IRESA Iosco Regional Educational Service Agency Enrollment Form

Student Information						
Legal Last Name	Legal First Name	Legal Middle N	ame Generation* Gende		/ <u> </u>	If Multi-Birt
			dentifier Code (UIC):		Birth Date	1st, 2nd, etc
City or Place of Birth	Primary Language					-
Student Information	Source —	*Generation is the	Suffix after Last Name: Jr /1, //1, e	etc. as it app	ears on Student Info	rmation Source
1-Birth certificate (certificate)		te (uncertified)	3-Baptismal certificate (w	ith place of	f birth)	
4-Court record	5-Government	record (passport,	military, immigration)	mmuniza	tions record	
Federal & State-Requ	uired Racial/Ethnic II	nformation* Ch	eck one. If multi-racial, enter	percentage	of each	
* Must be self-reported b	y the Parent, Adult Stud	lent or other Leg	ally Responsible Adult sign	ning below	<i>i</i> .	
American Indian or		Asian	American Bla	ck or Africa	n American	
Part of the second of	Other Pacific Islander	White	His	panic or La	tino	
<u>Previous Enrollment</u>	Information ———					
Previous District:			Prior Special Educa	tion Enroll	ment: Yes [
Previous School: Last Grade Level:			Prior 504 PLAN Yes No			
Parent/Guardian/Leg	ally Responsible Ad	ult (LRA) —				
PRIMARY LRA: Studer	The state of the s		Secondary LRA: S	tudent Live	s With? Yes	☐ No
Last Name	First Name		L get News			
Last Harris	i list ivallie		Last Name		First Name	
Relationship	Prime Language/Co	omm Mode	Relationship	Prin	ne Language/Com	m Mode
Can be Legal Rep? Ye	es No Can Get Sc	hool Info: 🗌	Can be Legal Rep? Y	-	Can Get School	
Interpreter Needed?: Ye	es 🗌 No		Interpreter Needed?: Y			
Interpreter Type:			Interpreter Type:			
		_				-
Street Address			Street Address			
City	State Zip Code	_	City	State	Zip Code	Ē
Resident District:				3.0.0	Zip code	
Home Phone: () -		Home Phone: (1		
Work Phone: () -		Work Phone: (
Emergency Phone: () -		Emergency Phone: ()	-	
Cell/Pager Phone: () -		Cell/Pager Phone: (-	
			-			
			e-Mail:			
Verifier Use Only:			Signature:			
Section 53 (if relevant)—						
A-Court or Agency place	d from another ISD	Co	ourt or Agency and ISD:			
B-Resident of Communit	y Health Dept Institution					
C-Former Resident of Community Health Dept DID Institution			Institution:			
D-On-Grounds Education	n Program in Residential Ir	stitution	Institution:			
E-Parent Placed for suit	table home' (Parent living	outside of losco				
Verified Resident District::			Beginning Building & Teach	er:		
Form Verifier:	Date:		Beginning Date			
Copy To: File	Transportation	MICIS	WSDS			

Michigan Missing Children's Act, MCL 380.1135 of the Revised School Code, requires that a person enrolling a pupil in school provide the local or intermediate school district with a certified copy of the pupil's birth certificate or other reliable proof of the pupil's identity. The pertinent part of the law states the following:

(1) Upon enrollment of a student for the first time in a local or intermediate school district, the district/ISD shall notify in writing the person enrolling the student that within 30 days he/she shall provide the local or intermediate school district either:

(a) A certified copy of the students birth certificate, or.

- (b) Other reliable proof, as determined by the school district, of the student's identity and age, and an affidavit explaining the inability to produce a copy of the birth certificate.
- (2) If a person enrolling a student fails to comply with subsection (1), the local or intermediate school district shall notify the person enrolling the student in writing that, unless he or she complies within 30 days after the notification, the case shall be referred to the local law enforcement agency for investigation. If the person enrolling the student fails to comply within that 30-day period, the local or intermediate school district shall notify the local law enforcement agency.
- (3) The local or intermediate school district shall immediately report to the local law enforcement agency any affidavit received pursuant to this section that appears inaccurate or suspicious in form or content.

The school district has the authority to determine the type of "other reliable proof 'that the district will accept to prove a pupil's identity or age when a copy of the pupil's birth certificate is not available. Examples of "other reliable proof "that may be accepted are: baptismal certificate indicating date and place of birth; court records; county, military, or immigration records; doctor or hospital records with sworn statements; certain family records; life insurance policy; or, a sworn statement from a parent or guardian which must be notarized.

*Michigan law requires that all students must be immunized against vaccine preventable diseases to attend the losco RESA Special Education Programs.

Racial/Ethnic:

Definition: First identify a racial group; then the ethnicity of the student (if Hispanic or Latino). A combination of the following codes with at least one primary and/or one or more secondary choices may be reported.

American Indian or Alaska Native. A student having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian American. A student having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian sub-continent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American. A student having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander. A student having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White. A student having origins in any of the original peoples of Europe, the Middle East, or North Africa.

ETHNICITY: Hispanic or Latino. An indication that the individual traces his or her origin or descent to Mexico, Puerto Rico, Cuba, Central and South America, and other Spanish cultures, regardless of race.

Section 63 Membership:

- (a) Assigned through the community placement program of the court or a state agency, if the pupil was a resident of another intermediate district at the time the pupil came under the jurisdiction of the court or a state agency.
- (b) Residents of institutions operated by the Department of Community Health.
- (c) Former residents of Department of Community Health institutions for the developmentally disabled who are placed in community settings other than the pupil's home.
- (d) Pupils in a Department approved on-grounds educational program longer than 180 days, but not longer than 233 days, at a residential child care institution, if the child care institution offered in 1991-92 is an on-grounds educational program longer than 180 days but not longer than 233 days.
- (e) Placed in a district by a parent for the purpose of seeking a suitable home, if the parent does not reside in the same intermediate district as the district in which the pupil is placed.

Refer to Section 6 of the current State Aid Act and the Department's Pupil Accounting Manual for FTE instructions.