

**DEPARTMENT OF DEFENSE EDUCATION ACTIVITY
STUDENT REGISTRATION**

INSTRUCTIONS 1. Completed by Sponsor
2. Print (Ink) or type all entries.
3. Leave shaded areas blank.
4. See supplemental sheet for assistance.

PRIVACY ACT STATEMENT

AUTHORITY: 10 USC 2164, 20 USC 921

PRINCIPAL PURPOSE(S): Required for enrollment of dependents into DoDEA Schools. Provides record of student and sponsor demographic data used in the administration of school programs. Provides emergency contact, pertinent medical and other vital information.

ROUTINE USE(S): Data is collected and entered into the automated School Information Management System for use by DoDEA personnel in providing educational and management programs. Release of student information to non-DoDEA personnel is restricted to U.S. Government personnel and other authorized individuals as approved by DoDEA. Sponsor information may be released to other schools, colleges, and prospective employers as part of the individual student record.

DISCLOSURE: Voluntary. Disclosure of the Social Security Number will expedite the registration process.

SECTION I – STUDENT INFORMATION

1a. Student Number	b. Student Legal Name (Last, First, Middle)		c. Preferred Name
d. Gender M F	e. Home Phone	f. Student SSN / Unique ID	g. Student Grade
h. Birth Date (MMMDYYYY)	i. Place of Birth	i. Field Trip Permission Y N	k. Employer Type Code
l. Citizenship	m. Home Language Survey Completed Y N	n. Computer/Internet Permission Y N	o. Entry / Status Code
p. Student Email Address		q. Previous DoDEA Student ? Y N	r. Sponsor Relationship

2a. Student Number	b. Student Legal Name (Last, First, Middle)		c. Preferred Name
d. Gender M F	e. Home Phone	f. Student SSN / Unique ID	g. Student Grade
h. Birth Date (MMMDYYYY)	i. Place of Birth	i. Field Trip Permission Y N	k. Employer Type Code
l. Citizenship	m. Home Language Survey Completed Y N	n. Computer/Internet Permission Y N	o. Entry / Status Code
p. Student Email Address		q. Previous DoDEA Student ? Y N	r. Sponsor Relationship

3a. Student Number	b. Student Legal Name (Last, First, Middle)		c. Preferred Name
d. Gender M F	e. Home Phone	f. Student SSN / Unique ID	g. Student Grade
h. Birth Date (MMMDYYYY)	i. Place of Birth	i. Field Trip Permission Y N	k. Employer Type Code
l. Citizenship	m. Home Language Survey Completed Y N	n. Computer/Internet Permission Y N	o. Entry / Status Code
p. Student Email Address		q. Previous DoDEA Student ? Y N	r. Sponsor Relationship

SECTION II – SPONSOR INFORMATION

4. Sponsor's Name (Last, First, Middle Initial)		5. Sponsor SSN/Unique ID	6. Pay/Civ Grade	7. Title / Rank
8. Organization		9. Location of Unit	10. Duty Phone	11. Rotation / ETS Date
12. Spouse's Name (Last, First, Middle Initial)		13. Spouse's Title	14. Spouse's Employer	15. Spouse's Duty Ph.
16. Mailing Address (e.g. APO/FPO) (If different from Physical)		17. Physical Quarters Address (Street, City, State, Zip Code)		
18. Sponsor Cell Phone	19. Spouse Cell Phone	20. Email Address		
21. Pager Number	22. Reserved	23. Relationship to Student		

SECTION III – LOCAL EMERGENCY CONTACT INFORMATION

24a. Emergency Contact Name (Not Sponsor or Spouse)		24b. Contact Duty Phone	24c. Contact Home Phone
24d. Emergency Contact Address (During Day)		24e. Doctor's Name (If not Military Clinic)	24f. Doctor's Phone Number
25a. Emergency Contact 2 Name (Optional)		25b. Contact 2 Duty Phone (Optional)	25c. Contact 2 Home Phone
25d. Emergency Contact 2 Address (Optional)		25e. Local Use	

SECTION IV – PERMANENT STATESIDE / EMERGENCY CONTACT INFORMATION

26a. Contact Name	26b. Contact Home Phone
26c. Contact Address	26d. Relationship to Sponsor

SECTION V – CONSENT and SCHOOL USE INFORMATION

<p>I understand that I have the right to review my child(ren)'s records and that a copy of the school and health records will be released to the next school (exclusive of colleges and universities) he/she/they attend(s) without further approval.</p> <p>I give permission for my child(ren) to receive first aid at school and any emergency treatment considered necessary with the following exceptions noted below.</p> <p>I verify the information is correct or has been corrected.</p>	34. First Day Student Starts School (MMDDYYYY)	35. DoDAAC	
	36. School Name		
	37. Orders on File / Verified		
	38. Birth Date Verified		
27. Exceptions (If none, enter NONE)	39. Physical Received	Y N	
28. Signature of Sponsor/Parent	29. Date (MMDDYYYY)	40. Registrar's Initials	41. Date (MMDDYYYY)
30. Reserved	31. Reserved	42. Custody Papers	
		Y N	
32. Local Use	33. Local Use	43. Local Use	

DoDEA COMPUTER AND INTERNET ACCESS AGREEMENT FOR STUDENTS

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 2164 and 20 U.S.C. 921-932, authorizing DoD Directive 1342.20, "DoD Education Activity" (1992), authorizing DoD Education Activity Administrative Instruction 6600.1 (2004).

PRINCIPAL PURPOSE(S): The information on this form is used to authorize an individual student to use government-owned computer resources in accordance with, and subject to enforcement provisions of, DoD and DoDEA policies governing computer and Internet usage.

ROUTINE USE(S): Disclosure of germane information contained in this form within the Department of Defense is authorized upon a demonstrated "need to know" to perform an official duty. Routine disclosure of relevant and necessary information is authorized to agencies outside of the DoD by DoD Privacy Act Systems Notices, which may be found at <http://www.defenselink.mil/privacy/notices/osd/>. Records are maintained at the school level in student records for the duration of the student's enrollment.

DISCLOSURE: Voluntary; however, no individual is permitted to use DoDEA-controlled computer resources until they have signed this statement indicating agreement to use such equipment only in accordance with the DoDEA Appropriate Use of DoDEA Information Technology Resources - Terms and Conditions for DoDEA Students.

1. STUDENT INFORMATION *(please print or type)*

a. NAME *(Last, first, middle initial)*

b. PARENT/GUARDIAN

c. SCHOOL

d. TEACHER/GRADE

2. STUDENT AGREEMENT

I, *(print name)* _____, have received instruction in the appropriate use of DoDEA information technology resources; I have read and understood the Appropriate Use of DoDEA Information Technology Resources - Terms and Conditions for DoDEA Students (attachment 1) and I agree to abide by them. If I violate the Terms and Conditions, I understand that I may lose all access privileges on the DoDEA network, and, furthermore, may be subject to school disciplinary and/or appropriate legal actions.

a. STUDENT SIGNATURE

b. DATE *(YYYYMMDD)*

3. PARENT OR GUARDIAN *(If student is under the age of 18, a parent or guardian must also read and sign this agreement.)*

I, *(print name)* _____, have read the Appropriate Use of DoDEA Information Technology Resources - Terms and Conditions for DoDEA Students (attachment 1). I understand that my child must abide by these Terms and Conditions. I understand that if my child violates these standards, he/she may lose all access privileges on the DoDEA network and may be subject to school disciplinary and/or appropriate legal actions. I understand that computer and network access is being provided for educational purposes.

a. PARENT OR GUARDIAN SIGNATURE

b. DATE *(YYYYMMDD)*

APPROPRIATE USE OF DODEA INFORMATION TECHNOLOGY RESOURCES
TERMS AND CONDITIONS FOR DODEA STUDENTS

E2.A1.1. USE OF INFORMATION TECHNOLOGY RESOURCES

E2.A1.1.1. Students will use DoDEA's IT resources, including computers, electronic mail, and Internet access, only in support of education and for research consistent with the educational objectives of DoDEA.

E2.A1.1.2. Students will respect and adhere to all of the rules governing access to and use of DoDEA's IT resources.

E2.A1.1.3. Students will be polite in all electronic communication. Students will use courteous and respectful language in their messages to others. Students will not swear, use vulgarities, or use harsh, abusive, sexual, or disrespectful language.

E2.A1.1.4. Students will not use DoDEA's IT resources:

E2.A1.1.4.1. To deliberately disrupt network use by others. Therefore, students will not send "chain letters" or "broadcast" messages to individuals or to lists of individuals.

E2.A1.1.4.2. To gain or attempt to gain unauthorized access to other computer systems.

E2.A1.1.4.3. To attempt to harm or destroy data of another user, the Internet, or any other network. This includes creating or knowingly transmitting a computer virus or worm or attempting unauthorized access to files, computers, or networks (i.e., "hacking").

E2.A1.1.4.4. To attempt to disable any IT security or auditing system.

E2.A1.1.4.5. To pursue private commercial business activities, including those conducted on Internet sites such as eBay.

E2.A1.1.4.6. To create, access, download, view, store, copy, send, or knowingly receive material that is illegal or offensive to others, such as hate speech or any material that ridicules others based on race, creed, religion, color, sex, disability, national origin, or sexual orientation.

E2.A1.1.4.7. To create, access, download, view, store, copy, send, or knowingly receive material that is obscene, pornographic, or sexually suggestive.

E2.A1.1.4.8. To participate in illegal or prohibited activities, such as those related to gambling, illegal weapons, or terrorist activities.

E2.A1.2. SECURITY OF DODEA IT RESOURCES

E2.A1.2.1. Security on any computer system is a high priority. Students will notify a teacher if they notice a security problem.

E2.A1.2.2. Students will only use the computer accounts issued to them and will log off the system promptly when finished. Actions performed using a student's account will be considered to have been done by that student. It is the student's responsibility to protect their account and password. Students will not give their user passwords to other individuals.

E2.A1.3. PRIVILEGE OF USING IT RESOURCES

E2.A1.3.1. The use of the network is a privilege, not a right, and use which is inconsistent with these Terms and Conditions may result in the cancellation of student privileges.

E2.A1.3.2. Electronic transmissions, including electronic mail, are not private and individual communications and system access will be monitored.

E2.A1.3.3. Students who misuse DoDEA IT resources are subject to disciplinary measures such as those prescribed in DoDEA Regulation 2051.1, "Department of Defense Education Activity Disciplinary Rules and Procedures," August 16, 1996. At the discretion of the principal, the student may lose the privilege of using DoDEA IT resources permanently and may be suspended or expelled from school.

E2.A1.4. OTHER

If students have any questions about appropriate computer use, they will ask their teacher.

Department of Defense Education Activity

Questionnaire for Race/Ethnicity, and Home Language

Completion of this form is required for enrollment in DoD schools. The data collected is maintained for "Statistical Use Only" and is protected in accordance with the Privacy Act (93-579), OMB Circular A-108, and DoD Directive 5400.11. Unauthorized disclosure of this information constitutes a violation of the Privacy Act and may result in a fine up to \$ 5000.

Race/Ethnicity questions comply with OMB Standards for Maintaining, Collecting, and Presenting Data for Race and Ethnicity, dated 30 October 1997 (62 FR 58782-58790)

STUDENT NAME: _____ DATE: _____

PLEASE ANSWER ALL SECTIONS

ETHNICITY (Mark one)

_____ **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture or origin, regardless of race.

_____ **NOT Hispanic or Latino.**

RACE (Mark one or more)

_____ **A – American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

_____ **B – Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

_____ **C – Black or African American.** A person having origins in any of the black racial groups of Africa.

_____ **E – White.** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

_____ **F – Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

HOME LANGUAGE SURVEY (Yes or No, and Mark Language)

Does an adult in the household speak a language other than English at home?

_____ Yes _____ No

Does the child you are registering speak a language other than English at home?

_____ Yes _____ No

What was the first language your child learned?

_____ **English (E)** _____ **Another Language (A)** _____ **Both English & Another Language (B)**

Language(s) Learned: _____

Effective August 2002 (School Year 2002/2003), DoDEA is changing the classification codes for recording student race and ethnicity in the schools' student information database. This sheet provides background information on the required change.

The Executive Office of the President, Office of Management and Budget (OMB), Office of Information and Regulatory Affairs has revised the Standards for the Classification of Federal Data on Race and Ethnicity.

After a comprehensive review process, OMB announced its decision concerning the revision of Statistical Policy Directive No. 15, Race and Ethnic Standards for Federal Statistics and Administrative Reporting. The modification is that the term "Hispanic or Latino" will be removed from the Race category and exist as a separate Ethnicity category.

This new Ethnicity category will require the sponsor/parent/guardian to mark one of the following:

- Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- NOT Hispanic or Latino.

In addition, the sponsor/parent/guardian will be required to mark one or more of the following races:

- American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American. A person having origins in any of the black racial groups of Africa.
- White. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Federal programs should adopt the standards as soon as possible, but not later than January 1, 2003, for use in household surveys, administrative forms and records, and other data collections. The Federal Register Notice and related OMB Notices are available electronically from the OMB Homepage on the World Wide Web at the location of www.whitehouse.gov/OMB/fedreg/ombdir15.html.

For further information, please contact the Statistical Policy Office, Office of Information and Regulatory Affairs, Office of Management and Budget, NEOB, Room 10201, 725 17th Street, N.W., Washington, D.C. 20503.



NEW YORK AND VIRGINIA DDESS
QUANTICO / DAHLGREN / WEST POINT SCHOOLS
3308 John Quick Road
Quantico, Virginia 22134-1702

Dear Parents:

This is a “**blanket permission form**” which covers four specific areas and is filled out at the time of registration.

- Throughout the coming school year, the students of the New York & Virginia Schools will be taking one-day field trips to points of interest in the area. Please indicate on the reverse side permission for your child to attend all school sponsored field trips. Parents will be given **two weeks prior notice** of the trip which will include detailing destination, purpose, and any cost to the home. This form eliminates the need for approval of each individual event. *If you do not wish your child to participate in the trip, the teacher must be notified at least two days prior to the trip so the non-attending student can be placed in a classroom for that day.*
- There are times when a photographer from the school newspaper or someone from the school may be taking photos for publication, the school year book, or the school homepage. Please indicate on the reverse side authorization to let your child's photograph be published.
- During the school year, certain events take place which are videotaped for school use. For example, the school concerts are videotaped and kept on file. Please indicate on the reverse side authorization to allow your child to be videotaped for school events.
- During the school year there may be times when students will be dismissed early due to inclement weather. Please indicate on the reverse side if your telephone number may be released to a volunteer who will be charged with notifying parents.

Sincerely,

Lawanna H. Mangleburg
District Superintendent
New York and Virginia DDESS

(OVER)

My child has permission to:

- ◆ **attend all school-sponsored field trips.**

Please circle one: Yes No

- ◆ **have his/her photograph published in the school newspaper,**
the school year book, and/or on the school homepage.

Please circle one: Yes No

- ◆ be videotaped during the school year for school events, i.e. school concerts.

Please circle one: Yes No

- ◆ **My telephone number may be released to notify me of unplanned early dismissals.**

Please circle one: Yes No

Child's Name

Parent's Signature

Date