

## New Student Registration

Students who were not enrolled in any Clay County Schools last year must register at their home school before registering for virtual school. Parents or guardians who wish to enroll new students must accompany their child to the school and have in their possession the following:

1. Valid birth certificate
2. Immunization record
3. Proof of guardianship (only if there is a question of joint custody or if custody is being transferred)
4. It would be helpful but not necessary, if the student could bring a copy of their last report card.

This registration is only for students who were not enrolled in Clay County last year.

REGISTRATION STATEMENT REQUIRED BY  
WEST VIRGINIA CODE §18-5-15f

(PUPIL NOT CURRENTLY UNDER SUSPENSION OR EXPULSION)

I, \_\_\_\_\_, do hereby swear/affirm that  
(pupil's parent, guardian, or custodian)

\_\_\_\_\_ is not, at this time, under suspension or  
(name of pupil)

expulsion from attendance at a private or public school in West Virginia or any other state.

\_\_\_\_\_  
Pupil's Parent, Guardian, or Custodian

STATE OF WEST VIRGINIA,  
COUNTY OF CLAY, to-wit:

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

(SEAL)



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# CLAY COUNTY SCHOOLS

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P.O. BOX 120 • 285 CHURCH STREET • CLAY, WEST VIRGINIA 25043  
Telephone (304) 587-4266 • Fax (304) 587-4181 • [www.claycountyschools.org](http://www.claycountyschools.org)

## BOARD OF EDUCATION

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TO SPECIAL EDUCATION DIRECTOR:

I state that my child, \_\_\_\_\_,

whose date of birth is \_\_\_\_\_, has an IEP in place at \_\_\_\_\_

School and give the Clay County Schools Office of Special Education permission to place my child in the placement deemed most appropriate until a transition meeting can be scheduled. I believe the exceptionality to

be one or more of the following:

- Learning Disability
- Mentally Impaired
- Behavior Disorder
- Autism
- Speech Impairment
- Vision Impairment
- Gifted
- No Services Requested

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Parent/Guardian's Signature

Date

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Telephone Number



# CLAY COUNTY SCHOOLS

Clay County High School  
1 Panther Drive  
Clay, WV 25043

Clay County Middle School  
419 Church Street  
Clay, WV 25043

Big Otter Elementary  
59 Ossia-O'Brien Rd.  
Duck, WV 25063

Clay Elementary  
151 Church St.  
Clay, WV 25043

Lizemore Elementary  
100 Lizemores Lions Rd.  
Lizemores, WV 25125

H.E. White Elementary  
501 Bomont Road  
Bomont, WV 25030

To: \_\_\_\_\_  
(Name of Previous School)

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Student: \_\_\_\_\_  
First Name Middle Name Last Name

Current Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I hereby authorize you to release to the party or parties named below, any and all information contained in the school records of the above-named student.

I understand that this form grants you permission to release confidential information in the records of the above-named student.

Name of Parent/Guardian: \_\_\_\_\_

\*Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Please release the following information to the appropriate address above:

- Official Transcript
- Grades to date of withdrawal
- An explanation of your grading system
- Attendance Record
- Discipline Records, if applicable
- Most recent eligibility report, most recent psychological evaluation, and most recent IEP, if applicable
- Test Scores
- Birth Certificate
- Social Security Card
- Immunization Record
- WV Schools Only*: Drop to Unassigned Pool

Previously Enrolled in any Clay County Schools? Yes No  
(Circle One)

\*Family Educational Rights and Privacy Act, Final Rule on Educational Records, Federal Register, June 17, 1976, Volume 41, No. 118, page 24673, reads in part:

999.31 Prior consent for disclosure not required.

- (a) An education agency or institution may disclose personally identifiable information from the education records of a student without the written consent of the parent of the student or the eligible student if the disclosure is to other school officials, including teachers within the education institution who have legitimate educational interest; to officials of another school or school system in which the student seeks or intends to enroll, subject to the requirements set forth in 99-34.

## HOME LANGUAGE SURVEY

Student Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Sex:  Male  Female

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

Federal and state laws require the following information be collected about the primary and home language of every student upon enrollment in the school district. Please complete a survey for each child you are enrolling in the school district.

1. What language did your child learn when he/she first began to talk? \_\_\_\_\_
2. What language does your child most frequently speak at home? \_\_\_\_\_
3. What language is spoken by you and your family most of the time at home? \_\_\_\_\_

If a language other than English is indicated for any of the above questions, the school district will test your child's English language proficiency to determine eligibility for initial and continuing placement in an English language development program. You will be notified about the results of this testing.

4. If available, in what language would you prefer to receive information from the school? \_\_\_\_\_

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Date