

Nassau County School District

Registration Checklist

You must have ALL required documents to complete the registration process, unless you are determined to be experiencing homelessness as defined by the McKinney-Vento Act.

- ☐ **Parent/Guardian Photo Identification**
- ☐ **Official Birth Certificate**
- ☐ **Social Security Card** (Optional)
- ☐ **Florida Immunization Form** - Must be on Florida DH 680 form
- ☐ **Physical Examination** - Florida DH 3040 (or equivalent) dated within 12 months of the enrollment date
- ☐ **Proof of Custody** (If applicable) - Court documentation is required if parental names/legal custody differs from the birth certificate

- ☐ **Proof of Residency** - See the Residency and Guardianship document for more information.
 - a. **If You Are A Homeowner** (1 from each Category)
 - Category A: Current mortgage statement, Property Deed, Signed settlement statement (for new home purchases only; sales/builders contracts not acceptable), Homesteaded property tax statement
 - Category B: Current Utility Bill (Cable, Electric, Gas, Internet, Landline Phone, Water)
 - Category C: Driver's License with enrolling address
 - b. **If You Are A Renter** (1 from each Category)
 - Category A: Current lease which must have both tenant and landlord/ property manager's signature and contact information
 - Category B: Current Utility Bill (Cable, Electric, Gas, Internet, Landline Phone, Water)
 - Category C: Driver's License with enrolling address
 - c. **If You Are Living With A Person Who Owns Their Home/Shared Residency** - Do Not Have Proof Of Ownership in the Parent/Guardian's Name (1 from each Category)
 - Category A (HOMEOWNER): Current mortgage statement, Property Deed, Signed settlement statement (for new home purchases only; sales/builders contracts not acceptable), Homesteaded property tax statement
 - Category B (HOMEOWNER): Current Utility Bill (Cable, Electric, Gas, Internet, Landline Phone, Water)
 - Category C (PARENT/GUARDIAN): Driver's License with enrolling address
 - Category D (HOMEOWNER): Signed Affidavit Verification of Residency form
 - d. **If You Are Living With A Person Who Is A Renter** - Do Not Have A Lease in the Parent/Guardian's Name (1 from each Category)
 - Category A (RENTER): Current lease which must have both tenant and landlord/ property manager's signature and contact information
 - Category B (RENTER): Current Utility Bill (Cable, Electric, Gas, Internet, Landline Phone, Water)
 - Category C (PARENT/GUARDIAN): Driver's License with enrolling address
 - Category D (RENTER): Signed Affidavit Verification of Residency form

- ☐ **Report Card/Records from Previous School** - Official transcript from previous school, final/last report card , and most recent test scores
- ☐ **Copy of Individual Education Plan (IEP)/504 Plan** (If applicable)

Nassau County School District

Residency & Guardianship

For a student to enroll in Nassau County Schools, the student's residence must be in Nassau County. Administrative Rule 5.01 defines a student's residence as the home of the student's parents or such other person with whom the student resides pursuant to court order or the residence where the student is placed by a state or federal agency which has jurisdiction over the student. If a minor student's parents or legal guardians live in separate residences while sharing physical custody under the terms of a court order or otherwise, the student may attend the school zoned for either residence with appropriate residency documentation.

The location of the student's residence determines the student's school zone and the school to which the student will be assigned unless the student enrolls in another school in accordance with the district's School Choice transfer policy.

Proof Of Residency

All documents must be current, valid, and include the residential address used for enrollment. Follow the requirements below that best describes your residency situation. Bills must be in the last 30 days.

If You Are A Homeowner

Category A (1 from this category)	Category B (1 from this category)	Category C (1 from this category)
<ul style="list-style-type: none"> ● Current mortgage statement ● Property Deed ● <u>Signed</u> settlement statement (for new home purchases only; sales/builders contracts not acceptable) ● Homesteaded property tax statement 	<ul style="list-style-type: none"> ● Current utility bill** <ul style="list-style-type: none"> ○ Cable ○ Electric ○ Gas ○ Internet ○ Landline Phone ○ Water <p>**For new service, an activation notice may be accepted – must show name, address, & start of service date.</p>	<ul style="list-style-type: none"> ● Driver's license with enrolling address (Driver's license must be updated within 30 days)** <p>**If the driver's license address does not match enrolling address, provide 1 of the following:</p> <ul style="list-style-type: none"> ● Additional utility bill ● Bank statement ● Cell phone statement ● Credit card statement ● HOA statement ● Insurance statement (any) ● Paycheck stub ● Property tax ● Vehicle registration

If You Are A Renter

Category A (1 from this category)	Category B (1 from this category)	Category C (1 from this category)
Current lease which must have both tenant and landlord/ property manager's signature and contact information.	<ul style="list-style-type: none"> ● Current utility bill** <ul style="list-style-type: none"> ○ Cable ○ Electric ○ Gas ○ Internet ○ Landline Phone ○ Water <p>**For new service, an activation notice may be accepted – must show name, address, & start of service date.</p> <p>***If utilities are included in your rent it must specify it in the lease and you will need an additional item from Category C, totaling 2.</p>	<ul style="list-style-type: none"> ● Driver's license with enrolling address (Driver's license must be updated within 30 days)** <p>**If the driver's license address does not match enrolling address, provide 1 of the following:</p> <ul style="list-style-type: none"> ● Additional utility bill ● Bank statement ● Cell phone statement ● Credit card statement ● Insurance statement (any) ● Paycheck stub ● Vehicle registration

If You Are Living With A Person Who Owns Their Home/Shared Residency *(Do Not Have Proof Of Ownership in the Parent/Guardian's Name)*

Category A HOMEOWNER (1 from this category)	Category B HOMEOWNER (1 from this category)	Category C PARENT/GUARDIAN (1 from this category)	Category D HOMEOWNER (1 from this category)
<ul style="list-style-type: none"> ● Current mortgage statement ● Property Deed ● <u>Signed</u> settlement statement (for new home purchases only; sales/builders contracts not acceptable) ● Homestead property tax statement 	<ul style="list-style-type: none"> ● Current utility bill** <ul style="list-style-type: none"> ○ Cable ○ Electric ○ Gas ○ Internet ○ Landline Phone ○ Water <p>**For new service, an activation notice may be accepted – must show name, address, & start of service date.</p>	<ul style="list-style-type: none"> ● Driver's license with enrolling address (Driver's license must be updated within 30 days)** <p>**If the driver's license address does not match enrolling address, provide 1 of the following:</p> <ul style="list-style-type: none"> ● Additional utility bill ● Bank statement ● Cell phone statement ● Credit card statement ● Insurance statement (any) ● Paycheck stub ● Vehicle registration 	Signed Affidavit Verification of Residency form

If You Are Living With A Person Who Is A Renter (Do Not Have A Lease in the Parent/Guardian's Name)

Category A RENTER (1 from this category)	Category B RENTER (1 from this category)	Category C PARENT/GUARDIAN (1 from this category)	Category D RENTER (1 from this category)
<p>Current lease which must have both tenant and landlord/ property manager's signature and contact information.</p>	<ul style="list-style-type: none"> ● Current utility bill** <ul style="list-style-type: none"> ○ Cable ○ Electric ○ Gas ○ Internet ○ Landline Phone ○ Water <p>**For new service, an activation notice may be accepted – must show name, address, & start of service date.</p>	<ul style="list-style-type: none"> ● Driver's license with enrolling address (Driver's license must be updated within 30 days)** <p>**If the driver's license address does not match enrolling address, provide 1 of the following:</p> <ul style="list-style-type: none"> ● Additional utility bill ● Bank statement ● Cell phone statement ● Credit card statement ● Insurance statement ● Paycheck stub ● Vehicle registration 	<p>Signed Affidavit Verification of Residency form</p>

Residency Fraud

Parent(s)/Guardian(s) are committing residency fraud if they submit an address during the enrollment process that is not their true residence.

If there is reasonable suspicion that the student is not residing at the claimed address, the following procedures may be implemented at the discretion of the Superintendent or designee.

- A letter may be sent to parent(s) who have conflicting address information requesting that the parent verify and update enrollment information. This may be followed by a phone conversation or home visit.
- The school staff may examine the Property Appraiser's website to determine the parent's homestead (permanent residence) location. The homestead address of the parent will be used as a factor to determine the student's zoned school. A conflicting address indicates that further investigation is required.

If it is determined that the student is attending a school outside of their zone, the student shall be withdrawn by the school and must be registered and enrolled in the appropriate zoned school.

The Superintendent or designee reserves the right to make an independent investigation and to make the final determination as to the residence of a student.

Change Of Residence

If the student's permanent residence changes, notification and updated documentation must be provided to the school within 10 school days.

Guardianship

Pursuant to Administrative Rule 5.01(II), when a student resides with a person who is not the student's parent seeks to enroll in school, the student shall present a court order appointing the person with whom they reside as either their legal guardian or legal custodian or shall present other proper documentation from a state or federal agency placing the child with the person with whom they reside.

Homeless

Homeless children shall have equal access to free public education in Nassau County schools. They will be enrolled in accordance with Administrative Rule 5.13, based on the McKinney-Vento Act.

Dependence Or Delinquency

Students who have been adjudicated to be dependent or delinquent pursuant to Chapter 39, Florida Statutes, shall be assigned by the Superintendent to the school best meeting the special needs of the student in consultation with the Department of Children and Family Services or such other agency or person having responsibility for the student's welfare.



NASSAU COUNTY SCHOOL DISTRICT STUDENT REGISTRATION FORM

Please Print. Complete Page 1 and 2.

School: Southside Elementary Date: / /

Student's Legal Name:

First Middle Last
Name Child Goes By: _____ Gender: ☐ Female ☐ Male Date of Birth: / /

Social Security Number: - -

STUDENT ADDRESS

Home Address:

Street, Route-Box, Apt. No. City State Zip

Mailing Address (If different from Home Address):

Street, Route-Box, Apt. No. City State Zip

Primary Phone: ()

SCHOOL ENROLLMENT HISTORY

Grade Level:

1) School last attended: _____ Grade: _____ Promoted: ☐ Yes ☐ No

Address: _____ City: _____ State: _____ Zip: _____

2) Has the student previously attended school in **Nassau County**? ☐ Yes ☐ No If yes, please provide prior school information:

Name of school last attended in Nassau County: _____ Grade: _____ Year: _____

3) a) Has the student previously been expelled? ☐ Yes ☐ No If Yes, please describe: _____

b) Has the student been arrested, resulting in a charge? ☐ Yes ☐ No If Yes, please describe: _____

c) Has the student received Juvenile Justice actions? ☐ Yes ☐ No If Yes, please describe: _____

d) Has the student ever been referred to mental health services? ☐ Yes ☐ No If Yes, please describe: _____

4) Has the student previously been enrolled in **Exceptional Student Education (ESE)**? ☐ Yes ☐ No If yes, please check all programs:

- ☐ Orthopedically Impaired ☐ Occupational Therapy ☐ Physical Therapy ☐ Speech Impaired ☐ Language Impaired
☐ Deaf or Hard of Hearing ☐ Visually Impaired ☐ Emotionally/Behavioral Disability ☐ Specified Learning Disability ☐ Gifted
☐ Hospital/Homebound ☐ Dual-Sensory Impaired ☐ Autism Spectrum Disorder ☐ Traumatic Brain Injured ☐ Developmentally Delayed
☐ Other Health Impaired ☐ Intellectual Disability ☐ Other: _____

5) Does the student have a 504 Plan? ☐ Yes ☐ No

6) Does the student have a Student Health Care Plan (A plan for specific health related services)? ☐ Yes ☐ No

7) **For Students entering KG only** – Did the student attend a Preschool Program BEFORE entering Kindergarten? ☐ Yes ☐ No

If Yes, please provide the following information:

Name of Preschool: _____ City/State/Zip: _____

How long did this child attend (in months)? _____ Preschool was: ☐ Public ☐ Private

STUDENT INFORMATION

Ethnicity: Hispanic or Latino ☐ Yes ☐ No

Student Race (Check all that apply):

☐ White ☐ Black/African American ☐ Asian ☐ American Indian/Alaskan Native ☐ Native Hawaiian/Pacific Islander

Location of Birth (City, State): _____ Country of Birth: _____

If the student's country of birth is **not US**, has your child ever attended a U.S. school? ☐ Yes ☐ No If Yes, what date did the student first enroll in a US school? / /

**NASSAU COUNTY SCHOOL DISTRICT
STUDENT REGISTRATION FORM**

Please Print. Complete Page 1 and 2.

Student's Legal Name: _____
First Middle Last

HOME LANGUAGE SURVEY

Is a language other than English used in the home? ☐ Yes ☐ No If Yes, list Primary Home Language: _____
Did the student have a first language other than English? ☐ Yes ☐ No If Yes, list Native Student Language: _____
Does the student most frequently speak a language other than English? ☐ Yes ☐ No If Yes, list Language spoken: _____
Has the student been in a program for English for Speakers of Other Languages (ESOL)? ☐ Yes ☐ No

PARENT / GUARDIAN INFORMATION

Who has custody? ☐ Both Parents ☐ Mother ☐ Father ☐ Grandparent ☐ Aunt/Uncle ☐ Legal Guardian ☐ Other: _____
(Current legal documentation must be on file in student's cumulative record)

Student lives with? ☐ Both Parents ☐ Mother ☐ Father ☐ Grandparent ☐ Aunt/Uncle ☐ Legal Guardian ☐ Parent & Step-parent
☐ Other: _____ Relationship to Student: _____

1) _____ () _____
First Last Relationship Home Phone Number

_____ @ _____ () _____
Email Address Cell Phone Number

2) _____ () _____
First Last Relationship Home Phone Number

_____ @ _____ () _____
Email Address Cell Phone Number

Emergency Contacts – Please provide name(s) of person(s), other than Parent or Guardian, allowed to pick up student.

1) _____ () _____ () _____
First Last Relationship Cell Phone Number Other Phone Number

2) _____ () _____ () _____
First Last Relationship Cell Phone Number Other Phone Number

3) _____ () _____ () _____
First Last Relationship Cell Phone Number Other Phone Number

FLORIDA STATUTE 837.06 PROVIDES THAT WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE.

Parent/Guardian's Signature: _____ Date: ____/____/____

FOR SCHOOL USE ONLY:

ENTRY CODE: _____

ENTRY DATE: ____/____/____

Birth Certificate Documentation:

____ Transcript of Birth Record [1]
____ Baptismal Certificate & Sworn Affidavit [3]
____ Insurance Policy in force 2 years [4]
____ Bible Record & Sworn Affidavit [5]
____ Passport – no copies allowed [6]
____ School Record, at least 4 years prior [7]
____ Health Exam & Sworn Affidavit [8]
____ No Verification [9]
____ Out-of-State Transfer Records [T]

Social Security Number* Documentation:

____ Original SS Card
____ Copy of SS Card

**Social Security Number is not required for enrollment. However, it is required that we request the SSN upon student enrollment.*

Physical Exam:

____ Medical record attached
____ In-State Transfer

Immunization:

____ Medical record attached
____ In-State Transfer

Processed By: _____ Date: ____/____/____

Entered in Student Database By: _____ Date: ____/____/____

Student Housing Information 2025-2026

ONLY COMPLETE this application if you meet the requirements of the McKinney-Vento/ Homeless Act. The answers to the questions below will assist in determining if your student may qualify for services provided to those living in a temporary situation due to loss of housing. **Please print clearly and complete the entire form. Incomplete forms will result in a delay of services.**

List names of all children living in the household, even if not enrolled in school.

_____ Last Name	_____ First Name	_____ MI	_____ Birth date	_____ Gender	_____ Race	_____ Grade	_____ School Enrolling In
_____ Last Name	_____ First Name	_____ MI	_____ Birth date	_____ Gender	_____ Race	_____ Grade	_____ School Enrolling In
_____ Last Name	_____ First Name	_____ MI	_____ Birth date	_____ Gender	_____ Race	_____ Grade	_____ School Enrolling In
_____ Last Name	_____ First Name	_____ MI	_____ Birth date	_____ Gender	_____ Race	_____ Grade	_____ School Enrolling In

Circle relationship to above student(s): Parent(s), Legal Guardian(s) by Court Order, or Caregiver(s) of displaced student(s) above. (See definition of "Caregiver" on #5 below. Temporary Guardianship or Notarized parent note are examples of situations that fall under "Caregiver/Host.")

Print Name of Parent(s), Legal Guardian(s) by Court Order, Caregiver(s), or Unaccompanied Youth:

_____ Relationship	
Address or Location: _____	
_____ Best phone #:	_____ 2 nd best #:
_____ City	_____ Zip
Email: _____	
Length of time at this address: _____ Former City/County/State: _____	
Signature of Parent/Guardian/Caregiver/or Unaccompanied Youth: _____	
_____ Signature	_____ Date

Title IX	The student(s) listed above are: (Please check 'yes' or 'no' in each column.)	YES	NO
1. Living in an emergency or transitional shelter or FEMA trailer.	(A)		
2. Sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason ("doubled-up"). Name of host(s):	(B)		
3. Living in a car, park, temporary trailer park or campground, public space, abandoned building, substandard housing (multiple major repair issues needed), bus or train station, or any other public or private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings.	(D)		
4. Living in a hotel or motel due to lack of adequate alternative accommodations.	(E)		
5. If a child/youth lives with an adult other than his/her parent/guardian, he/she is considered "unaccompanied." Mark "yes" if a student listed above is unaccompanied.			
(Caregiver's Authorization Affidavit must be completed for students under 18) Form obtained? Yes No			
Title I Part C		YES	NO
1. Have you moved to a new town to find work within the last 3 years?			
2. Did you find work in agriculture or fishing (e.g., field work, canneries, lumber industry, dairy work)?			
3. Is work in agriculture or fishing a major source of income for your family?			

***If you marked "Yes" on a Title IX question above, please indicate the cause by placing an "X" in the appropriate box.**

- | | | |
|--|---|--|
| <input type="checkbox"/> Mortgage Foreclosure (M) | <input type="checkbox"/> Natural Disaster-Hurricane (H) | <input type="checkbox"/> Natural Disaster-Tropical Storm (S) |
| <input type="checkbox"/> Natural Disaster-Flooding (F) | <input type="checkbox"/> Natural Disaster-Wildfire (W) | <input type="checkbox"/> Man-made Disaster (Major) (D) |
| <input type="checkbox"/> Natural Disaster-Tornado (T) | <input type="checkbox"/> Major Pandemic (P) | <input type="checkbox"/> For Convenience or Family Unit with Host (Ineligible) |
| <input type="checkbox"/> Other – i.e., lack of affordable housing, long-term poverty, unemployment or underemployment, mental illness, domestic violence, forced eviction, house fire or flood, etc. (N) | | |

School staff: For students with positive responses to questions 1-5 under Title IX & not "for convenience", discuss & complete the Interview Response Sheet and Dispute Resolution Process. Complete the Caregiver Form, if applicable. Email all forms to resseyemo1@nassau.k12.fl.us.



Nassau County School District

Immunization Requirements

By the time your child starts school he/she should already have several required immunizations. However, new and transferring students, Kindergarten students, and those entering seventh grade will need to provide proof of immunization prior to enrollment in Nassau County Schools on the DH 680 form.

PROOF OF THE FOLLOWING IS REQUIRED FOR STUDENTS TO REGISTER

Grade Level	Shots Required	Grade Level	Shots Required
Pre K	4 DTaP 3 Polio* 1 MMR 1-4 HIB (age appropriate) 3 Hep B 1 Varicella (or certification of disease)	1 – 6	4-5 DTaP** 3-4 Polio* 2 MMR 3 Hep B 2 Varicella (or certification of disease)
Kindergarten	4-5 DTaP** 3-5 Polio (last dose must be after age 4) 2 MMR 3 Hep B 2 Varicella (or certification of disease)	7 – 12	4-5 DTaP** 1 Tdap 3-4 Polio* 2 MMR 3 Hep B 2 Varicella (or certification of disease)

Notes of Exception:

- A child who commenced vaccination after 7 years of age would have only 3 Tdap/TD doses.
 - DTP is acceptable for DTaP.
 - *3 Polio doses are accepted only if the last dose is given after 4 years of age and 6 months after the 2nd dose.
 - ** 4 DTaP doses are accepted only if the last dose is given after 4 years of age and 6 months after the 3rd dose.
-
- Parents should get their child's shots with their child's doctor if they have private insurance or Medicaid.
 - For those without insurance shots are provided through the Florida Department of Health, Nassau County at no charge for children in school through a Federal Vaccine for Children Program.
 - Parents must bring their child's up-to-date shot record to help identify needed shots and prevent unnecessary shots for their child.
 - The Health Department will also provide parents with a required Proof of Immunization Form 680 if needed. We must have an up-to-date shot record to produce a Certified 680 in FL Shots for the school to download.
 - The Health Department DOES NOT provide School Entry or Sports Physicals.
 - For more information about our clinics, call our Yulee Clinic at 904-875-6110 #1.

For more information on vaccines and school requirements visit www.immunizeflorida.org

Nassau County School District

Medical & Allergy Notification

Please complete and return even if there are no health concerns. Indicate below the medical conditions which are severe enough to affect the student's school program or performance.

Student's Name _____ Date of Birth: _____ Grade _____

Medical (Documented)	Food Allergy	Insect Allergy
<input type="checkbox"/> ADHD <input type="checkbox"/> Diabetes <input type="checkbox"/> Asthma <input type="checkbox"/> Seizures <input type="checkbox"/> Migraines <input type="checkbox"/> Nosebleeds <input type="checkbox"/> Hemophilia <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Dairy (Milk/Cheese) <input type="checkbox"/> Eggs <input type="checkbox"/> Fish/Shellfish <input type="checkbox"/> Peanuts <input type="checkbox"/> Tree Nuts <input type="checkbox"/> Soy <input type="checkbox"/> Wheat <input type="checkbox"/> Food Dye <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Bees <input type="checkbox"/> Fire Ants <input type="checkbox"/> Hornets <input type="checkbox"/> Wasps <input type="checkbox"/> Yellow Jackets <input type="checkbox"/> Gnats <input type="checkbox"/> Mosquitoes <input type="checkbox"/> Other: _____ _____

☐ No Known Allergies

☐ Medication Allergy: _____

☐ Medication (List any current medication taken): _____

There are two types of allergy reactions. Please check one:

☐ Local (intense swelling, itching, and a raised bump)

☐ Systemic (hives, fever, difficulty breathing, and/or severe drop in blood pressure)

Keep in mind that all medications must be brought to the school by the parent/guardian along with a prescription and physician documentation, action plan, or a management plan.

Physician's Name: _____ Phone #: _____

Parent/Guardian's Name (Printed): _____

Parent/Guardian's Signature: _____ Date: _____

Nassau County School District

Medical Authorization Form

_____ (Student's Name) has my permission to participate in extra-curricular activities sponsored or authorized by Southside Elementary School and/or the School Board of Nassau County.

In my absence or in the absence of an authorized parent or guardian of the Participant, I hereby authorize The School Board of Nassau County, Florida, its agents, servants, employees or designees to administer first aid and to obtain and consent to on behalf of the Participant and Participant's parents or guardians, any emergency first aid or medical care by any physician, hospital, or attendant which is deemed necessary or expedient by said physician, hospital or attendant as a result of involvement in the Activity. I agree to abide and be bound by such decisions and consents as if made by me and do assume full financial responsibility for and agree to pay all expenses of such care. I understand that it is my responsibility to secure adequate insurance for such first aid and medical care. The name of our health insurance company is _____ Policy Number _____.

I further authorize any physician, hospital or medical attendant to receive full and complete medical reports or information deemed necessary by them with respect to the treatment of my child. Execution of this document shall operate as an authorization for such person(s) to receive any medical information which they require.

The medical authorization contained within this form shall be valid and usable by The School Board of Nassau County during such periods of time as my child is enrolled in a school within said District and this authorization shall remain valid unless revoked by me in writing.

Parent or Guardian: _____ Date: _____

STATE OF _____ COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ by
(Date)

_____, who is personally known to me or who has
(Name of Person Acknowledged)

produced _____ as identification and who did (did not) take an oath.
(Type of Identification)

(Title or Rank)

(Signature of Notary taking Acknowledgment)

(Serial Number, if any)

(Name of Notary, typed, printed or stamped)

MIDDLE AND HIGH SCHOOL STUDENTS:

I hereby certify that I have read, understand and agree to abide by all of the rules of conduct and regulations of The School Board of Nassau County and if appropriate, the Florida High School Activities and Athletic Association. Any violation of these rules and regulations will subject me to disciplinary action.

Student's Signature: _____ Date: _____

STUDENT RECORDS

Student information is protected by federal and state laws as well as policies of the Nassau County School Board. These regulations for determining who can or cannot obtain student information were enacted to protect the privacy rights of students and parents.

What rights do students and parents have?

According to Florida Statute 1002.22, students and their parents have the right to:

- Access their education records maintained by a school, including the right to inspect and review those records.
- Waive their right to access to their education records in certain circumstances.
- Challenge the information contained in the education records in order to ensure the records are not inaccurate, misleading, or otherwise a violation of privacy or other rights.
- Privacy with respect to such records and reports.
- Annual notice of their rights with respect to education records.

What information is included in a student's record?

Florida Statute 1003.25 requires all principals to maintain permanent cumulative records for all students enrolled in a public school. The state law also determines what should be in the record and its format. A student's education records include personally identifiable data (social security number, address, birth date, sex, and race), registration forms and information, birth certificate, academic records, standardized test scores, legal documents (custody, guardianship, name change, etc.), ESE documents, ELL documents, 504 documents, Rtl documents, attendance records, and health data. The record also may contain family background information, extracurricular activities, verified reports of serious or recurrent behavior patterns, honors and awards, and a list of schools attended.

How can parents review their child's records?

Parents can request to review student records. Schools must comply with that request within a 45-day period. If a parent feels that the record contains information that is inaccurate, misleading, or in violation of the student's rights to privacy, the parent contacts the principal of the responsible school. Requests for a correction, deletion, or expunging of the record must be made to the appropriate principal in writing and must clearly identify the part of the record they want changed and why.

Who, other than parents, can access student records?

Parents have the legal right to any and all information in a student's permanent cumulative record. If parents are divorced or separated, both parents have the right to student records unless a judicial order to the contrary is on file in the student's permanent cumulative record. Eligible students take on all the rights of a parent. An eligible student is one who is 18-years old or who is attending a postsecondary educational institution. Parents of eligible students still have access to the student's records as long as the student continues to be listed as a dependent on the parent's income tax return. A stepparent may have access to a child's record only with the written consent of the natural parent, legal guardian, or eligible student. School staff who need the information to work effectively with the student may also have access to it.

The law generally prohibits people from being able to inspect or review a student's education record without prior permission of the parent. Written consent is not required for disclosure of personally identifiable information for the following people: Principal and Assistant Principal, School Counselor(s), homeroom teacher, teacher of one or more subjects to the student, Dean of Students, NCPHU nurse or aide (access only to health records, stored separately), Occupational Specialist, Educational Support Employee aide assigned to guidance, student's academic advisor, and Administrative Data Entry Operator. Those persons who must sign and date an individual student access record are the following: school social worker, school psychologist, coach (if not the student's teacher), media specialist, activity sponsor (if not the student's teacher), designated school representatives, ESE staffing specialist, district administrative staff, parent/guardian of the student, law enforcement official, CFS official, fiscal or compliance auditor, other official who, in conduct of mandated duties may have access, and a person authorized by parent/guardian or adult student.

Please note that directory information can be made available for broad categories of students.

Nassau County Schools Transportation Information



Transportation help is just a click away through our Bus Stop Request Portal

Use the portal to:

- Register to ride the bus for the first time
- Request a bus stop
- Have a current bus stop moved or reviewed

To access the Bus Stop Request Portal, follow these steps:

- Go to www.nassau.k12.fl.us
- Click on the School Bus icon on the page
- Click on Bus Stop Requests & Guidelines
- Click on the Bus Stop Request Portal link

- A student cannot be routed or assigned to a bus until fully registered at the school level and his or her information appears in the FOCUS student information portal.
- Transportation assignments are based on the student's address of record used for school registration.
- Allow up to 10 days to process requests.
- Students that have do not have an existing stop are given priority.

FAC 6A-3.0121: Parents are responsible to ensure the safe travel of their students during the portions of each trip to and from school and home when the students are not under the custody and control of the school district, including during each trip to and from home and the assigned bus stop when the school district provides bus transportation.

Here Comes the Bus: HCTB is an easy-to-use app that enables you to see the location of your child's school bus on a smartphone, tablet, or personal computer. You will need your child's student ID# and our district's school code, **76491**, to sign up. You can download the app from the Google Play or Apple Store or visit www.herecomesthebus.com. More information can be found on our website.

FAQs:

- **I've never ridden the bus before and need to set up a bus stop. How do I register to ride?**
 - Use the online portal to request a stop.
- **My HCTB app isn't showing my students stop or information?**
 - This usually happens when you are not registered for a bus. Use the portal to make a request and put in the comments that your HCTB app isn't working.
- **How can I look up my child's bus stop information?**
 - Bus numbers, stop locations, and times can be found in your child's FOCUS portal on the transportation tab.
 - If there is no transportation information on FOCUS, then we don't have you registered to a bus. Use the Portal to make a stop request and we will get you registered.
- **I don't have a computer, or I am unable to access the online Portal—how do I register?**
 - Call us at the number below and we will help get your request submitted.
- **I submitted my request, when will I get a response?**
 - If there is already an existing bus stop in place or we just need to activate you as a rider, you will usually get a response the next day.
 - If a new stop needs to be created and routed to a bus, it may take 5-10 days to get a response depending on the complexity.

Contact Information:

- You can call us at **(904) 225-0127**, but using the Portal or email is preferred
- Westside Route Coordinator (Callahan, Hilliard, Bryceville)
 - Kathy Gammons: Gammonskal1@nassau.k12.fl.us
- Eastside Route Coordinator (Fernandina, Yulee)
 - Evelyn McKie: Mckieev@nassau.k12.fl.us
- Special Routes Coordinator
 - Megan Johnson: Johnsonme4@nassau.k12.fl.us

Nassau County School District

PARENT TOOLS

(Student Information, School Lunches, & Transportation)

FOCUS - Schedule, Grades, Attendance, Assessments



- To establish a Parent Portal account, you must be the parent/guardian and have a valid email address, the student's ID #, and the student's birthday.
- Go to <https://nassau.focusschoolsoftware.com>
- Under the Parent & Guardian Account Management, click the box titled *Click here to register for a new account* (If you already have an account, click the box to add another student to your existing account)
- Enter the required information
- Once you complete the process, you must visit your child's school and present a government-issued photo ID to verify your identity
- You can download the app on your phone: NCSD Focus

LINQ Connect - School Lunch



- Visit <https://linqconnect.com> to set up your parent or student account.
- View menus and meal prices, make online payments, add restrictions, apply for free/reduced lunch, or set up low balance alerts.
- You can download the app on your phone: LINQ Connect
- For more information about our program, please check out our website <https://www.nassau.k12.fl.us/foodservice>

Transportation - Bus Routes



- Go to <https://www.nassau.k12.fl.us> and click on the Transportation button.
- Bus routes and Here Comes the Bus (enables you to see the location of your child's school bus)
- You can download the app on your phone: Here Comes the Bus