

ACGC (Atwater-Cosmos-Grove City) Elementary
District #2396
302 S. 2nd Street
Atwater, MN 56209
320-244-4693 – Ph
320-974-8410 - Fax

AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

School Last Attended _____

Address _____

Phone Number _____

Fax Number _____

I hereby authorize you to send to ACGC Elementary School any and all information concerning the students listed below, including records of:

- _____ Early Childhood Screening Records
- _____ Cumulative Record Folder/ MARSS Information/Attendance
- _____ Standardized Group Test Score Recommendations/Evaluations
- _____ Health Records
- _____ Elementary Reading and Math Records
- _____ MCA Data
- _____ Psychological Reports
- _____ Elementary Progress Reports
- _____ Special Education Records, Tests, I.E.P.'s, Speech

Name of Student(s)

Grade

I authorize the release of the records indicated above:

Date

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Student and/or parental signatures are no longer required when records are requested by authorized personnel. (Family Educational Rights and Privacy Act, Final Rule of Educational Records, Federal Register, June 17, 1976 – Vol. 41, No. 188, page 2453). Revised 10/94

ACGC ELEMENTARY SCHOOL – District 2396

302 South 2nd Street, Atwater, MN 56209

New Student Registration Form

STUDENT _____ GRADE _____

Parent's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Date Enrolled _____

Birthdate _____ Birthplace _____

Is the student Hispanic/Latino? yes, Hispanic/Latino no, not Hispanic/Latino

What is the student's race? American Indian or Alaska Native Black or African American
(please circle one)

Asian White Native Hawaiian or Other Pacific Islander

Is your child currently in: a Title I program? yes no

a Special Education classroom? yes no

an ESL program? yes no

Have you recently moved to this school district within the last 36 months for temporary or seasonal agricultural or fishing work? yes no

Is there another parent that we should mail progress reports, report cards and classroom news to?

Name _____

Address _____

Name and telephone number of person to contact if parents cannot be reached:

Name _____ Phone _____

Father's Work Place _____ Phone _____

Mother's Work Place _____ Phone _____

School Last Attended: _____

Address _____

ACGC Elementary School 2018/2019 Student Information Sheet

Student's Full Name: _____ Date of Birth: _____

Male/Female: _____ Grade _____ Teacher _____

Siblings (name, age, grade): _____

Mother's Information (Circle: Biological/Step/Other: _____) **Father's Information** (Circle: Biological/Step/Other: _____)

Name:	Name:
Mailing Address:	Mailing Address:
Physical Address:	Physical Address:
City, State, Zip:	City, State, Zip:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Email Address:	Email Address:
Employer:	Employer:
Employer Phone Number:	Employer Phone Number:

CUSTODY:

Who has **legal** custody of the student? mom dad joint other: _____

Who has **physical** custody of the student? mom dad joint other: _____

Student lives with: mom dad joint other: _____

Is this student named in a current custody agreement? Yes No other: _____

If yes, provide a copy of the legal agreement to the school prior to the student starting school

Parents will always be contacted first in an emergency, however if you cannot be reached please provide emergency contact(s) below:

Emergency Contact	Relationship	Phone Number

Transportation: (check all that apply)

- My child will ride the bus AM Bus Number: _____ PM Bus Number: _____
- My child walks _____ to school _____ from school _____ to and from school
- My child goes to daycare Name: _____ Phone Number: _____
- My child is picked up By: _____
- Other: _____

Health Information:

Primary Doctor/Clinic: _____ Hospital: _____

List any major illnesses, operations, doctor ordered restrictions, allergies, injuries or health concerns that you have:

Is the child taking medication(s)? _____ No _____ Yes, contact Val Carlson our school nurse at 320-244-4674

I authorize the school nurse to share my child's health concerns or medical diagnosis with appropriate school staff. I authorize ACGC schools to obtain immediate medical care for the above children in case of an emergency.

Parent/Guardian Signature: _____ Date: _____



ACGC ELEMENTARY SCHOOL
Field Trip Permission Slip
2018 – 2019

My child has permission to go on any field trips scheduled for the current school year for his / her:

- Class
- Special Event / Presentation

Information on field trips will be sent home with your student prior to each field trip.

Name

Grade & Teacher

Parent/Guardian Signature

Date

Please sign and return this form to your child's teacher.

Please fill out one form for each child. Thank you.

Minnesota Language Survey

Minnesota is home to speakers of more than 100 different languages. The ability to speak and understand multiple languages is valued. The information you provide will be used by the school district to see if your student is multilingual. In Minnesota, students who are multilingual may qualify for a Multilingual Seal upon further assessment. Additionally, the information you provide will determine if your student should take an English proficiency test. Based upon the results of the test, your student may be entitled to English language development instruction. **Access to instruction is required by federal and state law. As a parent or guardian, you have the right to decline English Learner instruction at any time.** Every enrolling student must be provided with the Minnesota Language Survey during enrollment. Information requested on this form is important to us to be able to serve your student. Your assistance in completing the Minnesota Language Survey is greatly appreciated.

Student Information	
Student's Full Name: (Last, First, Middle)	Birthdate or Student ID:

	Check the phrase that best describes your student:	Indicate the language(s) other than English in space provided:
1. My student first learned:	<input type="radio"/> language(s) other than English. <input type="radio"/> English and language(s) other than English. <input type="radio"/> only English.	
2. My student speaks:	<input type="radio"/> language(s) other than English. <input type="radio"/> English and language(s) other than English. <input type="radio"/> only English.	
3. My student understands:	<input type="radio"/> language(s) other than English. <input type="radio"/> English and language(s) other than English. <input type="radio"/> only English.	
4. My student has consistent interaction in:	<input type="radio"/> language(s) other than English. <input type="radio"/> English and language(s) other than English. <input type="radio"/> only English.	

Language use alone does not identify your student as an English learner. If a language other than English is indicated, your student will be screened for English language proficiency.

Parent/ Guardian Information	
Parent/Guardian Name (printed):	
Parent/Guardian Signature:	Date:

* All data on this form is private. It will only be shared with district staff who need the information to best serve your student and for legally required reporting about home language and service eligibility to the Minnesota Department of Education. At the district and at the Minnesota Department of Education, this information will not be shared with other individuals or entities, except if they are authorized by state or federal law to access the information. Compliance with this request for information is voluntary.



ACGC FALCONS

Atwater-Cosmos-Grove City

School District #2396

ACGC Community Education
27250 MN Hwy #4
Grove City, MN 56243
Phone (320) 857-2271/2651
Fax (320) 857-2989

ACGC Elementary
302 South Second Street
Atwater, MN 56209
Phone (320) 974-8841
Fax (320) 974-8410

School Census

(Please Print)

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Please list all children who will be under age 5 by September 1st.

Child's Name	M/F	Birthdate

Parent's Signature _____ Date _____

ACGC Elementary 2018/2019 School Supply List

Kindergarten Supply List

- One set of extra clothing (in a plastic bag and labeled)
- Box or Bag of low-sugar snacks for classroom cupboard
- A backpack (big enough to carry folders in)
- 1 container of Disinfecting wipes
- 1 box of facial tissues
- 6 Glue Sticks
- 4 Black EXPO Brand Dry Erase Markers- Thin
- 1 Highlighter
- 1 Large Pink Eraser
- 1 Plastic pencil box (Zender only)

1st Grade Supply List

- One set of extra clothing (in a plastic bag and labeled)
- Box or Bag of low-sugar snacks for classroom cupboard
- A backpack (big enough to carry folders in)
- 1 container of Disinfecting wipes
- 1 box of facial tissues
- Grey plastic pencil box
- Deck of Playing Cards-regular, plain with no pictures
- 2 Jumbo Sized Glue Sticks
- 12 pack of Colored Pencils
- 4 Black EXPO Brand Dry Erase Markers- Thin
- 2 Highlighters
- 2 Large Pink Erasers

2nd Grade Supply List

- One set of extra clothing (in a plastic bag and labeled)
- Small Plastic Pencil Box
- A backpack (big enough to carry folders in)
- 1 box of facial tissues
- 1 container of Disinfecting wipes
- 1 box of Quart Size Zip Lock Plastic Bags
- Deck of Playing Cards-regular, plain with no pictures
- 2 Jumbo Size Glue Sticks
- 4 Black EXPO Brand Dry Erase Markers- Thin
- Highlighters
- Large Pink Erasers

3rd Grade Supply List

- Small Plastic School Box (Boeyink & Ruter ONLY)
- A backpack (big enough to carry folders in)
- 1 box of Sandwich Size Zip Lock Plastic Bags
- 1 box of facial tissues
- Addition, subtraction & multiplication Flashcards for at home
- 1 twelve pack of colored pencils
- 1 Wide Ruled Composition Notebook
- 4 Black EXPO Brand Dry Erase Markers- Thin

4th Grade Supply List

- A backpack (big enough to carry folders in)
- 1 box of facial tissues
- 2 thin highlighters
- 4 Black EXPO Brand Dry Erase Markers- Thin
- 1 twelve pack of colored pencils
- 1 Package of loose leaf line wide rule paper
- 1 Seven Pocket Expandable Folder
- 1 box of Gallon Size Zip Lock Plastic Bags

ACGC Elementary 2018/2019 School Supply List

Kindergarten Supply List

- One set of extra clothing (in a plastic bag and labeled)
- Box or Bag of low-sugar snacks for classroom cupboard
- A backpack (big enough to carry folders in)
- 1 container of Disinfecting wipes
- 1 box of facial tissues
- 6 Glue Sticks
- 4 Black EXPO Brand Dry Erase Markers- Thin
- 1 Highlighter
- 1 Large Pink Eraser
- 1 Plastic pencil box (Zender only)

1st Grade Supply List

- One set of extra clothing (in a plastic bag and labeled)
- Box or Bag of low-sugar snacks for classroom cupboard
- A backpack (big enough to carry folders in)
- 1 container of Disinfecting wipes
- 1 box of facial tissues
- Grey plastic pencil box
- Deck of Playing Cards-regular, plain with no pictures
- 2 Jumbo Sized Glue Sticks
- 12 pack of Colored Pencils
- 4 Black EXPO Brand Dry Erase Markers- Thin
- 2 Highlighters
- 2 Large Pink Erasers

2nd Grade Supply List

- One set of extra clothing (in a plastic bag and labeled)
- Small Plastic Pencil Box
- A backpack (big enough to carry folders in)
- 1 box of facial tissues
- 1 container of Disinfecting wipes
- 1 box of Quart Size Zip Lock Plastic Bags
- Deck of Playing Cards-regular, plain with no pictures
- 2 Jumbo Size Glue Sticks
- 4 Black EXPO Brand Dry Erase Markers- Thin
- Highlighters
- Large Pink Erasers

3rd Grade Supply List

- Small Plastic School Box (Boeyink & Ruter ONLY)
- A backpack (big enough to carry folders in)
- 1 box of Sandwich Size Zip Lock Plastic Bags
- 1 box of facial tissues
- Addition, subtraction & multiplication Flashcards for at home
- 1 twelve pack of colored pencils
- 1 Wide Ruled Composition Notebook
- 4 Black EXPO Brand Dry Erase Markers- Thin

4th Grade Supply List

- A backpack (big enough to carry folders in)
- 1 box of facial tissues
- 2 thin highlighters
- 4 Black EXPO Brand Dry Erase Markers- Thin
- 1 twelve pack of colored pencils
- 1 Package of loose leaf line wide rule paper
- 1 Seven Pocket Expandable Folder
- 1 box of Gallon Size Zip Lock Plastic Bags