

Haywood County Schools

1230 North Main Street Waynesville, NC 28786 828 456 2400



Anne G. Garrett, Ed., D. Superintendent

February 16, 2015

To: Parents or Guardians

This is a special and exciting time for your child. Kindergarten is a very important foundation for your child's future success in school and it is our goal to help each student meet his or her full potential. The ultimate purpose of Kindergarten is to promote children's development and learning.

We look forward to having your child become a part of our school system. Please complete and return the <u>Information for Cumulative Record</u> form **AS SOON AS POSSIBLE**. Return other forms by the first day of school.

If you have questions or concerns, please call your school.

 Bethel:
 828.646.3448
 Junaluska:
 828.456.2407

 Central:
 828.456.2405
 Meadowbrook:
 828.646.3445

 Clyde:
 828.627.2206
 North Canton:
 828.646.3444

 Hazelwood:
 828.456.2406
 Riverbend:
 828.627.6565

Jonathan Valley: 828.926.3207

Kindergarten Curriculum:

Kindergarten teachers will be using the Common Core State Standards to guide instruction in their classrooms. A Parents' Guide to Student Success at Kindergarten has been attached to this letter so that you have an idea of what is expected in math and reading at the kindergarten level.

The common core state standards are a set of learning skills that all students should achieve. They set the benchmarks and guidelines for what each student should learn, not how or what teachers teach. The standards are clear about what students should know and be able to do at each grade level in reading and math. The standards spiral so it is expected that students gain a strong foundation in the reading and math skills at each grade level that promote their success in these subject areas at the next grade level. The standards are rigorous and much will be expected of your child.

Please Note:

KINDERGARTEN HEALTH ASSESSMENT

Every child entering kindergarten in the public schools

must receive a health assessment. The Kindergarten Health Assessment must be completed for your child
no earlier than 12 months prior to the date of school entry. All kindergarten children must comply with
the state immunization guidelines and Health Assessment Law. North Carolina General Statute 130A – 441
requires children entering school to have both the kindergarten health assessment form and their
immunization records completed and up-to-date by the first day of school. A student is not allowed, by
law, to attend school unless this has been taken care of. Parents must make sure the information
recorded on the child's immunization/health record is signed by a doctor or certified nurse practitioner or
registered nurse who meets the North Carolina Division of Health Standards. This form is attached to this
packet (blue form). The form is also available at most health care providers.

Student residence verification must be submitted to the school when registering for kindergarten or when enrolling your child in Haywood County Schools for the first time. The verification of address must

specified by completing the **Student Residence Verification Form** and be accompanied by **any two** of the following items:

- Property tax records which indicate the street or road address location of the residence
- Copies of mortgage documents or copies of the deed of property which indicate the street or road address of property
- Copy of residential lease showing residence address
- Copy of current driver's license showing street or road address
- Current utility bill showing residence address
- Copy of voter registration form showing street or road residence address
- Copy of automobile registration showing street or road address



SPECIAL HEALTH CARE NEEDS If your child has special health care needs such as asthma, food allergies or diabetes, teachers and school nurses should know about them and be able to help in emergencies. Your child's health care provider will need to complete a Medication Authorization Form for all medications that your child needs to take while in school.

If your child has a chronic condition such as asthma or diabetes, you will want to develop an *action plan or individual health plan of care* with your child's primary health care provider and the school nurse to make certain everyone knows what actions to take when your child is at school. If your child has special dietary requirements, your child's health care provider will need to provide the school with a medical prescription for the special diet and dietary precautions. Please talk with your child's teacher and other school staff about your child's special health care needs and the school health care plan of care for your child.

STUDENT DATA

Birth Certificates for Kindergarten Pupils

North Carolina Law requires that kindergarten pupils be five (5) years old on or before **August 31**. **North Carolina General Statue G.S.115C-346(c)**, passed in June of **2011**, requires parents to furnish a <u>certified copy</u> of a birth certificate <u>to be filed in cumulative record of pupil</u> when the student is registered in **public school**. This must be submitted when you register your child at the school. As a condition of the law, the birth certificate will be kept by the school and placed in the student's cumulative record. If you do not want to give up your copy of the birth certificate, you can get another certified copy from the Haywood County Courthouse Register of Deeds office. A birth certificate for any child born in North Carolina can be obtained from the Haywood County Courthouse Register of Deeds office. The fee is \$15. A child cannot attend school without a certified copy of this document.

<u>IMMUNIZATION DOCUMENTATION</u> Attach copy of child's immunization record on doctor's office or health department's form with the doctor's name, address and signature showing on the form. No child shall attend a school (pre K-12) whether public, private or religious, unless a certificate of immunization indicating that the child has received the immunizations required by law is presented to the school.

What does the law now require for all children who enroll in Kindergarten or first grade?

- 5 DTP, Dtap, or DT doses (If 4th dose is after 4th birthday, 5th dose is not required; DT (requires medical exemption.)
- 4 POLIO VACCINE doses (If 3rd dose is after 4th birthday, 4th dose is not required.)
- 1-4 Hib doses (Series complete if at least 1 dose given on/after 15 months and before 5.)
- 3 Hep B doses (children born on or after July 1, 1994 are required to have 3 doses.)
- 2 Measles doses (at least 30 days apart; 1st dose on/after 12 months of age)
- 2 Mumps dose (one dose on or after 12 months of age and before 16 months of age The second dose before enrolling in school for the first time.)
- 1 Rubella dose (on/after 12 months of age)
- 1 Varicella dose (Children born on or after April 1, 2001)



	INFORM	IATION CON	CERNING PUPIL	
Student legal name:				
Place of Birth: City:		County:	State:	
•	Age: Grade:	Gender:	Phone Number:	Unlisted
Select One or More Race: American Indian or Alaska Native Asian: Black or African American: Native Hawaiian or Other Pacific Islander: White:				
Ethnicity: Hispanic or Latin			<u> </u>	
Present Mailing Address:		40000		
Community or Street:				
Social Security Number(opti	ional):		Medicaid I.D. Number:	
Are there any Health Problems of which we should be aware?				
Did your child attend pre-scl	nool program: Yes	NoIf Y	Yes, number of Years	_
Place:	City:		State:	
		ATION CONC	ERNING FATHER	
Father or Stepfather's Name			Place of Birth:	
Mailing address if different t				
Last grade Father/Stepfather			ation of Father/Stepfather:	
Place of Work: Employer Address:				
Employer Phone #: Cell Phone:				
If Father/Stepfather is not liv	<u> </u>			
			ERNING MOTHER	
Mother/Stepmother's Name	(include maiden name)):		
Place of Birth:	C 1			
Mailing address if different				
Last grade Mother/Stepmoth			pation of Mother/Stepmoth	er:
Place of Work:	Emp	oloyer Address:		
Employer Phone #:	1::	Cell Phone:		
If Mother/Stepmother is not living, give date of death:				
INFORMATION CONCERNING FAMILY Does pupil live with someone other than parents? Yes No				
If yes, with whom:		onship:	NO	
Total number of boys in fam		msinp.		
Total number of girls in fam	•			
Full name and age of older c	•		Girls:	
Full name and age of younge			Girls:	
EMERGENCY INFORMATION OTHER THAN PARENT OR GUARDIAN				
Contact Person:		Relationship:		
Home Phone:	Work Pho		Cell Pho	ne:
Contact Person:		Relationship:		
Home Phone:	Work Pho		Cell Pho	ne:
**		NERAL INFO		
Has student attended school	in Haywood County be	etore?	If so, where?	
Last school attended:	1 1			
Address of last school attend				
Special check out instruction	·	C D:1	XX7 11	
Transportation: Bus Numb		Car Rider:	Walk	
List people allowed to pick your child up (including inclement weather)(Use back if necessary):				
Does your child have an I.E.	P.?			
Custody papers on file: Yes	No			
Personal phone number you want <i>Alert Now System</i> to call:				
Do we have permission to use your child's name/photograph in the media? Yes No				