

Polaris Evening Program

APPLICATION FOR ENROLLMENT

4th Quarter 2017 – 2018

First Day of Classes: 3/19/18

Polaris @ Etowah East
6500 Putnam Ford Dr., Building A
Woodstock, Georgia 30189
(770) 721-3100 Phone (770) 926-1382 Fax

Registration Requirements:

1. Be at least 16 years of age.
2. Be a resident in Cherokee County, Georgia. Proof of residency is required (i.e. GA driver's license, property tax statement, lease/rental agreement, utility bill with Cherokee County address)
3. From previous school (non CCSD students): transcript of all high school credits earned to date, withdrawal form, GHSGT scores, immunization records, copy of certified birth certificate and copy of social security card.
4. Discipline records **MUST** be provided for out of county, out of state, and Ace Academy students.
5. Completed enrollment packet including student and parent/legal guardian signatures (accompanied by copy of photo ID of enrolling parent/legal guardian).
6. Students enrolled by a non-parental legal guardian must provide guardianship documentation.
7. Administrative fee of \$15.00 (cash only) each quarter registered.

Curriculum:

Polaris Evening Program is a non-traditional school dedicated to assisting student achievement in all educational and vocational pursuits so as to ensure that the doors of opportunity are always open.

A standard high school curriculum is offered to meet student needs. Additionally, credit recovery courses are available. One half Carnegie Unit credit may be earned for completing each class. Students must earn twenty-three (23) Carnegie Units in specified areas and pass all applicable Georgia High School exit exams to receive a regular high school diploma.

Class Schedules and Times:

During the school year classes meet Monday through Thursday. Each class period is two hours in length. Students shall take up to three (3) classes each quarter. Class times are shown below:

FIRST PERIOD ----- 4:15 - 6:00 PM
DINNER BREAK -----6:00 - 6:30 PM
SECOND PERIOD----- 6:30 - 8:15 PM
THIRD PERIOD----- 8:15 - 10:00 PM

Attendance:

Students are expected to attend all classes. Students will be dropped from a class after excessive absences (excused or unexcused). It is important to note that three (3) tardies equal one absence. An absence is assigned to students who arrive more than 15 minutes late or check-out early. Students who sleep in class will also be counted absent.

Student Parking:

All students who drive and/or park at Polaris must fill out an application to register their motor vehicle and obtain a **no-cost** parking permit. Student parking permits for the designated Polaris parking areas will be issued upon completion of this application. Parking permits are not transferable from one vehicle to another or from one individual to another. Failure to follow parking rules will result in a ticket and fine. No student records will be released until all fines are paid.

CHEROKEE COUNTY SCHOOL DISTRICT STUDENT ENROLLMENT FORM: HIGH SCHOOL

School: **POLARIS EVENING PROGRAM**

Student ID #: _____

Section I: STUDENT INFORMATION

SCHOOL USE ONLY

Official Withdrawal form _____

IMM _____
EED _____

Birth Certificate _____

Residency Info _____

Social Security Card _____

Last name	First Name	Middle Name
Female/Male _____	9 10 11 12 _____	_____
Gender _____	Grade _____	Age _____
Birth Place (State) _____	Social Security Number _____	
Nickname/Called Name _____	Student Cell Phone _____	

1. Year entered 9th Grade (e.g. 2011-12) _____
2. Foreign Exchange Student _____ Y/N If yes, country: _____
3. **Has student been enrolled in any special programs?** _____ Y/N
If yes, name of Program _____ (e.g. Special Education/IEP, ESOL, Tutoring)
4. Is this student currently serving a suspension or expulsion from another school or district: _____ Y/N
5. Name and address of school previously attended: _____
6. List Cherokee County Schools attended: _____
7. Ethnic Group: Is this student Hispanic/Latino? (choose only one)
 No, not Hispanic/Latino Yes, Hispanic/Latino

The above question is about ethnicity, *not* race. No matter what you selected above, **please continue to answer the following by choosing one or more to indicate what you consider your student's race to be.**

What is the student's race? (choose one or more):

American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

8. Is the birthplace of the enrolling student outside the United States? _____ Yes _____ No
 If yes, date entered U.S. Schools _____
 Country of birth _____

Section II: RESIDENCY INFORMATION

Are you the owner of your child's residence within this County's attendance zone? _____ Yes _____ No

If no, please ask the school for the necessary affidavit to be filled out by the property owner/manager.

RESIDENCE ADDRESS

Address _____

City _____

State _____ Zip Code _____

Home Phone _____ Parent/Guardian's Cell _____ Student Cell _____

MAILING ADDRESS (if different)

Address _____

City _____

State _____ Zip Code _____

With whom does student live? Both Parents Father Only Mother Only
 Mother & Stepfather Father & Stepmother Legal Guardian (documentation required)

Section III: PARENT/ LEGAL GUARDIAN INFORMATION

----- Last Name	----- First Name	----- Last Name	----- First Name
----- Relationship (Father, Mother, Guardian, etc.)		----- Relationship (Father, Mother, Guardian, etc.)	
----- Address		----- Address	
----- City	----- State	----- Zip	
----- Home Telephone	----- Work Phone	----- Cell	
----- E-mail Address		----- E-mail Address	

(Email is required in order to obtain ASPEN Parent Portal Account)

Section IV: EMERGENCY CONTACTS

Contact #1 (non parent/legal guardian)			Contact #2 (non parent/legal guardian)		
----- Name			----- Name		
----- Address			----- Address		
----- City	----- State	----- Zip	----- City	----- State	----- Zip
----- Telephone/Ext	----- Cell		----- Telephone/Ext	----- Cell	
----- Relationship to Student			----- Relationship to Student		

Section V: PHYSICIAN/MEDICAL INFORMATION

Physician

Telephone

Extension

List any medical conditions to which the school needs to be alerted:

Medical Alert 1

Medical Alert 2

Section VI: HOME LANGUAGE SURVEY

In order to provide your child with the best possible education, we need to determine how well he or she speaks and understands English. This survey assists school personnel in deciding whether your child may be a candidate for additional English language support. Final qualification for language support is based on the results of an English language assessment.

1. Which language does your child most frequently speak at home? -----
2. Which language do adults in your home most frequently use when speaking with your child? -----
3. Which language(s) does your child currently understand or speak? -----

Declarations:

- I understand that all the facts contained on this enrollment form are true and correct, and, if found to be false or erroneous, will lead to the immediate removal of my child from this school.
- I understand that I must report any change of residence to this school, regardless if that change in residence is outside of this school's attendance zone.

Signature of Person Enrolling Student

Relationship

Date

