



GLANKLER Early Learning Center

39207 Sundale Drive, Fremont, CA 94538

Phone: 510-651-1190 • Fax: 510-651-4201

Registration Packet for New Students

Glankler Mission Statement

Glankler Early Learning Center fosters positive growth and learning experience that allows each child to experience success.

Our services include:

- Early intervention for children birth to 3 years of age who are blind or visually impaired, deaf or hearing impaired, orthopedically impaired or deaf/blind.
 - Autism Resource Center for children, birth to 3 years of age, who are referred by the Regional Center.
 - Infant Preschool Assessment Team assesses children referred by physicians, parents, social workers and others to determine eligibility for special education services.
 - Collaborative programs with California Children's Services (CCS), Federal & State Preschool, Preschool Enrichment Program (PEP) and Alameda County Headstart.
 - Special Day Classes
 - ~ 2 Inclusion classes with Headstart/Hacienda
 - ~ 4 5-hour classes for preschoolers with autism
 - ~ 8 3-hour classes for preschoolers with mild, moderate and severe disabilities.
 - Speech & Language Services
 - Behavior Support
 - Occupational Therapy Services
 - Itinerant Vision & Hearing Services
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Glankler Early Learning Center

Is located at 39207 Sundale Drive in Fremont, next door to Brier Elementary School.

Please feel free to call the main office if you have any questions about registering your child. Office hours are 8:00 a.m. to 4:00 p.m.

For Registration, please bring with you:

- Child's birth certificate or passport for proof of age
- Child's immunization records
- 2 forms of Parent ID (picture ID such as driver's license or passport AND social security card or valid vehicle registration)
- Residency Statement (Renter's or Homeowner's)
- Current Lease Agreement or Property Tax Bill
- Current utility bill or business mail.



Glankler Early Learning Center

39207 Sundale Drive, Fremont, CA 94538
510-651-1190 • 510-651-4201 (fax)

**REGISTRATION TO BE
COMPLETED**

Dear Parent,

In order to proceed with testing/services, the enclosed **REGISTRATION PACKET** needs to be completed. For your convenience, you may bring your original documents to our office and copies will be made here.

The packet includes:

- Registration Form
- Help Sheet for Residency
- Statement of Residency—2-sided sheet

Homeowner's Statement of Residency*~**complete for
homeowner's and provide proofs for items 1-4**

Renter's Statement of Residency*~**complete for renter's and
provide proofs for items 1-4**

- Sample of Immunizations Required
- Home Language Survey*

Please be sure to bring your child's proof of age (usually birth certificate or passport) and immunization records.

Thank you for your assistance in this matter.

FUSD REGISTRATION FORM

Updated: 3/4/10

PLEASE PRINT

INFANT
 PRESCHOOLER School Year _____ Date _____
 Student's Legal Name _____ Male or Female _____ Birthdate _____
Last First Middle
 Student's Address _____ Lives with: Mother / Father / Both Parents
 Apt _____ Zip _____ Home Phone Number _____ Any Court/Restraining Order: No / See Attached
 City of Birth _____ Health Concerns/Problems: _____
 State of Birth _____
 Country of Birth _____

NAME:	Last	First	Employer Name/Work Phone #	Cell Phone #
Father	_____	_____	_____ () _____	() _____
Mother	_____	_____	_____ () _____	() _____
Guardian	_____	_____	_____ () _____	() _____

PARENT EDUCATION LEVEL:		SIBLINGS IN FREMONT SCHOOLS:	
FATHER	MOTHER	Name	School/Grade
____ (10) Graduate school	____ (10) _____	_____	_____
____ (11) College graduate	____ (11) _____	_____	_____
____ (12) Some college/AA degree	____ (12) _____	_____	_____
____ (13) High school graduate	____ (13) _____	_____	_____
____ (14) Not a H.S. graduate	____ (14) _____	_____	_____

LANGUAGES: Spoken by Child: _____ Spoken by Parents: _____

Is this student Hispanic or Latino? YES, Hispanic or Latino NO, Not Hispanic or Latino

Use "P" for Primary and circle all others that apply:

1. American Indian or Alaskan Native
 2. Asian—having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent (circle)
 Chinese 01 Japanese 02 Korean 03 Vietnamese 04 Asian Indian 05 Laotian 06 Cambodian 07
 3. Pacific Islander—having origins in any of the original peoples of the Polynesian, Micronesian or Melanesian Islands (circle)
 Hawaiian 01 Guamanian 02 Samoan 03 Tahitian 04
 4. Filipino American
 5. Hispanic or Latino
 6. Black
 7. White

Signature	Relationship to Child	Date
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FOR OFFICE USE ONLY				Student No:
Proof of Age <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Hospital Cert	Proof of Immunizations: <input type="checkbox"/> County Record <input type="checkbox"/> Yellow Card <input type="checkbox"/> Dr Report	Proof of Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> DR <input type="checkbox"/> MKV	To Be Completed <input type="checkbox"/> Cum File <input type="checkbox"/> Computer Screens <input type="checkbox"/> Incoming Book	Teacher: _____ Family No: _____ Dwelling No: _____ Registration: _____

HELP-SHEET FOR RESIDENCY

Per Board Policy dated May 2008, residents in the Fremont Unified School District must provide proof of residency of the primary occupant or host and must bring in ONE DOCUMENT FROM EACH of the following CATEGORIES/BOXES:

#1	<p><u>Current Picture ID:</u></p> <ul style="list-style-type: none"> • California Driver's License • California State ID card • Government ID card • Valid passport or consulate issued picture ID • Credencial para votar Mexicana • ID from home country 	<p><u>Current Original Document:</u></p> <ul style="list-style-type: none"> • Valid California vehicle registration • Social Security Card • W-2 form, state or federal tax return files w/in the past 12 months • Pay check issued by employer with both employer's and employees name and address imprinted on pay check 	#2
#3	<p><u>Current Original Property Related Document:</u></p> <ul style="list-style-type: none"> • Property tax bill or Close of Escrow Statement • Rental or lease agreement name of landlord/ landowner's name address and phone number must be printed on the documents 	<p><u>Current Bills:</u></p> <ul style="list-style-type: none"> • Utility bill/Cell phone bill • Car insurance bill • State agency mail, housing authority voucher • Official business mail (i.e. bank statement, health insurance document, credit card statement, etc.) 	#4

All of the above documents must be current and have the name of the primary resident printed on the documents, the current address, and the date issued.

FREMONT UNIFIED SCHOOL DISTRICT
HOMEOWNER'S STATEMENT OF RESIDENCY

I am aware that California Education Code and District Governing Board Policy on attendance area require a student to be enrolled in, and attend, the school that is within the district where the parent/s reside/s as well as the attendance area in which the student's parent/s reside/s when space is available. The district currently has a 30:1 ratio at all elementary schools and a 20:1 ratio at the kindergarten, first, second, and third grades.

I, _____, certify that my student, _____, resides with me
(Name of Parent) *(Name of Student)*
(sleeps a minimum of five (5) school nights a week per Board Policy 5111.1) on _____ at this address
(Today's Date)
_____ which lies within the boundaries of the Fremont Unified School District.
(Property Address)

Further, I understand it is considered falsification if I move from the above address and fail to notify the District within five days. Should this statement be found to be false, I am liable for the expense of educating my student at an approximate cost of \$6,000 per school year, my student will be dropped from enrollment and be required to transfer to his/her resident school. It is my responsibility to notify the school registrar/secretary within five school days should I or my student move from this address.

In accord with State Compliance, I have attached the required documentation as proof of residence for enrollment for the current school year.

1. Parent/Guardian's Picture ID from the following list: Current California State Driver's License, Current California State ID Card, Valid Passport or Consulate Issued Picture ID, Credencial Para Vota, AND
2. One of the following original documents with the parent/guardian's name and address: Current, valid vehicle registration, Current W-2 Form, Social Security Card, State or Federal tax return filed within the past 12 months, Current paycheck issued by employer with both the employer and employee's name and address imprinted on the paycheck, AND
3. One of the following original documents with the parent/guardian's name and address: Property Tax Bill or Close of Escrow Statement with the parent name and property address, AND
4. One of the following documents with the parent/guardian's name and address: Utility Bill, Business Mail, Car Insurance Bill, State Agency Mail.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that the student named above lives in my home and I am 18 years of age or older. I understand that if the student is not living full-time within the District's boundaries or if the student's arrangements do not agree with the information provided above, the student will NOT be allowed to attend schools in the Fremont Unified School District.

_____ *Date* _____ *Parent's Signature*

Street Address (include number, street name, state, zip) _____ *Home Phone* _____ *Business Phone*

For school use only:
Address and proof of residence verified on _____ by _____
Today's Date *District Administrator or Designee*

School Year: _____

**FREMONT UNIFIED SCHOOL DISTRICT
RENTER'S STATEMENT OF RESIDENCY**

I, _____, certify that my student, _____, resides with me
(Name of Parent) (Name of Student)
(sleeps a minimum of five (5) school nights a week per Board Policy 5111.1) on _____ at this address
(Today's Date)
_____ which lies within the boundaries of the Fremont Unified School District.
(Property Address)

Further, I understand it is considered falsification if I move from the above address and fail to notify the District within five days. Should this statement be found to be false, I am liable for the expense of educating my student at an approximate cost of \$6,000 per school year, and my student will be dropped from enrollment and be required to transfer to his/her resident school. It is my responsibility to notify the school registrar/secretary **within five school days** should I or my student move from this address. In accord with State Compliance, I have attached the required documentation as proof of residence for enrollment for the current school year.

1. Parent/Guardian's Picture ID from the following list: Current California State Driver's License, Current California State ID Card, Valid Passport or Consulate Issued Picture ID, Credencial Para Vota, **AND**
2. One of the following original documents with the parent/guardian's name and address: Current, valid vehicle registration, Current W-2Form, Social Security Card, State or Federal tax return filed within the past 12 months, Current paycheck issued by employer with both the employer and employee's name and address imprinted on the paycheck, **AND**
3. One of the following original documents with the parent/guardian's name and address: Tenant copy of Rental or Lease agreement with parent name, student name, and address, as well as manager or owner's name and phone number, **AND**
4. One of the following documents with the parent/guardian's name and address: Utility Bill, Business Mail, Car Insurance Bill, State Agency Mail.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that the student named above lives in the rented residence, and I am 18 years of age or older. I understand that if the student is not living full-time within the District's boundaries or if the student's arrangements do not agree with the information provided above, the student will NOT be allowed to attend schools in the Fremont Unified School District.

_____ Date _____ Parent's Signature
_____ Street Address (include number, street name, state, zip) _____ Home Phone _____ Business Phone

Owner/Landlord

I, _____, Owner/Landlord of the described property above, certify that the parent and student, as stated, are residing (sleeping a minimum of five school nights a week) at the property address below _____ which lies within the boundaries of the Fremont Unified School District.

- Rent does / does not include PG&E. Rent does / does not include water.

I am aware of the Education Code and District Policy on attendance and understand that the District is requesting that I notify the school of attendance at _____ immediately should the parent and student move from this address.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that the student and his/her family named above live in my home and I am 18 years of age or older. I understand that if the student is not living full-time within the District's boundaries or if the student's arrangements do not agree with the information provided above, the student will NOT be allowed to attend schools in the Fremont Unified School District.

_____ Date _____ Signature of Property Owner/Landlord _____ Phone No.

For school use only:

Address and proof of residence verified on _____ by _____
Today's Date District Administrator or Designee

School Year: _____



Fremont Unified School District
Language Assessment Center
HOME LANGUAGE SURVEY
ENCUESTA DE LENGUAJE DEL HOGAR

SCHOOL OFFICE USE ONLY
Initial if registration is complete _____
School Year _____

PLEASE COMPLETE FORM AND WRITE FIRMLY IN PEN
COMPLETE EL FORMULARIO CON PLUMA USANDO PRESIÓN

Last Name of Student
Apellido del Alumno

First Name of Student
Nombre del Alumno

M _____ F _____
Gender/Género

Today's Date/Fecha de hoy

Date of Birth/Fecha de nacimiento
Month/Day/Year/mes/día/año

FUSD Student Number

Cell or Work Phone/Teléfono del trabajo o celular

Home Phone/Teléfono del hogar

Student's Country of Birth/País natal del estudiante

New School in Fremont/
Escuela nueva en Fremont

Start Grade at the New School in Fremont/
Primer grado en la escuela nueva en Fremont

First Day at the New School in Fremont/
Primer día en la escuela nueva en Fremont

Previous School/ Escuela Anterior

City, State, Country/Ciudad, Estado, Condado

Grade Completed/Grado que terminó

When/Cuándo

Has the student ever attended K-12 school in USA?
¿Ha asistido el estudiante alguna vez a una escuela (K-12) en E.E.U.U.?

Names of CA public schools attended
Nombre de las escuelas públicas en CA que asistió

City
Ciudad

School Year
Año Escolar

Grade
Grado

When (start date)?/¿Cuándo (fecha que entró)?

Has the student ever attended K-12 public school in CA?
¿Ha asistido el estudiante alguna vez a una escuela pública (K-12) en CA?

- The California Education Code 306a requires schools to determine the language(s) spoken at home by each student. This information is essential in order for schools to provide meaningful instruction for all students. Your cooperation in helping us meet this important requirement is requested. Please answer all of the following questions. Thank you for your help.
- El Código de Educación de California requiere que las escuelas determinen el idioma que se habla en el hogar de cada estudiante. Esta información es esencial para que las escuelas puedan proporcionar instrucción significativa a todos los estudiantes. Le pedimos su cooperación en ayudarnos a cumplir con este requisito importante. Por favor conteste a todas las siguientes preguntas. Gracias por su ayuda.

- If PREVIOUS SCHOOL is a public school in CALIFORNIA and the student speaks another language besides English, please provide the California English Language Development Test (CELDT) results or a copy of CELDT report along with this form to the Language Assessment Center AT THE TIME OF YOUR APPOINTMENT.
- Si la escuela de donde viene el alumno es una escuela pública en California y el estudiante habla otro idioma además del inglés, por favor lleve los resultados del Examen de Inglés de California CELDT junto con esta forma al Centro de Asesoramiento cuando vaya a su cita.

1. What language did your son/daughter learn when he/she first began to talk?
¿Cuál idioma aprendió primero cuando su hijo/a empezó a hablar?

2. What language does your son/daughter most frequently use at home?
¿Cuál idioma usa su hijo/a más frecuente cuando conversa en la casa?

3. What language do you use most frequently to speak with your son/daughter?
¿Cuál idioma usa Ud. con más frecuencia cuando habla con su hijo/a?

4. What is the language most often spoken by the adults at home?
¿Cuál idioma hablan los adultos con más frecuencia en la casa?

NOTE: When you indicate a language other than English, we are legally required to test your child's English language proficiency (California Education Code 306a). You will be notified of the results of that test.

AVISO: Cuando se indique un idioma además del inglés, la ley requiere que evaluemos la habilidad en inglés de su hijo/a. Se le informará a Ud. de los resultados de la evaluación.

California State Department of Education (OPER-LS 77R-6/78)

(English/Spanish)

Rev. 01/09

White: Language Assessment Center

Yellow: Student Cum Folder

Pink: School Copy

Goldenrod: Parent Copy

Signature of Parent / Guardian

Firma de los padres / Guardianes