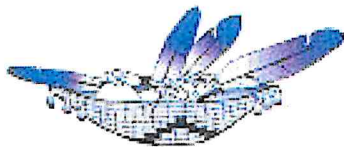


# MESCALERO "Apache" SCHOOL



260 White Mountain Drive  
Mescalero, New Mexico 88340  
Phone: (575)464-4431 Fax (575) 464-0053



"Mescalero Chiefs"

STUDENT REGISTRATION

2026-2027

Registration Date: \_\_\_\_\_

\*\*\*\*\*

**\*\*PLEASE PRINT\*\***

Student Full Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Mescalero Tribal Member? Yes \_\_\_ No \_\_\_ Census Number: \_\_\_\_\_ Other Indian Tribe: \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_ Hispanic/Latino? Yes \_\_\_ No \_\_\_

Student Mailing Address: \_\_\_\_\_

Student Street Address: \_\_\_\_\_

School Last Attended: \_\_\_\_\_ Date Last Attended: \_\_\_\_\_

\*\*\*\*\*

**\*\*PARENT/GUARDIAN HOUSEHOLD INFORMATION\*\***

Mother's Name: \_\_\_\_\_

Tribal Member? Yes \_\_\_ No \_\_\_ Tribe: \_\_\_\_\_ Race/Ethnicity: \_\_\_\_\_ Hispanic/Latino? Yes \_\_\_ No \_\_\_

Father's Name: \_\_\_\_\_

Tribal Member? Yes \_\_\_ No \_\_\_ Tribe: \_\_\_\_\_ Race/Ethnicity: \_\_\_\_\_ Hispanic/Latino? Yes \_\_\_ No \_\_\_

Guardian's Name (If not with Parents): \_\_\_\_\_

Relationship: \_\_\_\_\_ **\*\*Copy of Court/Placement Document needed**

Home Phone: \_\_\_\_\_ (M) Work Phone: \_\_\_\_\_ (M) Cell: \_\_\_\_\_  
(F) Work Phone: \_\_\_\_\_ (F) Cell: \_\_\_\_\_

Parent E-Mail Address (required): \_\_\_\_\_

**Please List Other Children in the Home:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

\*\*\*\*\*

**\*\*EMERGENCY INFORMATION\*\***

In case of illness / accident, the School is to proceed as follows: (Parent will be notified first)

1. Notify: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

2. Notify: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

3. Notify: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

**If unable to reach anyone, student will be taken to the Emergency Room / Mescalero Indian Hospital.**

List Student Allergies or Health Problems: \_\_\_\_\_

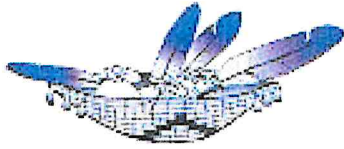
Prescribed Medication (if any) Taken by Student: \_\_\_\_\_

How Much: \_\_\_\_\_

\*\*\*\*\*

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

# MESCALERO -Apache- SCHOOL



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*"Mescalero Chiefs"*

## PERSONAL INFORMATION FORM \*\*CONFIDENTIAL\*\*

Student Full Name: \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_

Is this child in Foster Care? Yes \_\_\_\_\_ No \_\_\_\_\_

### IF YES, PLEASE ATTACH COURT / PLACEMENT LETTER

Is MOTHER living with this child? Yes \_\_\_\_\_ No \_\_\_\_\_

Is FATHER living with this child? Yes \_\_\_\_\_ No \_\_\_\_\_

### This is to VERIFY that the following people CAN check out my child:

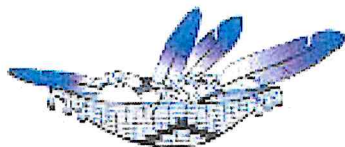
Name:	Relationship:	Phone Number:	Address:	Work Place & Phone Number

### This is to VERIFY that the following people CANNOT have contact with my child (Court Papers):

Name:	Relationship:	Phone Number:	Address:	Work Place & Phone Number:

\*\*\*NOTIFY THE SCHOOL IF YOU WANT THIS LIST CHANGED IN ANY WAY\*\*\*

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



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## SPECIAL EDUCATION INFORMATION

Dear Parents / Guardians:

Please read the following and check **YES** or **NO** in the space provided as it applies to your son/daughter.

YES \_\_\_ NO \_\_\_ My son/daughter received special education services at the last school attended as part of his / her Individualized Education Program (IEP).

YES \_\_\_ NO \_\_\_ My son/daughter was in the process of being evaluated to determine his/her eligibility to receive special education services at the last school attended.

If you checked **YES** on any one or both of the items listed above, please fill out the rest of this form so that the Mescalero Apache School might obtain the special education records necessary to develop an Individualized Education Program for your son/daughter. Once records have been obtained, you will be invited to attend an IEP meeting to develop an educational program to meet his/her needs. It is critical that you attend this meeting, as your participation in the development of your son's/daughter's IEP is an important part of determining to what degree he/she will be successful at the Mescalero Apache School.

Please be advised that by checking NO to both items, you are indicating that your son/daughter either is not a student who has been previously identified as a school aged child with a disability, or has not previously been in the process of evaluation for special education eligibility, and therefore not eligible for special education support and services at the time of enrollment.

Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Former School Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Comments / Concerns: \_\_\_\_\_

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



## INTERNET USE POLICY

### Purpose:

Mescalero Apache School internet usage policy outlines our guidelines for using the school's internet connection and network. We want to avoid inappropriate or illegal use that creates risks for our students and staff.

### Goals:

Our students will learn to use our school's internet connections for the following reasons:

- To complete research papers.
- To seek out information that they can use to improve their education.
- To utilize the school's internet to stay up-to-date on the current educational/career pathways.

We don't want to restrict our student's access to websites of their choice, but we expect our student's to exercise good judgement and utilize the school's internet appropriately.

### Acceptable Use Policy:

Students should:

- Use the computers for instruction and research purposes only.
- Follow established procedures given by the teacher.
- Become aware of copyright policies.
- Refrain from taking any food or drinks into the computer labs and take care of lab equipment.

### Inappropriate Use Policy:

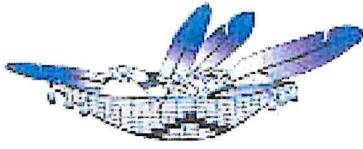
Our student's should not use the school's network to:

- Play games or access any social media sites.
- Download any unauthorized material/copy material without the specific permission of the copyright holder. Access restricted websites, such as hate, dangerous materials etc.
- Download or upload obscene, offensive or illegal material.
- Use the internet without specific directions given by the teacher.
- Visit potentially dangerous website that can compromise the safety or our network and computers.
- Perform unauthorized or illegal actions, like hacking, fraud, buying/selling illegal goods and more.

### Internet:

1. The internet is a tool for learning.
2. Students need to have parent permission to access the internet.
3. Students should return their permission slips to the respective schools' secretary.
4. Keep the internet use policy for your records.





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## WAIVER to give MAS privilege to use my child(ren) in Any 2026-2027 School-Event Multi-Media

Parents / Guardians:

From time to time, there may be opportunities where your child may be participating in school events when images may be taken that include your child. This statement signed by you, gives the Mescalero Apache School, the privilege to take an image of your child while he/she is engaged in the school's academic and social events, and to subsequently display that image in a respectful manner in other school sponsored events for the school year 2026-2027.

The uses for these images are primarily for newsletters, parent-teacher meetings, bulletin boards, communications with book supply companies to show the children received the books, communications with donors of materials, supplies, clothing, and other gifts and award items, area newspaper articles, and school publications. Also Student of the Month purposes, as their portrait is displayed on the wall for the month. Please check one of the lines below giving consent or not giving consent, sign and date it, and return it to the school.

Thank You,  
Mescalero Apache Elementary

For the 2026-2027 School Year ending May 20, 2027.

\_\_\_\_\_ I give consent for my child's image to be used for these purposes.

\_\_\_\_\_ I DO NOT give consent for my child's image to be used for these purposes.

Print Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Print Parent Name: \_\_\_\_\_

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

# Dental Sealant Consent Form

## Mescalero Apache School

Dear Parent/Guardian,

The Mescalero Indian Health Center (MIHC) will provide dental sealants for all students that are registered at MIHC for health services. Dental sealants provide a preventive dental service that will avoid your child from being absent from school and the inconvenience of the parent/guardian missing time from work. This service **does not** replace routine dental examinations. A dental report will be mailed for your review of the provided services.

### **Who will be providing service?**

The dentist/hygienist will be accompanied by a dental assistant in the designated room where your child will receive preventive dental services. The provider will determine which teeth will benefit from a dental sealant application. A fluoride treatment also will be applied at the beginning and the ending of each school term.

### **What are dental sealants?**

Dental sealants are a thin BPA-free plastic applied to the chewing surface of healthy teeth. The sealant materials that are used in the program have fluoride-releasing properties.

### **Our commitment to the parent/guardian and student:**

We will resume the dental sealant program each year to evaluate whether or not the sealant(s) are still present. It is our goal to repair or replace dental sealants that do not provide the student's teeth optimal protection from dental cavities.

---

*Please list any medical conditions or allergies that the school should be made aware of (ex. asthma, milk allergy):* \_\_\_\_\_

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Student's Grade / Teacher: \_\_\_\_\_

Parent/Guardian Name & Phone #: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Signature & Date: \_\_\_\_\_

\*\*Please mark the dental services provided below that you **DO NOT** want your child to participate in:

\_\_\_\_\_ I **do not** want my child to participate in the program at all.

\_\_\_\_\_ I **do not** want my child to have sealants applied.

\_\_\_\_\_ I **do not** want my child to have fluoride varnish application.



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*"Mescalero Chiefs"*

## AUTHORIZATION FOR THE RELEASE OF STUDENT RECORDS

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

Previous School Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

### Please send the following records:

1. Birth Certificate / Certificate of Indian Blood
2. Health Records (Immunization & Physical)
3. Current Custody Paperwork (if applicable)
4. Partial grades from current reporting period
5. Test Scores
6. Report Card(s)
7. Copies of all diagnostic reports and most recent IEP
8. Information of remedial or other special programs
9. Any Behavioral or Counseling information

\_\_\_\_\_  
Requesting Official

\_\_\_\_\_  
Date of Request

\*\*\*\*\*

**I give my consent for records to be sent to Mescalero Apache School.**

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# PARENT/STUDENT TRANSPORTATION GUIDE

## Mescalero Apache Schools



### **Safety is Everyone's Responsibility**

Mescalero Apache Schools provides bus transportation to all students. Students are expected to assist MAS staff and bus drivers in ensuring that buses remain in good condition and that transportation is provided safely. When riding in the school buses or MAS vehicles, students are held to behavioral standards established herein.

**Parents-** Please read this brochure and discuss the bus rules with your student(s). It would also be a good idea to discuss:

- How to walk safely to and from the bus stop.
- Where to go for help on the way to and from the bus stop.
- How to behave safely at the bus stop.

**Kindergarten students WILL NOT be released from the bus unless a parent/guardian is waiting or other arrangements have been made with the bus driver. Kindergarten students will be brought back to school and all phone numbers will be called on contact sheet. If no one can be reached, BIA police and Social Services will be called.**

**Students-** Please remember that the safest way to ride a bus is to sit properly, facing forward with your feet on the floor. Also, remember that your driver must concentrate on traffic and driving the bus safely. Please cooperate by following the rules listed in this brochure. Talking in a normal tone of voice is acceptable and the best form of communication on the bus.

### **Student Responsibilities**

#### **Arriving at pickup point:**

- Be on time.
- If you have to walk along the road, walk on the left side facing oncoming traffic.
- Walk on the shoulder of the road.
- If other students are waiting at the bus stop, get in line without pushing or crowding and stay off the roadway.

#### **Board/Exit the bus:**

- Line up single file parallel to the roadway, with the younger students in front so they can board the bus first.
- Wait until the bus comes to a complete stop before attempting to get on board.
- Board the bus quickly but without crowding or pushing.
- Always walk on the bus.
- Go directly to your seat and sit straight, with back against the seat and face the front of the bus.
- Do not push or crowd when leaving the bus.

#### **Conduct on the bus:**

- The bus will not move until all passengers are seated.
- Remain seated throughout the trip and leave your seat only when the bus has reached its destination and comes to a complete stop.
- Keep your books and/or other items on your lap or put them under the seat.
- Keep the aisle clear

- Bus driver should only be alerted if there is an emergency.
- Avoid doing anything that might disturb or interfere with the bus driver. Refrain from loud or boisterous talking or yelling.
- Never stick hands, arms, head or feet out of the windows of the bus.
- Windows may be opened only with the bus driver's permission.
- Do not throw anything in the bus or out of the window.
- The emergency door, exit controls or any of the bus safety equipment is only used in emergency situations.
- Keep the bus clean for your use.
- Eat at home or school, but not on the bus. (Safety issues: choking hazard)
- Consumption of food or drinks are prohibited on the bus.
- Promptly follow the bus driver's directions at all times.

**Prohibited items:**

- Tobacco, alcohol, or other drugs are not allowed in the school bus.
- Insects, reptiles, or other animals shall not be transported in the school bus.
- Weapons, explosive devices, or chemicals shall not be transported in the school bus.

**School Bus Disciplinary Plan**

When a principal/designee receives a school bus incident report, the administrator may use the following disciplinary plan.

**1<sup>st</sup> Offense:** A warning to the student with a report to the parent/guardian will be issued. It is expected that the parent/guardian will work with the student to help prevent a recurrence.

**2<sup>nd</sup> Offense:** A report to the parent/guardian will be made notifying that the student's bus riding privileges have been revoked for 1-2 days.

**3<sup>rd</sup> Offense:** A report to the parent/guardian will be made notifying that the student's bus riding privileges have been revoked for one week and a parent/principal/bus driver conference must occur.

**4<sup>th</sup> Offense:** Bus riding privileges will be revoked for 9 weeks.

**5<sup>th</sup> Offense:** Bus riding privileges will be revoked for the remainder of the school year.

**Severe disruption and dangerous behavior** will result in immediate suspension or revocation of transportation privileges.

**Parents will be required to transport students to school during any suspension of transportation privileges. Students will not receive an excused absence due to loss of transportation privileges.**

**Inclement Weather Schedule**



The most common use of the abbreviated day schedule occurs when severe weather causes dangerous driving conditions which would endanger the safety of students getting to school. The abbreviated day schedule is a shortened school day which begins at 10 a.m. and ends at the regular time. Morning pickup times will be **two hours later**.

If there is a need to initiate an abbreviated schedule, an announcement will be made through Facebook and the automated call no later than 6 a.m. If weather conditions worsen, to the point that it is necessary to close the school, an announcement will be made no later than 8 a.m.

Please complete and sign this page and return to the office, which acknowledges that you have read this transportation guide. The signature must be turned into the office to avoid loss of transportation privileges.

.....

**2026-2027 Transportation Guide Acknowledgement**

**Student's Regular Bus Route**

Pick-Up Location \_\_\_\_\_ Bus # \_\_\_\_\_

Drop-Off Location \_\_\_\_\_ Bus # \_\_\_\_\_

\_\_\_\_\_ My child will NOT ride the bus during the school year. He/She will be dropped off/picked up everyday.

I acknowledge that my child and I have read the Parent/Student Transportation Guide regarding the MAS bus policies.

\_\_\_\_\_

Print Student Name	Student Signature	Grade	Date
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\_\_\_\_\_

Print Parent Name	Parent Signature	Date
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***Please sign and return to the office to avoid loss of transportation privileges.***