



Ministero dell'Istruzione, dell'Università e della Ricerca

Ufficio Scolastico Regionale per il Lazio

Scuola Media Statale "Corrado Melone"

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Postal Giro Account no. 26532044 in "S.M.S. Corrado Melone"'s account

Headmaster: prof. Riccardo Agresti - mobile phone: 3337078109; e-mail: direzione@smsmelone.it

S.M.S. "CORRADO MELONE" - Student enrollment form - 2012-2013 school year
PART I - GENERAL INFORMATION

To the Headmaster of Scuola Media Statale (Junior High School) "Corrado Melone" of Ladispoli (hereinafter referred to as "Scuola")

I, the undersigned, father mother Legal Guardian (last name, first name)

APPLY TO ENROL THE STUDENT

Last name First name

M if Male / F if Female into the class at the above mentioned school.

Hereof I am fully aware of the civil and criminal responsibility of any false or untrue declarations and in order to simplify and streamline the administrative duties of the school in compliance with the law, I hereby declare that:

The student tax code

A copy of the birth certificate is herein attached (in order to avoid reading mistakes due to typing errors in official documents)

- Was born in date of birth
- Is an Italian citizen or a/an citizen (other, if applicable)
- Is a resident of (province of)
Home address home phone
other phone number mobile phone e-mail
- Name of former school former class
Family information:
father: last name first name mobile phone
mother: last name first name mobile phone
- the student lives with:

Table with 3 columns: Last name and First name, Place and date of birth, Relationship to student

- The student underwent mandatory vaccination yes no
- Does your child have any type of Allergy/Intolerance (i.e. peanuts, seafood, milk) or health condition (i.e. Asthma, Epilepsy, Diabetes etc)? If yes, please specify:

I, the undersigned, am fully aware that the personal information herein given will be used by the school only for the purposes stated by the law in compliance with the Italian Legislative Decree n. 196/2003 (Code for the protection of personal data) and D.M. 7.12.2006, n. 305; I declare that I have read and understand the information in section 13 of Legislative Decree 196/2003 and I consent to the processing of my personal data. (The above mentioned Lagislative Decree is available on the school's official notice board, at the school secretary's office and on the school website www.smsmelone.it); I am also aware that in case of separated/divorced parents, the Law no.54 8/2/2006, (modification of article 155 of the Civil code) provides that "...even in case of legal separation [...]both parents are required to share the responsibility for their own child and thus considered "holders of parental responsibility". The duties of protection, education and support towards the child are incumbent on both parents. They may take decisions upon these issues on mutual agreement. In case of disagreement, decisions will be taken by the court [...]. Therefore, the school will refer to the statements herein as commonly agreed and accepted by both parents, unless differently stated. In signing this document, I, the undersigned, acting as a parent or legal guardian of the child named above, am fully aware of the parental responsibility and the civil and criminal responsibility of any false or untrue declarations, and I hereby swear or affirm that the above information is true and accurate. I certify that the documents herein attached (if applied) are original or a true copy of the original documents, and that the above information and documents are considered substitutive declarations or self-certification, pursuant to and in accordance with DPR (Decree of the President of the Republic) 445/2000 and further modifications.

Date
Signature of self-certification (Laws 15/98 – 127/97 – 131/98) to be undersigned when submitting the application to the secretary of the school. In case of separation or divorce, signatures of both parents are required; in case of fostering or legal guardianship regime, the signature of the guardian or foster parent is required, giving notice of possible changes in foster care (if applicable). Parents shall declare if they agree upon the school giving notice of the most important information/communication, about student's marks for instance, to both parents or to the guardian or foster parent only.

S.M.S. "CORRADO MELONE" – Student enrollment form
PART II – COMPULSORY DECLARATIONS

I, the undersigned, DECLARE to be fully aware that the personal information given in this self-certification will be used by the school only for the institutional purposes of the Public Administration stated by the law in compliance with the Italian Legislative Decree no. 196/2003. I DECLARE that I have read and understood the information in section 13 of Legislative Decree no. 196/2003, attachment B, (which is available on the school's official notice board, at the school secretary's office and on the school website); and I consent to the processing of my personal data.

Date.....
(Signature)

I, the undersigned, DECLARE to be acquainted with the School General Rules and Regulations which I fully accept without condition; I commit myself to pay for the school insurance fee (RCT - Third Party Liability - and accident insurance) decided by the School Council.

Date.....
(Signature)

I, the undersigned, hereby AUTHORIZE, definitively and without condition, for the duration of the full course of study, my son/daughter to join in all the school's excursions and educational activities outside the school grounds (during school hours curriculum) and guided visits during the school year (one day trip without overnight stay), provided in the school POF (the study programme), planned by the Class Council, authorized by the headmaster. These activities may require the use of any means of transportation (even private means), under the school's responsibility. I ACCEPT that the School is not responsible for any accident that is caused by student's misbehavior that fails to respect teachers' instructions.

Date.....
(Signature)

I, the undersigned, hereby AUTHORIZE, definitively and without condition, for the duration of the full course of study, the teachers of the school to allow the student to have food and beverages, even without the parent/guardian's direct or indirect control, according to the activities authorized by the headmaster or provided by the POF (school programme). I, the undersigned, make myself personally responsible of any damages due to omission in informing the school about the presence of any allergy/intolerance affecting the student's diet.

Date.....
(Signature)

I, the undersigned, DECLARE to be fully aware that during educational activities pictures or videos of students may be taken or recorded, either in school activities or in case of special events, even though they are connected to the general educational aims of the school, such as for instance: tournaments, prizegiving, lectures or meetings with experts, journalism activities, openings in general, celebrations, school exchanges, exchange of photos and video clips with other schools or institutions, press release, broadcasting etc.

I, the undersigned, hereby GRANT PERMISSION, definitively and without condition, for the duration of the full course of study, for my child to be photographed, filmed, videotaped or audiotaped while participating in the above-mentioned activities, unless differently stated.

Date.....
(Signature)

I, the undersigned, DECLARE to be acquainted with the rule according to which minor children will not be handed over in any case, even at the end of school day, to people different from their parents or their representatives. I, the undersigned, DECLARE to be fully aware of the minor supervision duties, consisting in always getting informed about the school daily schedule, especially concerning the entry and exit timetable, making personally responsible (or through a representative) of the child supervision whilst

on the school premises after the official end of the school day.

Date.....
.....
(Signature)

(Please subscribe only in case of student with special needs)

I, the undersigned, ASK to provide my child with a resource teacher/special needs assistant pursuant to and in accordance with the Law 104/92 and further modifications and riders. For this purpose, I herein attach the medical certificate declaring the special needs, fully aware that I can withdraw the request at any time simply notifying the specific request to the headmaster of the school.

Date.....
.....
(Signature)

SCUOLA SECONDARIA DI PRIMO GRADO
(JUNIOR HIGH SCHOOL)

STUDENT.....

I, the undersigned,,
am acquainted with many educational opportunities offered by the school and available in addition to the formal classroom teaching program, such as extra Maths and Italian classes to improve pupils' performance. I am fully aware of the resolutions taken by the Consiglio d'Istituto (School Council) and of the organizational limits that may prevent from granting all requests.
Pursuant to and in accordance with the Legislative Decree no. 59/2004, article 7, paragraph 3, I ask that my child may be included in a priority category for the placement in the class organized as follows:

(put a tick on your choice)

After school programme

(40 weekly hours allocated in 8 hours per day for 5 days a week, with afternoon classes, with school canteen service and third EU language class (Spanish). The school canteen service is managed by the City Council. The family will be charged the canteen service fee.

Standard school programme

(6 hours per day for 5 days a week), no school canteen service.

Musical study programme section (put a tick or a cross if interested)

Musical study programme section, after passing aptitude test

(only if authorized by the competent authorities of U.S.R.- Education Department Office of Lazio)

Date.....

Signature of parent / legal guardian.....

S.M.S. "CORRADO MELONE" – Student enrollment form
ATTACHMENT A – CONSENT FOR ATTENDING CATHOLIC RELIGION INSTRUCTION

Consent for attending the Catholic religion instruction for the duration of the full course of study in the SMS (Junior High School) "Corrado Melone".

C.M. 21 december 2006, no. 74, reference number 11668

STUDENT

Whereas the State guarantees the Catholic religion instruction in schools of all levels and grades, in accordance with the agreement that modified the Lateran Treaty (art. 9.2, revised 18.2.1984, ratified through Law no. 25.3.1985), this form allows the student to exercise the right to choose whether to attend the Catholic religion instruction or not.

I the undersigned, DECLARE to be fully aware that the enrollment choice submitted at the beginning will be effective throughout the present school year and for the subsequent years of the course, in case the student is supposed to be enrolled automatically, provided that the student maintains the right to choose, within the enrollment deadline, whether to attend the Catholic religion instruction or not.

I give consent for my child to attend Catholic religion instruction.

I do not give consent for my child to attend Catholic religion instruction

(Put a tick on your choice)

DateSignature of parent / legal guardian.....

In case the student is already attending the above named school, please specify the school complex, the class and the section in the current school year.

School complex.....class.....section.....

Law 25/3/1985, no. 121- ratification and execution of the agreement, additional reference number, subscribed in Rome on 18/02/1984, carrying out modifications to the Lateran Treaty (11/02/1929) between The Italian Republic and the Holy See. (Published in "Suppl. Ord." of the Official Gazette of Italy, April 10, no. 85)

FOR STUDENTS WHO DO NOT CHOOSE TO ATTEND CATHOLIC RELIGION CLASS

Integrative choice for students not attending the Catholic religion class

C.M. 21 december 2006, no. 74, reference number 11668

Student.....

Fully aware that the choice made on the enrollment form will be effective throughout the present school year and for the duration of the full course of study in the "Corrado Melone" School, provided that the student maintains the right to modify his/her own choice,

I, the undersigned,.....ask that the student choose alternative options instead of attending the Catholic religion class, such as:

A) Educational activities under teachers' supervision

B) Individual study /research under teachers' supervision

C) Individual Study /research without teachers' supervision

D) Going out of the school

(Please, put a tick on your choice)

In case you choose options C) or D), I the undersigned..... accept that the School is not responsible for any accident or safety issue caused by student's misbehavior that fails to respect teachers' instructions, and I give the following written instructions regarding the student going out of the school; I may accept late entry, leaving classes earlier or anything connected to the supervision of the minor out of the school.....

.....

Date.....

Signature of parent / legal guardian.....