



South Range Local Schools

... a school family serving children and those who love them

11300 Columbiana-Canfield Rd., Suite B • Canfield, Ohio 44406 • Phone: 330-549-5226 • Fax: 330-549-4740

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South Range Local School District Required Open Enrollment Documents

(Kindergarten students need to be five (5) years of age on or before **August 1st**)

In order to accommodate your registration quickly, we must comply with the legal requirements of the following:

Federal/State Law-“Missing Child Act”	State Law ORC 3313.64-Legal Custody
State Law ORC 3313.64-Legal Residency	South Range Board of Education Policy/Guidelines #5111

Please help us by submitting **all** the necessary legal documents for the enrollment process. Incomplete documentation may cause delays in the entry of the student to their school or possible exclusion/withdrawal from the District due to lack of records per the above legal mandates. The following documentation/information **must** be filed with Central Enrollment to comply with the legal requirements of the “Missing Child Act” and the South Range Board of Education:

- 1. **A completed South Range Local Registration/Enrollment Form.**
- 2. **A completed New Student Record Release form to be faxed to the previous school for the student records.**
- 3. **Custody Papers-**If your child is **NOT** living with **BOTH** biological parents listed on the official birth certificate and the parents were married at the time of the student’s birth, one of the following must be provided:
 - **A complete copy of the current filed/stamped court document (divorce decree, shared parent agreement, etc.)** including, but not limited to, information stating legal custodial/residential parent information and signature page of parents and Judge/Magistrate.
 - If legal custody has not been established, the petitioner has sixty (60) days from the time of enrollment to produce a signed Journal Entry of Judgment establishing a change in custody. **In order for your child to be enrolled in South Range Local Schools during this waiting period, a copy of the filed/date stamped motion petitioning the court for a change in custody must be provided.**
- 4. **Certified Birth Certificate (photocopy)-**If you do not have an original and your child was born in Ohio, you may obtain a certified copy of a birth certificate through the Youngstown City Health District-Division of Vital Statistics at 345 Oak Hill Ave., Suite 200, Youngstown, Oh 44502. There is a fee required. Contact them at 330-743-3333 for more details.
- 5. **Photo I.D. of Parent/Custodial Parent/Guardian must be presented when registering a student.** Also, any paperwork showing a parental name change (i.e. divorce/re-marriage) must be presented.
- 6. **Social Security Card for the student. (photocopy)**
- 7. **Updated Immunization Record (photocopy)-**Immunization records from the student’s birth to present **must be submitted with the registration forms.** For Kindergarten, the physical form, with possible additional immunizations, must be submitted prior to the first day of kindergarten.
- 8. **Proof of Residency-** South Range Local Schools does have a State Wide Open Enrollment policy. All students in Ohio school districts and district residents must provide the following when registering:
 - A Notarized Residency Affidavit from the Parent/Guardian-*form attached*

*****Applications must be delivered in person to the South Range Schools Board of Education office. Applications sent via mail will not be considered. Applications must be complete at the time of delivery. No copies of documentation will be made when delivering applications.*****

Board of Education

John Kuhns • Dale Murray • Amy White • Ralph Wince • Corey Yoakam

South Range Local School District- 2017/2018 Registration & Enrollment Form

Office Use Only- Verification: Birth Certificate _____ SS Card _____ Proof of Res _____ Immunization _____

Custodianship _____ Records Request Sent _____ Records Received _____

Today's Date: _____ Admission Date: _____

Student's Name: _____
First Middle Last

Is there a name your child prefers to be called (if so, what): _____

Student Social Security Number: _____ Birthdate: _____
mm/dd/yy

Age: _____ Gender: _____ Grade for 2017/2018: _____
M or F

Race: Asian African American American Indian/Alaskan Native Native Hawaiian/Pacific Islander White
Ethnic Category: Asian African American Hispanic Indian Multi Racial White
Is the child of Hispanic/Latino heritage? Yes No

Native Language: _____ Home Language: _____

Student's Birthplace City: _____

Student Status: _____ Admitted From IRN: _____
(completed by office) (completed by office)

Address of Residence: _____
Street/Apt #

City State Zip

Mailing Address (if different from residence): _____
Street/ P.O. Box

City State Zip

Primary Contact Number: _____ (the number you wish to receive call off information)

County of Residence: _____ Student SSID: _____
(completed by office)

Attendance: Did your child miss 0-10 10-20 20 or more days during the previous school year?
Was your child ever suspended or expelled from a previous school? If so, when and for how long?

Is your child on an Individual Education Plan (IEP) or 504 Plan?

Was your child in any special class(es) at a previous school? (ex: Speech, Title I, etc.)

Contacts

Mother's/Guardian First & Last Name: _____
Address (if different from student): _____
Street City State Zip
Home Phone: _____ Cell Phone: _____ Email: _____
(***must provide in order to view grades)
Place of Employment: _____ Phone: _____

Father's/Guardian First & Last Name: _____
Address (if different from student): _____
Street City State Zip
Home Phone: _____ Cell Phone: _____ Email: _____
(***must provide in order to view grades)
Place of Employment: _____ Phone: _____

*****An email address is required by at least one parent.**

Parents are: Married Separated Divorced Widowed Never married

Student lives with: Both Mother & Father Mother Father Step-parent Guardian

Legal Custody: Both Mother & Father Mother Father Step-parent Guardian

****If parents are not married or student resides with a guardian, court documents are required stating residential, custodial, and parenting rights.**

Step Parent First & Last Name: _____
Address (if different from student): _____
Street City State Zip
Home Phone: _____ Cell Phone: _____ Email: _____
Place of Employment: _____ Phone: _____

Step Parent First & Last Name: _____
Address (if different from student): _____
Street City State Zip
Home Phone: _____ Cell Phone: _____ Email: _____
Place of Employment: _____ Phone: _____

Any other information that the school district should be aware of: _____

I understand that the falsification of any of the above information will void the open enrollment application.

Parent/Guardian Signature _____ Date _____



SOUTH RANGE LOCAL SCHOOL DISTRICT –RESIDENCY AFFIDAVIT

I, _____, certify that I am the Owner Tenant Resident
First Name Last Name

Of the dwelling/apartment located at:

Street number and name City Zip Code

Date of Occupancy _____ Phone Number _____

I, _____ certify that I am a full-time resident of the above address located in the State of Ohio.

School District of Residence _____ County _____

Residence Verification must be brought to the South Range Local Schools Registrar at the time of registration as follows:

- If you are the owner of the dwelling, any one (1) of the following items listed below is acceptable:
 Insurance Policy on dwelling Signed rental agreement Utility Bills

By initialing the following statements, I further certify that:

_____ This information is true, accurate, and not made for the purpose of circumventing the attendance laws of the State of Ohio or the policies of the Board of Education requiring legal residency in order to attend South Range Local Schools.

_____ I also understand that an attendance officer may visit my home to verify residency at this address.

NOTE: BE SURE YOU HAVE READ THIS STATEMENT CAREFULLY BEFORE YOU SIGN. IF YOU FALISFY THE INFORMATION PROVIDED ON THIS AFFIDAVIT, YOU MAY BE FOUND GUILTY OF A MISDEMANOR OF THE FIRST DEGRE AND LIABLE FOR A PENALTY UNDER LAW AND TUITION REIMBURSEMENT.

LIST BELOW THE NAMES OF ALL PERSONS LEGALLY RESIDING AT THE ABOVE ADDRESS:

Adults-First & Last Names	Children-First & Last Names & Age

Student's Name _____ Relationship to student _____

NOTE: SIGN ONLY IN THE PRESENCE OF AN OHIO NOTARY PUBLIC.

SIGNATURE: _____ Date: _____
(Parent/Guardian)

Please Print: _____ Signature of Residence Owner/Renter _____

County of Mahoning) Attested to and subscribed in my presence. this _____ day of _____, 20_____
 State of Ohio) (Seal)
 Notary Public _____
 Commission Expires _____



South Range Local School District
 11375 Columbiana Canfield Road
 Canfield, Oh 44406
 Phone: 330.549.5226 Fax: 330.549.4740



South Range Local School District IRN #048363

Previous School _____ Address _____

City _____ State _____ Zip _____ Phone _____

Fax Number _____

AUTHORIZATION AND REQUEST FOR RELEASE OF SCHOOL RECORDS

Please release all scholastic, health, attendance, testing, or other records that promote the educational welfare of my child.

STUDENT INFORMATION:

Grade: _____

Last Name: _____ First Name: _____ Middle: _____

Date of Birth _____ Social Security #: _____

Address: _____ City/State: _____ Zip Code: _____

Telephone: _____ Reason for Request _____

Signature of Parent/Guardian

Date

Please check box for correct school for records to be faxed or mailed to:

Grades K-4:

SOUTH RANGE ELEMENTARY SCHOOL

11300 COLUMBIANA CANFIELD RD., SUITE E, CANFIELD, OH 44406

Phone: 330-549-5578 Fax: 330-549-3430

Grades 5-8:

SOUTH RANGE MIDDLE SCHOOL

11300 COLUMBIANA CANFIELD RD., SUITE M, CANFIELD, OH 44406

Phone: 330-549-4071 Fax: 330-549-4073

Grades 9-12:

SOUTH RANGE HIGH SCHOOL

11300 COLUMBIANA CANFIELD RD., SUITE H, CANFIELD, OH 44406

Phone: 330-549-2163 Fax: 330-549-4083