

Registration Gateway – NTPS Signature Page

I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION PRESENTED IS TRUE AND CORRECT. I certify that I have read and understand the policies of the District and will adhere to them.

Phone Number: _____ **Email:** _____

Parent/Guardian Printed Name:

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Parent/Guardian Signature:

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An electronic copy of your signature will be placed on the forms listed below:

- HOME LANGUAGE SURVEY - answers provided regarding language most often spoken
- WASHINGTON PUBLIC SCHOOL STUDENT/STAFF ETHNICITY AND RACE DATA QUESTIONNAIRE - answers regarding student's ethnicity and race
- STUDENT HEALTH HISTORY - signature acknowledges that health questions were answered accurately and honestly; also allows teachers and pertinent school personnel to have access to health information provided as needed
- FERPA - acknowledges the types of directory information that the parent either releases or wishes the District to withhold
- ELECTRONIC COMMUNICATION SYSTEM POLICY AND ADMINISTRATIVE REGULATIONS - Answer regarding whether or not the guardian permits access to the District's electronic communication system
- STUDENT HOUSING QUESTIONNAIRE - Questions regarding temporary living arrangements
- CERTIFICATE OF IMMUNIZATION STATUS (CIS) – Information collected about immunization history
- MILITARY PARENT/GUARDIAN AFFILIATION – Information collected about family military affiliation status

Please print the name(s) of your student(s) below:
