



2011 - 2012

Millennium **Community** School
Enrollment Packet

What do I Need To Enroll My Child:

- Birth Certificate Social Security Card
- Immunization Records Proof of Residency(2 forms)
- Copy of Parent/Guardian Drivers License
- Court Order or Custody Papers (if applicable)
- Copies of most recent Report Card (if applicable)
- Emergency Card (in packet)
- Media/Interview/Photo Release (in packet)
- Public Information Release (in packet)

Thank you for choosing Millennium Community School where “Education is our Number One Priority.” Enclosed in this packet are the registration materials that **MUST be fully completed before your child is eligible** for enrollment to Millennium Community School for Fall 2011.

If you have any questions, please contact the admissions department at 614-255-5585. Please return all forms and documentation to our office in person.

Please return during office hours 8:30am - 3:15pm.

Millennium Community School is committed to the concept of an open door policy and equal educational opportunity. In accordance with federal and state laws, and school policy, MCS does not discriminate in any of its policies, procedures or practices on the basis of age, color, sex, religion, national origin, race, creed, or disability(ies).



Our Mission

The Millennium Community School will utilize research-proven curricula to ensure outstanding academic performance routinely by all of its socially and economically diverse student population. The Millennium Community School will create uniquely American, world-class public schools that meet the needs of today's families and children and prepare them for the twenty-first century.

The Millennium Community School is distinct from other schools in its intense focus on teaching students at their maximum rate, bringing them to higher levels at an advanced pace. To achieve this goal, the school uses a scripted curriculum in all basic skill subjects, such as math, reading, spelling and language. The Millennium Community School is also distinct in its success in elevating student achievement beyond expected grade level.

Our Philosophy

The basic educational philosophy of our program states that every child can learn if taught appropriately. In other words, children who fail have been failed by the instruction to which they have been submitted. Equipped with a proven curriculum, school staff follow successful instructional practices, evaluate each child often each day and alter ineffective teaching practices to meet the needs of every child. The school emphasizes basic skills, development and mastery at every stage to make it probable that skills will be applicable for every day life.

Our Program

Millennium Community School was established in 1999 with the initial enrollment of 345 students, which has increased to over 600+ students. Millennium accepts students in grades K-8. These students can be from anywhere in Ohio with preference to students from the Columbus Public School district. School is in session from 8:45 am to 3:45 pm. Busing is provided by the student's district of residence.

Millennium Community School utilizes the Direct Instruction (DI) curriculum in Reading, Math and Spelling. The goal of this program is to accelerate learning by maximizing efficiency in the design and delivery of instruction. DI has been scientifically proven to be the best curriculum available for elementary students. After the first year at Millennium, 80% of all Kindergarten students are reading at or above grade level.

Millennium employs highly qualified school personal and administrators who believe there are no excuses for children failing to learn. All teachers are certified and Instructional Assistants are available at each grade level. There are 25 students in each Kindergarten class and up to 30 students in each upper grade classroom. Instructional groups consist of 15-20 students. Full Special Education services are also available.

2011 - 2012 Registration Form

Millennium Community School
3500 Refugee Rd. Columbus, OH 43232

Please Note: Information on this form may be shared with the Ohio Department of Education

STUDENT INFORMATION (PLEASE PRINT AND USE INK)

Name: _____
Last Name First Name Middle Name

Primary: _____
Street City State Zip

Primary Phone #: (____) _____ Male Female

Present Grade: _____ Applying for Grade: _____ Birth Date: _____

Social Security Number: _____

Has this child ever attended Millennium Community School Before? YES or NO

School Transportation : Student Will Be A (Circle One) : Walker/Pick Up OR Bus Rider

Mother/Guardian Name: _____ Occupation: _____

Address (if different from above) : _____

Home Phone (if different from above) : _____ Business: _____

Cell/Pager # : _____ E-mail: _____

Carrier: _____

Father/Guardian Name: _____ Occupation: _____

Address (if different from above) : _____

Home Phone (if different from above) : _____ Business: _____

Cell/Pager # : _____ E-mail: _____

Carrier: _____

Parent/Guardian Information: Child lives with: Both Parents Mother Father Legal Guardian

Please check all that apply:

Parents are married Parents are divorced Father has custody Mother has custody

Joint custody Single-Parent household Mother or Father is deceased

Other: _____

Note: If legal custody of a child is split between two parents, please attach a certified copy of the court order identifying each parent's respective award of physical custody. You are responsible to immediately inform the school of any changes to the court order.

Are there any custody, visitation, or other orders limiting access to this child? Yes No

If yes, specify orders: _____

Ethnicity

Is this student of Hispanic/Latino heritage?

____ Yes, Hispanic/Latino Heritage

____ NO

Race

American Indian

Asian/Pacific Islander

African American (Black)

Hispanic

Caucasian (White)

Other: _____

Language

Primary Language _____

Language(s) spoken at home _____

Sibling Information

Does this student have any siblings that currently attend MCS?

Name of Sibling : _____ Grade: _____

Name of Sibling : _____ Grade: _____

Name of Sibling : _____ Grade: _____

School District of Residence and Former School Information:

School District of Residence: _____

Former School Information (other than pre-school):

Public School

Charter School

Home School

Nonpublic

Student Not Enrolled in School Preceding Enrollment in Charter School Because:

Entering Kindergarten

Re-enrolling Dropout

Other: _____

Name of Former School: _____

Address of Former School: _____

Previous Grade: _____ Withdrawal Date from Former School: _____

Was your child suspended, expelled (forced to withdraw), or under discipline at the previous school attended?

____ YES ____ NO If Yes, Please explain: _____

Was your child receiving Special Education Services based on an IEP? Yes No

If yes, do you have the child's special education records (IEP)? Yes No

(This information is confidential and will not be used to determine enrollment or to discriminate)

Student's Disability : Specific Learning Disability Emotional Disturbance Visual Impairment

Deaf Speech/Language Impairment Traumatic Brain Injury Autism Multiple Disabilities

Student Health History/Current Health Information

Information obtained from this health history will be included on a confidential health conditions list, if appropriate. Does your child have any of the following medical conditions? Please check the appropriate boxes.

Current seizures

If checked, on medication? Yes No

Current asthma

If checked, Uses inhaler On Medication

Diabetes

If checked, Insulin dependent? Yes No

Bee Sting allergy

If checked, requiring: Epi-pen Benadryl

Behavior problems

Hearing aids

Movement limitations

Prosthesis

Speech problems

Recent hospitalizations:

If checked, please explain: _____

Severe allergies requiring medication. If checked, please explain: _____

Other

(please explain): _____

Vision or eye problems: Yes No If yes, wears glasses: for board work for reading all the time

Medication

Medication: If your child requires medication at school, then all medication sent to the school must be in the prescript container with a current date and an "Authorization for Administration of Medication" form must be on file (obtain fr the school nurse).

Please indicate:

Medication: _____

Medication: _____

Dosage: _____ Hr(s). given: _____

Dosage: _____ Hr(s). given: _____

X _____
Parent Signature

EMERGENCY PROCEDURE CARD

Date of admission		Teacher		Grade	
Child's name <i>(including last, first, middle initial)</i>			Child's address <i>(including house number and street, building/apartment number)</i>		
Child's date of birth	Home phone number ()	City		State	ZIP Code
Residency information					
Student lives with <i>(please circle one)</i> parents, mother, father, stepmother, stepfather, other <i>(explain)</i> :					
Father's/legal guardian's name			Mother's/legal guardian's name		
Home address <i>(if not child's address)</i>			Home address <i>(if not child's address)</i>		
City	State	ZIP Code	City	State	ZIP Code
Employer name			Employer name		
Employer address			Employer address		
City	State	ZIP Code	City	State	ZIP Code
Employer phone number ()	Hours of employment a.m. to p.m.		Employer phone number ()	Hours of employment a.m. to p.m.	
Contact instructions					
Please indicate whom we should contact in case of an emergency <i>(other than parent)</i> :					
1 st choice:		Daytime phone:		()	
		Alternate phone:		()	
2 nd choice:		Daytime phone:		()	
		Alternate phone:		()	
Doctor:		Office phone:		()	
		Alternate phone:		()	
Name(s) of person other than parent or legal guardian to whom child may be released:					
Please indicate whom we should contact in case of an early dismissal <i>(other than parent)</i> :					
1 st choice:		Daytime phone:		()	
		Alternate phone:		()	
2 nd choice:		Daytime phone:		()	
		Alternate phone:		()	
Are there any restrictions on your child's activities at school? Yes or No If Yes, please explain.					
Is there any medical information/concern you would like to share with the school which might help better serve your child? This information is confidential.					
In case of separated or divorced parents, are there any legal restrictions on the release of child to either parent? If so, provide a copy of formal documentation to keep in your child's file.					
Emergency instructions					
◊ I give permission to Millennium Community School to secure emergency medical and/or surgical treatment for the above named minor child while in its care.					
◊ I do not give permission to Millennium Community School to secure emergency medical and/or surgical treatment for the above named minor child while in its care.					
Hospital preferred in case of emergency:				Phone: ()	
Health insurance policy name and number:					
Allergies:					
Signature of Parent or Guardian					Date

Millennium Community School Policies

Dress Code Policy

1. Arrive and leave school in dress code attire. Dress code attire consists of
 - **LIGHT BLUE** oxford shirts or polo's. (Logo is optional)
Shirts are to be tucked in and buttoned completely at all times.
 - **NAVY BLUE** pants/skirts/shorts/jumpers/skortos
Slacks, skirts, and shorts are to be worn firmly at the waist and accompanied by a belt. Skirts, shorts and jumpers must be no shorter than 3 inches above the knee.
NO SAGGING! * Belts must be worn (Black or Brown only)
Clothing should cover from the shoulders to three inches above the knee. Pictures, patches and wording on clothing are not permitted.
 - **BLACK SHOES** (must be entirely black, no other color or design is permitted) Shoes should be comfortable that will allow students to be safe at all times
During the school day. Footwear that exposes the feet are not allowed.
NAVY BLUE or **WHITE** stockings, tights or socks **ONLY**-No Colors, No Leggings.
NO EXCESSIVE JEWELRY. No Exceptions!
Thongs, sandals, high heels/stacks, heelies or exposed heel shoes are not allowed
2. Appear clean, neat and well groomed each day.
3. **Dress Code Infraction Enforcement:**
 - If your student is in violation of the dress code policy they will be sent to the office. Administration reserves the right to require the parent/guardian to pick up their child or bring proper clothing in accordance with the dress code to change at school. Administration also reserves the right refer your child to the nurse's office to change if sizes are available.
 - Suspension(s) can occur if your child violates the dress code policy after the initial warning.

ALL YOUNG MEN MUST WEAR A TIE ON FRIDAYS. NO EXCEPTIONS!!!

Visitor Policy

Visitors are welcome at all times. Visitors must first report to the office, sign in and receive a visitor's pass. The visitor's pass must remain on for the duration of your visit. Visitors are not permitted to interrupt teachers during instructional time.

Student Release Policy - Photo ID Required

Students cannot be released from the classroom at any time without an authorization form from the office. You must be at least 18 years of age to pick up a student.

Student Behavior Policy

Millennium Community School has zero tolerance for fighting and excessive student misconduct. If your student is fighting, they will be suspended for up to seven (7) days. If your student is removed from the classroom and sent to the office, you will receive a phone call and may be asked to pick up your child.

My signature below indicates that I have read the Dress Code Policy, Visitor Policy, Student Release Policy and Student Behavior Policy. I agree to the terms stated within the above policies. I certify that the information contained in this application is true and complete and that false information may forfeit enrollment at MCS.

Student's Name (please print)

Signature of Parent or Guardian

Date

Media/Interview/Photo Release Form

I hereby grant permission to Millennium Community School to photograph/interview my child, _____ . It is my understanding that this photograph/interview or portions thereof will be used for public view. Specifically, my child's picture will be used on the Millennium Community School website and in Millennium Community School marketing material.

I agree to participate in this project without financial remuneration and I understand that this releases Millennium Community School from any future claims as well as from any liability arising from the use of said photograph/interview.

Student's Name *(please print)*

Signature of Parent or Guardian

Date

Internet Acceptable Use Policy

Prior to receiving authorization to use the Internet, students and their parents/guardians must sign the following permission and contract document.

Parents

I give permission for my child to participate in the use of the Internet, a worldwide telecommunications network. I realize that (s)he will be able to access major networks throughout the world using the Internet. I understand that this access is designed and intended for educational purposes only. I also understand that the student will receive instruction in the appropriate use of this resource.

I realize the Internet contains material that is inappropriate for school purposes. I support the school's position that students are responsible for not accessing such material. Such unacceptable use of the network will result in the suspension of all privileges. I will not hold South Scioto Academy accountable for unsuitable materials acquired by the student through Internet usage for school.

I acknowledge that I have read the Internet Acceptable Use Policy.

Student's Name *(please print)*

Signature of Parent or Guardian

Date

Millennium Community School

Student and Parent Pledge

It is important that families and schools work together to help students achieve high academic and character standards. The following are agreed upon roles and responsibilities that we as partners will carry out to support student success in school and life. We understand that fulfilling these responsibilities is considered an important way for all of us to support our school.

STUDENT PLEDGE

As a student, I will:

- Maintain a good attendance record and commit to the academic calendar.
- Effectively utilize all of the time in the school day.
- Bring all materials I need to school.
- Show responsibility and trustworthiness in all that I do.
- Communicate with my parents daily about school so they can be informed and can help me when I need it.
- Show respect to everyone.
- Participate in service learning projects.
- Use all technology wisely and appropriately.
- Abide by the school rules and conduct myself in a responsible manner.
- Show respect to everyone.
- Not disrupt the learning environment or instructional time.

Student Signature: _____ Date _____

PARENT PLEDGE

As a parent/guardian, I will:

- Demonstrate to my child through my actions and deeds that learning and education are important.
- Commit to the academic calendar and ensure my child's regular school attendance.
- Uphold expectations set by the school.
- Send my child to school with all needed supplies.
- Support and participate in school activities.
- Support service learning opportunities.
- Support technology use.
- Update myself regularly about my child's progress and if I have questions or concerns, promptly call the staff.
- Help my child set goals for learning, participation in the community, and support the work needed to achieve those goals.
- Show respect to everyone.
- Not disrupt the learning environment or instructional time.

Parent Signature: _____ Date: _____

Millennium Community School Request for Student Records

Please complete and sign the statement below.

Please forward the records of _____ born _____,
(print student's full name) (birth date)

who enrolled in the _____ grade at Millennium Community School on _____.

I authorize _____ (current school) to release school records on file for the above student to Millennium Community School.

Current School: _____ Current Grade: _____

School Address:

_____ Street City State Zip

Parent/Guardian: _____ Relationship: _____
Print Name

Parent/Guardian Signature: _____ Date: _____

The student listed above is registering at Millennium Community School. To aid in our enrollment process, please send the following:

- Discipline Records/Report
- All Report Card/Progress Reports
- Results of all standardized tests and evaluations
- Results of all Cognitive Abilities tests and evaluations
- Results of all criterion-referenced tests and evaluations
- Current Health Card
- All Student Study Team (SST) evaluations and recommendations
- All Special Education Records including current ETR evaluations and Individual Education Program (IEP)
- Last Day In Attendance in your building

Please send all information (including this form) to :

Millennium Community School
3500 Refugee Rd.
Columbus, OH 43232

Millennium Community School Affirmation of Prior Discipline Record

Check the appropriate item, provide all appropriate information and sign this document.

I affirm that the information provided here is true and that any false statement may result in forfeiting my child's enrollment privileges at Millennium Community School .

The undersigned affirms that _____ has not been suspended or expelled from any school.

The undersigned affirms that _____ has been suspended or expelled from a school.

If the student has been suspended or expelled, please provide the school name, date of suspension and/or expulsion, along with a detailed description of the incident(s).

Signature of Parent or Guardian

Date

Signature of Millennium Staff Member

Date sent for verification

Former school information:

Name and address of responding school district:

City State ZIP Code

() _____
Phone number

() _____
Fax number

Please check one:

According to our records, we verify that the information provided above by the parent/student is correct.

According to our records, the information provided above by the parent/student is not correct. Appropriate documentation of suspensions and/or expulsions is attached.

Signature and title of sending district administrator

Date