

Carl Allgrove Elementary School

Maylah Uhlinger, Principal

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East Granby, CT 06026
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Student Registration Grades K - 2 Welcome to the East Granby Public Schools www.eastgranby.k12.ct.us

Thank you for your interest in the East Granby Public Schools. Attached please find the registration packet for kindergarten which includes:

- Allgrove Registration Form
- Emergency Form
- State of Connecticut Health Assessment Record
- Release of Information
- Public School Information System Form
- Kindergarten Developmental Information Form (Kindergarten only)

In addition, please be prepared to provide **proof of residency** (see below) and an original **birth certificate** (must be the long form with a raised seal). No copies will be accepted.

Proof of Residency (Please provide one of the following):

- Copy of a recent utility bill (electric, water, oil/natural gas, cable or landline phone) in your name and showing services provided for your East Granby house/apartment.
- Copy of a valid current lease agreement for your rental home/apartment in East Granby with the signatures of the lessee and lessor.
- Copy of sales contract for your home in East Granby.
- Contract with closing date (within 60 days of registration). After the closing, parent must provide proof of residency. ****Permission to enroll must be granted by the Superintendent if requesting to start school before taking occupancy of the East Granby house/apartment.**

Please download and complete the forms (please print legibly) along with the proof of residency and birth certificate(s) and return to the school office in person. The East Granby parent needs come to the school in person to register the child and sign the forms. The process is not complete until all forms and documentation are received.

Thank you!

Maylah Uhlinger
Principal

EAST GRANBY PUBLIC SCHOOLS



Uses an Inhaler
 Needs EpiPen for: _____
 Daily Meds: _____
Please note we must have all medication present on the day of Orientation.

Birth Certificate Received
 Proof of Residency

East Granby, Connecticut

GRADES K - 2 REGISTRATION FORM

Student/Parent Information:

Male
 Female

Student's Name	Grade	Birth Date	Birth Place
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Address: _____ Own Rent **Phone #:** _____

*If you are not currently occupying this East Granby residence, give current residence. Written permission must be obtained from the Superintendent of Schools if your current residence is not East Granby.

Child Resides with: Mother Father Both Parents
 Grandparent Legal Guardian Other _____

Email Address: _____

Full Name of Siblings in Family:

Name: _____	Year of Birth: _____	Grade: _____
Name: _____	Year of Birth: _____	Grade: _____
Name: _____	Year of Birth: _____	Grade: _____

Mother's Name or Guardian: _____	Home Phone: _____
Home Address: _____	Cell Phone: _____
Employer: _____	Work Phone: _____

Father's Name or Guardian: _____	Home Phone: _____
Home Address: _____	Cell Phone: _____
Employer: _____	Work Phone: _____

Guardian: _____	Home Phone: _____
Home Address: _____	Cell Phone: _____
Employer: _____	Work Phone: _____

Student Education Information:

Has your child previously attended preschool? Yes No
 If yes: Name of School: _____ Address: _____ # of Yrs _____

Has your child ever been referred for Special Education Services? Yes No
 Has your child ever received Special Education Services? (ie. Speech, Birth to 3, etc.) Yes No
 Town where services were received: _____ Provider: _____

Please Check:

If there is any information about your child's health or personality which you think the teacher should know, please explain on the back of this form or arrange to have a conference with the teacher.

Signature of Parent (Guardian) _____ Date: _____