

Sparks Elementary School

410-887-7900

601 Belfast Road · Sparks, MD 21152

Fax: 410-472-3190

For Kindergarten Round-up you **MUST** have the following:

Proof that the child is living in Baltimore County with the child's parent(s)/guardian. The burden of verifying domicile is the responsibility of the parent(s)/guardian and requires at least **five (5)** documents. Prior to enrolling a student in a Baltimore county Public School, we are required to ask parent(s)/guardians to provide **photo identification** with current address, work id, passport, etc. If used for identification, the document **cannot** be used to verify address. If you are sharing a residence with someone or your living arrangements are unique please let us know a.s.a.p. so we can send you through the proper channels and you can register in a timely fashion.

1. **One (1)** of the following documents is required for **proof of ownership/rental**
 - a) Deed
 - b) Signed settlement sheet
 - c) Title
 - d) Mortgage coupon book
 - e) Real estate tax bill
 - f) Current lease or rental agreement from a real estate company or commercial lessor.
 - g) Current lease or rental agreement from a private party owner. Documents that establish ownership by the private party owner of the property is required.

2. Parent(s)/guardian(s) must present **three (3) documents postmarked within 60 days to verify address**. Absolutely no junk mail will be accepted.
 - a) Income tax return for previous year
 - b) W-2 form for current year
 - c) Notarized statement on company letterhead from an employer
 - d) Mail received by parent(s)/guardian from a government agency or BCPS
 - e) Credit card billing statement
 - f) Bank Statement
 - g) Paycheck with name and address
 - h) Utility bill/Cable bill/Water bill
 - i) Voter's registration card
 - j) Motor Vehicle registration

3. Parent(s)/guardian must provide **proof of age for each child** registering. A birth certificate, hospital certificate, baptismal/church certificate or passport is acceptable.

4. A completed record of **immunizations** (DHMH896) from a physician, health clinic, or hospital.

It is necessary you and your child appear in person for Kindergarten Round-up on April 19, 2018.



**BALTIMORE COUNTY PUBLIC SCHOOLS
SPARKS ELEMENTARY SCHOOL
SCHOOL REGISTRATION FORM
PS 515, F1**

STUDENT INFORMATION	
Date:	
Student's Last Name:	Student's First Name:
Middle Name: No Middle Name: <input type="checkbox"/>	Suffix: Preferred Name:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date: (mm/dd/yy)
Grade Level:	U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Birth:	Documentation of Birth: (Name of Document)
Is a language other than English the student's first or home language? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, indicate the language):	

The U.S. Department of Education requires all public schools to collect racial and ethnicity information. Please complete Part I and II.	
Part I Hispanic (Check yes if your child is a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.) <input type="checkbox"/> YES	
Part II <input type="checkbox"/> 1. American Indian or Alaskan 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.
<input type="checkbox"/> 2. 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.
<input type="checkbox"/> 3. Black or African American	A person having origins in any of the black racial groups of Africa.
<input type="checkbox"/> 4. Native Hawaiian/Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> 5. White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

SIBLING INFORMATION					
Siblings	Brother/Sister	Age	School	Grade	Resides with registering student (yes or no)

STUDENT ADDRESS		
Street Address:	Apartment No.:	City, State, Zip Code:

STUDENT SUPPORT SERVICES INFORMATION
Check the services below that your child currently receives: <input type="checkbox"/> ELL (English Language Learners) <input type="checkbox"/> IEP <input type="checkbox"/> Free and Reduced-Price Meals <input type="checkbox"/> 504 <input type="checkbox"/> Gifted and Talented/Advanced Academics

APPLICATION INFORMATION		
Name of Person Completing Form:	Relationship:	Phone:
Do you have legal custody of this child? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are your custody documents on file? <input type="checkbox"/> Yes <input type="checkbox"/> No Year:
Child Lives With	<input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father	
	<input type="checkbox"/> Guardians <input type="checkbox"/> Foster Parent(s) <input type="checkbox"/> Other _____ Name: _____	
	Are you residing in temporary housing or do you lack housing? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, school will immediately contact pupil personnel worker to provide assistance. (Parent/Guardian is to complete HSE-1 Form)		



**BALTIMORE COUNTY PUBLIC SCHOOLS
SPARKS ELEMENTARY SCHOOL
SCHOOL REGISTRATION FORM
PS 515, F1**

PARENT/GUARDIAN INFORMATION

Primary Guardian Name:	Phone Numbers	Home, Work, Cell	Receive Texts? (Y/N)
Guardian Relationship:			
Does the student reside with this contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, list Address or P.O. Box:			
City, State, Zip Code:	Email:		
Employer:	Full-Time Active Military? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Secondary Guardian Name:	Phone Numbers	Home, Work, Cell	Receive Texts? (Y/N)
Guardian Relationship:			
Does the student reside with this contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, list Address or P.O. Box:			
City, State, Zip Code:	Email:		
Employer:	Full-Time Active Military? <input type="checkbox"/> Yes <input type="checkbox"/> No		

AUTOMATED PHONE CALLS

In addition to emergency notifications, the contact listed above may receive calls, emails, texts, and pre-recorded messages regarding non-emergent information. Non-emergent information is that which does not pertain to a school closing, medical or safety emergency. Non-emergent information includes, but it is not limited to: school calendar updates, student testing reminders, Superintendent's messages, school activities, and notifications pertaining to your student's daily activities, school responsibilities or events.

If you would like non-emergent notifications to be sent to a different number, please specify below:

Non-Emergent Number:	Ext:	<input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell	Receive Texts? <input type="checkbox"/> Yes <input type="checkbox"/> No
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If you would like to opt out of non-emergent notifications, sign here:

Note: Your signature confirms that you will not receive calls regarding non-emergent information.

EMERGENCY CONTACT LIST (Please list by order of contact)

In the event of an emergency ONLY when parents/guardians cannot be reached, please list three people we may contact to pick up your student. NOTE: This does not represent a list for general dismissals. All dismissals must be approved by a parent/guardian, preferably in writing. In case of an accident or serious illness, the school will contact the parent/guardian. If the school is unable to reach the parent/guardian, the school will contact the parties listed below or the child's physician/dentist on the health form. The school will also make whatever arrangements seem necessary, including calling an ambulance and transporting your student to the hospital.

Name	Relationship	Telephone

Elementary Only: In a school closing emergency who is responsible for the student? If not parent/guardian, list name and address:	In a school closing emergency, how will the elementary student be transported? <input type="checkbox"/> Walk <input type="checkbox"/> Ride Bus <input type="checkbox"/> Pick-Up
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Upon notification by school staff, I agree to send my child home by taxicab if necessary. I also agree to be responsible for calling the cab and for payment of the cab. Yes No

Secondary Only: DO NOT permit my child to participate in the Maryland Youth Tobacco & Risk Behavior Survey (MYTRBS).

*Please read carefully before signing this form:
I understand that if it is determined that I have provided false information regarding my place of residence, my child will be withdrawn from school and tuition will be assessed on a pro-rated basis for the period of time that he/she was fraudulently enrolled. (Tuition rates are currently over \$6,000 per year and are increased on an annual basis.)*

To the best of my knowledge, all information entered on this enrollment form is accurate.

Signature of adult responsible for the student's enrollment	Date
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Baltimore County Public Schools
Sparks Elementary
 Emergency Contact Information for School Year 2018-2019

No Changes for 2018-2019

First Name _____ Last Name _____ Grade _____

Address _____

Date Of Birth _____

Siblings (attending BCPS)

Name	Relationship	School	Reside with student (yes or no)	
			Yes	No
			Yes	No
			Yes	No
			Yes	No

Parent/Guardian Emergency Contact Information

Primary Guardian in the event of a student absence, school closing or other emergency

Primary Guardian Name:	Phone Numbers	Home, Cell, Work	Receive Texts? (Y/N)
Guardian Relationship:			
Resides with Student: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Address:			
City, State, Zip Code:			
Email:			

In addition to emergency notifications, the contact listed above may receive calls, emails, texts, and pre-recorded messages regarding non-emergent information. Non-emergent information is that which does not pertain to a school closing, medical or safety emergency. Non-emergent information includes, but it is not limited to: school calendar updates, student testing reminders, Superintendent's messages, school activities, and notifications pertaining to your student's daily activities, school responsibilities or events.

If you would like non-emergent notifications to be sent to a different number, please specify below:

Non-Emergent Number: _____ Ext: _____ Work Home Cell Receive Texts? Yes No

If you would like to opt out of non-emergent notifications, sign here:

Note: Your signature confirms that you **will not** receive calls regarding non-emergent information.

To submit opt-out preferences for your child's directory information, intellectual property and student photo, video and sound recordings, complete the Student Privacy Options Opt-Out Form (Rule 6202, Attachment) and return to your child's school.

Secondary Guardian to be called if Primary Guardian cannot be reached.

Secondary Guardian Name:	Phone Numbers	Home, Cell, Work	Receive Texts? (Y/N)
Guardian Relationship:			
Resides with Student: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Address:			
City, State, Zip Code:			
Email:			

Emergency Contact Information for School Year 2018-2019

No Changes for 2018-2019

First Name _____ Last Name _____

In the event of an emergency ONLY when parents/guardians cannot be reached, please list three people we may contact to pick up your student. **NOTE: This does not represent a list for general dismissals. All dismissals must be approved by a parent/guardian, preferably in writing.** In case of an accident or serious illness, the school will contact the parent/guardian. If school is unable to reach the parent/guardian, the school will contact the parties listed below or the child's physician/dentist on the health form. The school may also make whatever arrangements seem necessary, including calling an ambulance and transporting your student to the hospital.

Other Emergency Contacts: People to whom student can be released from school.

Name	Relationship	Telephone	Home, Work, Cell

In the event only Sparks Elementary closes early due to unexpected emergency, who is responsible for the student when released from school? If someone other than parent/guardian, please list below:

Name:	Phone Numbers	Home, Work, Cell	Receive Texts? (Y/N)
Relationship:			
Address:			
City, State, Zip Code:			
Email:			

The student will (check one): Walk to above address Be picked up from school Ride assigned school bus
 Upon notification by school staff, I agree to send my child home by taxicab if necessary. I also agree to be responsible for calling the cab and for payment of the cab Yes No

Does the student have a parent/guardian on full-time duty in the active military services of the United States or on full-time National Guard Yes No

By law, if parents are legally separated or divorced, each parent has equal rights to the custody of the child, UNLESS a parent has a court order that indicates otherwise. The school MUST HAVE A COPY OF THE CURRENT COURT ORDER on file.

I have provided the school with legal papers for the student.

NOTE: Legal papers include custody papers, protective and/or peace orders, and other court orders.

I certify all information on this form is correct and up-to-date.

Parent/Guardian Signature

____/____/____
Date



BALTIMORE COUNTY PUBLIC SCHOOLS

STUDENT PRIVACY OPTIONS

RULE 6202, Attachment

STUDENT INFORMATION

Student's Full Name (Please Print):

School Name:

Grade:

School Year:

COMPLETE AND RETURN YOUR CHILD'S STUDENT PRIVACY OPTIONS

ONLY IF YOU ARE OPTING OUT OF THE DISCLOSURE OF ANY OF THE INFORMATION LISTED BELOW

DIRECTORY INFORMATION OPT-OUT

The Family Educational Rights and Privacy Act (FERPA) and state regulation permit Baltimore County Public Schools (BCPS) to disclose designated "directory information" without a parent's written consent, unless you have notified BCPS to the contrary. As defined by FERPA, directory information is personally identifiable information that would not generally be considered harmful or an invasion of privacy if disclosed. BCPS designates the following student information as directory information:

- Student first and last name
- Dates of school attendance
- Grade level
- School enrollment status
- Most recent school attended
- Major field of study
- Participation in official activities and sports
- Weight and height of athletic team participants
- Degrees and awards received
- Photographic, video or electronic images

PARENTS/GUARDIANS MAY OPT OUT OF HAVING BCPS DISCLOSE THEIR CHILD'S DIRECTORY INFORMATION IN THE FOLLOWING WAYS:

- **IN SCHOOL PUBLICATIONS** (disclosure of directory information in school publications, such as school newsletter, yearbook/memory book, graduation program, theatre playbill, athletic team roster, displays, brochures and other school publications.)
- **IN BCPS/SYSTEMWIDE PUBLICATIONS** (disclosure of directory information in school system publications, such as the BCPS school information calendar, student handbook, meeting handouts/PowerPoint presentations, annual budget book and other BCPS/systemwide publications.)
- **IN BCPS/SYSTEMWIDE AND SCHOOL COMMUNICATIONS** (disclosure of directory information in systemwide and school communications, such as BCPS/school television, BCPS/school Web site, BCPS/school social media [e.g. Facebook, Instagram, Twitter, Flickr, Blogs, etc.] and other BCPS/systemwide and school communications).
- **TO OUTSIDE NEWS MEDIA ORGANIZATIONS** (disclosure of directory information, upon request, to news media organizations outside of BCPS, such as local and national TV and radio stations, newspapers or magazines).
- **TO A THIRD PARTY OTHER THAN NEWS MEDIA ORGANIZATIONS** (disclosure of directory information, upon request, to news media organizations outside of BCPS, such as local and national TV and radio stations, newspapers or magazines).

Parents may choose **NOT** to allow BCPS to disclose their student's directory information.

To **Opt Out** of BCPS disclosing your child's directory information, please place a checkmark (✓) in the appropriate box or boxes below:

- Opt out of disclosure in school publications
- Opt out of disclosure in BCPS/systemwide publications
- Opt out of disclosure in BCPS/systemwide and school communications
- Opt out of disclosure to outside news media organizations
- Opt out of disclosure to a third party other than news media organizations

PRIVACY OPTIONS OTHER THAN DIRECTORY INFORMATION

MILITARY RECRUITERS/INSTITUTIONS OF HIGHER EDUCATION OPT-OUT (SECONDARY STUDENTS ONLY)

- OPT OUT** of disclosing my child's name, address and phone number to military recruiters.
- OPT OUT** of disclosing my child's name, address and phone number to institutions of higher education.

PHOTOGRAPHY/FILMING BY OUTSIDE NEWS MEDIA ORGANIZATIONS OPT-OUT

- OPT OUT** of allowing members of outside news media organizations to photograph or film my child during the school day in relation to a story about BCPS schools/students.

STUDENT INTELLECTUAL PROPERTY OPT-OUT

- OPT OUT** of BCPS publishing and/or displaying my child's intellectual property and/or student-created publications. A student's intellectual property is published/displayed with your child's first and last names or with a group name, school and grade.

*** CONTINUED ON PAGE 2 ***

DIRECTORY INFORMATION

The Family Educational Rights and Privacy Act (FERPA), a federal law, as well as State regulation (COMAR 13A.08.02) permit the disclosure of directory information from a student's education record without the parent's prior written consent unless the parent has opted out of such disclosure. (To opt out means that a parent/eligible student does not permit BCPS to disclose a student's directory information.) Please note that, in certain situations, federal and state laws and regulations may permit or require the disclosure of the information from a student record to authorized persons or entities even if you have opted out of its disclosure as directory information.

OPT OUT OF PUBLISHING DIRECTORY INFORMATION

Parents may opt out of having BCPS disclose their student's directory information in the following ways:

• **IN SCHOOL PUBLICATIONS -**

These publications include: (1) lists of students participating in officially recognized activities and sports, which may include playbills, programs or rosters; (2) lists of students receiving honors, awards and scholarships; (3) athletic team rosters, which may include a team member's name, height and weight; (4) lists of students with degrees conferred and awards received; (5) school newsletters, yearbooks/memory books; (6) school/classroom displays; (7) school brochures; or (8) other means. A parent may request that BCPS not disclose the directory information of their child in school publications by checking the "opt out of disclosure in school publications" box on p. 1. (If you opt out of school publications, your child's photo and directory information will not be published in the school's yearbook/memory book.)

• **IN BCPS/SYSTEMWIDE PUBLICATIONS -**

These publications include: (1) school information calendar; (2) student handbook; (3) meeting/conference handouts/programs; (4) brochures; (5) annual budget; and (6) other means. A parent may request that BCPS not disclose the directory information of their child in systemwide publications by checking the "opt out of disclosure in BCPS/systemwide publications" box on p. 1.

• **IN BCPS/SYSTEMWIDE AND SCHOOL COMMUNICATIONS -**

These communications include: (1) BCPS/school television; (2) BCPS/school Web site; (3) BCPS/school social media (e.g. Facebook, Instagram, Twitter, Flickr, Blogs, etc.); and (4) other BCPS/school communications. A parent may request that BCPS and schools not disclose the directory information of their child in communications by checking the "opt out of disclosure in BCPS/systemwide and school communications" box on p. 1.

• **TO OUTSIDE NEWS MEDIA ORGANIZATIONS -**

There are times when BCPS may send a story of interest regarding a school to various media. These news media organizations include local and national TV and radio stations, newspapers or magazines. A parent may request that BCPS not disclose the directory information of their child to the media by checking the "opt out of disclosure to outside news media organizations" box on p. 1.

• **TO A THIRD PARTY OTHER THAN NEWS MEDIA -**

Directory information may be provided to individuals and organizations outside of BCPS (e.g. PTAs and booster organizations, state and county agencies, level 2 apps, and other third parties.) A parent may request that BCPS not disclose the directory information of their child to a third party by checking the "opt out of disclosure to a third party other than news media" box on p. 1.

NOTE: The *Student Privacy Options* on Page 1 do not include videotaping by security cameras in school or on school buses or for pictures used for student ID cards or badges, nor do the privacy preferences apply to school activities or events that are open to the public.

MILITARY RECRUITERS AND/OR INSTITUTIONS OF HIGHER EDUCATION (SECONDARY STUDENTS ONLY)

Federal law requires BCPS to provide, on a request made by a military recruiter or institution of higher education, access to the *name, address and telephone listing* of each secondary school student, unless the parent has notified the school principal in writing that this information not be disclosed. State law also requires BCPS to provide the same information to official recruiting representatives of the military forces of this state and the United States in order to inform students of educational and career opportunities available in the military. Parents must request that their child's name, address and telephone listing not be disclosed to military recruiters and institutions of higher education by checking the appropriate opt-out box(es) on p. 1.

PHOTOGRAPHY/FILMING BY OUTSIDE NEWS MEDIA ORGANIZATIONS OPT-OUT

There are times when a school may be featured in various media. News reporters, photographers and/or film crews from TV, radio stations, newspapers or magazines may wish to photograph or film your child during the school day in relation to a story about our schools or students. A parent may request that the media not photograph or film their child by checking the "outside news media opt-out" box on p. 1

STUDENT INTELLECTUAL PROPERTY OPT-OUT

BCPS may publish and/or display a student's intellectual property and/or a student's publications/productions created during school-sponsored activities and/or learning experiences. Student-created works may be displayed in schools, at school-sponsored events or used in BCPS publications or communications through digital and print media including: school newsletters, yearbooks/memory books, BCPS/school Web sites, social media sites (e.g., Facebook, Instagram, Twitter, Flickr, Blogs, etc.), the school system's cable television channel, brochures or by other means. Intellectual property includes, but is not limited to: (1) Patentable and potentially patentable works (processes, machines, manufactures or compositions of matter); devices; and supporting technology and know-how that is required for development or application of any of the foregoing; (2) Copyrightable material, such as text (manuscripts, books and articles); videos and motion pictures; music (sound recordings, lyrics and scores); images (print, photographs and art); and computer software (programs, databases and Web pages). A parent may request that their child's intellectual property and publications/productions not be published or displayed by any means by checking the opt-out box on p. 1. (If you opt out, your child's intellectual property will not be displayed in the school or by any other means.)

NOTE: A student's work will appear with the student's first and last names or with a group name, school and grade.
If you have checked any of the opt-out boxes on p. 1, you must sign and return your *Student Privacy Options* to your child's school.
Your school will assume that you have not opted out of the disclosure of your child's information, unless you submit your *Student Privacy Options* **no later than October 1 or within 30 days of enrollment in a BCPS school.**

PARENT/ELIGIBLE STUDENT (18 YEARS OR OLDER) SIGNATURE

Parent/Eligible Student Name (Print)	Parent/Eligible Student Signature	Date
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Note: The opt-out preferences noted on Page 1 are for the **CURRENT SCHOOL YEAR ONLY**.
If you wish to make changes to your *Student Privacy Options*, you must submit new privacy options to your child's school.
*** Please discuss your opt-out preferences with your child ***



Baltimore County Public Schools

Prekindergarten Experience/Prior Care

2018-2019

The Maryland State Department of Education (MSDE) requires Baltimore County Public Schools to collect information about the early care experiences of all newly enrolling kindergarten students. Using the definitions listed on the back, please provide the following information and return it to the school in which your child will be enrolled.

Student's Name: _____ Date of Birth: ____/____/____

School: _____ Kindergarten Year: _____

1. Has your child been cared for **exclusively** at home or by a relative **since last September?**

Yes No

2. If **No**, in what kind of early care did your child spend **most** of his/her time **since last September?** (Check only **one** box.)

- | | |
|--|---|
| <input type="checkbox"/> Head Start | <input type="checkbox"/> Prekindergarten in a public school |
| <input type="checkbox"/> Child Care Center | <input type="checkbox"/> Family Child Care |
| <input type="checkbox"/> Non-Public Nursery School | <input type="checkbox"/> Kindergarten |
| <input type="checkbox"/> Informal Care (cared for at home by a relative or non-relative) | |

3. In addition to the experience selected above, has your child had **any** of the following services? Include the name of the school, center, or provider on the line. (Check **as many** as may apply.)

- Head Start _____
- Prekindergarten in a public school _____
- Child Care Center _____
- Family Child Care _____
- Non-Public Nursery _____
- Informal Care _____
- ABC _____
- Others not listed _____