

CLEMENTON ELEMENTARY SCHOOL
4 AUDUBON AVENUE
CLEMENTON, NJ 08021
PHONE: (856)783-2300 / FAX: (856) 783-8929
www.clementon.k12.nj.us

For registration information please contact Vanessa Hernandez at ext. 1021.

Today's Date: _____		Phone #: _____	
Child's Name: _____	D.O.B. _____	Entering Grade: _____	
Child's Name: _____	D.O.B. _____	Entering Grade: _____	
Child's Name: _____	D.O.B. _____	Entering Grade: _____	
Parent/Guardian Name: _____		Current Address: _____	
For transfer student(s), school last attended: _____			
School Address: _____		Phone #: _____	
Appointment date: _____		/ CALL Time: _____	Register Complete: YES / NO

Registration Requirements

____ Proof of Residency- please provide the document(s) that apply to your living situation:

- *Own Home:* Agreement of Sale/ Deed or Tax Bill
- *Rent:* Current Lease with student(s) name on lease or signed lease extension agreement/renewal
- *Landlord Affidavit (provided by registrar and located on our website):* required for a tenant residing in a dwelling unit under an unwritten lease

____ Two current (2) documents *that can include:*

- utility bill and/or
- bank statement and/or
- paycheck stub and/or
- other form of ID showing name and current address

____ Parent/Guardian license with current address or photo ID

____ Child's birth certificate – must present original for first time enrolled students

____ Immunization records

____ Physical Examination (for transfer students, a copy of physical can be accepted from previous school)

____ Individual Educational Program (IEP) or Early Intervention Service Plans (IFSP) - if applicable

____ Custody Papers -please provide if applicable

For **transfer in** students, the following information is needed from the previous school district:

_____ Transfer/Withdrawal Card _____ Latest report card and state test scores _____ Immunization Record