

Montvale Public Schools Student Registration (Page 1 of 3)

Today's Date: _____ Grade Entering: _____ District Entry Date: _____ NJ Entry Code: _____

*****FOR KINDERGARTEN REGISTRATION: Please provide a small current picture of your child for our records*****

Student Enrollment Information:

Name: _____ Gender: M or F (circle)
(Last) (First) (Middle)

Street Address: _____ City: _____ Zip: _____

Home Phone Number (Area Code + Number): _____

Date of Birth: _____ Birth City: _____ Birth State: _____ Birth Country: _____

If born outside USA, first entry date into a U.S. school (required info): _____

Ethnicity: (please circle) Hispanic White Asian Black American Indian Hawaiian Native

Primary (Native) Language: _____ Home Language: _____

Military Connected: () Yes () No If Yes: () Active () Not Active

Unusual home conditions affecting pupil (i.e. death, divorce, separation, relatives living in home, etc.):

Previous school attended (name, address, city, state): _____

Parent Information:

Parent/Guardian (Mother)

Parent/Guardian (Father)

Name: _____

Name: _____

Street Address: _____

Street Address: _____

City: _____

City: _____

State: _____ Zip: _____

State: _____ Zip: _____

Home Phone No.: _____

Home Phone No.: _____

Cell Phone No.: _____

Cell Phone No.: _____

E-Mail: _____

E-Mail: _____

☐ *Please check if you would like to be informed of Emergency School Closing by E-mail*

I have reviewed my child's data and certify that the information is correct as submitted:

Parent Name: _____ Signature: _____ Date: _____

Please print clearly

(Please turn over)

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****Emergency Early Dismissal****

Phone number(s) to be dialed by the automated calling system is/are: _____

If a parent/guardian is not reached through the automated calling system, the following information is to be used:

Mother/Guardian Name: _____ Home Phone: _____

Work Phone: _____ (if part-time please specify days & hours) Cell Phone: _____

Father/Guardian Name: _____ Home Phone: _____

Work Phone: _____ (if part-time please specify days & hours) Cell Phone: _____

Two homes to which the student may go if parent/guardian cannot be contacted.

1. Name: _____ Phone: _____

Address: _____

2. Name: _____ Phone: _____

Address: _____

In case of an emergency early dismissal, please check the appropriate box:

- ☐ I will pick-up or arrange to have my child picked up.
- ☐ My child has permission to walk home.
- ☐ My child, who rides the bus, has my permission to ride his/her assigned bus to their designated stop.

I have instructed my child in the procedure listed above and authorize him/her to be dismissed to either the child's home or one of the two homes listed.

Parent Name: _____ Signature: _____ Date: _____
Please print clearly

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Proof of Residency:

As proof of domicile (residency), I am providing copies of the following (mark with "X"):

_____ 1. A notarized lease effective during the current school year, showing residence within the Borough of Montvale (or Landlord Affidavit). Effective date: _____ Renewal date: _____

OR

_____ 2. A recorded deed showing ownership of a residence within the Borough of Montvale.
Residency since: _____

AND

3. The following additional documentation (mark one item below with "X")

_____ Bank Statement showing address (block out the figures)

_____ Property Tax Bill

_____ Utility or Phone Bill showing your address

_____ Other (i.e. moving company bill)

AND, if applicable:

_____ 4. A current signed affidavit form stating that the student listed above resides with you and is financially dependent upon you even though you are NOT his/her parent or legal guardian. (Documentation of financial dependency must be attached, i.e. IRS return showing student as dependent)

Reviewed and approved by (initials): _____

Other children in household:

Child's Name:

Date of Birth:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Registration Statement:

I, _____, affirm that I am the (please check one): _____ natural parent/legal guardian; _____ affidavit host of the student(s) listed above. I further state that this form and the attached documentation constitute true and accurate proof that the student(s) listed above reside(s) with me within the Borough of Montvale. If any student above stops living with me, or if I move my residence out of the Borough of Montvale, I will promptly notify the Montvale Board of Education in writing.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are false, I am subject to punitive action.

Parent/Guardian Signature: _____ Print Name: _____

Date: _____