



Welcome to McCleary School District.

We're glad you're here!

In McCleary School District, we work with families and communities to help our students become lifelong learners leading productive, healthy, and responsible lives. This packet includes three of the forms you'll need to enroll your student in preschool at McCleary School District.

Please print, fill out, sign, and return the following required forms:

- **Registration**
- **Preschool Information**
- **Ethnicity and Race Data**
- **Home Language Survey**
- **Certificate of Immunization**

You will also need your child's birth certificate and a document that serves as proof of residency (e.g., utility bill, tax statement) for your child's legal guardian.

Incomplete forms may delay or prevent student registration. Call our main office at 360-495-3204 with questions or concerns about student enrollment.

¿Prefiere rellenar estos formularios en español? Puede descargar el paquete de inscripción en español de mccleary.wednet.edu/students-and-families/enrollment/



REGISTRATION

Last name	First name	Middle name	Nickname (if any)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Birthdate (MM/DD/YY)	Gender	Current grade level	Birthplace (city, state, country)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PREVIOUS EDUCATIONAL EXPERIENCE

Previous school	Previous school district	Previous school location (city, state)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Has your child ever qualified for or been enrolled in a Special Education Program? Yes No

Has your child ever qualified for or had a 504 Plan? Yes No

Check all that your child has ever participated in:

ESL Hi-Cap IEP LAP Speech Title Homeschool

Has your child ever been retained and repeated a grade? Yes Grade level(s) No

Has your child ever been promoted and skipped a grade? Yes Grade level(s) No

PRIMARY HOUSEHOLD

Street address	City	State	ZIP code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mailing address, **if different**

Federal funding: Under Public Law No. 974, the district can receive federal money for each child if the parent is in the active armed forces, or lives or works on federal land. Please check the corresponding box.

Active armed forces Lives on federal land Works on federal land None of these apply

Parent or guardian full name	Primary phone	Secondary phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to student	Email
<input type="text"/>	<input type="text"/>

Parent or guardian full name	Primary phone	Secondary phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to student	Email
<input type="text"/>	<input type="text"/>

Is there a joint-custody or parenting plan in effect? If **yes**, please include a copy. Yes No
 Is there a restraining order in effect related to the parents, guardians, or student? Yes No

SECONDARY HOUSEHOLD (IF APPLICABLE)

Street address	City	State	ZIP code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Parent or guardian full name	Primary phone	Secondary phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to student	Email
<input type="text"/>	<input type="text"/>

Parent or guardian full name	Primary phone	Secondary phone
<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to student	Email
<input type="text"/>	<input type="text"/>

ADDITIONAL STUDENT INFORMATION

Does the student have any pending disciplinary actions, history of violent or disruptive behavior, criminal or juvenile court proceedings (including attendance proceedings under BECCA, or history of gang affiliation? *Copies may be required.* Yes No

Do you have any special instructions to share about your family's religious practices or beliefs?

Siblings also enrolled in McCleary School District

First name	Last name	Grade level
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

STUDENT RELEASE AUTHORIZATION

We need to be able to quickly reach families or other responsible adults if an illness, injury, or other non-emergency situation happens at school. In the event we cannot reach the parents or guardians listed under the primary and secondary household sections, we will contact the people you list below.

Emergency contact full name	Relationship	Primary phone	Secondary phone

SIGNATURE

Please read each statement before you sign.

- **Student release authorization:** In the event that the school is unable to contact me or another parent or guardian, I give permission for my child to be released to the emergency contacts listed above.
- **Emergency medical authorization:** I understand that in the event of an accident or illness, every effort will be made to contact a parent or guardian immediately. In the event the school cannot reach a parent or guardian, I authorize school authorities to obtain emergency care for my child.
- **Verification of information:** I have verified that the information on this form is true and accurate. I understand that falsification of information to achieve enrollment or assignment may be cause for revocation of my child's enrollment or school assignment.

Parent or guardian signature

Date

Parent or guardian printed name



PRESCHOOL INFORMATION

Child's name

Birth date

Do you have developmental concerns about your child? If **yes**, please explain.

Yes

No

ECEAP PROGRAM

Are you interested in our ECEAP program? Our program serves students who turn 4 by September 1, 2024. If you select **yes** or **I don't know**, Family Services Staff will reach out to you to share more information and check eligibility.

Yes

No

I don't know

TRANSPORTATION

Transportation may be available for students in our Special Education or ECEAP programs. If transportation is available, would your child need a ride to school? If **yes**, please provide the drop-off and pick-up address.

Yes

No

SCHEDULE

Our two-day preschool program offers Monday/Wednesday (M/W) and Tuesday/Thursday (T/Th) options. Please indicate your preference and provide the reason why that option works better for your child or family. Although we can't guarantee either option, we'll do our best to accommodate your preference.

I would prefer M/W because:

I would prefer T/Th because:

Parent or guardian signature

Date

Parent or guardian printed name



ETHNICITY AND RACE DATA

School districts in Washington state are required to report student data by ethnicity and race categories to the Office of Superintendent of Public Instruction (OSPI), our state education agency. Ethnicity and race categories are set by the federal government, the Washington State Legislature, and OSPI. If parents, guardians, or students do not provide ethnicity and race information, districts are responsible for assigning categories based on observation.

Ethnicity and race data helps our district and state agencies better understand and close educational access and opportunity gaps. *Please select both the ethnicity and race(s) that apply to your child, along with any sub-ethnic or sub-racial categories that apply.*

ETHNICITY

Is your child Hispanic/Latino? Yes (H00) No (H01)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Hispanic (H00) | <input type="checkbox"/> Cuban (H09) | <input type="checkbox"/> Mestizo (H17) | <input type="checkbox"/> Spaniard (H25) |
| <input type="checkbox"/> Argentine (H02) | <input type="checkbox"/> Dominican (H10) | <input type="checkbox"/> Native (H18) | <input type="checkbox"/> Surinamese (H26) |
| <input type="checkbox"/> Bolivian (H03) | <input type="checkbox"/> Ecuadorian (H11) | <input type="checkbox"/> Nicaraguan (H19) | <input type="checkbox"/> Uruguayan (H27) |
| <input type="checkbox"/> Brazilian (H04) | <input type="checkbox"/> Guatemalan (H12) | <input type="checkbox"/> Panamanian (H20) | <input type="checkbox"/> Venezuelan (H28) |
| <input type="checkbox"/> Chicano (H05) | <input type="checkbox"/> Guyanese (H13) | <input type="checkbox"/> Paraguayan (H21) | <input type="checkbox"/> Write-in (H29) |
| <input type="checkbox"/> Chilean (H06) | <input type="checkbox"/> Honduran (H14) | <input type="checkbox"/> Peruvian (H22) | _____ |
| <input type="checkbox"/> Colombian (H07) | <input type="checkbox"/> Jamaican (H15) | <input type="checkbox"/> Puerto Rican (H23) | |
| <input type="checkbox"/> Costa Rican (H08) | <input type="checkbox"/> Mexican (H16) | <input type="checkbox"/> Salvadoran (H24) | |

RACE: NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER

Is your child Native Hawaiian/Other Pacific Islander? Native Hawaiian/Other Pacific Islander (P00)

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Carolinian (P01) | <input type="checkbox"/> Maori (P07) | <input type="checkbox"/> Pohnpeian (P13) | <input type="checkbox"/> Tuvualan (P19) |
| <input type="checkbox"/> Chamorro (P02) | <input type="checkbox"/> Marshallese (P08) | <input type="checkbox"/> Samoan (P14) | <input type="checkbox"/> Yapese (P20) |
| <input type="checkbox"/> Chuukese (P03) | <input type="checkbox"/> Native Hawaiian (P09) | <input type="checkbox"/> Solomon Islander (P15) | <input type="checkbox"/> Write-in (P21) |
| <input type="checkbox"/> Fijian (P04) | <input type="checkbox"/> Ni-Vanuatu (P10) | <input type="checkbox"/> Tahitian (P16) | _____ |
| <input type="checkbox"/> I-Kiribati (P05) | <input type="checkbox"/> Palauan (P11) | <input type="checkbox"/> Tokelauan (P17) | |
| <input type="checkbox"/> Kosraean (P06) | <input type="checkbox"/> Papuan (P12) | <input type="checkbox"/> Tongan (P18) | |

RACE: BLACK/AFRICAN-AMERICAN

Is your child Black/African American? Black/African American (B00) African American (B01)
 African Canadian (B02) Write-in (C02) _____

Caribbean

Anguillan (B03) British Virgin Islander (B08) Grenadian (B13) Montserratian (B18)
 Antiguan (B04) Caymanian (B09) Guadeloupean (B14) Puerto Rican (B19)
 Bahamian (B05) Cuba Dominican (B10) Haitian (B15)
 Barbadian (B06) Dominican (B11) Jamaican (B16)
 Barthélemois/ Barthélemoises (B07) Dutch Antillean (B12) Martiniquais/ Martiniquaise (B17)

Write-in (B20) _____

Central African

Angolan (B21) Chadian (B24) Congolese (Dem. Rep. of the Congo) (B26) Gabonese (B28)
 Cameroonian (B22) Congolese (Rep. of the Congo) (B25) São Toméan (B29)
 Central African (B23) Equatorial Guinean (B27) Príncipe (B30)

Write-in (B31) _____

East African

Burundian (B32) Malagasy (B38) Rwandan (B44) Ugandan (B49)
 Comoran (B33) Malawian (B39) Seychellois/ Seychelloise (B45) Tanzanian (B50)
 Djiboutian (B34) Mauritian (B40) Somali (B46) Zambian (B51)
 Eritrean (B35) Mahoran (B41) South Sudanese (B47) Zimbabwean (B52)
 Ethiopian (B36) Mozambican (B42) Sudanese (B48)
 Kenyan (B37) Reunionese (B43)

Write-in (B53) _____

Latin American

Argentine (B54) Costa Rican (B60) Guyanese (B66) Peruvian (B72)
 Belizean (B55) Ecuadorian (B61) Honduran (B67) S. Georgia / S. Sandwich Islands (B73)
 Bolivian (B56) El Salvadoran (B62) Mexican (B68) Surinamese (B74)
 Brazilian (B57) Falkland Islander (B63) Nicaraguan (B69) Uruguayan (B75)
 Chilean (B58) French Guianese (B64) Panamanian (B70) Venezuelan (B76)
 Colombian (B59) Guatemalan (B65) Paraguayan (B71)

Write-in (B77) _____

South African

- Botswanan (B78) Namibian (B80)
 Mosotho (B79)

West African

- Beninese (B84) Ivorian (B88)
 Bissau-Guinean (B85) Gambian (B89)
 Burkinabé (B86) Ghanaian (B90)
 Cabo Verdean (B87) Liberian (B91)

Write-in (B83) _____

South African (B81) Swazi (B82)

Write-in (C01) _____

- Malian (B92) Saint Helenian (B96)
 Mauritanian (B93) Senegalese (B97)
 Nigerien (Niger) (B94) Sierra Leonean (B98)
 Nigerian (Nigeria) (B95) Togolese (B99)

RACE: AMERICAN INDIAN/ALASKA NATIVE

Is your child American Indian/Alaska Native?

Alaska Native Write-in (N36) _____

American Indian/Alaska Native (N00)

American Indian Write-in (N37) _____

Washington State Tribes

- Chinook Tribe (N01)
 Confederated Tribes and Bands of the Yakama Nation (N02)
 Confederated Tribes and Bands of the Chehalis Reservation (N03)
 Confederated Tribes of the Colville Reservation (N04)
 Cowlitz Indian Tribe (N05)
 Duwamish Tribe (N06)
 Hoh Indian Tribe (N07)
 Jamestown S’Klallam Tribe (N08)
 Kalispel Indian Community/Kalispel Reservation (N09)
 Kikiallus Indian Nation (N10)
 Lower Elwha Tribal Community (N11)
 Lummi Tribe of the Lummi Reservation (N12)
 Makah Indian Tribe/Makah Indian Reservation (N13)
 Marietta Band of Nooksack Tribe (N14)
 Muckleshoot Indian Tribe (N15)
 Nisqually Indian Tribe (N16)
 Nooksack Indian Tribe of Washington (N17)

- Port Gamble S’Klallam Tribe (N18)
 Puyallup Tribe of Puyallup Reservation (N19)
 Quileute Tribe of the Quileute Reservation (N20)
 Quinault Indian Nation (N21)
 Samish Indian Nation (N22)
 Sauk-Suiattle Indian Tribe of Washington (N23)
 Shoalwater Bay Indian Tribe/Shoalwater Bay Indian Reservation (N24)
 Skokomish Indian Tribe (N25)
 Snoqualmie Indian Tribe (N27)
 Snoqualmoo Tribe (N28)
 Spokane Tribe of the Spokane Reservation (N29)
 Squaxin Island Tribe of the Squaxin Island Reservation (N30)
 Steilacoom Tribe (N31)
 Stillaguamish Tribe of Indians of Washington (N32)
 Suquamish Indian Tribe of the Port Madison Reservation (N33)
 Swinomish Indian Tribal Community (N34)
 Tulalip Tribes of Washington (N35)

RACE: ASIAN

Is your child Asian?

Asian (A00)

Asian Indian (A01)

Filipino (A08)

Mongolian (A16)

Thai (A24)

Bangladeshi (A02)

Hmong (A09)

Nepali (A17)

Tibetan (A25)

Bhutanese (A03)

Indonesian (A10)

Okinawan (A18)

Vietnamese (A26)

Burmese/Myanmar (A04)

Japanese (A11)

Pakistani (A19)

Write-in (B20)

Cambodian/Khmer (A05)

Korean (A12)

Punjabi (A20)

Cham (A06)

Lao (A13)

Singaporean (A21)

Sri Lankan (A22)

Chinese (A07)

Malaysian (A14)

Mien (A15)

Taiwanese (A23)

RACE: WHITE

Is your child White?

White (W00)

Write-in (W36) _____

Eastern European

Bosnian (W01)

Polish (W03)

Russian (W05)

Write-in (W07)

Herzegovinian (W02)

Romanian (W04)

Ukrainian (W06)

Middle Eastern and North African

Algerian (W08)

Druze (W16)

Lebanese (W24)

Tunisian (W23)

Amazigh or Berber (W09)

Egyptian (W17)

Libyan (W25)

Yemeni (W33)

Arab or Arabic (W10)

Emirati (W18)

Moroccan (W26)

Middle Eastern Write-in (W34)

Assyrian (W11)

Iranian (W19)

Omani (W27)

Bahraini (W12)

Iraqi (W20)

Palestinian (W28)

North African Write-in (W35)

Bedouin (W13)

Israeli (W21)

Qatari (W29)

Chaldean (W14)

Jordanian (W22)

Saudi Arabian (W30)

Copt (W15)

Kurdish Kuwaiti (W23)

Syrian (W31)

Parent or guardian signature

Date

FOR OFFICE USE ONLY Received by:

Date: