

Fairfield Township School

375 Gouldtown-Woodruff Rd.
Bridgeton, NJ 08302
Phone: 856-453-1882 / Fax: 856-459-3169

Pre-School Registration

In accordance with New Jersey Administrative Code 6A:28-2.5 Proof of eligibility: A district board of education representative shall accept the following forms of current documentation from persons attempting to demonstrate a student's eligibility for enrollment in the Fairfield Township School District.

Pre-School registrations requirements:

Student(s):

- √ Pre-School: Children turn 3 or 4 years old by October 1st of the school year
- √ Resident of Fairfield Township School
- √ An Original Birth Certificate or Passport with an Approved VISA
- √ Immunization Record (Must be updated – See list)
- √ Physical within one year before registration
 - √ Seasonal flu shot before December 31st of the school year or your child will not be permitted to return to school in January of the school year



Parent/Guardian Identification:

- √ Parent must provide sufficient identification to establish their relationship to the registered child.

These documents are acceptable if dated within two months before registration

If you own a house (any FOUR forms will be accepted):

- √ Property tax bill, mortgage statement, plus THREE current utility bills i.e., gas, electric water, sewer, phone and cable

If you rent (any FOUR forms will be accepted):

Current Signed Lease (original) including student(s) name(s), plus THREE current utility bills i.e., gas, electric water, sewer, phone and cable

If you and/or your children live with someone else:

- √ If you and/or your child lives with someone else that is a district resident or you are considered homeless, in addition to the student requirements, the person you are living with must come in person, provide sufficient identification, four proofs of residency of acceptable documents listed above and both must sign affidavits (available in the office) in front of the notary for verification.

PLEASE READ

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- √ After the registration process is complete, parents will be notified when the student can start school and when the bus is scheduled to start pick up and drop off. Before the bus is scheduled, the student will have to be dropped off and picked up at the designated areas. For further information, see Form E - **EARLY DISMISSAL, STUDENT PICK-UP & DROP OFF AND SECURITY PROCEDURES.**
- √ If your child is eligible to receive free lunch, it is in your best interest to complete your lunch application immediately. You will be charged each day full price for lunch until your application is approved. Breakfast is free.

Welcome to the Fairfield Township School!

MUST CHECK THE APPROPRIATE SELECTION OF ENROLLMENT

DOMICILE (Live With): If the student is living with a parent or guardian whose permanent home is in the district, the parent or guardian must provide an original birth certificate (we will make the copy). If you are the student's guardian, or will be the guardian of a student from an out of state following expiration of the required 6-month waiting period, you will be asked to provide official papers proving guardianship. You will not be asked to produce "affidavit student" proofs.

Under New Jersey law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location within a municipality, the district of domicile for school attendance purposes is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.

No district is required, as a result of being the district of domicile or temporary residence for school attendance purposes where a student lives with more than one parent, to provide transportation for a student residing outside the district for part of the school year, other than transportation based upon the home of the parent domiciled within the district to the extent required by law.

AFFIDAVIT STUDENT NOTICE: (Please read carefully)

It is not necessary that legal guardianship or custody be obtained before a student will be considered for enrollment on an "affidavit" basis.

Students are not eligible to attend school as "affidavit" students unless the student's parent or guardian is not capable of supporting or providing care for the student due to family or economic hardship, and unless it is clear that the student is not living in the district solely for purposes of receiving a public education there. Please explain the circumstances applicable in this case, with special attention to the parent/guardian's family and/or economic hardship. (The parent and guardian will be required to file a sworn statement with documentation to support the claims made along with a copy of the person's mortgage or lease (if a tenant without a lease, a sworn statement from the landlord).

A student will not be considered ineligible because required sworn statements(s) cannot be obtained, so long as evidence is presented that the underlying requirements of the law are being met.

A student will not be considered ineligible when evidence is presented that the student has no home or possibility of school attendance other than with a non-parent district resident who is acting as the sole caretaker and supporter of the student.

A student will not be considered ineligible solely because a parent or guardian provides gifts or limited contributions, financial or otherwise, toward the welfare of the student, provided that the resident keeping the student receives no payment or other remuneration from the parent or guardian for the student's actual housing and support. Receipt by the resident of social security or other similar benefits on behalf of the student do not render a student ineligible.

AFFIDAVIT STUDENT: (Please read carefully and check the appropriate box)

If the **student is living with a person in the district, other than the parent or guardian** the parent must complete **Form A** and the person that are caring for your child(ren), must complete **Form B**. If there is no lease, the resident must complete Form J.

If the **student is living with a parent or guardian and temporarily or permanently residing with a district resident** (even if the parent has a domicile elsewhere), the parent must complete **Form C** and the person that you reside with must complete **Form D**. If there is no lease, the resident must complete Form J.

If the **student is temporarily living with a parent or guardian and residing outside the district and still has a permanent address in the district**, the parent must complete **Form E** and the person that you reside with must complete **Form F**. If there is no lease, the resident must complete Form G.

OTHER CIRCUMSTANCES: Please indicate if any of the following apply:

- The student is the child of a parent or guardian who has moved to another district as the result of being homeless. (Parent - Complete Form K) (Resident – Complete Form L)
- The student has been evaluated through the Child Study Team and has been implemented an I.E.P program.
- The student has special needs that need to be discussed with a counselor.
- The student has medical needs that need to be discussed with the nurse. (504 Plan ___ YES / ___ NO)
- The student has been placed in the home of a district resident other than the parent or guardian by court order. (You will be required to provide a copy of the order.)
- The student is a child of a parent or guardian who previously resided in the district and is a member of the New Jersey National Guard or the United States reserves ordered to active service in time of war or national emergency.
- The student is kept in the home of a person domiciled in the district, other than the parent or legal guardian, and the parent/guardian a member of the New Jersey National Guard or the reserve component of the United States armed forces and has been ordered into active military service in the United States armed forces in time of war or national emergency. If this applies, when is the parent or guardian expected to return from active military duty? _ _ _
- The student resides on federal property? Y () / N () Where? _____
- The student's circumstances do not appear to be addressed anywhere in this application. I understand that I will be contacted by administration for further information.

STUDENT INFORMATION FORM
If applicable, custody papers must be presented.

Student: _____ Gender: ___ Male ___ Female
 Last Name First Name Middle Name

Place of Birth: _____ DOB: ____/____/____
 City State Country M D Y

Ethnicity (Please check all that apply): ___ African American ___ White ___ Hispanic ___ Native American ___ Asian

Check all that apply:

- Classified Student Basic Skills Required Attended Alternative School
- 504 or Medical Alert Home Instruction Speech
- Requires Bilingual (ESL) Another Language Spoken if other than English _____

Mother/Father/Guardian Registering Student: (Circle One)	Mother/Father/Guardian: (Circle One)
Street Address:	Street Address:
City & Zip:	City & Zip:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Work Place & Phone:	Work Place & Phone:
Email:	Email:

Please list any contacts that you give permission for student pick up. These individuals listed will be contacted if a parent/guardian cannot be reached. Individuals whose names are not listed above will not be permitted contact with students during school hours. This includes picking up students, visiting students at the school, or receiving any information regarding the student. **Check here () if attaching a list of more names to this form.**

- Name: _____ Relationship: _____ Phone#: _____
- Name: _____ Relationship: _____ Phone#: _____
- Name: _____ Relationship: _____ Phone#: _____
- Name: _____ Relationship: _____ Phone#: _____
- Name: _____ Relationship: _____ Phone#: _____

Please list any other children enrolled in the Fairfield Township School:

- 1 . Name : _____ Grade : _____ 2. Name: _____ Grade: _____
- 3 . Name : _____ Grade : _____ 4. Name: _____ Grade: _____

Parent/Guardian Signature: _____ Date: _____

	SID#: _____ FTS#: _____ Start Date: _____
<u>Office Use Only:</u>	Class of: _____ New: _____ Address Change: _____ Re-Admit: _____ Notification: _____
	Business Office: _____ Computer Room: _____

Fairfield Township School
375 Gouldtown Woodruff Road
Bridgeton, NJ 08302

STUDENT HEALTH INFORMATION

Student's Name: _____
Last Name First Name Middle Name

Please complete the following information:

Does child have Health Insurance? **Yes** _____ If Yes, name of insurance company _____

No _____ NJ FamilyCare provides free or low cost health insurance for uninsured children and certain low income parents. For more information call 800-701-0710 or visit www.njfamilycare.org to apply online. You may release my name and address to the NJ FamilyCare Program to contact me about health insurance.

Signature _____ Printed Name _____ Date _____

Written consent required pursuant to 20 U.S.C. § 1232g (b)(1) and 34 C.F.R. 99.30(b.)

Student Physician _____ Phone number _____

Student Dentist _____ Phone number _____

Hospital _____ Phone number _____

Student is allergic to:

Medications _____ Food _____ Environment _____

Last eye exam ____/____/____ Glasses Yes _____ No _____ Contacts Yes _____ No _____

Last dental exam ____/____/____ Does student have Asthma? Yes _____ No _____

Does student have any limitations or restrictions of any kind? Please list _____

Has student had any recent surgery? Please list _____

Please list daily medications _____ N/A _____

If student has received immunizations since last year please submit a copy of the shot record.

Please list additional comments or special health problems that may impact your student's day at school.

I, the undersigned, do hereby authorize officials of New Jersey Public Schools to contact directly the persons named on this form and do authorize the named physicians to render such treatment as may be deemed necessary in an emergency, for the health of said child.

In the event that physicians, other persons named on this form cannot be contacted, the school officials are hereby authorized to take whatever action is deemed necessary in their judgment, for the health of the aforesaid child.

I will not hold the school district financially responsible for the emergency care and/or transportation of said child.

PARENT/GUARDIAN SIGNATURE _____ DATE ____/____/____

Fairfield Township School
Pre-School Home Language Survey
Parent/Guardian Questionnaire

PLEASE PRINT

Child's Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Date of School Entrance: _____

Person completing the survey: () Mother () Father () Grandparent () Guardian () Other

Please tell us about your child:

1. What language did the child learn when he/she first began to talk?
2. What language does the family speak at home most of the time?
3. What language does the mother (guardian) speak to the child most of the time? _____
4. What language does the father (guardian) speak to the child most of the time? _____
5. What language does the child speak to his/her mother most of the time?
6. What language does the child speak to his/her father most of the time?
7. What language does the child speak to his/her brothers and sisters most of the time? _____
8. What language does the child speak to his/her friends most of the time?
9. Please list any school your child attended before coming to our program.
10. In which language do you wish to receive information from school?
11. What name do you use for your child?
12. If you would like us to call your child a different name, please specify:
13. What does the child call his/her mother (guardian)?
14. What does the child call his/her father (guardian)?
15. List the foods your child likes to eat?
16. List the foods your child DOES NOT like to eat?
17. How does your child tell you that he/she has to go to the bathroom?
18. Does your child enjoy looking at books?
19. Do you have children's books available in the child's home language?
20. Where was the child born?
21. What country or countries are most important to your family's cultural background? _____
22. Research tells us that one of the most important things we can do to help children succeed in school and do well in English is to support their home language. Would you like more information on any of these resources and activities:
() Storybooks in the child's home language that the family can borrow from school
() Parent workshops about helping the child learn in their home language(s) and also help to learn English
() Opportunities to read stories in your home language to the class
() Opportunities to share some of your culture with the children – such as favorite foods, games, songs, art or crafts
() Newsletters with ideas about helping your child learn in his/her home language

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Dear Parents/Guardians:

Please take a moment to complete this brief registration for the Parent Portal in order to view your child(ren)'s assignments, grades (1-8 only) and attendance. Completed registrations are to be returned to the Main Office.

Please print neatly to avoid any complications with your account.

Parent/Guardian Email Address:

Parent/Guardian Last Name:

Parent Guardian First Name

Please list all children enrolled in school and grade:

Student's Last Name	Student's First Name	Grade

Once you are registered, you will receive an email with instructions on how to sign on. If you experience any difficulties with your username and password, please contact the school at 856-453-1882.

Pursuing Educational Excellence

PRE-SCHOOL STUDENTS

Don't Delay....Get your child's Flu Shot today!

**Seasonal Flu Shots are required for children enrolled
in Pre-School.**

**The vaccine needs to be given before December 31st or your child will
not be permitted to return to school in January.**

**Schedule your appointment now and send in proof the vaccine
was received. Shots can be provided by your
child's physician or local clinics.**

Local clinics include:

Complete Care Pediatric & Family Medical Professionals - 451-4700
265 Irving Avenue, Bridgeton, NJ 08302

RiteCare – Upper Deerfield (Inside of the Shoprite) - 451-4700
1000 North Pearl Street, Bridgeton, NJ 08302

Cumberland County Health Department - 327-7602

Thank you!

**Please call Mrs. Griffiths, RN, BSN with any questions
at 453-1882 x5.**

DRESS CODE

Fairfield Township Board of Education Policy 5132

STUDENT DRESS CODE

The Board of Education believes that neatly attired students take pride in themselves; therefore, they are more likely to practice habits of self-discipline and display a positive attitude and demeanor in the school setting. Therefore school uniforms shall be worn since they have been requested by the principal, staff and parents. The school principal shall ensure that assistance is provided to economically disadvantaged students. The assistance may include, but not be limited to, providing information about how and where to obtain the uniform considering the parent's budget limitations. The specific uniform has been determined by the principal, staff and parents of the individual school as appears below. Any changes to the required uniform must be approved by the Board of Education not less than three months before implementation.

This policy shall not preclude students who participate in a nationally recognized youth organization, which is approved by the Board of Education, from wearing uniforms to school on days that the organization has scheduled a meeting. The principal may authorize exceptions to the uniform requirements on an individual event basis such as Individual Picture Day, Spirit Day or Character Ed activities.

In addition the following general dress code regulations apply:

1. All students are expected to wear the entire uniform at all times whenever they are on school property or are attending a school activity unless permission is expressly granted for a game or dance, etc.
2. Transfer students will be allowed two days grace time to acquire the uniform.
3. Total uniform must be visible at all times.
4. No hats (or headgear of any type) may be worn indoors.
5. No coats, jackets, or other outerwear, including sweatshirts or hooded sweatshirts, may be worn indoors.
6. No decorations, logos or writing allowed on the outside of the uniform. Polo style shirts with the school logo may also be worn.
7. No large jewelry; if worn, necklaces must be worn under the tops.

The following are examples of unacceptable attire for students during school hours:

1. Torn and/or dirty clothing
2. Tight/form-fitting clothing
3. Dark eye glasses (except for medical reasons)
4. Combs and picks worn in the hair
5. Any accessory that may be used as a potential weapon.
6. Any gang-related accessory.

Dress Code Violations (as per Student Discipline Code)	
1 st Offense	Verbal Warning
2 nd Offense	Written Warning Parent Notified
3 rd Offense	1-2 Days Admin. Detention

The approved uniform shall consist of:

Shirts & Tops

- Permitted colors for shirts are royal blue, and navy blue. No other colors are permitted;
- Long or short sleeve polo style shirt with a collar (Must not be tight, form-fitting or oversized, no tee-shirts.)
 - Tops must be worn tucked into bottoms or tucked in and bloused;
- A royal blue, black or navy blue cardigan (without hoods) may be worn in addition to a polo shirt;
- Turtlenecks, if worn, must be worn under the polo shirt and be royal blue or navy blue;
- Undershirts may be short-sleeved or long-sleeved and may be solid white, solid royal blue, solid black or solid navy blue only. No other color undershirt is permitted.
- No tops containing logos, writing or other illustrations may be worn, with the exception of the Fairfield Township School logos and/or name.

Khaki bottoms

- Slacks (Must be worn with a belt at the waistline.);
- Skirts, jumper dresses, shorts and skorts must be no shorter than 2 inches above the knee;
- Cargo and Painter type shorts and shorts with ties on the leg are not permitted;
- Capri pants;
- Jeggings and yoga attire are not permitted.

Bottom Guidelines

- All bottoms must be proper fit (not tight, not baggy and worn at the waistline.);
- “Cargo-Style” pants with pockets alongside the leg are not permitted;
- Pants with ties on the legs are not permitted;
- Stretch pants are not permitted;
- Tights must be neutral (skin-toned), royal blue, navy blue, black or white.

Footwear

- Shoes, sneakers and athletic shoes of any color are permitted;
- Boots, with no ornamentation other than a company name are permitted in any solid color;
- Pants must be worn over boots; not inside;
- Shoe laces or Velcro closure straps must be same color as the shoes;
- All footwear must cover the entire foot;
- Open toe shoes and flip-flops are not permitted;
- No heels;
- No bedroom slippers;
- Footwear must be tied or Velcro closure strapped at all times;
- Shoes with wheels and/or lights are not permitted;

Socks

- Must be white, black, royal blue or navy blue;
- Tights / stockings are acceptable;
- Leggings, below or at the knee may be worn under shorts, skorts or jumpers and must not contain sparkles, names faces;
- Leggings must be ankle or knee high.

Belts

- Must be black, brown, beige/khaki or white with a small buckle (3” or less) and no ornamentation;
- Must be worn with pants that have belt loops. Note: Pants without belt loops will not require a belt.
- Belts are optional for Pre-K, through 2nd grade students. Students are required to wear belts beginning in the 3rd grade.

Jewelry & Body Ornamentation

- Earrings may be worn provided they are no larger than a quarter;
- Visible body piercings and/or tattoos are not permitted.

Headbands

- Headbands of up to 2 inches in width may be worn, but must be white, black, navy blue or royal blue.

Book Bags

- Any style, configuration or color is permitted.

Students who choose not to comply with these guidelines shall be subject to disciplinary action in accordance with the current district discipline policy.

Legal References:

NJSA 18A:11-1 General Mandatory Powers and Duties
NJSA 18A:11-7 Findings relative to school dress codes
NJSA 18A:11-8 Adoption of dress code policy for school permitted
NJSA 18A:11-9 Prohibition of gang-related apparel
NJSA 18A:37-1 Submission of pupils to authority