



Miami-Dade County Public Schools | 2020 - 2021

# Initial Entry Registration Procedures Handbook



Federal and State Compliance Office



# **Miami-Dade County Public Schools**

## **The School Board of Miami-Dade County, Florida**

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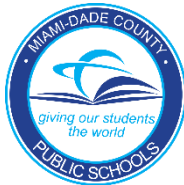
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## INTRODUCTION

Florida Law (Section 1003.21, Florida Statutes) states that children of compulsory school age must attend school regularly during the entire school term. Miami Dade County Public School is an A-rated school system offering diverse programs for students of all ages and we welcome all students to register with Miami Dade County Public Schools.

Given the unprecedented nature of the COVID-19 pandemic, every registration intent will have its unique challenges. As such, school site staff will work with parents/legal guardians to determine the best course of action for each registration.

***School Board Policy 5112-Entrance Requirements*** establishes the admission and registration requirements for students entering Miami Dade County Public Schools. At the May 20, 2020, School Board Meeting, as part of A-1 COVID-19 response closure of schools, the Superintendent, Alberto M. Carvalho, reported a waiver to School Board Policy 5112 – Entrance Requirements, where procedures have been modified to allow parents to register their children virtually utilizing electronic submission of forms. Schools have put in place security procedures for the purpose of verifying records and information received via an automated transaction. Parents/legal guardians are asked to authenticate the information received and their legal relationship to the child.

During Stage I, schools will process registrations both virtually and in-person. Once local conditions support a physical reopening and the District determines it is safe for students to return to schools (Stage II and Stage III), all new student registrations will be conducted in-person.

The procedures in this handbook convey the process schools will follow regarding student registrations and ensures adherence to all registration procedures. The Federal and State Compliance Office (FASCO) will update, as needed, registration protocols and procedures communicated in this document throughout the year. Should you require assistance implementing the registration procedures, please visit the Federal and State Compliance Office website at [attendanceservices.dadeschools.net](http://attendanceservices.dadeschools.net) or call **305-883-5323**.

## SECTION I DOCUMENTS, FORMS & PROCEDURES FOR INITIAL ENTRY

This section of the handbook provides all documents and forms required for student registration, as well as links to all registration forms. Forms can also be accessed via the district records and forms management system at <http://forms.dadeschools.net/>.

In an effort to facilitate the enrollment of new students to M-DCPS schools, the [2020-2021 New Student Registration Parent Guide](#) and [2020-2021 New Student Registration Packet](#) is available in English, Spanish and Haitian-Creole and accessible for download from the Federal and State Compliance Office Registration webpage at <attedanceservices.dadeschools.net>. Schools are encouraged to download both documents and post on their school websites for parents.

### I. THE FOLLOWING DOCUMENTS ARE NEEDED AT THE TIME OF REGISTRATION:

- Verification of age and legal name
- Verification of parent/legal guardian current residence
- Health and Immunization Requirements

#### A. AGE AND LEGAL NAME VERIFICATION

Every child initially entering a District school must prove age by an authentic document issued by a governmental agency. If acceptable proof of age is not presented when the child first seeks admission, the principal should enroll the student temporarily and give the parent thirty (30) calendar days to secure proper proof.

Florida Statute 1003.21, [School Attendance](#), specifies the evidence required to establish proof of birth, and alternative options if the first prescribed evidence is not available, in the prescribed order, as provided below.

1. A duly attested transcript of the child's birth record filed according to law with a public officer charged with the duty of recording births (original birth certificate); a hospital certificate is not acceptable. Birth certificates issued as of January of 2013 to present cannot be photocopied. Complete the *Verification of Birth Certificate* form ([FM-6982](#)) with the student information provided on the original birth certificate.
2. A duly attested transcript of the certificate of baptism showing the date of birth and place of baptism of the child, accompanied by an affidavit sworn to by the parent.
3. An insurance policy on the child's life which has been in force for at least two years.
4. A bonafide contemporary religious record of the child's birth accompanied by an affidavit sworn to by the parent.
5. A passport or certificate of arrival in the United States showing the age of the child.

Since the passport or certificate of arrival cannot be copied, you must complete the *Verification of Student Information on Passport, Parolee Card or Certificate of Arrival* ([FM-6670](#)).

6. A transcript of record of age shown in the child's school record of at least 4 years prior to application, stating date of birth.
7. If none of these evidences can be produced, parent must supply an *Affidavit of Age* ([FM-4681](#)) available in English, Spanish, and Haitian Creole, sworn by the parent and accompanied by a Certificate of Age signed by a public health officer or by a public school physician, or, if practicing physician designated by the School Board, certificate shall state the health officer or physician has examined the child and believes that the age as stated in the affidavit is substantially correct.

## **BIRTH CERTIFICATE**

Parents are to provide proof of age for their child. School site personnel may provide parents information on how to request original birth certificates. Hospital Certificates are not acceptable. If available, a copy of the birth certificate is to be placed in the student's Cumulative Record Folder, and the birth registration number is to be recorded in the appropriate place on the Cumulative Record Folder.

## **APPLYING FOR A BIRTH CERTIFICATE**

Birth certificates are to be requested from the Bureau of Vital Statics appropriate to where the child was born. The requester (parent) must provide specific information at the time of the request, along with any associated fees for processing. The following link to the [USA.gov website](#) provides up-to-date information on how to request a copy of a birth certificate from any of the fifty states of the USA. A chart has been prepared by the State for your convenience. **(Appendix 5)**

## **LEGAL NAMES OF STUDENTS**

School Board Policy [5200-Attendance](#) states that requests from a parent to enroll a child in a public school under a name other than the legal name may be granted on a temporary basis provided court action is in process to make the assumed name legal. Official school records must list both the legal name and assumed name of the student. Students entering a District school for the first time must have an *Emergency Student Data Form* completed with both legal and assumed names shown.

A student's legal name should not be changed on any of the student's records without a legal document noting the change. Upon registration, the staff person who is initially entering a student's name into the District Student Information System (DSIS) should enter the student's name as it appears on the legal document. Do not enter the name the parent wrote on the *Emergency Student Data Form*. It is imperative that the legal document be used to enter information in DSIS.

When a student's name, birth date, sex, ethnicity or place of birth is initially entered incorrectly, or when a legal document is provided with different information, you must submit an Ivanti Service Manager (ISM) request to the Federal and State Compliance

Office along with the *Change of Data Form* ([FM-0735](#)) and any documents to support the change.

### **NAME AND PRONOUNS**

School staff should address students by their chosen name and pronouns that correspond to their gender identity, regardless of whether there has been a legal name change. Upon request, the chosen name should be included in the district's information management systems, in addition to the student's legal name. District-generated student email addresses should also reflect the student's chosen name, if first names are identifiable in such addresses. These changes inform all staff, including substitute teachers, of the name to use when addressing the student, and help avoid inadvertent disclosures.

**Students who have a formal name change with proof of court documents must submit an amended birth certificate to finalize the change in DSIS.**

### **B. VERIFICATION OF ADDRESS**

Verification of parent's residence shall be required at the time the child registers in a District school. At the discretion of the Superintendent, verification of residence may be required at any other time during the school year. The student shall reside with the parent placing the student in the neighborhood school.

Verification of address requires **two (2)** of the following:

1. Broker's or attorney's statement of parent's purchase of residence, or properly executed lease agreement
2. Current Homestead Exemption Renewal Receipt
3. Electric deposit payment receipt or electric bill, bottom portion, showing name and service address

If address verification is not provided, or submitted documents are not acceptable, the Superintendent may verify the student's residence address and a *Statement of Bonafide Residence* ([FM-7444](#)) can be used.

If an electric deposit payment receipt is used as verification, the electric bill, bottom portion, must also be submitted to the school. If the parent is unable to provide the school with the requested electric deposit receipt, the student will be allowed to enroll in the new school, but must submit the electric bill, bottom portion, to the school within forty (40) calendar days.

When a change of family residence occurs after ninety (90) school days in which a student is enrolled in a school which would place the student in a different attendance area, the student, upon the request of the parent, may complete the year in the present school. No transportation will be provided.

When a change of family residence occurs after ninety (90) days in which a student is enrolled in grades 11 through 12, or is enrolled in the last grade offered at a school, which would place the student in a different attendance area, the student, upon the request of the parent, may remain in the present school through graduation (for grades 11 through 12), or the last grade offered at the school. No transportation will be provided.

Florida Statute 837.06, [False Official Statements](#), states that any parent who knowingly makes false statements in writing with the intent to mislead a public servant will be penalized by law.

### **EVIDENCE OF CUSTODY/ GUARDIANSHIP**

If the student is residing with someone other than the parent or legal guardian, the following provisions shall apply:

1. If the parent lives within Miami-Dade, Broward, Palm Beach or Monroe counties, the parent must provide documentation of custody by an appropriate state agency such as the Florida Department of Children and Families or the court. To obtain guardianship of a student, the legal parent must submit to the school a power of attorney that has been properly executed by the legal system, the receipt of affidavit from the Family Court, and valid photo identification. Applications for temporary custody of minor children by extended family can be obtained at the [Lawson E. Thomas Court Center](#) at 175 NW First Ave., Suite 2441, Miami, Florida, 33128, 305-349-7800.
2. If a parent resides within Miami-Dade, Broward, Palm Beach or Monroe counties and the student lives in a residence licensed by the Florida Department of Children and Families, the student may be registered and enrolled in the school that serves that licensed residence.
3. If the parent lives outside of Miami-Dade, Broward, Palm Beach or Monroe counties, the school may accept a notarized statement from the parent identifying the person assuming responsibility for the supervision of the child.

### **C. HEALTH AND IMMUNIZATION REQUIREMENTS**

**NO STUDENT WILL BE ADMITTED TO SCHOOL WITHOUT PRESENTING TANGIBLE DOCUMENTATION THAT IMMUNIZATION AND HEALTH REQUIREMENTS HAVE BEEN MET:**

1. *Florida Certification of Immunization* [DH-680](#)
2. *State of Florida School Entry Health Exam* [DH-3040](#), including proof of tuberculin screening, reading of the test, and appropriate follow-up.



Parents/guardians should be encouraged to contact their medical provider for information regarding the required school entry vaccines. If parents/guardians are experiencing financial difficulties or if a parent/guardian do not have a private medical provider, they can contact the Florida Department of Health in Miami-Dade County Special Immunization Unit at (786) 845-0550 to schedule an appointment to receive **FREE** school entry vaccines. Parents/guardians can also contact “The Children’s Trust” Helpline at 211 to obtain a list of medical facilities that will provide immunizations at a reduced price.

Exceptions may be made for a period of 30 days for students currently in transition ([Project Up-Start Program](#)), under the Juvenile Justice System and children of Military families.

### **State of Florida School Entry Health Exam, [DH-3040](#)**

Parents/guardians of **ALL** students are required to present evidence of a health examination performed within twelve (12) months by a medical provider prior to initial entry into a Miami-Dade County Public School. The school health exam **MUST** include a **tuberculosis clinical screening**. If the screening indicates that a follow-up skin test is needed, the student may enroll **ONLY** with a medical provider’s statement that the student is free of communicable tuberculosis and can attend school.

Students transferring from within the state of Florida or within the county are **NOT** required to be re-examined. However, **ALL** students’ initially entering Miami-Dade County Public Schools health screening must include a tuberculosis clinical screening, and evidence of appropriate follow-up if necessary.

The school entry health exam should be completed on the *State of Florida School Entry Health Exam* form ([DH-3040](#)). When using this form, parents/guardians must complete page one (1). A health care provider may complete page two (2) or submit their own documentation of the medical information detailed on the form.

### **Florida Certification of Immunization, [DH-680](#)**

Florida Statue [1003.22](#), states that the Florida Department of Health requires the school board of each district shall require each student prior to admittance, or attendance in a Florida public or private school in PK-12th grade, to present or to have on file a *Florida Certificate of Immunization* ([DH-680](#)).

The following vaccinations are needed for students attending kindergarten through twelfth grade:

| Grade Levels<br>(including retained for the grade)       | Immunization Requirements  |
|--|--|
| Kindergarten through twelfth grade (K-12 <sup>th</sup> ) | <ul style="list-style-type: none"> <li>• <b>Four or five doses of diphtheria-tetanus-pertussis (DTap) vaccine</b><br/>The fifth dose of DTap vaccine is not necessary if the fourth dose was administered at age 4 years or older.</li> <li>• <b>Three doses of hepatitis B (Hep B) vaccine</b></li> <li>• <b>Three, four or five doses of polio (IPV) vaccine</b><br/>If four or more doses are administered before age 4 years, an additional dose should be administered at age 4 through 6 years and at least six months after the previous dose. A fourth dose is not necessary if the third dose was administered at age 4 years or older and at least six months after the previous one.</li> <li>• <b>Two doses of measles-mumps-rubella (MMR) vaccine</b></li> <li>• <b>Two doses of varicella (chicken pox) vaccine</b><br/>Varicella (chicken pox) vaccine is not required if the child has a documented history of the varicella (chicken pox) disease.</li> </ul> |
| Seventh grade (7 <sup>th</sup> )                         | <b>One dose of tetanus-diphtheria-pertussis (Tdap) vaccine</b>   |

Students enrolling in school for the first time or transferring into Miami-Dade County Public Schools from out-of-state **MUST** present one of the following:

1. **Florida Certificate of Immunization Form**  
Complete *Florida Certificate of Immunization* form should be marked only when **ALL** kindergarten or seventh grade immunization requirements are met.
2. **Temporary Medical Exemption**  
Temporary Medical Exemptions should only be marked when a medical provider indicates that the child has received as many immunizations as are medically indicated at this time. An additional *Florida Certificate of Immunization* form **MUST** be presented on or before the expiration date. If the additional certificate is not presented on or before the expiration date, the student must be excluded from school.
3. **Permanent Medical Exemption**  
A Permanent Medical Exemption is provided when a child cannot receive one or more vaccines due to medical reasons. The medical provider **MUST** list the vaccine(s) that are contraindicated on the *Florida Certificate of Immunization* form.
4. **Religious Exemption**  
A request for a religious exemption from immunization requirements is issued **ONLY** by the Florida Department of Health in Miami-Dade County for a child who is not immunized because of his/her family's religious tenets or practices.

The *Religious Exemption From Immunization* form ([DH-681](#)) **MUST** be kept on file at the school to facilitate identification of unimmunized/susceptible children needing exclusion during an outbreak of a vaccine-preventable disease.

Parents/guardians of students transferring within Miami-Dade County Public Schools do not need to be issued a copy of the immunization documentation. The receiving school can access the immunization information from the Districts Student Information System (DSIS) Student Information Screen (PF3) and then access the Health Information Screen (PF17).

### **Florida SHOTS (State of Florida Immunization Registry)**

Florida SHOTS is a **FREE** statewide centralized, online immunization registry that helps parents, authorized health-care providers, schools and day care centers keep track of immunization records. The registry was designed to assist health care providers by providing the following benefits:

- Easy-to-print forms ([DH-680](#)).
- 24/7 access to immunization tracking software that never needs to be downloaded or upgraded on your computer.
- System-certified electronic records accessible directly to authorized schools, child-care centers, and medical providers.
- Reliable, consolidated immunization histories for new or continuing patients.
- Previously reported contraindications, immunization reminders and recall.

**These forms are not available to the public and must be completed by a Florida Physician or the Florida Department of Health in Miami-Dade County.**

The *State of Florida School Entry Health Exam* ([DH-3040](#)) and the *Florida Certification of Immunization* ([DH-680](#)), **MUST** be attached to the student's *Florida Department of Health Cumulative Health Record* ([DH-3041](#)) and filed as part of the Cumulative Record Folder. The *Florida Department of Health Cumulative Health Record* ([DH-3041](#)) may be obtained by contacting the Miami-Dade County Public Schools' Comprehensive Health Services Department at (305) 805-4600.

Health Centers for FREE Vaccines

#### **Health District Center**

1350 N.W. 14<sup>th</sup> Street, 2<sup>nd</sup> Floor, Miami, FL 33125  
(Mon.–Fri. 8:00 a.m.–3:30 p.m.)

#### **Little Haiti Health Center**

300 NE 80<sup>th</sup> Terrace 2<sup>nd</sup> Floor Miami, FL 33138  
(Mon, Wed & Fri. 8:00 a.m.–3:30 p.m.)

### **West Perrine Health Center**

18255 Homestead Ave., Miami, FL 33157 (Rear)  
(Mon.–Fri. 8:00 a.m.–3:30 p.m.)

**Must make an appointment at (786) 845-0550**

## **PARENT COMMUNICATION: LETTER OF HEALTH REQUIREMENTS FOR NEW STUDENT ENTRIES (Appendix 6)**

This letter may be distributed to each parent who is attempting to enroll a child in Miami-Dade County Public Schools for the first time, and who does not have the required documents.

For health, related questions, please contact the Comprehensive Health Services Department (305) 805-4600.

## **II. THE FOLLOWING FORMS ARE NEEDED AT THE TIME OF REGISTRATION:**

- Emergency Student Data Form ([FM-2733](#))
- Home Language Survey Form ([FM-5196](#))
- Disclosure at Time of Registration ([FM-5740](#))
- Project UP-START Student Questionnaire ([FM- 7378](#))

### **A. EMERGENCY STUDENT DATA FORM, [FM-2733](#) (Appendix 4)**

Students initially entering Miami-Dade County Public Schools must have at least one Emergency Student Data Form completed by a parent as a part of the registration process. The Emergency Student Data forms in English, Spanish and Haitian Creole are available from Stores and Distribution. Appendix 4 provides a copy of the Emergency Student Data Form and instructions in English, Spanish and Haitian-Creole, to assist parents in completing the Emergency Student Data Form. The information on this form must be updated **annually** for all students in membership or when parents provide additional or new information regarding the student. For the 2020-21 school year, Emergency Student Data cards will be sent to schools after the No Show window and prior to moving to Stage II of re-opening. The enrolling parent is responsible for completing the Emergency Student Data card, and for notifying the school of additional or new information during the school year. Specific procedures for releasing students during the school day are as follows:

1. The Authorization for Release of Student from School section of the emergency Student Data Form must contain the name of any person(s), other than parents, who are authorized to pick up the student during the school day. A parent, as identified on the front side of the Emergency Student Data Form must sign this authorization.
2. In instances where parents are divorced or separated, the action of the school will be governed by the information on the Authorization for Release of Student

from School section of the Emergency Student Data Form. The enrolling parent is responsible for completing the card, and for notifying the school of additional or new information during the school year.

3. The school administrator or designee must be responsible at the school to release a student during the school day. This school official must review the Authorization for Release of Student from School section of the Emergency Student Data Form to ensure that the person requesting the student is authorized to remove the student. **Under no conditions should students working in school offices release other students; students should only be released from the main office.**
4. Only individuals listed on the Authorization for Release of Student from School section of the Emergency Student Data Form are allowed to take students from school during the school day – provided they are identified as follows:
  - a. Individual’s driver license, or other identification card (photo ID preferred)
  - b. Individual is identified by student being picked up if picture ID is not presented
  - c. Individual is identified by school personnel
  - d. Individuals who do not provide the identification information listed above, and are authorized to pick up children from elementary schools should have a signed note from the parent on file and/or a phone call should be made to the parent for purposes of identification.

A person whose name is not on the Authorization for Release of Student from School section of the Emergency Student Data Form is not permitted to pick up the student early, or at the end of the school day. The parent must be contacted to seek authorization. **No release shall be permitted regardless of the person’s relationship to the student, until the parent approves.**

**For information regarding the release of students to the Florida Department of Children and Families or to law enforcement, staff should contact School Operations/Juvenile Justice Support Office at 305-679-2800.**

## **B. HOME LANGUAGE SURVEY FORM, [FM-5196](#)**

The Florida Department of Education in accordance with the Multicultural Education, Training, and Advocacy Inc. (META) Consent Decree which addresses the civil rights of English Language Learners (ELL) students, mandates that every student initially entering Miami-Dade County Public Schools be asked a series of three questions, as part of the registration process. The Home Language Survey, [FM-5196](#), is available in English, Spanish, and Haitian Creole.

### **ETHNICITY/RACE**

There are six data elements for reporting race and ethnicity for students in Florida public schools. They are:

- Ethnicity
- Race: American Indian or Alaska Native

- Race: Asian
- Race: Black or African American
- Race: Native Hawaiian or Other Pacific Islander
- Race: White

One element is used to report ethnicity - whether or not the person is of Hispanic/Latino origin.

Five elements are used to report race. Each student may have up to five race elements. A student may have more than one race element with at least one race element identified.

**C. DISCLOSURE AT TIME OF REGISTRATION, FM-5740**

Florida Statute 1006.07, [District School Board Duties Relating to Student Discipline and School Safety](#), requires that any student seeking admission to a public school in the State of Florida be required to provide information regarding expulsions, arrests and referral for mental health services regarding expulsions, arrests which may have resulted in a formal charge, or any involvement with the Juvenile Justice System, at the time of initial registration.

**D. PROJECT UP-START STUDENT ELIGIBILITY QUESTIONNAIRE, FM- 7378**

Miami-Dade County Public Schools' Project UP-START is the McKinney Vento Homeless Education Program In Title I Administration, whose mission is to ensure a successful educational experience for students in transition (a.k.a. homeless) by collaborating with parents, schools, and community to remove barriers to education, and promote a healthy sense of self with hope for a bright tomorrow.

Under the Federal McKinney Vento Law, Every Student Succeeds Act, and School Board Policy [5111.01](#), identified homeless students are entitled to immediate school enrollment and are given up to 30 days to comply with any required documentation, including birth certificates and immunizations. Students are entitled to transportation to their school of origin, which is – defined as the school that the student attended prior to being displaced from his/her home. In order to register a student in Project UP-START, the Project UP-START Student Eligibility Questionnaire ([FM-7378](#)) must be completed and sent to Project UP-START at [Projectupstart@dadeschools.net](mailto:Projectupstart@dadeschools.net) or faxed to 305-579-0370. Registrars can contact the Project UP-START office for support 305-995-7318.

If transportation is to be requested to attend the school of origin, Project UP-START Special Transportation Request Referral Form ([FM-7405](#)) is to be completed and sent to the Project UP-START Office. For additional services including uniform assistance, school supplies, and housing, Project UP-START Referral/Report of Homeless Student Form [FM-7404](#) is to be completed and sent to the Project UP-START Office.

Schools should have the Project UP-START Student Eligibility Questionnaire Form ([FM-7378](#)) in the registration packets, and distribute to those students currently enrolling that might benefit from these services. Please note that both nationally and in the state of

Florida, the category with the highest number of homeless students are those sharing the housing of other persons due to the loss of permanent housing, economic hardship or a similar reason, also known as “Doubled-up.”

If you have any questions about [Project UP-START](#) and services for students in transition, please call Ms. Debra Albo-Steiger, Director of Community Outreach, Department of Title I Administration, Project UP- START, at (305) 995-7318.

### **III. ADDITIONAL PROCEDURES FOR INITIAL ENTRY**

#### **A. PRIOR RESIDENT ENTRY CODE**

During the registration process, students entering Miami-Dade County Public Schools must indicate the county, state, country or territory in which they were previously enrolled. To obtain a list of codes, please refer to the DSIS Help Menu, PA2 screen.

#### **B. STUDENT RECORDS**

##### **FOREIGN STUDENTS**

The Federal & State Compliance Office, Foreign Records/Student Visa Department, conducts interpretation of foreign school records for grade placement in Kg-Adult, provides grade conversions of high school records for credit in the U.S. from foreign schools, and issues the Form 1-20- Certificate of Eligibility - to non-immigrant individuals seeking an F-1 Student Visa, or an M-1 Vocational Student Visa. In addition, this office initializes and monitors the processing of J-1 Student Exchange Visas.

For questions regarding grade placement or records of foreign students in the K-12 program, you may initiate an Ivanti Service Manager (ISM) request. Please include student's records, along with the completed Foreign Student Placement ISM Cover Sheet FM-6957. Submit one student's records per ISM. When a student placement cannot be determined, schools are advised to use the Temporary Grade Placement Form FM-6008. A student's enrollment in school must NOT be delayed while records are being evaluated by the Federal & State Compliance Office. You may access the following link for additional information: Foreign Records/Student Visa Department. In addition, for questions regarding foreign records, student placement, or student visas, you may consult with FASCO's Foreign Records/Student Visa Department via email or phone, see as follows for the list of contacts

| International Student Placement Advisers |  |                       |
|--|--|-----------------------|
| Name                                     | Email address  | Telephone No.         |
| Ms. Grethel Curbelo                      | <a href="mailto:gcurbelo@dadeschools.net">gcurbelo@dadeschools.net</a>   | (305) 884-2044 Ext. 3 |
| Dr. Maria Elena Paradela                 | <a href="mailto:mparadela@dadeschools.net">mparadela@dadeschools.net</a> | (305) 884-2044 Ext. 2 |
| Mr. Michael J. Perez                     | <a href="mailto:mjperez@dadeschools.net">mjperez@dadeschools.net</a>     | (305) 884-2044 Ext. 1 |

### **OUT-OF-STATE TRANSFER KINDERGARTEN STUDENTS**

Entry guidance into Kindergarten and first grade by out-of-state transfer students is provided in Florida Statute, F.S. 6A-1.0985, [CLICK HERE](#) (Appendix 7).

For a listing of legal minimum public-school entry ages by states and territory, as provided by the Florida Department of Education [CLICK HERE](#). (Appendix 8)

### **HOME EDUCATION STUDENTS**

Students enrolled in the Home Education Program from grades Kindergarten through 11th grade may enter a regular Miami-Dade County Public School (M-DCPS) at any time throughout the school year. Any 12th grade student interested in enrolling in a Miami-Dade County Public School may do so at any time of the school year up to the end of the first semester of their 12<sup>th</sup> grade year. **Grade 12 students enrolled in Home Education may not enter a M-DCPS during the second semester of their senior year.**

For Home Education students who were previously enrolled at a M-DCPS, school staff should retain all student records in the INACTIVE CUMS at the student's last school of enrollment BEFORE entering the Home Education Program. DO not send student records to the Home Education Office.

### **Grades for Home Education Students**

Students entering M-DCPS from the Florida Home Education program should be scheduled for courses that would be the next course work to follow with the same rigorous course work presented according to their transcripts, grades or portfolio presented to the school. Once the student is scheduled for the next levels of course work, the school must wait until the completion of that school year and the final grade issued by the teachers in order to enter the Home Education grades as follows:

- If the student completes the school course work with a final passing grade, the school registrar must enter into TRACE the Home Education grade brought in by the student with the letter grade of a “**P**” for pass.
- If the student completes the school course work with a final failing grade, the school registrar must enter into TRACE the Home Education grade brought in by the student with the letter grade of an “**F**” for fail.



## **SPECIAL EDUCATION STUDENTS**

A new school district in which a Special Education student enrolls must take reasonable steps to promptly obtain the student's records, including the Individual Education Plan (IEP), Education Plan (EP) for Gifted students, supporting documents and any other records relating to the provision of special education or related services to the child, from the previous school district in which the child was enrolled, as per Florida Rule 6A-6.0334, [Individual Educational Plans \(IEPs\) and Education Plans \(EPs\) for Transferring Exceptional Students](#). The previous school district in which the child was enrolled must take reasonable steps to promptly respond to the request from the new school district.

## **MILITARY STUDENTS**

Florida Statute 1003.05(3), [Assistance to Transitioning Students from Military Families](#), gives enrollment priority to students whose parents are on active military duty. The following procedures are to be adhered to when processing an out-of-area military transfer.

- Parent must enroll the student at the home school that serves their residence address before the request for the military transfer can be considered
- Parent completes a Parent Choice Student Transfer Form, [FM-3281](#), and obtains the signature of principal or designee administrator on the form at the home school
- Region Center staff approves all military transfers to the requested school if the receiving school's FISH capacity and its relocatable's are below 100%

## **C. MAINTENANCE AND TRANSFER OF STUDENT RECORDS**

The procedure for transferring and maintaining records of students who transfer from school to school is prescribed by Florida Statute 1012.584. The transfer of records shall occur within 3 school days.

The records shall include:

- Verified reports of serious or recurrent behavior patterns, including threat assessment evaluations and intervention services.
- Psychological evaluations, including therapeutic treatment plans and therapy or progress notes created or maintained by school district or charter school staff, as appropriate.

## SECTION II

### REGISTRATION & TRANSFERS – CHOICE & SPECIAL PROGRAMS

To ensure the identification and the proper coding of students registered in Choice and Special Programs, please review the explanations and procedures provided for your convenience.

#### **A. JOHN M. MCKAY SCHOLARSHIP PROGRAM**

The John M. McKay Program for Students with Disabilities provides students the opportunity to attend one of the following:

- A participating private school, transfer code “P”, Work Loc. 3518.
- Another public school, transfer code “W” with transportation, or transfer code “O” without transportation.

Criteria for student eligibility is as follows:

- Valid Individual Education Plan (IEP) or 504 Plan.
- Five (5) years of age, and younger than 22 years of age, by September 1 of the scholarship year.
- Current Florida public school student.
- Attended public school in Florida during the prior school year (**meeting both the October and February FTE counts**).

For questions pertaining to policies and procedures of the John M. McKay Scholarship Program, please contact Ms. Mary Paz, Office of Exceptional Student Education and Student Support at 305-995-1816.

For students participating in the John M. McKay Scholarship Program (Location 3518), please do not send Student Cumulative Records to the District Office. They are to be sent to the last public school the student attended.

Parents who wish to participate in the John M. McKay Scholarship Program must file their intent at [School Choice John M. McKay Scholarship Program](#).

#### **B. FAMILY EMPOWERMENT SCHOLARSHIP (FES) PROGRAM**

The Family Empowerment Scholarship (FES) Program is Florida’s first voucher program for low- and middle-income students.

##### **Procedures for Registering/Withdrawing Students in FES – Location 3900**

For students previously enrolled in the FES Program entering a District or Charter school, please note the following:

- **Location 3900** is not an official school. It is used to register students who are entering a private school through the FES Program.
- **Entry Code E03** – Any PK-12 student whose last school of enrollment was a private school in any Florida school district.
- **Registration documents** must be sent via the ISM System to the school’s designated Data Specialist at FASCO to enter the student’s missing information in DSIS.

For students currently enrolled in a District or Charter school and withdrawing to a participating private school in the FES Program, please note the following:

- **Withdrawal Code W04** – Private School/Private Agency: Overseas Study; Intl Programs
- Student records, including cumulative folders, report cards, and District or state assessment results, **must be kept at the last public school** attended by the student.
- To request records for students who are assigned to Location 3900, please contact the last public school the student attended, as listed on the DSIS Previous School Information (PF-21) screen.

For questions pertaining to the Family Empowerment Scholarship (FES) Program, please contact Mara Ugando, FTE Specialist, Federal and State Compliance Office, via email, at [mugando@dadeschools.net](mailto:mugando@dadeschools.net).

For students participating in the Family Empowerment Scholarship (FES) Program (Location 3900), please do not send Student Cumulative Records to the District Office. They are to be sent to the last public school the student attended.

Parents who wish to participate in the Family Empowerment Scholarship (FES) Program must file their intent at [School Choice Family Empowerment Scholarship Program](#).

### **C. OPPORTUNITY SCHOLARSHIP PROGRAM**

The Opportunity Scholarship Program provides students assigned to schools with a grade of “D” or “F”, as determined by the Florida Department of Education, the opportunity to transfer to another public school graded “C” or better, transfer code “V” with transportation or transfer code “N” without transportation.

Criteria for student eligibility is as follows:

- The student’s attendance must have occurred during a school year in which the school was designated as failing.
- The student must have been in attendance in the public school system, or is eligible to start kindergarten, and be assigned to a school that was designated as failing.

For information referring to the Opportunity Scholarship Program, policies and procedures, please contact Ms. Sheila Jackson, Curriculum Support Specialist, Schools Choice and Parental Options, at 305-995-1922.

For data entry questions, please contact Ms. Lynae Richardson, Coordinator of Student Transfers, Federal & State Compliance, at (305) 883-5323.

#### **D. DEPENDENT (DCF REVISED) STUDENTS – ENROLLMENT, TRANSFER & WITHDRAWAL PROCEDURES**

Students who are under the supervision of the Department of Children and Families (DCF) and under the jurisdiction of the Circuit Court's Juvenile Division are considered dependent children and youth. The lead child welfare agency in Miami-Dade County is Our Kids of Miami-Dade/Monroe, Inc. (Our Kids). Our Kids full case management provider agencies are responsible for the direct supervision of DCF supervised children and youth. These children and youth may be placed in licensed foster care, relative care (which may include a biological parent), a temporary shelter, or in a licensed group home. **Schools may not withdraw or transfer a student under the supervision of DCF without the written approval of the Juvenile Justice Support Office (JJSO), School Operations.**

School-sites are electronically blocked from withdrawing or transferring a dependent student. Therefore, M-DCPS personnel are advised to contact the JJSO immediately at 305-679-2800 if an individual or agency does not present the appropriate documentation from the JJSO and is requesting to withdraw or transfer a dependent student.

Please note that a student may be removed from school at any time by DCF in the course of an investigation but may not be withdrawn or transferred from his/her school without prior approval from the JJSO.

The Our Kids full case management agency which is responsible for the direct supervision of a dependent student is identified by a letter in the DCF field on the District Student Information System (DSIS) Student Information Screen (PF3) screen. Our Kids Full Case Management Agency DCF Flag Designations are:

#### **DCF Flag Designations in DSIS**

- D -- Center for Family and Child Enrichment (CFCE)
- E -- Children's Home Society (CHS)
- F -- Family Resource Center (FRC)
- O --IL – Central
- S -- IL – South
- T -- IL – North
- Y-- Citrus Temporary Code (Utilized for new entries prior to full case management agency assignment, courtesy supervisions, or adult students under extended jurisdiction)
- N -- No longer under the supervision of the Department of Children and Families (DCF) and/or Citrus Family Care Network of Miami-Dade/Monroe, Inc.

## **DEPENDENT STUDENTS - OUT OF AREA TRANSFER (Appendix 9)**

In order for the student who has been placed in a home outside his/her current school boundary, to remain at his/her school of origin, JJSO staff will complete a **CONFIDENTIAL School Operations Juvenile Justice Support Office (JJSO) Educational Review Form (FM-7536)** and enter a transfer code of "J" in the District Student Information System (DSIS). All such transfers will be requested, completed, and approved by the JJSO.

Schools are to immediately direct DCF Child Protective Investigators (CPI), full case managers, foster parent/legal guardians, or anyone wishing to withdraw or transfer a dependent student to the JJSO by calling 305-679-2800.

## **DEPENDENT STUDENTS – SCHOOL TRANSFERS**

If a best interest transfer has been approved by the JJSO, an **Educational Review Form (FM-7536)** for the transfer of a dependent student will be completed at the JJSO and provided to the DCF CPI or full case manager. Subsequently, JJSO staff will withdraw the student by entering a "W13" withdrawal code. The DCF CPI, full case manager, foster parent, and /or legal guardian is to present the completed **Educational Review Form** and register the student at the receiving school within twenty-four (24) hours.

**The individual registering the student is not to be directed back to the sending school to withdraw the student. The receiving school's registrar is to submit** an Ivanti Service Manager (ISM) request with the attached JJSO approval form to the Federal and State Compliance Office (FASCO) in order to enroll the student.

School-site personnel must ensure that the student's emergency contact information is immediately updated when a change in home placement and/ or guardianship has occurred. **Individual names must be listed on the data card or sheet.**

Any books or other school materials the student has with him/her should be sent back to the sending school via school mail. **Schools may not deny the transfer of a student under the supervision of DCF for lost books, materials, or a financial debt. The students' parents remain responsible for financial obligations.**

## **DEPENDENT STUDENT – NEW ENROLLMENT**

For new students entering M-DCPS, the registrar of the receiving school will assist the full case manager, DCF CPI, or parent/guardian, in completing the **Dependent Student Address Verification Form (FM-6536)** and may contact the JJSO if additional assistance is needed.

The registration of a student under the supervision of DCF MUST be expedited and the lack of documentation may not delay the student's enrollment in school.

#### **E. NON – M-DCPS STUDENTS – (LOCATION 8013)**

A procedure was developed to assign identification numbers for non M-DCPS students that are tested through the psycho-educational evaluation process. When a request for evaluation, [FM-2561](#), is completed for non-MDCPS students, a designee at the school site must submit an Ivanti Service Manager (ISM) request to the Federal and State Compliance Office to facilitate the assignment of a student to location 8013 and to process the request for a student identification number, or to have an inactive student reactivated into location 8013 for testing. The student will remain assigned to location 8013 until the student officially registers at an M-DCPS site.

The following student information is required with the ISM request, to process the assignment to location 8013:

- Copy of the birth certificate
- Current address
- Telephone number (if possible)
- Current grade level

#### **F. TEENAGE PARENT PROGRAM (TAP) – ENROLLMENT PROCEDURES FOR SCHOOL REGISTRARS**

1. When a teen parent returns from the Early Learning Coalition Eligibility Center or Approved Contracted Daycare Provider with a completed application, the registrar should enter the infant into DSIS within 24 hours and issue that infant an M-DCPS student identification number, if one hasn't already been assigned. The infant should be entered into school location 8016 and the section should be 999. If you are unable to enter an infant, please contact the TAP office. Infants cannot be entered into the DSIS system without the parent first being TAP qualified and Single Parent Coded.
- Infants whose parent was attending one of the COPE centers or those re-entering the TAP program should already have M-DCPS student I.D. numbers. (Please check before issuing a new student I.D. number.) Some infants who have I.D. #'s assigned from COPE may have had a change of last name. If so, please complete an Ivanti Service Manager (ISM) request to the Federal and State Compliance Office and attach the birth certificate.
  - When entering the student and infant into the dropout prevention screen using the eligibility forms, please complete the three TAP survey questions at the bottom of the TAP screen.
    - o Enter the number of children using numbers 1-9
    - o Enter whether the infant weighed 5 pounds, using either Y for Yes or N for No.
    - o Enter the ancillary services the student is eligible to receive: H=Health care, C=Child care, S=Social service and T=Transportation. All four must be listed.

- The student's and infant's TAP eligibility codes must be entered into DSIS on the student's Dropout Prevention Information Screen (PF4 then PF19).
  - Also listed on the eligibility forms is the single parent coding. This code is entered on the student's Miscellaneous Information Screen (PF20). Single Parent Coded data is collected to benefit the Carl D. Perkins Grant.
2. Once the infant has been registered, the registrar needs to put the following documents in a labeled folder, inside the mother's official cumulative record (CUM). If the student transfers to another school, copies of all TAP information must be forwarded to the new school via the cumulative folder.

Documents:

- o Eligibility forms for parent and infant
- o Parental Decision Letter
- o TAP application
- o Infant's Birth Certificate
- o Home Language Survey form (signed by infant's parent) [FM-5196](#)
- o Infant's current blue or white [DH-680](#) and yellow [DH-3040](#) H.R.S. Forms (originals)
- o Temporary Exempt Certificates must have Expiration Dates

After the student has been entered, check the teen-parent's transportation zone code. If this field has an N for No, please change this field to show a Y for Yes. This is to ensure the teen-parent and infant receive transportation.

3. The registrar must update the infant's immunization when the teen-parent brings in official documentation that the infant's immunization has been updated. This is very important because if the immunization is expired, the infant will not be allowed to attend the daycare center.
4. Each time the teen-parent completes a new TAP application, a copy of that application needs to be placed in the infant's folder and in the parent's cumulative record (CUM). When the infant's daycare center changes, the new daycare center's code must be updated and placed on the application. **When a daycare change is needed, the student must report to the Early Learning Coalition Eligibility Center of an Approved Contracted Daycare provider that was chosen with their pink copy of the TAP Application for a transfer to be issued.** A new application is not needed for transfers. Please contact District TAP Office to approve change in daycare center.

**SECTION III  
APPENDICES**





MIAMI-DADE COUNTY PUBLIC SCHOOLS  
 2020-2021 SCHOOL CALENDAR  
 ELEMENTARY AND SECONDARY  
 REVISED 8/12/20

| July 2020 |    |    |    |              |
|-----------|----|----|----|--------------|
| M         | T  | W  | T  | F            |
|           |    | 1  | 2  | <del>3</del> |
| 6         | 7  | 8  | 9  | 10           |
| 13        | 14 | 15 | 16 | 17           |
| 20        | 21 | 22 | 23 | 24           |
| 27        | 28 | 29 | 30 | 31           |

| August 2020     |                 |               |               |               |
|-----------------|-----------------|---------------|---------------|---------------|
| M               | T               | W             | T             | F             |
| 3               | 4               | 5             | 6             | 7             |
| 10              | 11              | <del>12</del> | <del>13</del> | <del>14</del> |
| <sup>o</sup> 17 | <sup>o</sup> 18 | 19            | 20            | 21            |
| 24              | 25              | 26            | 27            | 28            |
| 31              |                 |               |               |               |

| September 2020  |    |    |    |    |
|-----------------|----|----|----|----|
| M               | T  | W  | T  | F  |
|                 | 1  | 2  | 3  | 4  |
| <del>7</del>    | 8  | 9  | 10 | 11 |
| 14              | 15 | 16 | 17 | 18 |
| 21              | 22 | 23 | 24 | 25 |
| <sup>a</sup> 28 | 29 | 30 |    |    |

| October 2020 |    |    |    |                 |
|--------------|----|----|----|-----------------|
| M            | T  | W  | T  | F               |
|              |    |    | 1  | 2               |
| 5            | 6  | 7  | 8  | 9               |
| 12           | 13 | 14 | 15 | 16              |
| 19           | 20 | 21 | 22 | <sup>a</sup> 23 |
| 26           | 27 | 28 | 29 | 30              |

| November 2020 |                |                 |               |               |
|---------------|----------------|-----------------|---------------|---------------|
| M             | T              | W               | T             | F             |
| 2             | <sup>a</sup> 3 | 4               | 5             | 6             |
| 9             | 10             | <del>11</del>   | 12            | 13            |
| 16            | 17             | 18              | 19            | 20            |
| 23            | 24             | <sup>a</sup> 25 | <del>26</del> | <del>27</del> |
| 30            |                |                 |               |               |

| December 2020 |               |               |               |               |
|---------------|---------------|---------------|---------------|---------------|
| M             | T             | W             | T             | F             |
|               | 1             | 2             | 3             | 4             |
| 7             | 8             | 9             | 10            | 11            |
| 14            | 15            | 16            | 17            | 18            |
| <del>21</del> | <del>22</del> | <del>23</del> | <del>24</del> | <del>25</del> |
| <del>28</del> | <del>29</del> | <del>30</del> | <del>31</del> |               |

| January 2021  |    |    |    |              |
|---------------|----|----|----|--------------|
| M             | T  | W  | T  | F            |
|               |    |    |    | <del>1</del> |
| 4             | 5  | 6  | 7  | 8            |
| 11            | 12 | 13 | 14 | 15           |
| <del>18</del> | 19 | 20 | 21 | 22           |
| 25            | 26 | 27 | 28 | 29           |

| February 2021 |    |    |    |    |
|---------------|----|----|----|----|
| M             | T  | W  | T  | F  |
| 1             | 2  | 3  | 4  | 5  |
| 8             | 9  | 10 | 11 | 12 |
| <del>15</del> | 16 | 17 | 18 | 19 |
| 22            | 23 | 24 | 25 | 26 |
|               |    |    |    |    |

| March 2021    |               |               |    |                 |
|---------------|---------------|---------------|----|-----------------|
| M             | T             | W             | T  | F               |
| 1             | 2             | 3             | 4  | 5               |
| 8             | 9             | 10            | 11 | 12              |
| 15            | 16            | 17            | 18 | 19              |
| 22            | 23            | 24            | 25 | <sup>a</sup> 26 |
| <del>29</del> | <del>30</del> | <del>31</del> |    |                 |

| April 2021 |    |    |              |              |
|------------|----|----|--------------|--------------|
| M          | T  | W  | T            | F            |
|            |    |    | <del>1</del> | <del>2</del> |
| 5          | 6  | 7  | 8            | 9            |
| 12         | 13 | 14 | 15           | 16           |
| 19         | 20 | 21 | 22           | 23           |
| 26         | 27 | 28 | 29           | 30           |

| May 2021      |    |    |    |                 |
|---------------|----|----|----|-----------------|
| M             | T  | W  | T  | F               |
| 3             | 4  | 5  | 6  | 7               |
| 10            | 11 | 12 | 13 | 14              |
| 17            | 18 | 19 | 20 | 21              |
| 24            | 25 | 26 | 27 | <sup>a</sup> 28 |
| <del>31</del> |    |    |    |                 |

| June 2021       |    |    |                 |    |
|-----------------|----|----|-----------------|----|
| M               | T  | W  | T               | F  |
|                 | 1  | 2  | 3               | 4  |
| 7               | 8  | 9  | <sup>o</sup> 10 | 11 |
| <sup>o</sup> 14 | 15 | 16 | 17              | 18 |
| 21              | 22 | 23 | 24              | 25 |
| 28              | 29 | 30 |                 |    |

- New Teachers Report
- Teacher Planning Day
- Teacher Planning Day - (No Opt)
- District-wide Professional Development Day
- Floating Teacher Planning Day (No Opt)

- Recess Day
- Beg/End of Grading Period
- Legal Holiday
- Available to opt
- Teacher Planning Day available to opt

| Days in Grading Period |  |
|------------------------|--|
| 1- 37                  |  |
| 2- 49                  |  |
| 3- 43                  |  |
| 4- 46                  |  |

For information on employee opt days, please refer to back of calendar.

**Miami-Dade County Public Schools  
Federal and State Compliance Office**

**Student Cumulative Record  
Registrar's Checklist**

\_\_\_\_\_ **A. Emergency Student Data Form** – [FM-2733](#)

- Completed by the parent

\_\_\_\_\_ **B. Home Language Survey Form** – [FM-5196](#)

- Date of entry into the U.S. School (DEUSS) must be entered.  
*\*\*other translations are available through the Division of Bilingual and World Languages.*

\_\_\_\_\_ **C. Verification of Age and Legal Name** – Authenticate age and legal name of student by affixing birth verification stamp on the copy of one of the **original** documents below:

- \_\_\_\_\_ 1. Duly attested **original** birth certificate; hospital certificate not acceptable
- \_\_\_\_\_ 2. Duly attested Certificate of Baptism with a parent affidavit
- \_\_\_\_\_ 3. Life Insurance policy for the child in effect for two years
- \_\_\_\_\_ 4. Bonafide Bible record with parent affidavit
- \_\_\_\_\_ 5. Complete Verification of Student information on a Passport or Certificate of Arrival Form – [FM-6670](#) – authenticating legal name, date of birth and place of birth.  
***These documents cannot be photocopied.***
- \_\_\_\_\_ 6. Transcript of school records for at least four years prior, stating date of birth
- \_\_\_\_\_ 7. Affidavit of age sworn by the parent and a Certificate of Age signed by a public health officer – [FM-4681](#)

\_\_\_\_\_ **D. Verification of Address** – Must provide two of the following:

- \_\_\_\_\_ 1. Broker's or Attorney's statement of parents' purchase of residence, **or** properly executed lease agreement
- \_\_\_\_\_ 2. Current Homestead Exemption Card
- \_\_\_\_\_ 3. Electric deposit receipt or electric bill, showing name and service address
- \_\_\_\_\_ 4. Miami-Dade County Public Schools Statement of Bonafide Residence

\_\_\_\_\_ **E. Disclosure at Time of Registration**

- [FM-5740](#)

\_\_\_\_\_ **F. Health Requirements\***

- \_\_\_\_\_ 1. Student Health Examination – [DH-3040](#) (yellow form) health examination performed within one year prior to enrollment; Clinical TB screening/results
- \_\_\_\_\_ 2. Florida Certificate of Immunization – [DH-680](#) - from a private doctor or local health provider

***\* If assistance is needed regarding these documents, please call Comprehensive Health Services at (305) 805-4600.***

\_\_\_\_\_ **G. Important Message to Parents**

- Health Requirements for School Entrance

\_\_\_\_\_ **H. Prior Resident Entry Code**

- \_\_\_\_\_ 1. County Name
- \_\_\_\_\_ 2. District Number
- \_\_\_\_\_ 3. Enrollment Type

\_\_\_\_\_ **I. Student School Records**

- For grade placement and verification of credits earned
- Interpretation of foreign records available from Federal and State Compliance Office

\_\_\_\_\_ **J. Parent Handbook/Curriculum Bulletin** (if applicable)

\_\_\_\_\_ **K. School Insurance and Free and Reduced Lunch Applications**

\_\_\_\_\_ **L. Student Code of Conduct**

\_\_\_\_\_ **M. Project UP-START**, Children and Youth In Transition Program [FM-7378](#)

\_\_\_\_\_ **N. Military Families**

- Yes \_\_\_\_\_ No \_\_\_\_\_

**Miami-Dade County Public Schools  
Registration Requirements**

**Hours of Registration** \_\_\_\_\_

Miami-Dade County Public Schools is committed to the education of all children. Your child's enrollment in this school is very important. If you cannot produce any of these documents, please ask to speak to an administrator.

**I. ENTRIES FROM OUT-OF-COUNTY, STATE, COUNTRY, AND PRIVATE SCHOOLS**

**A. AGE AND LEGAL NAME VERIFICATION** – Must provide one of the following:

1. Duly attested original birth certificate; *hospital certificate not acceptable*
2. Duly attested Certificate of Baptism with a parent affidavit
3. Insurance policy on the child's life in force for two years
4. Bonafide religious record with parent affidavit
5. Passport or Certificate of Arrival in the U.S. showing age of child
6. Transcript of school records of at least four years prior, stating date of birth
7. Affidavit of age signed by parent and Certificate of Age signed by public health officer

**B. VERIFICATION OF ADDRESS** – Must provide two of the following:

1. Broker's or Attorney's statement of parents' purchase of residence or properly executed lease agreement;
2. Current Homestead Exemption Card; and
3. Electric deposit receipt or electric bill, showing name and service address.

**C. HEALTH REQUIREMENTS** – Must provide both forms:

1. Student Health Examination – [DH-3040](#) (yellow form) physical examination performed one year prior to enrollment.
2. Florida Certificate of Immunization – [DH-680](#) (blue card) from a private doctor, or local health provider

**D. SCHOOL RECORDS**

- Verification of credits earned for grade placement; and
- Interpretation of foreign records at no cost available from the Federal & State Compliance Office

**II. TRANSFERS FROM ANOTHER MIAMI-DADE COUNTY PUBLIC SCHOOL**

- Parent or legal guardian must bring a withdrawal slip from sending school
- Proof of address with name of parent/guardian.



**EMERGENCY STUDENT DATA FORM**

School No./Name \_\_\_\_\_ I.D. No. \_\_\_\_\_ Grade \_\_\_\_\_ Section \_\_\_\_\_

Student's Last Name \_\_\_\_\_ APP \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Address \_\_\_\_\_

**Main contact phone number to be used for emergencies and automated messaging:** \_\_\_\_\_

Registering Parent/Guardian's Name \_\_\_\_\_ Relation \_\_\_\_\_ Place of Employment \_\_\_\_\_

Telephone \_\_\_\_\_ Cellphone \_\_\_\_\_ Email \_\_\_\_\_

Non-Registering Parent/Guardian's Name \_\_\_\_\_ Relation \_\_\_\_\_ Place of Employment \_\_\_\_\_

Telephone \_\_\_\_\_ Cellphone \_\_\_\_\_ Email \_\_\_\_\_

Is either parent in the Military? Yes  No  Branch \_\_\_\_\_

Kindergarten Only: Was the child in pre-school or child care? Yes  No

Was the full cost paid by you? Yes  No  What type? Headstart  ESE  Migrant  Other  Unknown

**EMERGENCY CONTACT INFORMATION:** I authorize the school district to provide or secure any necessary emergency care for my child. It is the parent's legal responsibility to assume medical and transportation expenses for your child. In the event that parents of child cannot be reached, provide contact information below of two persons, by order of priority.

|                 |                                |                    |                          |
|-----------------|--------------------------------|--------------------|--------------------------|
| _____<br>(Name) | _____<br>(Relation to Student) | _____<br>(Address) | _____<br>(Phone at Work) |
| _____<br>(Name) | _____<br>(Relation to Student) | _____<br>(Address) | _____<br>(Phone at Work) |

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_ Preference of Hospital \_\_\_\_\_ Phone \_\_\_\_\_

**Student health/allergy data which should be known in an emergency:** \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF STUDENTS FROM SCHOOL:** Please provide the names of persons authorized or not authorized to take your child from school during the school day. Note that persons listed as emergency contacts are not authorized to pick up your child, unless listed in this section.

Authorized: \_\_\_\_\_

Authorized: \_\_\_\_\_

Not authorized: \_\_\_\_\_

Not authorized: \_\_\_\_\_

**IT IS THE PARENT'S RESPONSIBILITY** to inform the school in person of any changes in the information listed on this form. Under penalties of perjury, I declare that I have read the foregoing [document] and that the facts stated in it are true.

Date: \_\_\_\_\_ Printed Registering Parent/Guardian's Name \_\_\_\_\_

Registering Parent/Guardian's Signature \_\_\_\_\_

Parents/guardians have the right to review the professional qualifications of their child's classroom teacher(s) including the licensing status, degree major, graduate degree(s) and the field of certification. This "right to know", available from your child's school, includes whether your child is receiving services provided by paraprofessionals and, if so, their qualifications.

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her official duty shall be guilty of a misdemeanor of the second degree under Fla. Stat. § 837.06, or whoever makes a false verified declaration is guilty of the crime of perjury, a felony of the third degree, under Fla. Stat. § 90.525, which are punishable as provided in Fla. Stat., §§ 775.082, 775.083 and 775.084.

The Emergency Student Data Form governs early release/withdraw of the student. The registering parent/guardian must sign/verify this form and is responsible for providing truthful and accurate information. If the student's parents are divorced or separated, the enrolling parent is responsible for providing information that is consistent with the most recent court order governing such matters as divorce, separation or custody.

**INSTRUCTIONS FOR COMPLETING THE  
EMERGENCY STUDENT DATA FORM**

- On the first section of the *Emergency Student Data Form*, please provide the contact information for the parent's and/or legal guardian(s).
- When giving a work number, please provide an extension number. In the event of an emergency, we need to contact you as quickly as possible.
- If an e-mail address is available, please make sure to include it on the form.
- When you provide an emergency contact, please include the name(s) of individuals and telephone numbers other than the ones provided on the first section of the form. If you cannot be reached in the event of an emergency, we will call emergency contacts.
- Please make sure that if you have someone who is NOT authorized to pick up your child, write their name(s) in the section that says not authorized.
- Information provided on the *Emergency Student Data Form* must be accurate and truthful. *Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her official duty shall be guilty of a misdemeanor of the second degree under Florida Statute Section 837.06, which is punishable as provided in Fla. Sta., §§ 775.083 and 775.084.*
- In cases where divorce, separation or other custody dispute, only the enrolling parent is responsible for completing and/or updating any information on the *Emergency Student Data Form*.
- Information provided regarding Authorization for Release of Students from School should be accurate and consistent with any legally binding instrument or court order governing such matters as divorce, separation, or custody. If information contained on the *Emergency Student Data Form* regarding Authorization for Release of Students from School contradicts any legally binding instrument or court order, the parent contesting the information may seek the assistance of the court order governing their divorce or custody matter to compel the enrolling parent to correct the information.

**INSTRUCCIONES PARA COMPLETAR EL FORMULARIO EN CASO DE  
UNA EMERGENCIA DEL ESTUDIANTE**

En caso de una emergencia es imperativo que la escuela pueda comunicarse con los padres o tutor del estudiante lo más rápido posible. A continuación encontrará las instrucciones necesarias para completar el siguiente formulario:

- Debe incluir los nombres y números de contacto de los padres o tutor en la primera sección del formulario.
- En caso que haya un número de teléfono para su trabajo proporcione una extensión cuando sea necesario.
- Si tiene una dirección de correo electrónico por favor, agregue esta información en la parte delantera del formulario.
- En caso de emergencia, por favor provea los nombres y números de contacto diferentes a los de la primera sección. Si no podemos contactarlos en la casa o trabajo, se llamará a los contactos que ustedes nos han proporcionado.
- Si hay alguien que no está autorizado a recoger al estudiante, asegúrese de escribir el nombre en la sección que dice NO AUTORIZADO.
- Cuando hay un divorcio, separación u otra disputa de custodia, el padre o tutor que registra al estudiante es responsable de completar el formulario o hacer actualizaciones.
- Si la información proveada contradice algún orden judicial, puede ser discutido y a su vez ordenar al padre o tutor que registró al estudiante corregir la información.
- La información proporcionada en el formulario debe ser exacta y veraz. Quien sabiendo y a propósito hace una declaración falsa con la intención de engañar a un funcionario público en el desempeño de su deber oficial será culpable de un delito menor de Segundo grado que es castigado según lo dispuesto en el Estatuto del Estado de la Florida 775.083 y 775.084.
- Esta información autoriza a la escuela que el estudiante se le permita salir en caso de emergencia con la información obtenida en este formulario.

**ANSÉYMAN POU FIN IJANS ELÉV DONE FOM**

- Le y' ap anpil travay, souple bay nou ak yon ekstansyon. Ka yon ijans, nou bezwen pran ou ke posib.
- Nimewo telefón lakay ou, se pou ekri sou li a Avant de fóm apwé adrés ou.
- Nimewo travay ou pou ekri nan zón nan apwé, koy travay.
- Si ou gen selil nombre, tanpri ekri li devan an fóm, endike sa se you bann sélil.
- Lé nou founi nou ak yon ijans kontak, tanpri, ban nou ninewo telefón pa 24 sou Avant de fóm. Ka yon ijans lé nou pa ka pran kenbe kontak ak nou nan travay ou lakay lé sa nou bezwen pou rele kontak dijans la e nou bezwen anpil lót moun.
- Souple asire nou ke si w gen yon moun ki PAT otorize pou te chwazi pitit ou pou ou ka ekri non nan seksyon ki pa t' otorize.
- Si yon lét elektwonik adrés ki disponib, souple ajoute Avant de fóm.
- Enfòmasyon ki te bay sou ijans elév done fóm lan dwe précis Et vérité. *Si yon moun ak tout entansyon fè yon deklarasyon tèt anba nan ekri ak entansyon pou en esklav piblik nan pèfòmans de droit ofisyèl li pwal koupab de yon move kondwit de dezyèm degre a anba Florid Loi seksyon 837.06, ki se nenpo't menm jan te founi nan detasyon Laflorid Sta., §§, 775.083 Et 775.084.*
- Kote ki pa gen yon divòs pa bò, separasyon oubyen lòt sous diskisyon, s' paran limenm k ap responsab pou fin ijans elév done fóm.
- Enfòmasyon ki te bay sou otorizasyon pou Liberasyon de elèv nan lekòl dwe précis Et cohérentes ak tout legalman Liaison zam ou desizyon tribinal D' konsa questions kòm divòs, separasyon ou sous. Si enfòmasyon ki genyen ijans elév done fóm konsènan otorizasyon pou Liberasyon de elèv nan lekòl sou avec UN legalman Liaison zam ou nan tribinal, paran an, contester enfòmasyon pou chache asistans de a D' yo divòs ou sous pwoblèm pou fòse s' paran pou m korije enfòmasyon an.



**2020-2021 Directory of Bureaus of Vital Statistics by State for Birth Certificates**

Birth certificates are to be requested at the Bureau of Vital Statistics appropriate to the state where one is born. The requester must provide specific information at the time of the application, along with any associated fees for processing. You may access the links provided for specific information by state, or you may contact their office directly.

| STATE  | ADDRESS   |
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| <p>ALABAMA<br/> <a href="http://adph.org/vitalrecords">http://adph.org/vitalrecords</a></p>  | <p>Alabama Vital Records<br/>                     P.O. Box 5625<br/>                     Montgomery, AL 36103-5625<br/>                     (334) 206-5418</p>  |
| <p>ALASKA<br/> <a href="http://vitalrecords.alaska.gov/dph/bvs/birth/default.htm">http://vitalrecords.alaska.gov/dph/bvs/birth/default.htm</a></p>   | <p>Alaska Vital Records Office<br/>                     P.O. Box 110675<br/>                     Juneau, AK 99811-0675<br/>                     (907) 465-3391</p>  |
| <p>AMERICAN SAMOA</p>  | <p>American Samoa Government<br/>                     Department of Homeland Security<br/>                     Office of Vital Statistics<br/>                     PO Box 6894<br/>                     Pago Pago, AS 96799 / (684)633-1405</p>     |
| <p>ARIZONA<br/> <a href="http://www.azdhs.gov/vital-records/fees/index.php">http://www.azdhs.gov/vital-records/fees/index.php</a></p>  | <p>Bureau of Vital Records<br/>                     PO Box 6018<br/>                     Phoenix, AZ 85005<br/>                     (602) 364-1300</p>  |
| <p>ARKANSAS<br/> <a href="http://www.healthy.arkansas.gov/programs-services/program/certificates-and-records">http://www.healthy.arkansas.gov/programs-services/program/certificates-and-records</a></p> | <p>Arkansas Department of Health<br/>                     Vital Records, Slot 44<br/>                     4815 West Markham Street<br/>                     Little Rock, AR 72205<br/>                     (800) 637-9314</p>                       |
| <p>CALIFORNIA<br/> <a href="https://www.cdph.ca.gov/Programs/CHSI/Pages/Vital-Records.aspx">https://www.cdph.ca.gov/Programs/CHSI/Pages/Vital-Records.aspx</a></p>                                       | <p>California Department of Public Health<br/>                     Vital Records – MS 5103<br/>                     P.O. Box 997410<br/>                     Sacramento, CA 95899-7410<br/>                     (916) 445-2684</p>                  |
| <p>CANAL ZONE</p>  | <p>Vital Records Branch<br/>                     Passport Services<br/>                     1111 19<sup>th</sup> Street NW, Suite 510<br/>                     Washington, DC, CZ 20036 / (202) 955-0307</p>  |
| <p>COLORADO<br/> <a href="https://www.colorado.gov/pacific/cdphe/categories/services-and-information">https://www.colorado.gov/pacific/cdphe/categories/services-and-information</a></p>                 | <p>Colorado Department of Public Health and Environment<br/>                     Vital Records Section<br/>                     4300 Cherry Creek Drive South<br/>                     Denver, CO 80246<br/>                     (303) 692-2200</p> |

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| <p style="text-align: center;">CONNECTICUT</p> <p style="text-align: center;"><a href="https://portal.ct.gov/DPH/Health-Information-Systems--Reporting/Vitalrecs/State-Vital-Records-Office---Birth-Certificates">https://portal.ct.gov/DPH/Health-Information-Systems--Reporting/Vitalrecs/State-Vital-Records-Office---Birth-Certificates</a></p> | <p>State of Connecticut Department of Public Health<br/>Vital Records Section, Customer Services<br/>410 Capitol Avenue, MS#11VRS<br/>P.O. Box 340308<br/>Hartford, CT 06134-0308<br/>(860) 509-7700</p>  |
| <p style="text-align: center;">DELAWARE</p> <p style="text-align: center;"><a href="http://www.dhss.delaware.gov/dhss/dph/ss/vitalstats.htm">http://www.dhss.delaware.gov/dhss/dph/ss/vitalstats.htm</a></p>  | <p>Delaware Health and Social Services<br/>Office of Vital Statistics<br/>Jesse S. Cooper Bldg.<br/>417 Federal Street<br/>Dover, DE 19901<br/>(302) 744-4549</p>   |
| <p style="text-align: center;">DISTRICT OF COLUMBIA</p> <p style="text-align: center;"><a href="http://doh.dc.gov/service/birth-certificates">http://doh.dc.gov/service/birth-certificates</a></p>  | <p>Department of Health<br/>Vital Records Division<br/>899 North Capitol Street, NE, 1<sup>st</sup> Floor<br/>Washington, DC 20002<br/>(202) 442-9303</p>   |
| <p style="text-align: center;">FLORIDA</p> <p style="text-align: center;"><a href="http://www.floridahealth.gov/certificates/certificates/birth/index.html">http://www.floridahealth.gov/certificates/certificates/birth/index.html</a></p>   | <p>Department of Health<br/>Office of Vital Statistics<br/>Attn: Vital Records Section<br/>P.O. Box 210<br/>Jacksonville, FL 32231-0042<br/>(904) 359-6900</p>  |
| <p style="text-align: center;">MIAMI-DADE COUNTY</p> <p style="text-align: center;"><a href="http://miamidade.floridahealth.gov/certificates/birth/index.html">http://miamidade.floridahealth.gov/certificates/birth/index.html</a></p>   | <p><b>Mail Request/Walk-in Service</b><br/>1350 N.W. 14 Street, Room 3<br/>Miami, FL 33125<br/>(305)575-5030</p> <p><b>Walk-in Service (only)</b><br/>18680 N.W. 67 Avenue<br/>Hialeah, FL 33015<br/>(305) 628-7227</p> <p><b>Walk-in Service (only)</b><br/>18255 Homestead Avenue, Room 113<br/>West Perrine, FL 33157<br/>(305) 278-1046</p> |
| <p style="text-align: center;">GEORGIA</p> <p style="text-align: center;"><a href="http://dph.georgia.gov/VitalRecords">http://dph.georgia.gov/VitalRecords</a></p>   | <p>State Office of Vital Records<br/>1680 Phoenix Blvd., Suite 100<br/>Atlanta, GA 30349<br/>(404) 679-4702</p>   |
| <p style="text-align: center;">GUAM</p> <p style="text-align: center;"><a href="http://www.dphss.guam.gov/content/office-vital-statistics">http://www.dphss.guam.gov/content/office-vital-statistics</a></p>  | <p>Office of Vital Statistics<br/>123 Chalan Kareta<br/>Mangilao, GU 96913<br/>(671) 735-7263</p>   |

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| <p style="text-align: center;">HAWAII</p> <p style="text-align: center;"><a href="http://hawaii.gov/health/vital-records/vital-records/index.html">http://hawaii.gov/health/vital-records/vital-records/index.html</a></p>  | <p>State Department of Health<br/>Office of Health Status Monitoring<br/>Issuance/Vital Statistics Section PO Box<br/>3378<br/>Honolulu, HI 96801<br/>(808) 596-1500</p>                                     |
| <p style="text-align: center;">IDAHO</p> <p style="text-align: center;"><a href="http://www.vitalrecords.dhw.idaho.gov">http://www.vitalrecords.dhw.idaho.gov</a></p>   | <p>Idaho Vital Records<br/>P.O. Box 83720<br/>Boise, ID 83720-0036<br/>(208) 334-5988</p>  |
| <p style="text-align: center;">ILLINOIS</p> <p style="text-align: center;"><a href="http://www.idph.state.il.us/vitalrecords/births/Pages/default.htm">http://www.idph.state.il.us/vitalrecords/births/Pages/default.htm</a></p>  | <p>Illinois Department of Public Health<br/>Division of Vital Records<br/>925 E. Ridgley Avenue<br/>Springfield, IL 62702-2737<br/>(217) 782-6554</p>  |
| <p style="text-align: center;">INDIANA</p> <p style="text-align: center;"><a href="https://www.in.gov/isdh/26754.htm">https://www.in.gov/isdh/26754.htm</a></p>   | <p>Indiana State Department of Health<br/>Vital Records<br/>2 North Meridian Street<br/>Indianapolis, IN 46206<br/>(317) 233-2700</p>  |
| <p style="text-align: center;">IOWA</p> <p style="text-align: center;"><a href="http://www.idph.iowa.gov/health-statistics/request-record">http://www.idph.iowa.gov/health-statistics/request-record</a></p>  | <p>Iowa Department of Public Health<br/>Bureau of Health Statistics<br/>Lucas State Office Building, 1<sup>st</sup> Floor 321 E. 12<sup>th</sup><br/>Street<br/>Des Moines, IA 50319-0075 (515) 281-7680</p> |
| <p style="text-align: center;">KANSAS</p> <p style="text-align: center;"><a href="http://www.kdheks.gov/vital/">http://www.kdheks.gov/vital/</a></p>  | <p>Kansas Office of Vital Statistics<br/>1000 SW Jackson, Suite 120<br/>Topeka, KS 66612-2221<br/>(785) 296-1400</p>   |
| <p style="text-align: center;">KENTUCKY</p> <p style="text-align: center;"><a href="https://chfs.ky.gov/agencies/dph/dehp/vsb/Pages/birth-">https://chfs.ky.gov/agencies/dph/dehp/vsb/Pages/birth-</a></p>  | <p>Office of Vital Statistics<br/>275 E Main Street 1E-A<br/>Frankfort, KY 40621<br/>(502) 564-4212</p>  |
| <p style="text-align: center;">LOUISIANA</p> <p style="text-align: center;"><a href="http://ldh.la.gov/index.cfm/page/635">http://ldh.la.gov/index.cfm/page/635</a></p>   | <p>Bureau of Vital Records and Statistics<br/>P.O. Box 60630<br/>New Orleans, LA 70160<br/>(504) 593-5100</p>  |
| <p style="text-align: center;">MAINE</p> <p style="text-align: center;"><a href="http://www.maine.gov/dhhs/mecdc/public-health-systems/data-research/vital-records/order/">http://www.maine.gov/dhhs/mecdc/public-health-systems/data-research/vital-records/order/</a></p> | <p>Maine Center for Disease Control and Prevention<br/>(Maine CDC)<br/>220 Capitol Street<br/>11 State House Station<br/>Augusta, ME 04333-0011 (207) 287-1093</p>   |
| <p style="text-align: center;">MARYLAND</p> <p style="text-align: center;"><a href="http://dhmh.maryland.gov/vsa/Pages/home.aspx">http://dhmh.maryland.gov/vsa/Pages/home.aspx</a></p>  | <p>Division of Vital Records<br/>P.O. Box 68760<br/>Baltimore, MD 21215-0036<br/>(410) 764-3038 or (800) 832-3277</p>  |

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| <p>MASSACHUSETTS</p> <p><a href="https://www.mass.gov/ordering-a-birth-marriage-or-death-certificate">https://www.mass.gov/ordering-a-birth-marriage-or-death-certificate</a></p>            | <p>Registry of Vital Records and Statistics<br/>150 Mount Vernon<br/>Street, 1st Floor<br/>Dorchester,<br/>MA 01919</p>  |
| <p>MICHIGAN</p> <p><a href="http://www.michigan.gov/mdch/">http://www.michigan.gov/mdch/</a></p>   | <p>Vital Records Requests<br/>PO Box 30721<br/>Lansing, MI 48909<br/>(517) 335-8666</p>  |
| <p>MINNESOTA</p> <p><a href="http://www.health.state.mn.us/divs/chs/osr/birth.html">http://www.health.state.mn.us/divs/chs/osr/birth.html</a></p>  | <p>Minnesota Department of Health<br/>Central Cashiering-Vital Records<br/>P.O. Box 64499<br/>St. Paul, MN 55164-0499<br/>(651) 201-5970</p>   |
| <p>MISSISSIPPI</p> <p><a href="https://msdh.ms.gov/msdhsite/_static/31,0,344.html">https://msdh.ms.gov/msdhsite/_static/31,0,344.html</a></p>  | <p>Mississippi Vital Records<br/>P.O. Box 1700<br/>Jackson, MS 39215-1700<br/>(601) 206-8200</p>   |
| <p>MISSOURI</p> <p><a href="http://health.mo.gov/data/vitalrecords/index.php">http://health.mo.gov/data/vitalrecords/index.php</a></p>   | <p>Missouri Department of Health and Senior Services<br/>Bureau of Vital Records<br/>P.O. Box 570<br/>Jefferson City, MO 65102-0570<br/>(573) 751-6387</p>                                     |
| <p>MONTANA</p> <p><a href="http://dphhs.mt.gov/vitalrecords">http://dphhs.mt.gov/vitalrecords</a></p>  | <p>Montana Vital Records<br/>111 North Sanders, Room 6<br/>PO Box 4210<br/>Helena, MT 59604-4210<br/>(406) 444-2685</p>  |
| <p>NEBRASKA</p> <p><a href="http://dhhs.ne.gov/Pages/contact.aspx">http://dhhs.ne.gov/Pages/contact.aspx</a></p>   | <p>Vital Records<br/>PO Box 95065<br/>Lincoln, NE 68509-5065<br/>(402) 471-2871</p>  |
| <p>NEVADA</p> <p><a href="http://dpbh.nv.gov/Programs/BirthDeath/Birth_and_Death_Vital_Records_-_Home/">http://dpbh.nv.gov/Programs/BirthDeath/Birth_and_Death_Vital_Records_-_Home/</a></p> | <p>Office of Vital Records<br/>4150 Technology Way,<br/>Suite 104 Carson City, NV<br/>89706</p>  |
| <p>NEW HAMPSHIRE</p> <p><a href="http://sos.nh.gov/vital_records.aspx">http://sos.nh.gov/vital_records.aspx</a></p>  | <p>NH Department of State<br/>Division of Vital Records Administration<br/>Registration/Certification<br/>9 Ratification Way<br/>Concord, NH 03301-2455 / (603) 271-4650(603) 271-46504650</p> |

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| <p>NEW JERSEY<br/> <a href="http://www.state.nj.us/health/vital/index.shtml">http://www.state.nj.us/health/vital/index.shtml</a></p>                                       | <p>New Jersey Department of Health<br/> Office of Vital Statistics and Registry<br/> P.O. Box 370<br/> Trenton, NJ 08625-0370<br/> (866) 649-8726, Ext. 505 or 500</p>       |
| <p>NEW MEXICO<br/> <a href="http://vitalrecordsnm.org/">http://vitalrecordsnm.org/</a></p>   | <p>New Mexico Department of Health<br/> Bureau of Vital Records and Health Statistics<br/> PO Box 25767<br/> Albuquerque, NM 87125<br/> (505) 827-0121 or (866) 534-0051</p> |
| <p>NEW YORK<br/> <a href="http://www.health.state.ny.us/vital_records/">http://www.health.state.ny.us/vital_records/</a></p>   | <p>New York State Department of Health<br/> Vital Records Section/Certification Unit<br/> P.O. Box 2602<br/> Albany, NY 12220-2602<br/> (855) 322-1022</p>                   |
| <p>NEW YORK CITY-only<br/> <a href="https://www1.nyc.gov/site/doh/services/birth-certificates.page">https://www1.nyc.gov/site/doh/services/birth-certificates.page</a></p> | <p>NYC Department of Health and Mental Hygiene<br/> Office of Vital Records<br/> 125 Worth Street, CN-4,<br/> Room 133<br/> New York, NY 10013-</p>                          |
| <p>NORTH CAROLINA<br/> <a href="https://vitalrecords.nc.gov/order.htm">https://vitalrecords.nc.gov/order.htm</a></p>   | <p>North Carolina Vital Records<br/> 1903 Mail Service Center<br/> Raleigh, NC 27699-1900<br/> (919) 733-3000</p>  |
| <p>NORTH DAKOTA<br/> <a href="http://www.ndhealth.gov/vital/">http://www.ndhealth.gov/vital/</a></p>   | <p>Vital Records<br/> 600 East Boulevard Ave - Dept. 301<br/> Bismarck, ND 58505-0200<br/> (701) 328-2360</p>  |
| <p>NORTHERN MARIANA ISLANDS</p>  | <p>Vital Statistics Office<br/> Division of Public Health<br/> P.O. Box 500409<br/> Saipan, MP 96950<br/> (670) 236-8717</p>   |
| <p>OHIO<br/> <a href="http://www.odh.ohio.gov/vs">www.odh.ohio.gov/vs</a></p>  | <p>Ohio Department of Health<br/> Vital Statistics<br/> P.O. Box 15098<br/> Columbus, OH 43215-0098<br/> (614) 466-2531</p>  |
| <p>OKLAHOMA<br/> <a href="http://www.ok.gov/health/Birth_and_Death_Certificates/index.html">http://www.ok.gov/health/Birth_and_Death_Certificates/index.html</a></p>       | <p>Vital Records<br/> Oklahoma State Department of Health<br/> PO Box 53551<br/> Oklahoma City, OK 73152-3551<br/> (405) 271-4040</p>  |

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| <p style="text-align: center;">OREGON</p> <p style="text-align: center;"><a href="https://www.oregon.gov/oha/ph/birthdeathcertificates/getvitalrecords/pages/index.aspx">https://www.oregon.gov/oha/ph/birthdeathcertificates/getvitalrecords/pages/index.aspx</a></p> | <p>Oregon Vital Records<br/>PO Box 14050<br/>Portland, OR 97293-0050<br/>(971) 673-1190</p>   |
| <p style="text-align: center;">PENNSYLVANIA</p> <p style="text-align: center;"><a href="http://www.health.state.pa.us/vitalrecords">http://www.health.state.pa.us/vitalrecords</a></p>   | <p>Department of Health<br/>Division of Vital Records<br/>PO Box 1528<br/>New Castle, PA 16103<br/>(844) 228-3516</p>                                 |
| <p style="text-align: center;">PUERTO RICO</p>   | <p>Department of Health<br/>Demographic Registry<br/>P.O. Box 11854 -Fernandez Juncos Station San Juan,<br/>PR 00910<br/>(787) 765-2929 Ext. 6131</p> |
| <p style="text-align: center;">RHODE ISLAND</p> <p style="text-align: center;"><a href="http://www.health.ri.gov/records/">http://www.health.ri.gov/records/</a></p>   | <p>Rhode Island Department of Health<br/>Office of Vital Records<br/>3 Capitol Hill, Rm 101<br/>Providence, RI 02908 (401) 222-2811</p>               |
| <p style="text-align: center;">SOUTH CAROLINA</p> <p style="text-align: center;"><a href="http://www.scdhec.gov/VitalRecords/BirthCertificates/">http://www.scdhec.gov/VitalRecords/BirthCertificates/</a></p>   | <p>SC DHEC - Vital Records<br/>2600 Bull Street<br/>Columbia, SC 29201<br/>(803) 898-3630</p>   |
| <p style="text-align: center;">SOUTH DAKOTA</p> <p style="text-align: center;"><a href="http://doh.sd.gov/records/">http://doh.sd.gov/records/</a></p>   | <p>Vital Records<br/>207 East Missouri Avenue, Suite 1A<br/>Pierre, SD 57501<br/>(605) 773-4961</p>   |
| <p style="text-align: center;">TENNESSEE</p> <p style="text-align: center;"><a href="https://www.tn.gov/health/search-results.html?q=Birth+Certificates">https://www.tn.gov/health/search-results.html?q=Birth+Certificates</a></p>                                    | <p>Tennessee Vital Records<br/>Andrew Johnson Tower, 1<sup>st</sup> Floor<br/>710 James Robertson<br/>Parkway<br/>Nashville, TN 37243</p>             |
| <p style="text-align: center;">TEXAS</p> <p style="text-align: center;"><a href="http://www.dshs.state.tx.us/vs/default.shtm">http://www.dshs.state.tx.us/vs/default.shtm</a></p>  | <p>DSHS-VSS<br/>P.O. Box 12040<br/>Austin, TX 78711-2040<br/>(888) 963-7111</p>   |

|  |   |
|--|---|
| <p>UTAH</p> <p><a href="http://www.utahcounty.gov/Dept2/Health/VitalRecords/requests.asp">http://www.utahcounty.gov/Dept2/Health/VitalRecords/requests.asp</a></p>   | <p>Utah County Health Department<br/>Vital Records<br/>151 South University Avenue, Suite 1100<br/>Provo, UT 84601<br/>(801) 851-7005</p>           |
| <p>VERMONT</p> <p><a href="http://healthvermont.gov/research/records/vital_records.aspx#overview">http://healthvermont.gov/research/records/vital_records.aspx#overview</a></p>                            | <p>Vermont Department of Health<br/>Vital Records Office<br/>P.O. Box 70<br/>Burlington, VT 05402<br/>(802) 863-7275 or (800) 439- 5008</p>         |
| <p>VIRGINIA</p> <p><a href="http://www.vdh.virginia.gov/vital-records/">http://www.vdh.virginia.gov/vital-records/</a></p>   | <p>Division of Vital Records<br/>P.O. Box 1000<br/>Richmond, VA 23218-1000<br/>(804) 662-6200</p>   |
| <p>VIRGIN ISLANDS (U.S.) (MAIL)</p>  | <p>Department of Health<br/>Vital Statistics<br/>Knud Hansen Complex<br/>St. Thomas, VI 00802<br/>(340) 774-9000 Ext. 4685 or 4686</p>              |
| <p>ST. CROIX (MAIL)</p>  | <p>Department of Health<br/>Vital Statistics<br/>Charles Harwood Memorial Hospital<br/>St. Croix, VI 00820<br/>(340) 774-9000 Ext. 4685 or 4686</p> |
| <p>WASHINGTON</p> <p><a href="http://www.doh.wa.gov/LicensesPermitsandCertificates/BirthDeathMarriageandDivorce">http://www.doh.wa.gov/LicensesPermitsandCertificates/BirthDeathMarriageandDivorce</a></p> | <p>Department of Health<br/>P.O. Box 9709<br/>Olympia, WA 98507-9709<br/>(360) 236-4300</p>   |
| <p>WEST VIRGINIA</p> <p><a href="http://www.wvdhhr.org/bph/hsc/vital/birthcert.asp">http://www.wvdhhr.org/bph/hsc/vital/birthcert.asp</a></p>  | <p>Vital Registration<br/>Room 165<br/>350 Capitol Street<br/>Charleston, WV 25301-3701<br/>(304) 558-2931</p>                                      |
| <p>WISCONSIN</p> <p><a href="http://dhs.wisconsin.gov/vitalrecords/index.htm">http://dhs.wisconsin.gov/vitalrecords/index.htm</a></p>  | <p>State Vital Records Office<br/>PO Box 309<br/>Madison, WI 53701-0309<br/>(608) 266-1373</p>  |



# Miami-Dade County Public Schools

*giving our students the world*

## Superintendent of Schools

Alberto M. Carvalho

## Administrative Director

Dr. Verena Cabrera

## Miami-Dade County School Board

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 Dr. Steve Gallon III, Vice Chair  
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 Dr. Lubby Navarro  
 Dr. Marta Pérez  
 Mari Tere Rojas

## IMPORTANT Letter to Parents HEALTH REQUIREMENTS FOR SCHOOL ENTRANCE 2020-2021

Florida law requires that your child presents immunization documentation prior to admittance or attendance in a Florida school for the first time [CLICK HERE](#). This applies to **ALL** new students in Pre-Kindergarten through the 12<sup>th</sup> grade. You must present a Florida Certificate of Immunization-DH-680 form, or DH-681-Religious Exemption when registering your child/children for school. The form can be printed on plain white paper if printed from the Florida State Health Online Tracking System (FL-SHOTS).

**PLEASE NOTE:** For the 2020-2021 school year, parents/legal guardians **MUST** provide documentation of the following:

- Four or five doses of diphtheria-tetanus-pertussis (DTap) vaccine for students in kindergarten through twelfth grade. The fifth dose of DTap vaccine is not necessary if the fourth dose was administered at age 4 years or older.
- Three doses of hepatitis B (Hep B) vaccine for students in kindergarten through twelfth grade.
- Three, four or five doses of polio (IPV) vaccine for students in kindergarten through twelfth grade. If four or more doses are administered before age 4 years, an additional dose should be administered at age 4 through 6 years and at least six months after the previous dose. A fourth dose is not necessary if the third dose was administered at age 4 years or older and at least six months after the previous one.
- Two doses of measles-mumps-rubella (MMR) vaccine for students in kindergarten through twelfth grade.
- Two doses of varicella (chicken pox) vaccine for students in kindergarten through twelfth grade. Varicella (chicken pox) vaccine is not required if the child has a documented history of the varicella (chicken pox) disease.
- One dose of tetanus-diphtheria-pertussis (Tdap) vaccine is required for **ALL** students entering, attending or transferring into **seventh (7<sup>th</sup>)** grade.

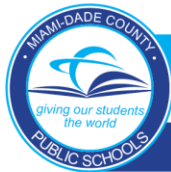
The “Florida Plan for School Health Services” requires all students (PK-12) must submit documentation of a student health examination performed within the 12 months prior to the initial entry into a Florida school. A student health examination, including proof of a Tuberculosis Clinical Screening and appropriate follow-up, if necessary, **MUST** be completed and signed by a medical provider and presented to the school at the time of registration. The school entry health exam should be completed on the Student Entry Health Exam DH-3040 form. When using the Student Entry Health Exam DH-3040 form, parents/legal guardians must complete page one (1). A medical provider may use their own document when completing the school entry health examination.

Parents/legal guardians should consult with their private medical provider for the above requirements before registering your child for school. If you do not have a private medical provider, please contact the Florida Department of Health in Miami-Dade County Special Immunization Unit by calling 786-845-0550 to schedule an appointment to receive **FREE** school age vaccines. Parents/legal guardians can also contact “The Children’s Trust” Helpline at 211 to obtain a list of medical facilities that will provide immunizations at a reduced price.

We remind parents/legal guardians of the importance of vaccinating their child/children against the influenza for the next flu season.

Federal & State Compliance Office • 489 East Drive, Miami Springs, FL 33166  
 (305) 883-5323 • (305) 883-75441 (FAX)





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## IMPORTANTE Carta a los padres de familia REQUISITOS DE SALUD PARA EL INGRESO A LA ESCUELA DEL 2020-2021

La ley de la Florida requiere que su hijo/hija presente la documentación de inmunización antes de la admisión o asistencia en una escuela de la Florida por primera vez [HAGA CLIC AQUÍ](#). Esto se aplica a **TODOS** los estudiantes nuevos en Pre-Kindergarten hasta el 12º grado. Usted debe presentar un Certificado de la Florida de Inmunización – formulario DH-680, o DH-681-Exención Religiosa al matricular a su(s) hijo(s) en la escuela. El formulario puede imprimirse en papel blanco normal si se imprime desde el Sistema de Rastreo en Línea de Salud del Estado de la Florida (Florida State Health Online Tracking System, FL-SHOTS).

**POR FAVOR NOTE:** Para el curso escolar del 2020-2021, los padres de familia/tutores **DEBEN** proveer documentación de lo siguiente:

- Cuatro o cinco dosis de la vacuna contra la difteria, el tétanos y la tos ferina (DTaP) para estudiantes del Kindergarten al duodécimo grado. La quinta dosis de la vacuna DTaP no es necesaria si la cuarta dosis se administró a la edad de 4 años o más.
- Tres dosis de la vacuna contra la hepatitis B (HepB) para estudiantes del Kindergarten al duodécimo grado.
- Tres, cuatro o cinco dosis de la vacuna contra la polio (IPV) para estudiantes del Kindergarten al duodécimo grado. Si se administran cuatro dosis o más antes de los 4 años, se debe administrar una dosis adicional entre los 4 y los 6 años y al menos seis meses después de la dosis anterior. La cuarta dosis no es necesaria si la tercera dosis se administró a los 4 años o más y al menos seis meses después de la anterior.
- Dos dosis de la vacuna contra el sarampión, las paperas y la rubéola (MMR) para estudiantes del Kindergarten al duodécimo grado.
- Dos dosis de la vacuna contra la varicela para estudiantes del Kindergarten al duodécimo grado. La vacuna contra la varicela no es necesaria si los niños tienen antecedentes documentados de la enfermedad de varicela.
- Se requiere una dosis de la vacuna contra el tétanos, la difteria y la tos ferina (DTaP) para **TODOS** los estudiantes que ingresan, asisten o se trasladan al **séptimo (7º)** grado.

El "Plan de la Florida para Servicios Escolares de Salud" ("Florida Plan for School Health Services") requiere que todos los estudiantes (de Pre-Kindergarten al 12º grado) presenten la documentación de un examen de salud del estudiante realizado dentro de los 12 meses antes de la entrada inicial en una escuela de la Florida. Un examen de salud estudiantil, incluyendo el comprobante de una Detección Clínica de Tuberculosis y el seguimiento apropiado, si es necesario, **DEBE** ser completado y firmado por un proveedor médico y presentado a la escuela al momento de la matrícula. El examen de salud de ingreso a la escuela debe ser completado en el formulario DH-3040, Examen de Salud de Entrada del Estudiante. Al usar el formulario DH-3040, Examen de Salud de Entrada del Estudiante, los padres de familia/tutores deben completar la página uno (1). Un proveedor médico puede usar su propio documento al completar el examen médico de ingreso a la escuela.

Los padres de familia/tutores legales deben consultar su proveedor médico privado sobre los requisitos anteriores antes de matricular a sus hijos en la escuela. Si no tiene un proveedor médico privado, por favor, comuníquese con la Unidad de Inmunización Especial (Special Immunization Unit) del Departamento de Salud de la Florida en el Condado Miami-Dade (Florida Department of Health in Miami-Dade County) al llamar al 786-845-0550 para programar una cita para recibir vacunas **GRATIS** para los niños en edad escolar. Los padres de familia/tutores legales también pueden comunicarse con la línea de ayuda de "The Children's Trust" al 211 para obtener una lista de los centros médicos que proporcionarán vacunas a un precio reducido.

Les recordamos a los padres de familia/tutores legales la importancia de vacunar a sus hijos contra la influenza durante la próxima temporada de gripe.

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## ENPÒTAN Lèt pou Paran yo EGZIJANS SANTE POU ANTRE LEKÒL 2020-2021

Lwa Florid egzije pitit ou prezante dokiman vaksinasyon anvan li antre oubyen li ale nan yon lekòl Florid pou premye fwa. Règleman sa a aplikab pou **TOUT** nouvo elèv klas matènèl rive 12èm ane eskolè [KLIKE LA A](#). Ou dwe prezante yon fòm "Florida Certificate of Immunization-DH-680 oubyen yon fòm "DH681-Religious Exemption" (Fòm Dispans Relijye DH681) lè w ap enskri pitit/timoun ou (yo) nan lekòl. Ou ka enprime fòm nan sou papyè blan si w ap enprime li nan sa ki soti nan "Florida State Health Online Tracking System (FL-SHOTS)".

**NOTE BYEN:** Pou ane lekòl 2020-2021 an, paran/gadyen legal **DWE** bay dokiman k ap suiv yo:

- Kat oubyen senk dòz vaksen "diphtheria-tetanus-pertussis (DTap)" (diferi-tetanòs-koklich) pou elèv nan jadendanfan jiska douzyèm ane eskolè. Senkyèm dòz vaksen DTap a pa nesèsè si yo te administre l katriyèm dòz la a 4 an oubyen pi gran.
- Twa dòz vaksen "hepatitis B (Hep B)" (Epatid B) pou elèv nan jadendanfan jiska douzyèm ane eskolè.
- Twa, kat oubyen senk dòz vaksen "polio (IPV)" (polyo) pou elèv nan jadendanfan jiska douzyèm ane eskolè. Si yo te administre l kat oubyen plis dòz anvan 4 an, yo ta dwe administre l yon dòz adisyonèl a 4 jiska 6 an e omwen a sis mwa aprè dòz anvan an. Yon katriyèm dòz pa nesèsè si yo te administre twazyèm dòz a 4 an oubyen pi gran e omwen a sis mwa aprè sa anvan an.
- De (2) dòz vaksen "measles-mumps-rubella (MMR)" (lawoujòl-malmouton- sawonpyon) pou elèv nan jadendanfan jiska douzyèm ane eskolè.
- De (2) dòz vaksen "varicella (Chicken pox)" (varisèl) pou elèv nan jadendanfan jiska douzyèm ane eskolè. Vaksen "varicella" (Chicken pox) la pa obligatwa si timoun nan gen yon istwa malady "varicella" (Chicken pox) ki dokimante.
- Yon dòz vaksen "diphtheria-tetanus-pertussis (DTap)" (diferi-tetanòs-koklich) obligatwa pou **TOUT** elèv ki ap antre, ale oubyen ki ap transfere ale nan **setyèm (7èm)** ane eskolè.

"Florida Plan for School Health Services" (Plan Florid pou Sèvis Sante Lekòl) egzije pou tout elèv (PK-12) dwe prezante dokimantasyon egzamen sante yon elèv nan espas 12 mwa anvan li te premye antre nan yon lekòl Florid. Yon founisè medikal **DWE** ranpli e siyen yon fòm egzaminasyon sante yon elèv, ki gen ladan prèv yon "Tuberculosis Clinical Screening" (Depistaj Klinik Tibèkiloz) e suivi apwopriye, si nesèsè, e yo dwe pwezante li bay lekòl la nan lè enskripsyon. Egzamen sante pou antre lekòl la ta dwe fèt sou fòm "Student Entry Health Exam DH-3040" (Egzamen Antre Lekòl DH-3040). Lè yo ap itilize fòm Egzamen Antre Lekòl DH-3040, paran/gadyen legal yo dwe ranpli paj (1). Yon founisè medikal ka itilize pwòp dokiman li lè l ap ranpli fòm egzaminasyon sante pou antre lekòl la.

Paran/gadyen legal ta dwe konsilte avèk founisè medikal prive yo pou egzijans anwo yo anvan yo enskri pitit yo lekòl. Si ou pa gen yon founisè medikal prive, silvoulè kontakte Depatman Sante Florid nan Miami-Dade County Special Immunization Unit nan rele (786) 845-0550 pou pran yon randevou pou resevwa vaksen **GRATIS** pou elèv nan laj lekòl. Paran/gadyen ka kontakte tou Liy Asistans "The Children's Trust" nan 211 pou jwenn yon lis etablisman medikal ki ap bay vaksen nan yon pri redui.

Nou raple paran/gadyen legal enpòtans pou vaksine pitit/timoun ou (yo) kont 'influenza' a pou pwochen sezon "flu" (gwo grip) la.

**RULES OF THE STATE BOARD OF EDUCATION OF FLORIDA**

## Out-of-State Transfer Students

**6A-1.0985 Entry Into Kindergarten and First Grade by Out-of-State Transfer Students.**

1. Any student who transfers from an out-of-state public school and who does not meet regular age requirements for admission to Florida public schools shall be admitted upon presentation of the data required in subsection (3).
2. Any student who transfers from an out-of-state nonpublic school and who does not meet regular age requirements for admission to Florida public schools may be admitted if the student meets age requirements for public schools within the state from which he or she is transferring, and if the transfer of the student's academic credit is acceptable under rules of the school board. Prior to admission, the parent or guardian must also provide the data required in subsection (3).
3. In order to be admitted to Florida schools, such a student transferring from an out-of- state school must provide the following data:
  - a. Official documentation that the parent(s) or guardian(s) was a legal resident(s) of the state in which the child was previously enrolled in school;
  - b. An official letter or transcript from proper school authority which shows record of attendance, academic information, and grade placement of the student;
  - c. Evidence of immunization against communicable diseases as required in Section 1003.22, Florida Statutes;
  - d. Evidence of date of birth in accordance with Section 1003.21, Florida Statutes; and
  - e. Evidence of a medical examination completed within the last twelve (12) months in accordance with Section 1003.21, Florida Statutes.

*Specific Authority 1001.02(1) FS. Law Implemented 1003.21(2) FS. History—New 7-29-82, Formerly 6A-1.985.*

STATE OF FLORIDA  
DEPARTMENT OF EDUCATION  
LEGAL MINIMUM PUBLIC SCHOOL ENTRY  
AGES BY STATE AND TERRITORY

**APPENDIX 8**

The legal public school entry ages listed below were provided to the Florida Department of Education by each state or territory. These dates should be used in accepting transfer students from out-of-state into Florida public schools according to Rule 6A-1.985. (Red indicates changes from prior year.)

| STATE OR TERRITORY   | KINDERGARTEN AGE | DATE               | FIRST GRADE AGE | DATE  |
|----------------------|------------------|--------------------|-----------------|---|
| ALABAMA              | 5                | on or before 09/01 | 6               | on or before 09/01  |
| ALASKA               | 5                | on or before 09/01 | 6               | on or before 09/01  |
| ARIZONA              | 5                | on or before 09/01 | 6               | on or before 09/01  |
| ARKANSAS             | 5                | on or before 08/01 | 6               | on or before 08/01; K is mandatory  |
| CALIFORNIA           | 5                | on or before 09/01 | 6               | on or before 09/01  |
| CANADA (ONTARIO)     | 5                | on or before 09/01 | 6               | on or before 09/01  |
| COLORADO             | 5                | on or before 09/30 | 6               | on or before 09/30  |
| CONNECTICUT          | 5                | on or before 01/01 | 6               | on or before 01/01; K is mandatory  |
| DELAWARE             | 5                | on or before 08/31 | 6               | on or before 08/31; K is mandatory  |
| DISTRICT OF COLOMBIA | 5                | on or before 9/30  | 6               | on or before 9/30; K is required  |
| FLORIDA              | 5                | on or before 09/01 | 6               | on or before 09/01  |
| GEORGIA              | 5                | on or before 09/01 | 6               | on or before 09/01  |
| GUAM                 | 5                | on or before 07/31 | 6               | on or before 07/31  |
| HAWAII               | 5                | on or before 07/31 | 6               | on or before 07/31; K is mandatory  |
| IDAHO                | 5                | on or before 09/01 | 6               | on or before 09/01  |
| ILLINOIS             | 5                | on or before 09/01 | 6               | on or before 09/01  |
| INDIANA              | 5                | on or before 08/01 | 6               | on or before 08/01  |
| IOWA                 | 5                | on or before 09/15 | 6               | on or before 09/15  |
| KANSAS               | 5                | on or before 08/31 | 6               | on or before 08/31  |
| KENTUCKY             | 5                | on or before 08/01 | 6               | on or before 08/01  |
| LOUISIANA            | 5                | on or before 09/30 | 6               | on or before 09/30; K is mandatory  |
| MAINE                | 5                | on or before 10/15 | 6               | on or before 10/15  |
| MARYLAND             | 5                | on or before 09/01 | 6               | on or before 09/01; K is Mandatory  |
| MASSACHUSETTS        | 5                | on or before 08/31 | 6               | by 12/01-Local eligible for 1 <sup>st</sup> grade if 6 yrs. old between 09/01-12/01 |
| MICHIGAN             | 5                | on or before 09/01 | 6               | on or before 09/01  |
| MINNESOTA            | 5                | on or before 09/01 | 6               | on or before 09/01  |
| MISSISSIPPI          | 5                | on or before 09/01 | 6               | on or before 09/01  |
| MISSOURI             | 5                | by 08/01           | 6               | by 08/01  |
| MONTANA              | 5                | on or before 09/10 | 6               | on or before 09/10  |
| NEBRASKA             | 5                | on or before 07/31 | 6               | on or before 07/31  |
| NEVADA               | 5                | on or before 09/30 | 6               | on or before 09/30; K is mandatory  |
| NEW HAMPSHIRE        | 5                | on or before 10/01 | 6               | on or before 10/01  |
| NEW JERSEY           | 5                | by 10/01           | 6               | by 10/01  |
| NEW MEXICO           | 5                | by 09/01           | 6               | by 09/01  |

|   |   |  |   |  |
|---|---|--|---|--|
| NEW YORK                                | 5 | on or before 12/01   | 6 | on or before 12/01                       |
| NORTH CAROLINA                          | 5 | on or before 8/31  | 6 | on or before 8/31                        |
| NORTH DAKOTA                            | 5 | on or before 08/01   | 6 | on or before 8/01                        |
| OHIO                                    | 5 | on or before 09/30; K is mandatory                         | 6 | on or before 09/30 and completed K       |
| OKLAHOMA                                | 5 | on or before 09/01   | 6 | on or before 09/01; K is mandatory       |
| OREGON                                  | 5 | on or before 09/01   | 6 | on or before 09/01                       |
| PENNSYLVANIA                            | 5 | on or before 09/01   | 6 | on or before 09/01                       |
| PUERTO RICO                             | 5 | by 08/31   | 6 | by 08/31                                 |
| RHODE ISLAND                            | 5 | on or before 09/01   | 6 | on or before 09/01                       |
| SOUTH CAROLINA                          | 5 | on or before 09/01   | 6 | on or before 09/01                       |
| SOUTH DAKOTA                            | 5 | on or before 09/01   | 6 | on or before 09/01                       |
| ST. KITTS & NEVIS                       | 5 | 09/01; Compulsory age                                      | 6 | 09/01; Automatic transfer from K         |
| TENNESSEE                               | 5 | on or before 08/15   | 6 | on or before 08/15; K is required        |
| TEXAS                                   | 5 | on or before 09/01   | 6 | on or before 09/01                       |
| UTAH                                    | 5 | on or before 09/02   | 6 | on or before 09/02                       |
| VERMONT                                 | 5 | on or before 01/01   | 6 | on or before 01/01                       |
| VIRGINIA                                | 5 | on or before 09/30   | 6 | on or before 09/30; K is mandatory       |
| VIRGIN ISLANDS                          | 5 | on or before 12/31   | 6 | on or before 12/31; Promotion from K     |
| WASHINGTON                              | 5 | on or before 08/31   | 6 | on or before 08/31                       |
| WEST VIRGINIA                           | 5 | on or before 07/01   | 6 | on or before 07/01                       |
| WISCONSIN                               | 5 | on or before 09/01; Local boards may grant early admission | 6 | on or before 09/01 compulsory school age |
| WYOMING                                 | 5 | on or before 09/15   | 6 | on or before 09/15                       |
| DEPARTMENT OF DEFENSE DEPENDENT SCHOOLS | 5 | on or before 09/01   | 6 | on or before 09/01                       |



**CONFIDENTIAL**  
**SCHOOL OPERATIONS**  
**JUVENILE JUSTICE SUPPORT OFFICE (JJSO)**



**EDUCATIONAL REVIEW FORM**  
 (THIS FORM MUST BE COMPLETED AT THE JJSO)

|  |  |   |         |                      |        |      |
|--|--|---|---------|----------------------|--------|------|
| STUDENT NAME: (LAST)   |  | (FIRST)   | (M.I.)  | STUDENT ID :         | GRADE: | DOB: |
| CURRENT EDUCATIONAL STATUS: (PLEASE CHECK ALL THAT APPLY) <input type="checkbox"/> ELEMENTARY <input type="checkbox"/> MIDDLE <input type="checkbox"/> K-8 <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> ACTIVE                  |  |   |         |                      |        |      |
| <input type="checkbox"/> SPED SERVICES: PRIMARY EXCEPTIONALITY _____ <input type="checkbox"/> MAGNET <input type="checkbox"/> CHARTER <input type="checkbox"/> PRIVATE <input type="checkbox"/> ADULT/TECH/VOC <input type="checkbox"/> INACTIVE |  |   |         |                      |        |      |
| EDUCATIONAL REVIEW AREAS: <input type="checkbox"/> ATTENDANCE <input type="checkbox"/> ACADEMIC <input type="checkbox"/> BEHAVIORAL <input type="checkbox"/> SCHOOL PLACEMENT <input type="checkbox"/> COURT ORDER                               |  |   |         |                      |        |      |
| <input type="checkbox"/> COURT REFERRAL <input type="checkbox"/> SCHOOL ENROLLMENT <input type="checkbox"/> SCHOOL RE-ENTRY <input type="checkbox"/> NEW M-DCPS STUDENT  |  |   |         |                      |        |      |
| CURRENT ADDRESS (NUMBER)   |  | (STREET)  | (CITY)  | (ZIP)                |        |      |
| NEW ADDRESS (IF APPLICABLE) (NUMBER)   |  | (STREET)  | (CITY)  | (ZIP)                |        |      |
| RESIDENCE SCHOOL (For Out of Area Transfers ONLY): <input type="checkbox"/> REQUEST TRANSPORTATION   |  |   |         | LOCATION #           | REGION |      |
| CURRENT SCHOOL:  |  |   |         | LOCATION #           | REGION |      |
| APPROVED SCHOOL:   |  |   |         | LOCATION #           | REGION |      |
| CASE WORKER:   | SIGNATURE:   |   | AGENCY: | CONTACT INFORMATION: |        |      |
| LEGAL GUARDIAN NAME:   |  | RELATIONSHIP:   |         | CONTACT INFORMATION: |        |      |
| M-DCPS DISTRICT COURT LIAISON:   |  | SIGNATURE:  |         | 305-679-2800         |        |      |
| SCHOOL TRANSFER BEST INTEREST REASON (CHECK ALL THAT APPLY BELOW) <input type="checkbox"/> NOT APPLICABLE-NO SCHOOL PLACEMENT CHANGE   |  |   |         |                      |        |      |
| <input type="checkbox"/> STUDENT REQUEST   | <input type="checkbox"/> ALTERNATIVE EDUCATION PLACEMENT | <input type="checkbox"/> PREVIOUS SCHOOL OF ORIGIN      |         |                      |        |      |
| <input type="checkbox"/> PARENT REQUEST  | <input type="checkbox"/> ADULT/VOCATIONAL/TECHNICAL ED.  | <input type="checkbox"/> STUDENT RE-ENTRY               |         |                      |        |      |
| <input type="checkbox"/> SIBLING GROUP PLACEMENT   | <input type="checkbox"/> SCHOOL OF CHOICE TRANSFER       | <input type="checkbox"/> PLACED OUT OF COUNTY           |         |                      |        |      |
| <input type="checkbox"/> PERMANENCY GOAL/REUNIFIED WITH PARENT   | <input type="checkbox"/> SCHOOL/COMMUNITY CONNECTION     | <input type="checkbox"/> ENTERING FROM OUT OF COUNTY    |         |                      |        |      |
| <input type="checkbox"/> TERMINATION OF SUPERVISION  | <input type="checkbox"/> COURSE OFFERING/CREDIT RECOVERY | <input type="checkbox"/> GRADE OR LEVEL PROMOTION       |         |                      |        |      |
| <input type="checkbox"/> 504/MEDICAL/SPED SERVICES PLACEMENT   | <input type="checkbox"/> IMMINENT SAFETY CONCERN         | <input type="checkbox"/> DISTANCE/HARDSHIP: _____ MILES |         |                      |        |      |
| COMMENTS:<br>_____<br>_____<br>_____<br>_____  |  |   |         |                      |        |      |
| PARTICIPANTS: <input type="checkbox"/> CASE MANAGER <input type="checkbox"/> CHILD PROTECTIVE INVESTIGATOR <input type="checkbox"/> STUDENT <input type="checkbox"/> PARENT/GUARDIAN <input type="checkbox"/> GUARDIAN AD-LITEM                  |  |   |         |                      |        |      |
| <input type="checkbox"/> OTHER : _____   |  |   |         |                      |        |      |
| COMPLETED BY JJSO ONLY: <input type="checkbox"/> W13 <input type="checkbox"/> 8017/8141 WD <input type="checkbox"/> OAT <input type="checkbox"/> OUT OF CTY DATE: _____ INITIAL: _____   |  |   |         |                      |        |      |