Groveport Madison Local Schools

Kindergarten Registration Checklist ***Complete*** _____ ***Date*** _____ ***Time***

Child's Complete Name _____

Child's Birth Date _____ **City of Birth** _____

Race _____ **White** _____**Black** _____ **Multi-Racial** _____ **Hispanic**
_____ **Asian/Pacific Islander** _____**American Indian** _____ **Alaskan Native**

	Need	Complete
Original Birth Certificate (not hospital certificate):	_____	_____
Social Security Number _ _ _ - _ _ - _ _ _ _	_____	_____
Custody Paper/Issue _____ **Not Applicable**	_____	_____
Verification of Residence (Lease/Mortgage & 2 Utility Bills)	_____	_____

Immunizations Needed:

- A 5th dose of DPT is needed if the 4th dose was given before the fourth birthday
- A 4th dose of Polio vaccine is needed if the 3rd dose was given before the fourth birthday or a combination of OPV and IPV was given

Complete

* DPT #1 _____ #2 _____ #3_____ #4 _____ #5 _____ _____

*Polio OPV #1 _____ #2 _____ #3 _____ #4 _____ _____
Or IPV #1 _____ #2 _____ #3 _____ #4 _____ _____

*MMR (measles, mumps, rubella) #1 _____ #2 _____ _____
(After 1st Birthday) (28 days later)

*Hepatitis B #1 _____ #2 _____ #3 _____ _____
(1 month) (28 days after #1) (8 weeks after 2nd)

The last dose in the series (3rd or 4th), must not be administered before age 24 weeks.

*Varicella #1 _____ #2 _____ _____
(12 months) (3 months after 1st)

Kindergarten Physical Form Given to Parent _____ Returned _____

All information must be submitted before registration is considered complete. School placement is on a first come basis rank ordered by the date on the completed registration. Priority will not be given to enrollees with siblings in the building. For example, a kindergarten student's registration is received and the school is full the last to enroll will go to the next available school even if the last to enroll has siblings in that building.
NO EXCEPTIONS – REGISTER EARLY !!!