

Guam Department of Education Student Registration



Student Name: _____

School Name: _____

PLEASE READ THIS INFORMATION BEFORE COMPLETING THE REGISTRATION FORM

Before a student can be enrolled into a school, a *Student Registration* must be completed and signed by parent or legal guardian. A Caretaker can register a student, but the registration is only good for up to 30 days. The Student Registration is used to enroll a student who is new to the Guam Department of Education, or who is returning to the school district.

The forms that are included in the Student Registration are:

1. Part A: Board Policies – Parent Acknowledgement (Page 2)
2. Part B: Student Information
3. Part C: Parent or Guardian and/or Caretaker Information
4. Part D: Attendance Zone
5. Part E: Ethnicity and Race Identification
6. Part F: Home Language Survey
7. Part G: Student Home Map & Other Information
8. Part H: High School Course Assessment Form (*only for enrolling a high school student and if necessary*)
9. Part I: Student Record Request (*only complete if necessary*)
10. Part J: Emergency Information & Health Form
11. Part K: Counseling Consent Form
12. Part L: SWIFTK12 Parent Contact Preference Form
13. Part M: Education Technology Use Policy – User & Parent/Guardian Agreement
14. Part N: Media/Photo Release Permission
15. Part O: Truancy Prevention Notice To Parents
16. Part P: Student Registration by Caretaker Form (*only complete if necessary*)

With the guidance of the School Registrar, parent or legal guardian (or caretaker) must complete all the required forms.



**Guam Department of Education
Student Registration**

Registration Checklist

Student Name (Last, First, Middle Initial):	
Student #:	Date of Birth:

The checklist is to guide schools on the registration process regarding the required documents. School officials must date and initial all the required documents that have been submitted by parent/guardian upon registration.

Administrative Office and/or Curriculum Office	Date Received	School Official Initial
1. Parent/Legal Guardian/Caretaker (under 18 years) Present		
2. Completed School Registration Forms		
3. Official Birth Certificate		
4. Parent/Legal Guardian/Caretaker Photo Identification		
5. Court Appointment Guardianship (if applicable)		
6. Official Transcript and Official Withdrawal <i>from previous school</i>		
7. Proof of Residency (select only one item needed) <ul style="list-style-type: none"> a. ___ Mayor's Verification – names of parents/legal guardians and children; or b. ___ Copy of Mortgage Settlement/Deed to Property/Lease Agreement, Base Commander's Certification clearly showing complete home address; or c. ___ Utility Bill (Power, Water, Telephone); or d. ___ Living arrangements if staying with a family/friend – homeowner to provide a notarized letter; or e. ___ Deemed Homeless. (form from SPCE) 		
8. Program Placement: IEP/EAP, ESL (current) or Agency Letter of Placement (if applicable)		

9. Parent Acknowledgment for Student/Parent Handbook/Student Achievement		
10.		
School Health Counselor Office	Date Received	School Official Initial
1. Immunization Record (Title 10 GCA § 3322) – current and copy for submittal		
2. Tuberculosis Requirement (Title 10 GCA § 3329)		
3. Physical Examination <i>or Appointment Card</i>		
4. Emergency Form		

PARENT/GUARDIAN FORMS BEGIN HERE



**Guam Department of Education
Student Registration**

Part A: Board Policies/Standard Operating Procedures
– Parent Acknowledgement (Page 1)

Attendance Area *(For more information, please reference Board Policy 411.)*

“The Superintendent is authorized to establish attendance areas,” pursuant to 17 GCA §6102. A list of attendance areas shall be made available for review in the main office and at the Department Of Education’s central office for examination by any interested party. A child is required to attend the school which serves the attendance area in which:

1. His/her parents or guardians* live; or
2. Caretaker who is responsible for providing the student with food, clothing, or shelter in the absence of parent or legal guardian**.

()A guardian is defined as an adult other than a parent who has been lawfully invested with the power, and charged with the duty, of taking care of a child, as evidence by a court order.*

*(**) The GDOE procedures for dealing with children who are registered by an adult who is not the legal guardian shall be implemented whenever children are registered under these circumstances.*

For Adults Who Are Caretakers of the Children They Register

(For more information, please SOP 1200-023, Chapter 11)

Child Protective Services (CPS), an agency of the Government of Guam, will be informed by the school that you are taking care of the child and you are not the child’s guardian. As a caretaker, you do not have the authority to:

1. Provide consent for medical treatment which may be needed by the child; and
2. Make decisions regarding the child’s education.

Caretakers must complete the *Student Registration by Caretaker Form* found in the packet. CPS is responsible for investigating these types of situations to determine what needs to be done to enable children to obtain the medical and educational care described above. CPS will work with the adult or caregiver to determine how to best do this. The caretaker and the school are both responsible for following up every 30 days on the legal guardianship status for the child. The school is responsible for documenting the efforts in PowerSchool to track the progress. (19 GCA §13201)

Uniform Policy (Board Policy 401) *(For more information, please reference Board Policy 401.)*

The Board recognizes that school uniforms enhance the learning environment. The intent of the policy is to promote the following: improve student behavior, promote appropriate attire, promote unity and pride, promote

safety and security of all school personnel, minimize and or eliminate any socio-economic distinction, and promote an environment free of harassment. The following guidelines for students to follow:

1. No hats or bandanas are to be worn on school campus;
2. Pants/shorts/skorts do not need to be vendor-specific, but need to be the same color as required by the school;
3. Any color undershirt can be worn, as long as there is no obscene language or picture or unless there is a reason to believe it is gang-affiliated;
4. No revealing clothing blouses, spaghetti straps, and high heels; and no open toe shoes; and
5. Also, schools may apply additional restrictions as per BP 400 to meet their school's mission.

The two exemptions for the policy include: provisions for medical reasons or school-wide general dress-down approved by school principal.

Uniform Bag Policy (For more information, please reference Board Policy 401.1.)

Secondary students are allowed to use any school bag of their choice as long as it abides by the following restrictions:

1. No vulgar language/inappropriate images.
2. No secret/hidden pocket(s).
3. No connected articles that express violence



**Guam Department of Education
Student Registration**

Part A: Board Policies – Parent Acknowledgement (Page 2)

FOR HIGH SCHOOL STUDENTS ONLY:

High School Graduation Requirements (BP 351.4 and Public Law 31-156, effective July 18, 2017), mandates the College and Career Readiness Course of Study for all GDOE students. In addition, seventy-five (75) hours of service learning are required for high school graduation.

Required Courses	College & Career Readiness Course of Study
Language Arts	4
Social Studies	3
Math	4
Science	3
Health	1
Physical Education	1
Chamorro	1
Fine Arts	1
Total Core Requirements	18
College, Career & Life Courses (CCL)	6
TOTAL CREDITS	24

I acknowledged that I have read and understand the above language regarding policies pertinent to my child's enrollment at Guam Department of Education.

Parent/Guardian Print Name:

Parent/Guardian Signature:

Date:



**Guam Department of Education
Student Registration**

Part B: Student Information

Student Demographics

Student

Name: _____

Last Name, First Name, Middle Initial

Circle One:
Male or

Grade Level:

Date of Birth:

Place of Birth:

Femal
e

—

Month/Day/Year

U.S. Territory/State/Other Country

Home

Address: _____

House #

Street Name

Village

Zip Code

Mailing

Address: _____

P.O. Box

Village

Zip

Code

Student resides with: (Check all that applies)

() P Parents () M Mother Only () F Father Only

() GP Grandparents () GM Grandmother () GF Grandfather () G

Guardian

School History: (Select one of the following)

1. For student entering kindergarten: If student attended one of the following early childhood program, please select program:
 Guam Head Start Program GDOE Pre-Gate Program GDOE Preschool-K Program
2. For all other students, please indicate name and address of last school attended:

Name of School _____

Address of School _____

Student Placement: Please check (✓) the service/s your child is receiving or has received –

- | | |
|---|---|
| <input type="checkbox"/> Special Education Services | <input type="checkbox"/> Section 504 Accommodations |
| <input type="checkbox"/> English as a Second Language | <input type="checkbox"/> Individualized Health Plan |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> None |

For School Registrar to complete and select (✓) the Type of Enrollment Code that applies.

() E1: Original Entry/First-Time Entry

Completed registration for a first-time student enrollment to GDOE. (Used primarily by elementary schools.)

() R2: Entry/Re-Entry from another GDOE school

Completed registration process for a student from another GDOE school.

R3: Entry/Re-Entry from Guam non-public school Completed registration process for a student from a Guam non-public school (private/non-profit, charter, DODEA).

R4: Entry/Re-Entry from an off-island school Completed registration process for a student from an off-island school.

() R5: Re-Entry from Another Guam School After Withdrawal or Expulsion

Completed registration process and has received school administrator's approval for re-entry of a student who has withdrawn or was expelled from another GDOE school.

R5: Re-Entry from Another Guam School After Withdrawal or Expulsion

Completed registration process and has received school administrator's approval for re-entry of a student who has withdrawn or was expelled from another GDOE school.

R6: Re-Entry To Same School After Withdrawal or Expulsion

Completed registration process and has received school administrator's approval for re-entry of a student who has withdrawn or was expelled from the same GDOE school.

R8: Re-Entry From Alternative Program School

Completed registration process of a student who have been attending another learning institution (Alternative School, Department of Youth Affairs/ Sagan Manhomlo (Drug and Alcohol Program) / Rays of Hope).

R10: Re-Entry From Home School

Completed registration process of a student who has been attending home school.



Guam Department of Education Student Registration

Part C: Parent or Guardian and/or Caretaker Information

Father or Guardian and/or Caretaker Information:

Name: _____

_____ Last Name, First Name, Middle Initial

_____ Home Phone Number _____ Mobile Phone Number _____ Email Address

Place of Employment: _____
 _____ Work Phone Number

Home Address: _____

_____ House # _____ Street Name _____ Village _____ Zip

Code

Mailing Address:

P.O. Box Village Zip

Code

Mother or Guardian and/or Caretaker Information:

Name: _____

Last Name, First Name, Middle Initial

Home Phone Number Mobile Phone Number Email Address

Place of Employment: _____ Work Phone Number

Home Address: _____

House # Street Name Village Zip

Code

Mailing Address:

P.O. Box Village Zip

Code

Language Information

- | | | |
|----|---|-----------|
| 1. | Do you speak English? | YES OR NO |
| 2. | Are you able to read in your native language? | YES OR NO |
| 3. | Do you need an interpreter to complete the registration packet? | YES OR NO |

School Note:

If parent/guardian/caretaker, answers "no" for either #1 or #2 or "yes" for #3, the school must contact SPCE Social Worker and provide a copy of the registration for assistance with the registration process.

By affixing my signature below, I affirm the information provided is true and correct to the best of my knowledge. If any of the information is found to be false, fraudulent, or inaccurate, the parent will be promptly notified, and the student shall be unenrolled and sent to his / her respective school attendance.

Print Parent/Guardian/Caretaker Name

Signature Date

Note: A registration by a caretaker is only good for up to 30 days.



**Guam Department of Education
Student Registration**

Part D: School Attendance Zone

School to Insert Attendance Zone



**Guam Department of Education
Student Registration**

Part E: Ethnicity and Race Identification

Section 1: The following two (2) tables pertains to the student for statistical purposes.

Citizenship: (Circle one)

1	US Citizen	5	FSM Citizen
2	CNMI Citizen	6	Marshallese Citizen
3	Permanent Resident Alien (Green	7	Belauan Citizen

	Card)		
4	I-20/Foreign Student/F-Visa	8	H-4 Visa
Ethnic Background: (Circle one)			
A	Chamorro	G	Korean
AR	Rota	H	Hawaiian
AS	Saipan	I	Samoa
AT	Tinian	J	Kosraean
B	Filipino	K	Pohnpeian
C	White (Non-Hispanic)	L	Chuukese
D	African American	M	Yapese
E	Japanese	N	Marshallese
F	Chinese	O	Belauan
Race: (Circle one)			
AM	American Indian or Alaskan Native (R)	AS	Asian (B) (E) (F) (G) (P) (S)
BL	Black or African American (D)	HI	Hispanic or Latino (Q)
HP	Native Hawaiian or Other Pacific Islander (A) (AR) (AS) (AT) (H) (I) (J) (K) (L) (M) (N) (O) (T)	MR	Other Ethnic/Mixed Categories (U)
WH	White (Non-Hispanic) (C)		
Section 2: The following information below pertains to the parent/guardian with whom the student is living with upon registration.			
Federal Status: (Circle one)			
A	Navy (Military)	H	Coast Guard (Civilian)
B	Navy (Civilian)	I	Marine Corps (Military)
C	Air Force (Military)	J	Marine Corps (Civilian)
E	Army (Military)	K	Other Federal Agencies
F	Army (Civilian)	L	Student I-20
G	Coast Guard (Military)		
Living Status: (Circle one)			
1	Live and Work on Federal Property	3	Live on Federal Property Low Cost Housing
2	Work on Federal Property	4	None-Federally Connected



Guam Department of Education
HOME LANGUAGE SURVEY
(Part F: Student Registration)

School: _____

Student's Name			Date of Birth	Grade
Last	First	MI		

Federal Law and Guam Education Policy Board/Guam Department of Education policy requires schools to determine the language(s) spoken at home by each student. This information is essential in order to provide meaningful instruction for all students. Your cooperation in helping us meet this important requirement is requested. Thank you for your help.

Please circle one for each question.

1. Which language did your son or daughter speak when he or she first began to talk?

10 Chamorro	39 Other Filipino Lang.	60 Vietnamese	75 Palauan
20 English	41 Mandarin	70 Carolinian	76 Pohnpeian
32 Ilocano	42 Cantonese	71 Chuukese	77 Yapese
35 Tagalog	45 Other Chinese Lang.	73 Kosraean	80 Japanese
37 Visayan	50 Korean	74 Marshallese	99 Other Language:

2. What language does your son or daughter most frequently speak at home?

10 Chamorro	39 Other Filipino Lang.	60 Vietnamese	75 Palauan
20 English	41 Mandarin	70 Carolinian	76 Pohnpeian
32 Ilocano	42 Cantonese	71 Chuukese	77 Yapese
35 Tagalog	45 Other Chinese Lang.	73 Kosraean	80 Japanese
37 Visayan	50 Korean	74 Marshallese	99 Other Language:

3. What language does your son or daughter most frequently speak with friends?

10 Chamorro	39 Other Filipino Lang.	60 Vietnamese	75 Palauan
20 English	41 Mandarin	70 Carolinian	76 Pohnpeian
32 Ilocano	42 Cantonese	71 Chuukese	77 Yapese
35 Tagalog	45 Other Chinese Lang.	73 Kosraean	80 Japanese
37 Visayan	50 Korean	74 Marshallese	99 Other Language:

4. What language do you use most frequently to speak to your son or daughter?

10 Chamorro	39 Other Filipino Lang.	60 Vietnamese	75 Palauan
20 English	41 Mandarin	70 Carolinian	76 Pohnpeian
32 Ilocano	42 Cantonese	71 Chuukese	77 Yapese
35 Tagalog	45 Other Chinese Lang.	73 Kosraean	80 Japanese
37 Visayan	50 Korean	74 Marshallese	99 Other Language:

5. Name the language(s) most often spoken by adults at home.

10 Chamorro	39 Other Filipino Lang.	60 Vietnamese	75 Palauan
20 English	41 Mandarin	70 Carolinian	76 Pohnpeian
32 Ilocano	42 Cantonese	71 Chuukese	77 Yapese
35 Tagalog	45 Other Chinese Lang.	73 Kosraean	80 Japanese
37 Visayan	50 Korean	74 Marshallese	99 Other Language:

Signature of Parent or Guardian

Date

Should a school determine a student language is other than English, the school registrar must refer the student and parent/guardian to the ESL Coordinator and Guam ESL Procedural Manual. This form must be attached to the PEP form in the cumulative folder. This form was taken from the revised version on 12/18 – Curriculum & Instruction.



**Guam Department of Education
Student Registration**

Part G: Student Home Map & Other Information

For School Use Only:

Attendance Area Code: _____

Is student a car rider? (circle one) YES NO

Is student a walker? (circle one) YES NO

Is student a bus rider? (circle one) YES NO



**Guam Department of Education
Student Registration**



**Guam Department of Education
Student Registration**

Part I: Student Record Request

Date: _____

To: **School Registrar**

Name of Previous School

Address/City/State/Zip Code

Subject: Request for Student Record

This is a written request for the official student record for student:

Name of Student: _____

Date of Birth: _____

Grade: _____

The student has enrolled at _____ on
_____.

Name of School

Date

Please send the complete transcript record, cumulative folder, test results, health record, or other information which will help determine his/her placement at the school. Should you have any questions, please call _____.

Thank you.

Sincerely,

School Administrator/School Registrar

Department of Education Health Requirements Form



School: _____

Dear Parent/Guardian,

Student:	DOB:	Grade/Homeroom:
-----------------	-------------	------------------------

Valid Documentation¹ must be presented to the school showing that your child has completed the **health requirements** per **Board Policy 337** and **SOP 1200-020**; checked below to:

- **Register for School:**

This item applies only to the Department of Education’s minimum health related registration requirements. If applicable, you will be informed of the follow-up health requirements which your child will have to meet in order to be allowed to remain in school.

- **Remain in School:**

The required documentation must be presented to your child’s school by _____. **Your child will be excluded from school** if the document is not submitted by the date or by the following school day after the date shown on the appointment card/letter indicating when the **Immunization/Physical Exam/TB Skin Test** will be received.

- DTP/DTaP# _____ or Td/Tdap# _____ *(if the child is seven years of age older)*
- IPV/TOPV# _____
- MMR# _____ *(MMR# 1 is not valid if received before the first birthday)*
- Hep B# _____
- Hib# _____

- **TB Skin Test RESULTS:**

The date on which the TB Skin Test was given **AND** the date on which the result was read must be clearly written. If the result is positive *(shows a reading of 10mm or greater)* the child must get a

- **TB Evaluation Clearance Form** from the Department of Public Health and Social Services (DPHSS) in Mangilao ²before student can attend school.
- **Physical Examination** or an appointment card which shows that a Physical Examination has been scheduled. All students entering **DOE** for the **first time**, regardless of grade level will be required to submit an updated Physical Exam. The Physical Exam should **not be older than one year at the start of a new school year or when enrolled**. All incoming **sixth (6)** and **ninth (9)** grade students will require an updated Physical Exam

Comments:

SHC/LPN print and Signature and Title

Date

¹ The only type of documentation that will be accepted as valid are: An **official immunization record**, a note on **official medical letterhead** signed by duly authorized medical personnel of official school health records, provided each type of documentation clearly shows the dated each specific immunization was received.

² Call the TB Program at the DPHSS in Mangilao at 735-7145/57 to make an appointment for this evaluation.



**Guam Department of Education
Student Registration**

Part K: SCHOOL COUNSELING INFORMED CONSENT FORM

Introduction of Services

Guam Department of Education is committed to provide school counseling support to its students. School teachers, school administrators, school officials or parents/guardians may refer students for school counseling services, or students may request counseling on their own. There is no cost for school counseling services. However, school counseling services are not intended as a substitute for medication, psychotherapy or a medical diagnosis.

Responsibility to Students: School counselors provide individual supportive counseling and facilitate Small Group Sessions to help students with academic, career, behavioral, social and emotional needs. School counselors may provide counseling interventions to address various student challenges but **not** limited to the following such as students’ adjustment or transition difficulties, self-esteem challenges, peer relationships, study skills, stress management, anger management, fears or worries, academic progress, conflict resolution, social skill building, substance abuse education, etc.

Confidentiality: School counselors maintain student information and school counseling services confidential. No other persons or agencies outside of GDOE will have any access to students’ records without a written consent to release of information from their parents. Parents have the right to revoke any written consent at any time.

Limits to Confidentiality: School counselors have limits to confidentiality. Legally, school counselors are mandated by law to reveal information about a student under the following circumstances:

1. A student is a danger of harming or ending his or her life
2. A student is a danger of harming others or threat to school safety
3. A student self-disclose or evidence of any past or ongoing neglect and/or abuse (sexual, verbal, physical, or emotional).
4. Court order or other legal proceedings

Acknowledgement, Agreement and Written Consent:

Student Name: _____ School Name: _____ Grade Level: _____

I, _____, am the parent/legal guardian of the student listed above. I have read and acknowledge the terms above discussed in the *School Counseling Informed Consent*. I agree and I give my written permission/consent for my child to participate and to receive school counseling services while attending school at GDOE. I also give my written permission to my child’s identified School Counselor to collaborate, if necessary, with the District Psychologist through psychological consultations for the school counselor to seek guidance, information and/or discussion to address my child’s needs.

Parent/Legal guardian name (print and Signature)

Date

School Principal (Print Name and Sign)

Date

Disclaimer: Parents/legal guardians, in the event you decline your child to participate in and to receive school counseling services at his or her school, please provide a written statement that you do not want your child to receive school counseling services and the reason for not wanting your child to participate in school counseling services addressed to your child’s school administrator with parent signature and date.



Guam Department of Education Student Registration

Part L: SWIFTK12 Parent Contact Preference Form

Dear Parents/Guardians,

The information below is necessary for your child’s school to successfully send electronic notifications regarding emergencies, attendance, or general announcements. **Please note that for emergencies and attendance**, parent’s will be contacted using all three methods; text messaging, phone call, and email (if applicable). However, for General Announcements, you are able to indicate a preference. The call out boxes to the right of each section are intended to provide a brief explanation.

If the contact information on this form is different from what was provided on the current school year Student Emergency Information Form, please submit an updated one. This form is only for SWIFTK12 purposes. Please have your child return the document to his/her school. If you have any questions or need assistance, please contact your school directly. Thank you for your assistance.

Student First Name _____ Middle Initial _____ Last Name _____

Send notices to both parents/guardians: YES NO (only fill name of parent/guardian to receive).

Mother/Guardian First Name: _____ Middle Initial _____ Last Name _____

Father/Guardian First Name: _____ Middle Initial _____ Last Name: _____

General Announcement Message Category
(e.g., student bulletin, etc..)
(Check each box you want)

****For General Announcements ONLY, there are three (3) optional methods for sending out notifications; text, email, and voice calls to home or cellular. All three (3) methods will be used, unless otherwise specified.

Text Messaging:

Phone Call (Cellular):

Phone Call (Home):

Email:

**** The blank fields to the left are very important for the notifications to work successfully. Please provide current contact numbers for each field that applies. Phone numbers need to include area code plus number (e.g., 6714821267). Email addresses should be printed legibly. Please provide as much information as possible to increase success of electronic messages being received.

Contact Field		
Field	Information	
Home phone		
Mother/Guardian Cell Phone		
Father/Guardian Cell Phone		
Mother/Guardian Email		
Father/Guardian Email		



**Guam Department of Education
Student Registration**

Part M: Education Technology Use Policy – User & Parent/Guardian Agreement

A printed copy of the policy will be readily available upon registration for student, and parent/guardian to read and review prior acknowledging and signing this form. Student and parent/guardian may request with the school registrar for a copy of the policy at any time of the school year.

Education Technology Use Policy User Agreement

I have read, understand, and will follow Guam Education Board Policy 379 Education Technology Use Policy when using computers and other electronic resources owned, leased, operated by the Guam Department of Education and/or personal devices accessing the GDOE network. I further understand that any violation of the policy that is illegal, prohibited, immoral, and/or unethical may result in disciplinary actions up to and including suspension or expulsion, access privileges revoked, and/or legal action.

Student Name (Print)

Student Signature

Date

Education Technology Use Policy Parent/Guardian Agreement

(Note: Student youths as defined under federal guidelines – are student youths 21 years of age or under.)

As a parent or guardian of [print the name of student]

Name of Student (Print)

I have read the Guam Board of Education Policy 379 Education Technology Use Policy. I understand that this access is designed for educational purposes. _____ has taken

Name of School

Reasonable steps to control access to the internet, but cannot guarantee that all controversial information will be inaccessible to student users. I agree that I will not hold the

Name of School

Responsible for materials acquired on the network. I, hereby, give permission for my child to use network resources, including the internet that are available through Guam Department of Education.

Parent Name (Print)

Parent Signature

Date



Guam Department of Education Student Registration

Part N: Media/Photo Release Permission

_____ will be reporting newsworthy events by film, photograph, audiotape, or

Name of School

videotape student's name, image, student work and performance to display, publish or distribute these for the purpose of publishing on the school-approved websites, school bulletin or on social media sites for broadcasting online, television or radio as determined by the school.

External media organizations may attend school events and may record, film, photograph, audiotape or videotape student's name, image, student work and performance for the purpose of being published or broadcast online, on television or radio.

The respectfully requests your permission to use such picture/video. If, however, you do not feel comfortable granting this permission, we will respect your privacy.

Please check one option below and sign and date below:

- I DO** allow the school to release my child's name, photograph and/or work to be used as described above.
- I DO NOT** allow the school to release my child's name, photograph and/or work to be used as described above.

Name of Child (Print)	
Parent/Guardian Name (Print)	
Parent/Guardian Signature	
Contact Number	
Date	



K. ERIK SWANSON, Ph.D.
Superintendent of Education

DEPARTMENT OF EDUCATION

STUDENT SUPPORT SERVICES DIVISION
501 Mariner Ave., Barrigada, Guam 96913
Telephone: (671) 300-1623/1624
Email: cjanderson@gdoe.net



CHRISTOPHER M. ANDERSON
Administrator

TRUANCY PREVENTION NOTICE TO PARENTS

To the parents of _____, our records at

_____ Name of Student

_____ Name of School

Indicates that your child has accumulated _____ days of unexcused absences. It is your duty and responsibility to ensure your child attends school daily. If your child continues to incur more unexcused absences to the extent it reaches twelve (12) days, your child will be referred to the Family Court of Guam for truancy as required by law. Please review below the **GUAM ATTENDANCE LAW, TITLE 17 GUAM CODE ANNOTATED (GCA)**:

Section 6102 Duty to Send Children to School.

Any parent, guardian or other person having control or charge of any child who is at least five (5) years of age and has not reach the age of eighteen (18) years of age, not exempted under the provisions of this Article, shall send the child to a public or private full-time day school for the full-time of which such schools are in session, except that the starting date of school for children five (5) years of age shall be determined by the provisions of §6103 and 6107 of this Article.

The Superintendent is authorized to establish attendance areas. Any parent, guardian or other person having control or charge of any such child who is at least five (5) years of age, and has not reached the age of eighteen (18) years, who fails to comply with the provisions of this Section, *unless* excused or exempted therefrom, is guilty of a violation for the first offense, and subject to perform one hundred (100) hours of community service at the school of the student. For each subsequent offense, the person is guilty of a petty misdemeanor.

PowerSchool.

If you answered no, please answer the remainder of the questions.

2. Do the child's parents or guardians expect you to take care of him/her? Yes _____ No _____

If you answered no, please explain why you are registering this child.

3. Are you able to contact the parents/guardians of the child? Yes _____ No _____

4. If you answered yes to question 3, you must attempt to provide this school with the documents described on the back of this form within 30 business days? Yes _____ No _____

If you answered no to question 4, please explain why.

Part P: Student Registration by Caretaker Form (Page 2)

Below are documents which are required of Caretaker of the children they register. The following requirements are due to the school within 30 days of the date of registration.

1. A Notarized Power-Of-Attorney or equivalent document which has been signed by a parent or guardian of the child which authorizes you to make educational and medical decisions regarding the child.
2. Either a birth certificate or legal documents which establish guardianship over the child. The name of the person who signs a notarized power-of-attorney or equivalent form must be the same person listed on the birth certificate or legal document which establishes guardianship over the child for the Notarized Power-Of-Attorney or its equivalent to be considered valid.

You are required to contact the child's parents/guardians to ask them to send both of these documents to you so that you can provide them to the school within 30 days of the date of registration.

Important Information For Adults Who Are Caretakers of the Children They Register:

Child Protective Services (CPS), an agency of the Government of Guam, will be informed, by the school that you are taking care of the child listed on the front of this form and that you are not the child's guardian. This will be done in order to help the child. Please consider the following.

Because you do not have the documents described above, you do not have the authority to:

1. provide consent for medical treatment which may be needed by the child; and
2. make decisions regarding the child's education.

19 GCA §13201 requires educators to inform CPS whenever this type of situation occurs.

CPS is responsible for investigating these types of situations to determine what needs to be done to enable children to obtain the medical and educational care described above. CPS will work with the adult or

caregiver to determine how to best do this.

The Caretaker and the school are both responsible for following up every 30 days on the legal guardianship status for the child. The school is responsible for documenting the efforts in PowerSchool to track the progress.

Signature of Assisting School Personnel

Date

Signature of Caretaker

Date