

4855 Bloom Avenue
White Bear Lake, MN 55110
651-407-7674

January, 2012

Dear Parents and Guardians of «First Name» «Last Name»:

On behalf of our school community, we welcome you and «First Name» to the White Bear Lake Area Schools. We look forward to meeting you this month! To help you learn about and prepare for the exciting opportunities in the White Bear Lake Area Schools, we have enclosed a *2012-13 Elementary Guide*, filled with photos of our students doing what they do best - learning and making lasting friendships!

Our records indicate that «First Name» is eligible to attend kindergarten in September, 2012. Your address indicates that you live in the area served by «School».

You have the option of attending «School» or Matoska International IB World School, a district-wide choice school. Bus transportation will be provided for either of these options. You also have the option to attend any of the district's other elementary schools, but you would need to provide transportation for your student.

This packet contains important information to help you with your kindergarten selection and registration process. As described in more detail in the enclosed information, we offer the following three kindergarten options:

- Half-day Kindergarten Program
- Half-day Kindergarten combined with a half-day Extended Day Kindergarten Program
- Full-day Kindergarten Plus Program

We offer two special opportunities in January for families interested in learning more about our elementary programs and to register your child as a kindergartner:

Welcome to White Bear Week

All elementary schools will have tours available during the week of January 9-12, 2012 for families who want to explore our schools - stop in at any elementary school office at one of the following times to join a tour:

- 10 a.m. on Monday, January 9 and Wednesday, January 11
- 6 p.m. on Tuesday, January 10 and Thursday, January 12

District-wide Kindergarten Registration Nights

Parent Information and Registration Nights offer parents an opportunity to learn more in-depth about the District kindergarten curriculum and programs, ask questions, visit a kindergarten classroom and complete your child's registration materials for kindergarten:

- 5:30 p.m. on Thursday, January 19 at any District elementary school.

Once you have registered your child at one of our schools, you will receive more information about opportunities to visit school with your child and meet your teacher.

Matoska International IB World School is a district-wide choice school available to all elementary students in the White Bear Lake Area School District. The District provides transportation from any point in the school district for students enrolled in this International Baccalaureate World School option.

Open Enrollment: In addition, all White Bear Lake Area Schools are open to students from outside the school district under the provisions of the State of Minnesota open enrollment laws. We welcome any families interested in our schools to contact us for more information.

(over)

Registration materials for kindergarten are included in this packet of information. **Please bring the completed information to the Kindergarten Registration Night.** If you have any questions or would like more information, feel free to call your school or Michelle Igo at the District Center, 651-407-7674. In late spring we notify families of morning or afternoon session assignments for half-day kindergarten.

All children need to participate in Early Childhood Screening after they have turned three and before entering kindergarten. We provide this service at no charge on the dates below. Your child needs to be screened only once. If your child has not participated in Early Childhood Screening, please call 651-653-3154 to schedule an appointment. For additional information, please call Danielle Mickelson at 651-653-3102.

Early Childhood Screening Dates, Winter/Spring 2012		
Day	Date	Appointment Times
Friday	January 13, 2012	8:30-11:30
Friday	January 27, 2012	8:30-11:30
Wednesday	February 1, 2012	8:30-10:45 and 12:00-1:45
Friday	February 10, 2012	8:30-10:45 and 12:00-1:45
Friday	February 24, 2012	8:30-10:45 and 12:00-1:45
Wednesday	February 29, 2012	8:30-10:45 and 12:00-1:45
Friday	March 9, 2012	8:30-10:45 and 12:00-1:45
Wednesday	March 14, 2012	1:00-4:00
Wednesday	April 4, 2012	1:00-4:00
Friday	April 13, 2012	8:30-10:45 and 12:00-1:45

*Dates will be added in May for children entering Kindergarten in the Fall of 2012

The White Bear Lake Area School District has a proud tradition of working with parents and community to provide students with an outstanding education. We are committed to providing the information you need to make good decisions for your child. This is an exciting time and we eagerly anticipate the family/school partnerships that will be established and continued. We look forward with enthusiasm to the 2011-2012 school year!

Sincerely,

*White Bear Lake Area Schools
Elementary principals*

2012-13 White Bear Lake Area Schools Kindergarten Sites:

Birch Lake Elementary
1616 Birch Lake Avenue
White Bear Lake 55110
651-653-2776
Tami VanOverbeke, Principal

Lincoln Elementary
1961 Sixth Street
White Bear Lake 55110
651-653-2820
Dan Schmidt, Principal

Vadnais Heights Elementary
3645 Centerville Rd.
Vadnais Heights 55127
651-653-2858
Sara Svir, Principal

Hugo Elementary (paired with
Oneka Elementary, gr 2-5)
14895 Francesca Ave.
Hugo 55038
651-653-2798
Teresa Dahlem, Principal

**Matoska International
IB World School**
2530 Spruce Place
White Bear Lake 55110
651-653-2847
John Leininger, Principal

Willow Lane Elementary
3375 Willow Avenue
White Bear Lake 55110
651-773-6170
Barbara Kearn, Principal

Lakeaires Elementary
3963 Van Dyke Street
White Bear Lake 55110
651-653-2809
Cary Krusemark, Principal

Otter Lake Elementary
1401 County Road H2
White Bear Lake 55110
651-653-2831
Max DeRaad, Principal

Enclosures: 2012-13 Elementary Guide
Enrollment forms

Translations: Para Español por favor llame al 651-407-7625
Xav tau ntawv Hmoob hu rau 651-407-7623



WHITE BEAR LAKE AREA SCHOOLS
KINDERGARTEN REGISTRATION INFORMATION
FOR THE 2012-2013 SCHOOL YEAR

*Welcome to the White Bear Lake Area Schools!
We are excited to partner with you and your family in the education of your child.*

Attached are some forms we ask you to complete and bring to registration night at your school:

- Enrollment Form
- Kindergarten-Plus Application Form: Complete this if you are interested in the fee-based full-day Kindergarten Plus program
- Census Form

Additional materials you may be asked to provide or complete when you visit your school:

- **Birth date verification document** - required. (examples: Birth Certificate, Adoption Papers, Passport). If you have already have one of these documents, please bring it with you to Registration Night. Otherwise, it is due on or before September 6, 2012. If your child was born in Minnesota and you need to request a copy of the Birth Certificate, you may obtain an application through the Minnesota Department of Health, <http://www.health.state.mn.us> or call at 651-201-0101.
- **Proof of Residency** - *i.e.; copy of driver's license, recent utility bill, etc.*
- **Health information packet** - required. Due on or before September 6, 2012. *Available at school registration night and in school office.*
- **Consent to release information.** If your family is new to the White Bear Lake Area and your child received pre-school screening in another district, you will be asked to complete this form. *Available at school registration night and in school office.*
- **Day Care Provider Form.** Complete this form **only** if you need transportation from a daycare provider's home **within** your home school boundary. *Available at school registration night and in school office.*

Questions? Contact Michelle Igo at 651-407-7674 or Michelle.Igo@isd624.org



ENROLLMENT FORM

SCHOOL: _____

OFFICE USE ONLY		
DATE ENROLLMENT FORM RECEIVED:	DATE RECORDS REQUESTED FROM PREVIOUS SCHOOL:	DATE STUDENT DATA VERIFIED FROM PREVIOUS SCHOOL: Data Verified by: <input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Other _____
DATE OPEN ENROLLMENT STATUS GRANTED:	DATE RECORDS RECEIVED FROM PREVIOUS SCHOOL:	ADDITIONAL NOTES:
STUDENT ENROLLMENT INFO: DATE: _____ YEAR: _____ SCHOOL: _____ STUDENT MARRS # _____	ADDRESS VERIFICATION: <input type="checkbox"/> Driver's License <input type="checkbox"/> Utility Bill <input type="checkbox"/> Other _____	NAME/BIRTH DATE VERIFICATION: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Other _____

1. STUDENT INFORMATION (Legal documentation or district approval is required to use this address for school assignment if other than parents)

LEGAL NAME	Last: _____	First: _____	Middle: _____	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	BIRTH DATE (mm-dd-yyyy) - -	GRADE
ADDRESS	Street Name and House Number (Apt./Unit#): _____			City: _____	State: _____	Zip Code: _____
HOME PHONE <input type="checkbox"/> Unlisted () -	WITH WHOM DOES THE STUDENT LIVE?	<input type="checkbox"/> Both Father & Mother <input type="checkbox"/> Father & Stepmother <input type="checkbox"/> Mother & Stepfather	<input type="checkbox"/> Father Only <input type="checkbox"/> Mother Only <input type="checkbox"/> Foster Parent(s)	<input type="checkbox"/> Legal Guardians <input type="checkbox"/> Group Home <input type="checkbox"/> Lives Independently	<input type="checkbox"/> Other (Explain): _____	

2. PARENT/GUARDIAN #1 INFORMATION (Legal documentation is required for custody limitations)

LEGAL NAME	Last: _____	First: _____	Middle: _____	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	RELATIONSHIP	LEGALLY RESPONSIBLE FOR STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
HOME PHONE (If different than student) () -	CELL PHONE () -	WORK PHONE () -	EMAIL	ADDRESS (If different than student) Street Name and House Number (Apt./Unit#): _____		
			City: _____	State: _____	Zip Code: _____	

3. PARENT/GUARDIAN #2 INFORMATION (Legal documentation is required for custody limitations)

LEGAL NAME	Last: _____	First: _____	Middle: _____	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	RELATIONSHIP	LEGALLY RESPONSIBLE FOR STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
HOME PHONE (If different than student) () -	CELL PHONE () -	WORK PHONE () -	EMAIL	ADDRESS (If different than student) Street Name and House Number (Apt./Unit#): _____		
			City: _____	State: _____	Zip Code: _____	

4. EMERGENCY CONTACT #1 INFORMATION (LIST CONTACT OTHER THAN PARENT/GUARDIAN – CONTACT WITH PARENT/GUARDIAN WILL BE MADE 1ST)
These are the only contacts that may transport, care for or provide release permission for your child if you cannot be reached. In case of serious accident or illness at school, 911 will be called. The parent/guardian is responsible for all expenses. List daycare as an emergency contact.

LEGAL NAME	Last: _____	First: _____	Middle: _____	RELATIONSHIP (NOT PARENT)
GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	HOME PHONE () -	CELL PHONE () -	WORK PHONE () -	

5. EMERGENCY CONTACT #2 INFORMATION (LIST CONTACT OTHER THAN PARENT/GUARDIAN – CONTACT WITH PARENT/GUARDIAN WILL BE MADE 1ST)
These are the only contacts that may transport, care for or provide release permission for your child if you cannot be reached. In case of serious accident or illness at school, 911 will be called. The parent/guardian is responsible for all expenses. List daycare as an emergency contact.

LEGAL NAME	Last: _____	First: _____	Middle: _____	RELATIONSHIP (NOT PARENT)
GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	HOME PHONE () -	CELL PHONE () -	WORK PHONE () -	

6. OTHER SIBLINGS OF THE STUDENT UNDER THE AGE OF 21 LIVING IN THE SAME HOUSEHOLD INFORMATION

LAST NAME	FIRST NAME	MIDDLE NAME	GENDER	BIRTH DATE (mm/dd/yyyy)	GRADE	SCHOOL
			<input type="checkbox"/> Male <input type="checkbox"/> Female	/ /		
			<input type="checkbox"/> Male <input type="checkbox"/> Female	/ /		
			<input type="checkbox"/> Male <input type="checkbox"/> Female	/ /		
			<input type="checkbox"/> Male <input type="checkbox"/> Female	/ /		
			<input type="checkbox"/> Male <input type="checkbox"/> Female	/ /		

ENROLLMENT FORM (continued)

7. RACIAL/ETHNIC INFORMATION

This information is for federal and state civil rights and statistical reports. This is a nonscientific racial/ethnic designation as defined by the U.S. Department of Education.

CHECK ONE RESPONSE

 American Indian/Alaskan Native

FOR STATE REPORTING PURPOSES OF THE STUDENT'S PRIMARY RACIAL ETHNIC BACKGROUND:

– [Persons having origins in any of the original peoples of North America and maintain cultural identification through tribal affiliation or community recognition.]

 Asian/Other Pacific Islander

– [Persons having origins in any other original peoples of the Far East, Southeast Asia, the Pacific Islands or the Indian subcontinent.]

 Hispanic

– [Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture of origin – regardless of race.]

 Black, not of Hispanic origin

– [Persons having origins in any of the Black racial groups of Africa.]

 White, not of Hispanic origin

– [Persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.]

CHECK ONE RESPONSE

FOR FEDERAL REPORTING PURPOSES OF THE STUDENT'S ETHNICITY:

 Hispanic or Latino

– [A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin – regardless of race.]

 NOT Hispanic or Latino

CHECK ALL RESPONSES THAT APPLY

FOR FEDERAL REPORTING PURPOSES OF THE STUDENT'S RACE:

 American Indian or Alaska Native

– [A person having origins in any of the original peoples of North and South America, including Central America, and who maintains a tribal affiliation or community attachment.]

 Asian

– [A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.]

 Black or African American

– [A person having origins in any of the Black racial groups of Africa.]

 Native Hawaiian/Other Pacific Islander

– [A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.]

 White

– [A person having origins in any other original peoples of Europe, the Middle East, or North Africa.]

8. HOME LANGUAGE INFORMATION

This information is used to determine if your student is eligible for the English Learner (ELL) program. In order to help your student learn, your student's teachers need to determine which language your student uses most. All Students with a home language other than American English are screened to determine if they are eligible for ELL services.

WHICH LANGUAGE DID THE STUDENT LEARN FIRST?

 English (American)

 Other: _____

WHICH LANGUAGE DOES YOUR STUDENT USUALLY SPEAK?

 English (American)

 Other: _____

WHICH LANGUAGE IS MOST OFTEN SPOKEN IN YOUR HOME?

 English (American)

 Other: _____

WHICH LANGUAGE DO YOU USUALLY SPEAK TO YOUR CHILD?

 English (American)

 Other: _____

9. IMMIGRANT INFORMATION

This information is used to determine eligibility for supplemental funding for the education of immigrant students.

WHAT IS THE STUDENT'S COUNTRY OF BIRTH?

If NOT in the United States, when did the student enter the United States?

(mm-dd-yyyy)

10. RESIDENCY INFORMATION

Do you reside within White Bear Lake Area Schools boundaries? Yes No If no, *Open Enrollment Forms* must be completed.

This information is used to determine if the student qualifies for migrant education services.

HAVE YOU RECENTLY MOVED TO THE SCHOOL DISTRICT IN THE LAST 36 MONTHS FOR TEMPORARY OR SEASONAL AGRICULTURE OR FISHING WORK? Yes No

This information is used to ensure the educational rights and protection for students experiencing homelessness. A homeless individual is one who: (1) lacks a fixed, regular and adequate nighttime residence and (2) includes: (a) children and youths are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelter; are abandoned in hospitals; or are awaiting foster care placement; (b) children and youths who have a primary nighttime residence that is a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings; and (c) children or youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings. You are not required to complete the information in this section of the form. If you choose not to complete this section there may be a delay in the provision of services. The teacher, school and district administrators and the Minnesota Department of Education (MDE) have access to this information.

IS THE STUDENT CONSIDERED HOMELESS? Yes No

If YES, what district and school did the student attend prior to becoming homeless?

If YES, what district and school is currently serving the location where the student is temporarily living?

11. PREVIOUS SCHOOL ENROLLMENT INFORMATION

HAS THE STUDENT EVER ENROLLED IN ISD624-WHITE BEAR LAKE AREA SCHOOLS BEFORE? Yes No If yes, Date _____ School _____

HAS THE STUDENT EVER ENROLLED IN A MINNESOTA PUBLIC SCHOOL BEFORE? Yes No If yes, Date _____ City _____

PRESCHOOL SCREENING: If enrolling for Kindergarten, has your child completed Preschool Screening? Yes No If yes, Where? _____

LIST ALL PREVIOUS ENROLLMENTS (LIST THE MOST RECENT FIRST)

District Name	School Name	State	Grade(s) Enrolled	Withdraw Date (mm/dd/yyyy)

DOES THE STUDENT HAVE AN IEP (INDIVIDUALIZED EDUCATION PLAN)? Yes No

If YES, what is the student's primary disability? (Check all that apply)

Autism Spectrum Disorders
 Developmental Cognitive Disability
 Developmental Delay
 Deaf – Hard of Hearing

Emotional/Behavior Disorders
 Other Health Disabilities
 Physically Impaired
 Specific Learning Disabilities

Speech/Language Impairments
 Traumatic Brain Injury
 Visually Impaired

DOES THE STUDENT HAVE A 504 ACCOMMODATION PLAN? Yes No

IS THE STUDENT CURRENTLY ENROLLED IN A TALENTED AND GIFTED PROGRAM? Yes No

HAS YOUR CHILD EVER RECEIVED HELP LEARNING ENGLISH? Yes No

IS THE STUDENT CURRENTLY RECEIVING TITLE I SERVICES? Yes No

HAS THE STUDENT EVER BEEN EXPELLED FROM A PREVIOUS SCHOOL? Yes No

HAS THE STUDENT EVER BEEN ARRESTED RESULTING IN A CHARGE? Yes No

12. PARENT/LEGAL GUARDIAN/OTHER PRIMARY CARE PROVIDER/EMANCIPATED STUDENT CERTIFICATION

I CERTIFY THE INFORMATION GIVEN ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

PRINTED NAME _____

SIGNATURE _____

DATE _____

Para Español por favor llame al 651-407-7625 / Xav tau ntawv Hmoob hu rau 651-407-7623



Census Information
 4855 Bloom Avenue
 White Bear Lake, MN 55110

Phone: 651-407-7551
 Email: census@isd624.org
 District Web site: www.isd624

Dear School District Resident:

Periodic census is a very necessary function of school districts. We need accurate data for enrollment projections, budget planning, and providing district services such as early childhood programs, recreation, and senior center services. It is particularly imperative that we have any 0 to 5 year olds accurately registered on our District census.

Our recent census tracking indicates that the District does not have complete family data for your address. Please allow us to update our system by completing this form. If you choose, you may call in, email your information, or submit the information online. Thank you in advance for your response.

Census Information
 4855 Bloom Avenue
 White Bear Lake, MN 55110

Phone: 651-407-7551
 Email: census@isd624.org
 District Web site: www.isd624.org

Today's Date: _____

Street Address _____

Apt _____

City _____

State _____

Zip _____

Phone _____

Head(s) of Household:

Last Name	First Name	Gender	Date of Birth
(1) _____	_____	M F	_____
(2) _____	_____	M F	_____

All others at this address:

Last Name	First Name	Gender	Date of Birth
(1) _____	_____	M F	_____
(2) _____	_____	M F	_____
(3) _____	_____	M F	_____
(4) _____	_____	M F	_____
(5) _____	_____	M F	_____

If your last residence was in the White Bear Lake Area School District, please indicate that address below:

Street Address _____

Apt _____

City _____

State _____

Zip _____

Phone _____

Translations: Para Español por favor llame al 651-407-7625. / Xav tau ntawv Hmoob hu rau 651-407-7623