Kindergarten Pre-Registration

Alamo Heights School District Kindergarten Pre-Registration for the 2020-2021 school year will be held at Howard Early Childhood Center, 7800 Broadway, beginning the week of January 4th, 2021.

To be eligible to enroll in kindergarten, a student must be five years of age ON OR BEFORE SEPTEMBER 1, 2021.

Parents are also required to UPLOAD the following items during the online registration:

- 1. Child's birth certificate
- 2. Child's immunization record
 - *DPT (at least 4 doses, including booster after fourth birthday)
 - *Polio (at least 4 doses, unless 3rd was given on or after fourth birthday)
 - *Measles, Rubella, and Mumps (2 doses of measles received on or after first birthday, completed before kindergarten)
 - *Hepatitis B (3 doses in series, completed before kindergarten)
 - *Hepatitis A (2 doses in series, completed before Kindergarten)
 - *Chicken Pox (2 dose or date documentation of disease)

3. Proof of residence

(if you own your home please provide the most recent utility bill- CPS, SAWS or Cable bill showing your name and address-If you rent, a lease agreement must be provided that lists all occupants INCLUDING THE CHILDREN along with your most recent CPS, SAWS or cable bill showing your name).

- 4. Parent's Driver License
- 5. Online registration must be complete.
- **All items must be received in order for registration to be accepted. (Registration will NOT be complete until all documents are accounted for.)

Please call the Howard office at 832-5900 if you need additional information.

Howard Early Childhood Center & Alamo Heights Independent School District

7800 Broadway, San Antonio, Texas 78209 Ph; 826-0261



VERIFICATION OF PRIMARY RESIDENCE

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Howard Early Childhood Center, AHISD Kindergarten Placement Information Sheet



At Howard Early Childhood Center, we strive to create very balanced classrooms. We want to be certain the students' backgrounds and needs are taken into account when making placement decisions. It is for this reason we ask you to complete this form. The information provided will help us in doing all we are able to meet the needs of your child.

Child's Name	Name child goes by					
Date of Birth						
Ethnicity: (circle) Am. Indian Asian/Pacific Blace	k Hispanic White Other:					
Guardian #1	Guardian #2					
Street Address	Street Address					
Contact Number	Contact Number					
Email Address	Email Address					
Parents are: (circle) Married Separated Divorced	Deceased Other:					
Child lives with: (circle all that apply) Mother Father Stepmother Stepfather Other:						
Sibling Age: If siblings	attended Howard, indicate and list his or her teacher:					
	rd Teacher:					
	rd Teacher:					
Howard Teacher:						
	rd Teacher:					
Prior School Experience: (circle) None Kin	ndergarten PK/Preschool Daycare					
Name of school or program:						
Language the child speaks: Language(s) spoken in the home:						
Volunteer Information: Parent(s) would be interested in regularly volunteering in the classroom. Weekly or Monthly						

Information used to balance classes and plan for appropriate supports

Please tell us about your child's personality and any behaviors of which we should be made aware.

On a scale of 1-5, please rate your child's social and emotional readiness for kindergarten.

1

I have concerns.

Below Average for Age Average for Age

3

Mature for Age

Additional Information:

Based on your child's preschool/home experiences, please rate your child's academic readiness for kindergarten.

1

I have some concerns.

2

Below Average for Age 3

Average for Age 4

5

5

Above Average for Age

Additional Information:



Alamo Heights Independent School District

7101 Broadway ° San Antonio, Texas 78209 ° Phone 210-824-2483

Dear Parent or Guardian:

The State of Texas requires that each school district conduct a survey of all students who hear or use a language other than English in the home. Our school offers a program that may assist these students. The purpose of this survey is to identify students who might be eligible for English As a Second Language classes. To determine if your child would benefit from Bilingual and/or English as a Second Language program services, please answer the two questions below.

If your responses indicates the use of a language other than English, then the school district must conduct an assessment to determine how well your child communicates in English. This assessment information will be used to determine if Bilingual and/or English as a Second Language program services are appropriate and to inform instructional and program placement recommendations. Once your child is assessed, changes to the Home Language Survey responses are not permissible.

Thank you for your cooperation in this survey.

Sincerely, Dr. Jimmie Walker, Executive Director of Curriculum & Instruction **HOME LANGUAGE SURVEY** Name of Student ______Campus _____Campus _____ Telephone #_____ Home Address Previous School Attended Public Private TO BE FILLED IN BY PARENT OR GUARDIAN: (1) What language is spoken in your home most of the time? (2) What language does your child speak most of the time? Signature of Parent/Guardian Date Signature of Student if Grades 9-12 Date

Please complete the "Military Connected Student Form" only if it pertains to you.



Alamo Heights Independent School District

7101 Broadway ♦ San Antonio, Texas 78209 ♦ Ph: (210) 824-2483 ♦ Fax: (210) 832-5952

Military Connected Student Form

The Texas Legislature adopted the Interstate Compact on Educational Opportunities for Military Students. The Interstate Compact is an agreement among member states to abide by a common set of requirements related to the education of military children. The purpose of the compact is to remove barriers to educational success imposed on children of military families because of frequent moves and deployment of their parents.

Student Name:	Last Name	First Name		Middle Name	
Student Campus:		Grade:	Student DOB:		
Parent Name:	Last Name	First Na	me	-	
Parent Signature:			-		
Please indicate w	with an ${f X}$ if your child is a dependen	nt of a member o	f		
FOR KINDERO	GARTEN – 12 TH GRADE STUDEN	TS:			
	My Kindergarten – 12 th grade studer Army, Navy, Air Force, Marine Cor			Action – MIA)	
	My Kindergarten – 12 th grade studer Army, Air Guard, or State Guard	nt <u>is</u> a dependent	of a member of the <u>Tex</u> :	as National Guard:	
	My Kindergarten – 12 th grade studer Army, Navy, Air Force, Marine Cor		-	e Duty:	
FOR PRE-KIN	DERGARTEN STUDENTS:				
	My Pre-Kindergarten student <u>is</u> a Force, Marine Corps, of Coast Guar		ive Duty Member of the	e Army, Navy, Air	
	My Pre-Kindergarten student <u>is</u> a National Guard (Army, Air Guard,		active / mobilized memb	per of the Texas	
	My Pre-Kindergarten student <u>is</u> a components of the Army, Navy, Air	_			
2	My Pre-Kindergarten student is a States, including the Texas National killed or injured while serving on ac	l Guard or reserv			