

West Orange Public Schools

179 Eagle Rock Avenue West Orange, New Jersey 07052

(973) 669-5400 ext. 20505 Fax: (973) 324-1289

Registration Requirements (2 Pages)

A REGISTRATION APPOINTMENT IS REQUIRED!

To register a student in the West Orange Public Schools, please contact the Registration Office, at 973-669-5400, extension 20505, between the hours of 8:30 a.m. and 4:00 p.m., to schedule an appointment. <u>All appointments take place in the Administrative Offices located at 179 Eagle Rock Avenue</u>. Please be prompt for your appointment and have all required documents on hand. Failure to submit all required documentation at the time of registration will result in rescheduling your appointment for a later date. **Note:** The student is not required to be in attendance during the registration process.

CHECKLIST OF DOCUMENTS REQUIRED FOR REGISTRATION APPOINTMENT:

Proof of Residency for Homeowner: One **notarized** form and three additional documents as follows:

Certificate of Residency – Homeowner Form: completed and notarized by homeowner

•	Proof of	Ownership - please provide one of the following documents :
		Deed
		Most Recent Municipal tax bill
		Current Mortgage bill
•	Proof of	Address - please provide two current documents, some examples listed below:
		Public Service bill
		Water bill
		Cable or satellite bill
		Home or cell phone bill
		Bank or Insurance statement
		Paystub with name and address
Pr	oof of Res	idency for Renter: Two notarized forms and three additional documents as follows:
•		te of Residency-Renter Form: completed and notarized by renter.
•	Statemer	nt of Landlord Form: completed and notarized by landlord (property owner) or landlord's agent
•		Tenancy - please provide one of the following documents:
		Current Lease
		Current Signed and addressed Rent Receipts
		Letter: signed and notarized, by relative/friend, stating that the parent/guardian and student
	are liv	ring in his/her home, and are not responsible for rent and bills for the home. This letter must be
	accor	mpanied by proof of ownership or tenancy of the relative/friend.
•	Proof of	Address - please provide two current documents, some examples listed below:
		Public Service bill
		Water bill
		Cable or satellite bill

Please be advised that the West Orange Board of Education reserves the right to conduct periodic, random home visits to verify residency of all students enrolled in the district. These visitations are conducted by Residency Verification Officers. Per Board Policy 5111: From time to time the Board of Education may require re-registration of all students.

ALL PARENTS/GUARDIANS MUST SUPPLY THE FOLLOWING INFORMATION:

Student Identification Information & Proof of Guardianship:

Home or cell phone bill

Bank or Insurance statement Paystub with name and address

Student identification information & Proof of Guardianship.				
•	Please select one or more (as necessary) of the following from the list below:			
		Birth certificate (original with raised seal preferred)		
		Adoption papers		
		Custody papers (from Divorce Decree or Court Order, etc)		

Parent/Guardian Information:

	e provide one item that indicates you are the person listed as guardian in the Student's
Inform	ation and in the Residency Documents submitted. Following are representative examples
(prese	ntation of a photo ID is preferred but optional):
	Photo driver's license
	Passport
	State or Municipal ID
	Motor vehicle non-driver ID Work ID
	Other photo or non-photo identification
Change of	·
	student or parent/guardian's current legal name is different from that on the student's
	entification information or proof of guardianship, please provide one or more (as necessary) of
	e following to show progression of name change:
	Certified marriage certificate
	Divorce papers
	Court documentation
	Other Proof of Name Change
	nformation:
	Immunization records Pupil health examination
_	e advised that in the absence of medical records provided at time of registration, per
	SA:22-4.1(h): "actual attendance at school may be deferred as necessitated by
	ce with rules regarding immunization of students, N.J.A.C. 8:57-4.1 et seq."
Student's	Previous School Information (as available/applicable):
	School records (any or all of: report card, official transcripts, attendance/behavior records
<u>-</u>	rticipation in Gifted and Talented programs)
	Transfer Card IEP or 504 (for students requiring Special Education or Modifications)
	Latest Terra Nova or other standardized tests administered
	ESL test results for non-English speakers
Please be	e advised that the absence of previous school records at time of registration, can delay
-	ment or creation of schedules for the incoming student, especially those entering
middle or	high school.
	al documents (some requiring signature) that are included in this packet and/or will be
complete	d during your registration appointment:
•	District Health History & NJ FamilyCare/Insurance Information Forms
•	Emergency Contact Release Form
•	Home Language Survey
•	Individual Internet User Agreement
•	PreK & K Pupil Information Form
•	Provision for Emergency Medication Form Record Release Form
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•	School Messenger Notice Special Education Medicaid Initiative (SEMI) Parental Consent Form
•	Special Education Medicaid Initiative (SEMI) Parental Consent Form Student All-Media Permission Form
•	Student Information Cover Sheet
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