.C. 11435

Part A: Current Housing Situation

Select One :

- Stable / Adequate Transitional situations

Student lives in a house/apartment owned or rented by their parent/legal guardian?

Does the house/apartment have electricity and running water? YES NO

Housing:

- Living with another family in a house or apartment (doubled up)
- Living in a shelter Living in a motel or hotel Unsheltered

Unsheltered:

- Living in a structure not usually used for housing Living at a park, campsite, or outside
- Living in a car or camper

Part B: Students not living with a Parent/Legal Guardian

Student is not in the physical custody of a parent or legal guardian. This would include runaways living in shelters, abandoned buildings, cars, on the streets, or in other inadequate housing; children and youth denied housing by their families; school-age unwed mothers living in shelters; and students living with non-custodial relatives or friends without a parent or legal guardian.

Part C: Current Background Situation -

Please check ANY that apply.

- Domestic issues/violence Natural disaster/evacuation
- Catastrophic illness/medical expenses/disability Loss of employment/no income
- Evicted/kicked out House fire or other housing destruction
- Abandonment by parents One or both parents deceased
- Other Parent incarcerated/recently released for incarceration

Part D: Needed Services

- Free/Reduced Lunch/Breakfast School Supplies (based on availability)

STUDENT NAME [] GRADE [] DATE OF BIRTH [] CAMPUS []

NAME OF ADULT LIVING IN RESIDENCE [] RELATIONSHIP TO STUDENT (PARENT, GRANDPARENT, FRIENDS PARENT) []

STUDENT SIGNATURE (HIGH SCHOOL ONLY) [] SIGNATURE OF ADULT IN THE RESIDENCE (IF LISTED) []

CAYUGA ISD HOMELESS LIASON SIGNATURE/ DATE []

Please contact Becky Thompson at 903-928-2295 ext. 034 if you need assistance in completing this form.



School Year

STUDENT NAME	
PREVIOUS SCHOOL DISTRICT	
PARENT NAME	PARENT PHONE NUMBER

Please Answer the following questions :	NO	YES	Notes
Has your child ever been served in a Special Education program?			If yes, what grade level(s) _____
Did your child receive Speech Therapy services at their previous school?			
Did your child receive services under Section 504 at their previous school?			
Is your child an Emergent Bilingual student who received English Learner Support in a prior District?			
Was your child in a Gifted & Talented program at the previous school?			
Has your child ever repeated a grade ?			If yes, what grade level(s) _____
Has your child been served in a Dyslexia program in a previous school?			



CAYUGA ISD

TEA Texas Public School Student/Staff Ethnicity and Race Data Questionnaire

School Year

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC). School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting. Please answer both parts of the following questions on the student's or staff member's ethnicity and race. United States Federal Register (71 FR 44866)

PART 1. ETHNICITY: Is the person Hispanic/Latino?

- Not Hispanic/Latino
- Hispanic/Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

PART 2. RACE: What is the person's race? (Choose one or more)

- American Indian/Alaskan Native American Indian or Alaska Native - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- 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/African American Black or African American - A person having origins in any of the black racial groups of Africa.
- Hawaiian/Pacific Islander 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.

STUDENT/ STAFF NAME (PLEASE PRINT)	PARENT /GUARDIAN/ STAFF SIGNATURE
STUDENT/ STAFF ID #	DATE

THIS SPACE IS RESERVED FOR LOCAL SCHOOL OBSERVER - UPON COMPLETION AND ENTERING DATA IN STUDENT SOFTWARE SYSTEM, FILE THIS IN STUDENT'S PERMANENT FOLDER.	
<p style="text-align: center;">Ethnicity - Choose One</p> <p><input type="checkbox"/> Hispanic / Latino</p> <p><input type="checkbox"/> Not Hispanic / Latino</p>	<p style="text-align: center;">Race - Choose One</p> <p><input type="checkbox"/> American Indian or Alaska Native</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> White</p>
Observer Signature :	Campus and Date:



CAYUGA ISD

Family Survey



School Year

Dear Parents,

In order to better serve your children, Cayuga I.S.D would like to identify students who may qualify to receive additional educational services. The information provided below will be kept confidential. Please answer the following questions and return this survey form to your child's school.

For more information contact Becky Thompson at 903-928-2102 ext 034 or bthompson@cayugaisd.com

- Have you moved within the last 3 years? YES NO
- Was the move due to economic necessity? YES NO
- Do you have a high school aged child under the age of 22 who lacks a U.S. issued high school diploma or Certificate of High School Equivalency and is currently not enrolled in school? YES NO
- If yes, have you done agricultural or fishing related work? (e.g., field work, canneries, dairy work, meat processing) YES NO



CHILD NAME

DATE OF BIRTH (DD/MM/YYYY)

GRADE

PARENT / GUARDIAN NAME

TELEPHONE NUMBER

BEST TIME TO CONTACT YOU

If you answered "yes" to questions 1 and 2 above, Marisol Mancha from the Region 7 Education Service Center may contact you to find out whether your child is eligible for additional educational services.



CAYUGA ISD

Proof of Residence

School Year
<input type="text"/>

Note : For New To District enrolling students, a copy of a utility bill must be presented.

STUDENT IS A TRANSFER STUDENT (LIVES OUT OF CAYUGA SCHOOL DISTRICT)	<input type="checkbox"/> YES <input type="checkbox"/> NO	BUS ROUTE NUMBER
		<input type="text"/>

STUDENT FIRST NAME	STUDENT LAST NAME	STUDENTS CELL		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
PARENTS FIRST NAME	PARENTS LAST NAME	PARENTS CELL		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
PHYSICAL ADDRESS		CITY	STATE	ZIPCODE
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
MAILING ADDRESS		CITY	STATE	ZIPCODE
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>

DO YOU OWN YOUR HOME	LANDLORD NAME IF RENTING	LANDLORD PHONE
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="text"/>	<input type="text"/>
PHYSICAL LOCATION OF YOUR HOME FROM THE SCHOOL (EX: 1 MILE N OF TENNESSEE COLONY ON HWY 645)		
<input type="text"/>		
PHYSICAL DESCRIPTION OF YOUR HOME (EX: RED BRICK WITH GREEN TRIM AND GRAY SHINGLES)		
<input type="text"/>		

According to the Texas Education Code, Ch.25-Section 25.001, Cayuga ISD may require evidence that a person is eligible to attend the district at the time the school considers application for admission of a student to the district. The district may make reasonable inquiries to verify a student's eligibility for admission.

A person who knowingly falsifies information on a form required for enrollment of a student in the district is liable to the district if the student is not eligible for enrollment in the district but is enrolled on the basis of false information. The person is liable, for the period during which the student is enrolled, for the greater of:

- the maximum tuition fee the district may charge under Section 25.038 of the Texas Education Code or,
- the amount the district has budgeted for each student as maintenance and operating expense.

In addition, the individual who knowingly falsifies this information is also in violation of Texas Criminal Laws Penal Code Section 37.10. An offense under this section is a felony of the third degree.

PARENT OR GUARDIAN SIGNATURE	DATE
<input type="text"/>	<input type="text"/>



School Year
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Texas Education Code § 25.006 requires districts and open-enrollment charter schools to collect data to identify their military-connected student population and submit to the Texas Education Agency.

Please check appropriate box, if applicable:

Students in K-12th grade:

Student is a dependent of a current member of one of the following:

- U.S. military;
- Texas National Guard (Army, Air Guard, or State Guard); or
- A reserve force.

Student is a dependent of a former member of one of the following:

- U.S. military;
- Texas National Guard (Army, Air Guard, or State Guard); or
- A reserve force.

Student was a dependent of a member of the U.S. military or reserve force who has fallen in the line of duty.

The following information is requested in order for the school to be in compliance with the Texas Education Code, Section 29.081.

- Student has been incarcerated or has a parent that has been incarcerated within the student's lifetime, in a penal institution. YES NO
- Student is currently in the conservatorship of the Department of Family and Protective Services (Foster Care). The enrolling caregiver must provide a copy of the Texas DFPS Placement Authorization Form (Form 2085) or a court order that designates the student is in the conservatorship of the Department of Family and Protective Services. YES NO
- Student has been identified as having dyslexia or related disorders as defined in TEC 38.003. YES NO
- Student is enrolled in Special Programs (GT, Special Education, etc) YES NO

List any Special Programs Student is enrolled in

[]

- Has the Student ever been retained? YES NO If Yes what Grade : []
- Has the Student lived outside the U.S. for two or more years? YES NO If Yes when /where: []
- If the Student lived outside the U.S. did they attend school regularly? YES NO

CHILD NAME	GRADE	DATE
[]	[]	[]
PARENT / GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE	
[]	[]	



School Year
[]

CAYUGA ISD ENCOURAGES PARENTS AND STUDENTS TO ACCESS ALL INFORMATION ELECTRONICALLY, IF POSSIBLE, TO REDUCE THE COST IN PRINTING LARGE QUANTITIES OF FORMS AND HANDBOOKS. PLEASE CHECK EACH BOX TO ACKNOWLEDGE THAT YOU UNDERSTAND THE INFORMATION IS LOCATED ON THE DISTRICT WEBSITE AND THAT YOU AND THE STUDENT AGREE TO READ AND FOLLOW ALL INFORMATION AND INSTRUCTIONS.

Please see your Campus Office if you need a printed copy of any of the following information.

Click here for Cayuga ISD's Complete Student Code of Conduct and the Student Handbook or visit www.cayugaisd.com, navigate to any campus and click on School Handbook or Student Code of Conduct.

I accept responsibility for accessing the Student Code of Conduct and the Student Handbook located online and agree to follow all rules, regulations and procedures found therein.

Click here for Cayuga ISD's Complete Student Technology Acceptable Use Policy or visit www.cayugaisd.com, navigate to any campus and click on Student Technology AUP.

I give permission for my child to access the District's technology resources, including District-approved online applications.

Click here for Cayuga ISD's Complete Drug Testing Policy or visit www.cayugaisd.com, navigate to Athletics and click on Athletic Forms.

I have read the Cayuga ISD Student Drug Testing Policy and understand that my child's participation in school sponsored extracurricular activities is voluntary and a privilege, as is obtaining a parking permit. I understand that as part of my child's voluntary participation in school-sponsored extracurricular activities and/or in order to obtain a parking permit, I am consenting to his/her participation in Cayuga ISD's random student drug testing program for the entire academic school year.

Click here to log into the Ascender Parent Portal or visit www.cayugaisd.com, navigate to the Families Tab and click Parents. You will see the icon for the Ascender Parent Portal.

I accept responsibility to view and keep track of my students grades. I understand that mid-grading period progress reports are available online for grades 6-12 and that I can contact the middle or high school office for a printed copy. Printed grade reports are sent home at the end of each six-week grading period.

Click here for Cayuga ISD's Complete Student Handbook or visit www.cayugaisd.com, navigate to any campus and click on School Handbook. Locate the section for Buses and Other School Vehicles

I accept responsibility for reviewing the Bus Safety Rules located in the School Handbook online.

Cayuga ISD Automated Phone Notification System

I agree to receive automated notifications from the school at the contact numbers I have provided.

STUDENT NAME (PLEASE PRINT)	STUDENT SIGNATURE (MIDDLE/HIGH SCHOOL STUDENTS)
[]	[]
GRADE	DATE
[]	[]
PARENT NAME (PLEASE PRINT)	PARENT SIGNATURE
[]	[]
	DATE
	[]