Registration Process Checklist

Oasis Elementary North: 239-283-4511
Oasis Elementary South: 239-542-1577
Oasis Middle School: 239-945-1999
Oasis High School: 239-541-1167
Jacquelin Collins, Superintendent

Registration Process:

Applicants are placed on the waitlist based on the date the application is received. Once a seat is available, the applicant is notified and given **1 business day** to respond. If a response is not received the applicant is removed from the waitlist. If a seat is offered and declined, a new application must be completed to be placed back on the waiting list. Students' positions on the waitlist may change at any time due to Enrollment Preference (see below).

Registration Preference

Military, and siblings of students currently enrolled in our school system are given preference when enrolling. Please complete a Sibling Preference Seat Assignment Form when submitting your paperwork. This form will NOT guarantee a seat when applying to our school.

Application Documents

To finalize your child's application for our enrollment process, the following documents must be submitted:

- ☐ **Student Registration form** completed and accurate (please be sure to answer all questions and fill in all areas). If your address and/or phone number change it is your responsibility to contact the school with updates. Inaccurate contact information will result in the loss of your seat, should one become available.
- ☐ **Parent Involvement Acknowledgement** should be read, signed, and submitted.
- ☐ **Parent Commitment Agreement** should be read, initialed, signed and submitted.
- ☐ **Proof of Residency** must be submitted. This can be any one of the following: electric, water, cable bill, signed lease agreement, title statement or a homestead exemption. **If you are residing with a relative or friend, a letter signed by that individual, must be submitted stating that you are residing in their home. Your name and your child's name must be included, and you must have a copy, in their name, of one of the proofs of residence documents listed above.
- ☐ **Driver's license:** Parent(s)/ Guardian(s) must be photocopied for your student's file to ensure that you are the parent/guardian legally able to enroll your student in school.
- ☐ **Academic Transcript**
- ☐ **Current Class Schedule**
- ☐ **State Test Scores**: ELA & Math
- ☐ **Copy of your child's IEP** (Individual Education Plan) must also be provided if your child is in an Exceptional Student Education (ESE) Program (this includes Speech, OT, etc.)
- ☐ **Proof of Custody** must be provided if the student does not live with both natural parents.
- ☐ **Birth Certificate** must be submitted.
- ☐ **Form 680 Florida Certificate of Immunization** must be submitted and current.
- ☐ **School Entry Health Exam** (within 12 months) must be submitted and current.
- ☐ **Your Child's Social Security Card** Social Security Cards are used for identification and are not mandatory.

Submission of these documents does not guarantee your student a seat in our system. It allows your child to participate in our enrollment process. Families will be notified by phone, and by email when a seat becomes available.

Please ensure your contact information is always up to date with us. Failure to do so, may result in loss of seat.

Thank you for your interest in our Oasis Charter School System!

OASIS CHARTER SCHOOLS
CITY OF CAPE CORAL CHARTER SCHOOL AUTHORITY
STUDENT REGISTRATION

Application for: (if submitting a Kindergarten Enrollment Application *only one elementary school* may be selected)

❑ Oasis Elementary North ❑ Oasis Elementary South

School Year: 20 ____ - 20 ____ **Grade:** ❑ KG ❑ 1st ❑ 2nd ❑ 3rd ❑ 4th ❑ 5th

❑ Oasis Middle ❑ 6th ❑ 7th ❑ 8th ❑ Oasis High ❑ 9th ❑ 10th ❑ 11th ❑ 12th

STUDENT'S NAME AS IT APPEARS ON BIRTH CERTIFICATE:

Last **First** **Middle**

❑ **First time in Lee County Public School** ❑ **First Time in Florida Public School** ❑ **First Time in school in the United States**

STUDENT'S SOCIAL SECURITY #	SEX ❑ MALE ❑ FEMALE	STUDENT'S ETHNICITY ❑ Hispanic or Latino ❑ Not Hispanic or Latino	WHAT IS THE STUDENT'S RACE? (Mark one or more races to indicate what you consider the student to be) ❑ White ❑ Indian (American) or Alaskan Native ❑ Black or African American ❑ Pacific Islander or Hawaiian ❑ Asian

BIRTHDATE (M) ___ /(D) ___ /(Y) ___ **BIRTHPLACE:** CITY STATE COUNTY

Expelled from Previous School ❑ YES ❑ NO
Date_____ School_____
Arrested Resulting in Charge ❑ YES ❑ NO
Juvenile Justice Action ❑ YES ❑ NO

Previous District Referral to Mental Health Services ❑ YES ❑ NO
Life Threatening Allergies ❑ YES ❑ NO
If YES, Explain: _____
Medical Condition with Special Care ❑ YES ❑ NO
If YES, Explain:

ADDRESS WHERE STUDENT LIVES	**MAILING ADDRESS (IF DIFFERENT)**
STREET	STREET
CITY/STATE	CITY/STATE
ZIP CODE	ZIP CODE

MAIN CONTACT #: **EMERGENCY PHONE #:**

With whom does the student reside? ❑ Both Natural Parents ❑ Mother ❑ Father ❑ Legal Guardian ❑ Other _____

INFORMATION FOR: ❑ **Mother** ❑ **Guardian** ❑ **Other** _____
Name: _____
Address: _____
Main Contact #: _____ Home #: _____
Wk. Phone: _____ Occupation: _____
E-mail Address: _____

INFORMATION FOR: ❑ **Father** ❑ **Guardian** ❑ **Other** _____
Name: _____
Address: _____
Main Contact #: _____ Home #: _____
Wk. Phone: _____ Occupation: _____
E-mail Address: _____

Is a language other than English used in the home? ❑ YES ❑ NO What language? _____	Does the student have a first language other than English? ❑ YES ❑ NO What language? _____	Does the student most frequently speak a language other than English? ❑ YES ❑ NO What language? _____	Has your child attended a United States school for less than 3 full years? ❑ YES ❑ NO Date entered in U.S. school. (M) _____/(D) _____/(Y) ____

Preferred language to be contacted: ❑ English ❑ Spanish ❑ Creole ❑ Other _____

Is either parent a current or former member of the U. S. military? YES NO

NAME OF LAST SCHOOL ATTENDED:			❑ PUBLIC ❑ PRIVATE ❑ ALTERNATIVE SCHOOL ❑ HOME SCHOOL ❑ CHARTER SCHOOL	Have you moved recently due to working in agriculture or the fishing industry? ❑ YES ❑ NO
CITY	STATE	COUNTY		
ZIP CODE	COUNTRY			

_____ _____ _____
SIGNATURE OF PARENT **PLEASE PRINT YOUR NAME** **DATE**

THIS BOX FOR OFFICE USE ONLY

STUDENT #_____ SCHOOL NAME _____
ENROLLMENT CODE _____ ENROLLMENT DATE ____/____/____ ALTERNATIVE SCHOOL _____
❑ NEW ENROLLMENT ❑ TRANSFER FROM SCHOOL _____ ❑ RE-ENROLLMENT TO LEE COUNTY
PRIOR SCHOOL DISTRICT _____ PRIOR STATE _____ PRIOR COUNTRY _____ Yrs Intrp ____

Acknowledgement of Parent Volunteer Policy

Documentation Required for Processing Background Checks for School Volunteers:

- You must fill out a Confidential Application form **each year** for each parent/guardian. This form allows us to ensure that your information is current and up to date and provides us with permission to run your background check.
- This information will be shared between Cape Coral Charter schools at your request.

Receiving Clearance:

- While your paperwork is being processed, you may still help in certain areas on campus. You will need to bring your driver's license with you each time you arrive on campus.
- You will receive a Clearance Notification once your background check is complete. This notification should be completed and returned. It provides us with the necessary information to help you complete your volunteer hours.

Requirements for Volunteering:

- Parents/Guardians are required to complete a minimum of 12 volunteer hours. **This requirement is per family, not per child.**
- It is your responsibility to accurately log your hours by signing in and out at the front desk or completing Off-Site Hours forms if necessary.
- When volunteering, you must sign in and out each time you are on campus. If you do not sign in/out, you will not receive credit for those hours.

****

I agree and acknowledge that our family will spend a minimum of 12 hours involved with the Cape Coral Charter School System for each school year that my child attends.

Parent/Guardian Name

_____

Student Name(s)

_____

Students currently enrolled at (please check all that apply): ___Oasis Middle School
___ Oasis Elementary North ___Oasis Elementary South ___Oasis High School

Parent/Guardian Signature:_____

OASIS CHARTER SCHOOLS
CITY OF CAPE CORAL

Oasis Elementary North: 239-283-4511
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Jacquelin Collins, Superintendent

Active Military Preference/ Sibling Preference/ Veteran Military Preference Form

STUDENT INFORMATION:

Name _____ **Grade:**_____ **School Yr. 20**____ **- 20**____

Phone Number _____ **Date of Birth:**_____

SIBLING PREFERENCE APPLIES ONLY WHEN SIBLINGS ARE CURRENTLY ENROLLED IN THE OASIS CHARTER SCHOOL SYSTEM

❒**Sibling preference only applies to siblings who are biological or adopted in the same household.**

Name of sibling: _____ **Grade level:**_____

Name of sibling: _____ **Grade level:**_____

Siblings' school(s): ❒ Oasis Elementary North ❒ Oasis Elementary South

❒ Oasis Middle School ❒ Oasis High School

❒**Active-Duty Military Parent/ Dependent child (If applicable)**

❒**Veteran-Duty Military Parent/ Dependent child (If applicable)**

Applicants legal parent(s) must provide one of the following when applying for Military Preference: Military official orders, Military I.D. or Veteran designation card

To place your child's name on the waiting list, the following documents **must** be submitted at the time of submission:

1. **Student Registration form**, this can be found on the Oasis Middle School Website.
2. **Birth Certificate:** Must be submitted
3. **Florida Certificate of Immunization** (Blue) DH680/Must be submitted and current.
4. **Health Examination** (Gold) DH3040/Must be submitted/ upon enrollment current within 12 months.
5. **Proof of Residency** must be submitted to verify that you legally reside in SW Florida. *This can be an electric or water bill, signed lease agreement or a homestead exemption.*
6. **Proof of Custody** must be provided if the student does not live with both natural parents.
7. **Copies of Both Parent(s) I.D.'s** / Guardian(s) I.D.'s
8. **Academic Transcript/Current Class Schedule/ State Test Scores: ELA & Math /**Must submit
9. **IEP/Gifted Documents:** If applicable. This includes speech, O/T, etc.

Please be aware that submission of this form does not guarantee your student a seat in the City of Cape Coral Oasis Charter School System, it is only used for determining the order of preference when assigning available seats.

ALL LISTED DOCUMENTS -1-8 MUST BE SUBMITTED TO ENSURE YOUR CHILD IS ELIGIBLE FOR ASSIGNMENT.

OASIS
ELEMENTARY NORTH
CITY OF CAPE CORAL

PARENT COMMITMENT AGREEMENT

By choosing Oasis Elementary North, you are choosing for your child to attend a RIGOROUS ACADEMIC PROGRAM within a STRUCTURED and DISCIPLINED ENVIRONMENT. Please carefully read the following commitment statements and initial each one that is in agreement with your philosophy for your child's education.

If you hesitate to sign any of the following items, please carefully reconsider whether Oasis Elementary North is the right choice for your student. Your child's opportunity for success is greatest if your educational beliefs are aligned with those of our school.

_____ 1. I understand that the curriculum is intended to be "hard". I will help my child welcome and revel in the challenge, beginning in Kindergarten.

_____ 2. I understand the school's grading scale, and that "average" work earns a "C", while "A's" are reserved for excellence.

_____ 3. It is my responsibility to hold my child accountable for his or her actions, and I will not tolerate any behavior that distracts from the learning of others.

_____ 4. I understand the specifics of the Oasis Elementary North uniform policy and will dress my child accordingly.

_____ 5. I will provide time and a quiet, distraction-free environment in my home for studying. I will see that my child's assignments are completed on a daily basis, using the student planner for current information.

_____ 6. I understand that it is my responsibility to consider the retention of my child if he or she cannot perform on grade level.

_____ 7. I understand that the Oasis Elementary North program succeeds only through excellent attendance and that frequent absences are unacceptable. Therefore, I agree, whenever possible, to schedule family vacations and appointments outside of school hours, and to remove my child from school only for health reasons.

_____ 8. I will read newsletters from teachers and the office, check the school calendar online, and be responsible for knowing the information contained in them.

_____ 9. I will expect exemplary behavior from my child on the bus and will support the discipline policies needed to keep our children safe.

_____ 10. I will readily be involved in my child's education as a member of our PTO, school committees, or in other roles that utilize my strengths.

_____ 11. I understand that, by choosing Oasis Elementary North, I have made a commitment to assist and support the school in order to provide the best possible education for all children. If the time comes that I am unable to honor that commitment and offer that support, I will carefully reconsider whether Oasis Elementary North is the right program for my child.

Please direct any questions to our principal at (239) 283-4511.

Student's Name: _____

Parent Signature: _____ **Date** _____

The School District of Lee County
2855 Colonial Boulevard, Fort Myers, FL 33966

HOME LANGUAGE SURVEY

Instructions /Instrucciones /Enstriksyon /Instrucoes:

Please answer Question 1-3. Write the language, sign, and date before submitting.
Favor de contestar las preguntas 1-3. Escriba el idioma, firme e escriba la fecha antes de someter.
Tanpri reponn Kesyon 1-3. Tcheke kaz ki apwopriye pou lang, siy, dat ak telechaje nan FOCUS.
Responda as perguntas 1-3. Marque el idioma, assine, adicione a data e anexe ao FOCUS.

STUDENT NAME/Estudiante/Élev/Aluno: _____
ID#: _____

1. What language is primarily used in the home? _____
   ¿Qué idioma se utiliza principalmente en el hogar? _____
   Ki lang yo itilize prensipalman nan kay la? _____
   Qual idioma e mais usado em casa? _____

2. What is the student's first (native) language? _____
   ¿Cuál es el primer idioma (nativo) del estudiante? _____
   Ki premye lang (matènèl) elèv la? _____
   Qual e o idioma nativo do aluno? _____

3. What language does the student most frequently speak? _____
   ¿Qué idioma habla el estudiante con más frecuencia? _____
   Ki lang elèv la pale pi souvan? _____
   Qual o idioma mais falado pelo aluno? _____

Date/Fecha/Dat/Data: _____

Submitted by/Presentado por/Soumèt pa/Submetido por: _____

(Signature)