



Frederick County Public Schools Enrollment Form

Board of Education of Frederick County
191 South East Street
Frederick, Maryland 21701

FCPS Form 400-07F
[Regulation 400-07](#)
March 2023

Clear Form

Enrollment Date	Student ID#	School Name	Bus #
Enrollment Code	Teacher Name	School #	Walker

THE FOLLOWING ITEMS ARE REQUIRED BY MARYLAND LAW BEFORE A STUDENT CAN ATTEND/ENROLL IN SCHOOL

If you are missing any of the following information please see the secretary.

- **Proof of Date of Birth** *Birth Certificate, Physicians Certificate, Church Certificate, Passport/Visa/Hospital Certificate, Parent Affidavit*
- **Proof of Residency** *Signed Lease Agreement, Utility Bill (electric/water/gas), property tax bill, cable bill.*
- **Proof of Immunizations**

Legal Name of Student:

First Name FULL Middle Name Last Name Gender Date of Birth

Home Phone Number: _____ Grade: _____

Student's Preferred Name or Nickname (optional): _____

EVIDENCE OF DATE OF BIRTH (Check one. School will retain a copy.)

Birth Certificate Physician's Certificate Church Certificate Parent's Affidavit Passport/Visa Hospital Certificate
Other (specify) _____

RACE: (check all that apply): American Indian/Alaskan Native Asian Black or African American White Native Hawaiian or Pacific Islander

ETHNICITY: Is the student Hispanic or Latino? Yes No Country of Birth: _____

What language(s) did the student first learn to speak? _____

What languages does the student use most often to communicate? _____

What language(s) are spoken in your home: _____

STUDENT ADDRESS: Please include a street address with PO Boxes

House Number / Street Name / Apartment Number / PO Box City / State / Zip Code

Is this address out-of-district? Yes No *If yes, school will refer to PPW*

LEGAL PARENT/GUARDIAN INFORMATION Enter one guardian in each area. Enter PRIMARY CONTACT FIRST.

Legal Parent/Guardian Name: _____ **Relationship to Student:** _____

Address (if different from student): _____

House Number / Street Name / Apartment Number / PO Box City / State / Zip Code

Phone Numbers: Cell: _____ Home: _____ Work: _____

Email: _____

Legal Parent/Guardian Name: _____ **Relationship to Student:** _____

Address (if different from student): _____

House Number / Street Name / Apartment Number / PO Box City / State / Zip Code

Phone Numbers: Cell: _____ Home: _____ Work: _____

Email: _____

Is there a court order concerning custody? Yes** No Not applicable

Type of proof of custody and/or guardianship, e.g., court / legal documents: _____

Is there a "NO CONTACT" order? Yes** No

***FCPS must have a copy of any court orders relating to CUSTODY or NO CONTACT in order to honor the request.*

ADDITIONAL STUDENT INFORMATION

Will you allow your child's name to be published? (e.g., newspaper, FCPS television broadcasts, Honor Roll) Yes No
Is the current address a temporary living arrangement? Yes No
If yes, is this current living arrangement due to lack of housing or economic hardship? Yes No

PRIOR SCHOOL INFORMATION

School Last Attended: _____ Date(s) Last Attended: _____
Address: _____
Contact: _____ Phone: _____
Is your child currently attending, or has your child ever attended a Maryland Public School or a Frederick County Public School?
If YES, please provide school district name: _____
Is the student currently expelled or suspended from another school? Yes No If yes, school will refer to PPW Yes No
Is the student transferring from an alternative school? Yes No If yes, school will refer to PPW

SPECIAL SERVICES

Was your child enrolled in a special program? Yes No
If yes, please specify: Special Education: Hours of service: _____ 504 Plan Student Support Teacher Services
Court Placement: Residential Other
Multilingual Education Program Specify one: Beginner Intermediate Advanced

EMERGENCY CONTACTS (OTHER THAN LEGAL PARENT/GUARDIAN)

Name: _____ Relationship to Student: _____
Address (if different from student): _____
House Number / Street Name / Apartment Number City / State / Zip Code
Phone Numbers: Cell: _____ Home: _____ Work: _____
Email: _____

Name: _____ Relationship to Student: _____
Address (if different from student): _____
House Number / Street Name / Apartment Number City / State / Zip Code
Phone Numbers: Cell: _____ Home: _____ Work: _____
Email: _____

DAY CARE PROVIDER:

Name _____ House Number / Street Name _____ City / State / Zip Code _____
Phone Numbers: _____ (home) _____ (cell)

HOUSEHOLD MEMBERS

Name _____ Date of Birth _____ Relationship to student _____
Name _____ Date of Birth _____ Relationship to student _____
Name _____ Date of Birth _____ Relationship to student _____

HEALTH CONCERNS (e.g., takes daily medications, wears glasses, hearing problem, allergies, diabetic, etc.)

Describe: _____

Immunization records on file? Yes No

Has the child received a physical examination in the past 9 months? Yes No
Is DHMH on file? Yes No If no, give reason: Insufficient financial resources Lack of access to care

Community Services (optional): If your family has been in contact and/or has received services from outside agencies, please indicate (e.g., Mental Health, Social Services, Community Agency School Services (CASS): _____

DISCLAIMER: Your son/daughter _____ has been enrolled on the basis of available information. Upon receipt of all records and information, formal enrollment will be completed. Any person who willfully makes a material misrepresentation shall be subject to a penalty payable to the County for three times the pro rata share of tuition for the time the child fraudulently attends a Frederick County Public School.

*Contact information provided in this document will be used by authorized FCPS and Frederick County Health Department (FCHD) employees to contact parent(s)/guardian(s) of students when necessary.

Signature: _____ Date: _____

Student's Name: _____

Parent Signature/Date: _____

AGREEMENTS:

● **STUDENT HANDBOOK**

Please read <https://www.fcps.org/about/calendar-handbook>.

I have read and agree to the terms of the policy: Yes No

● **ACCEPTABLE USE / INTERNET USE POLICY**

Please read <https://www.fcps.org/boe/selected-policies#internet>.

I have read and agree to the terms of the policy: Yes No

● **ELECTRONIC DEVICE USAGE AGREEMENT**

Please read <https://registration.powerschool.com/resources/3835/files/Electronic%20Device%20Usage%20Agreement.pdf>

I have read and agree to the terms of the policy Yes No

Will your student need a device? Yes No

● **MILITARY ACCESS**

Federal law requires school systems that receive assistance under the Elementary and Secondary Education Act of 1965 to provide military recruiters and institutions of higher education, upon request, access to secondary students' names, addresses and telephone listings. The requirement may be waived.

I grant permission to release information to the military. Yes No

● **PRIVACY POLICY**

Please read <https://www.fcps.org/privacy-policy>

I have read and agree to the terms of the policy: Yes No

● **TERMS OF SERVICE**

Many of the learning activities, educational programs, and services that FCPS teachers use with students involve interactive websites that require a student login. These "Digital Tools" are thoroughly reviewed by our curriculum, technology, and student data teams for approval for student use and for compliance with all federal and state student data privacy laws. A more detailed explanation of the tools can be found on <https://www.fcps.org/about/digital-tools>. After reviewing the Core and Supplementary Digital Tools please answer the below question.

I agree to allow my child to use FCPS-approved digital tools: Yes No

● **YOUR CHILD AND MEDIA EXPOSURE**

In the course of school activities, FCPS staff and/or the news media occasionally wish to interview, photograph or videotape students, and/or make public their names, work or likenesses in print, on television, radio or by electronic means such as the Internet. This includes but is not limited to honor roll, school publications and artwork. Unless indicated otherwise below, we will assume your permission to do so. (FCPS cannot control media coverage of events that are open to the public)..

Release student's information to Media: Yes No

Include student name in honor roll publication. Yes No

Include student name and photo in yearbook. Yes No

● **SOCIAL MEDIA / NEWSPAPER / PUBLICATIONS**

Schools may use one or more social media platforms (Facebook, Twitter, Instagram, YouTube...) to share the positive activities happening in our buildings: student learning, engagement, collaboration, celebrations, accomplishments, etc. When posting, student confidentiality is respected. Stories refer to groups of students, or utilize first names only, with the exception of previously published information. Examples of this could include a link to an exciting story that has already appeared on public TV, radio or in print publications; or a published list of student winners in state, regional or national contests with a school-based connection. This notice serves to inform you of the practice. If you DO NOT wish to have your child included in a social media post, newspaper or publication, please indicate that below.

Student may be included on Social Media: Yes No

● **RECORD GOOGLE MEET**

Please read the Google Meet Recording, Student Privacy and Security, <https://www.fcps.org/student-services/google>.

I have read and agree to the Google Meet Recording policy. Yes No