



LOSTANT COMMUNITY UNIT SCHOOL DISTRICT 425

315 W 3rd Street • Lostant, Illinois 61334
Phone (815) 368-3392 • Fax (815) 368-3132
www.lostantcomets.org

High School Registration 2020-2021

from

Lostant CUSD 425

_____ has shown proof of residency at:
(student name)

Address: _____

This student will attend _____ High School as a _____
grade student.

Telephone Numbers and Names

Name _____ Number _____

Name _____ Number _____

Name _____ Number _____

Name _____ Number _____

_____ I certify the above information to be true and accurate.
(parent signature)

Lostant Superintendent's Office

Date Student Registered at Lostant School _____

Certified by _____



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Proof of Residency
School Year: 2020 – 2021

Name of Lostant Resident _____

Address of Lostant Resident _____

Relationship to Student(s) _____

Student Name _____

Student Name _____

Student Name _____

Student Name _____

For Office Use Only

Please check any two documents presented as proof of residency.

_____ Water Bill	_____ Telephone Bill
_____ Electric Bill	_____ Rental lease agreement
_____ Gas Bill	_____ Mortgage statement or coupon
_____ Tax Bill	School Official _____

Bus Incident and School Emergency Form

Parent/Guardian Request

In the event of a school bus accident or school emergency, the Emergency Medical Service (EMS) personnel will determine the seriousness of the accident and injury. It may be determined a student or chaperone be transported to an appropriate hospital. Loshant CUSD 425 shall abide by the judgment of the appropriate EMS personnel, and will not transport an uninjured student or adult to the hospital, unless otherwise directed to do so in writing. Any such transportation or services shall be at the expenses of a parent or guardian.

_____ I choose to abide by the judgment of the appropriate EMS personnel. My child will be transported to the hospital, only if EMS personnel determine that it is necessary.

_____ I choose to have my child transported to the hospital at my own cost, whether or not the appropriate EMS personnel determine that it is necessary.

Name of student(s):

Name of possible chaperone(s);

Parent/Guardian Signature _____

Date _____

High School Transportation

My child(ren) will require **daily** transportation service.

_____ By completing this form my child will be picked up and dropped off at my rural address:

or

_____ By completing this form my child will be picked up and dropped off at Lostant School.

Students who drive to school and occasionally need to ride the bus are always welcome to access bus service at Lostant School. Drivers should park their vehicles at the back end of the parking area.

Name of child(ren)

(parent signature)

Contact Numbers

Please list below ALL telephone numbers you would like on the Phone Blast System with regard to changes in bus routes, school cancellations, and school emergencies.

Student(s) _____

Name

Phone number

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Student/Parent Handbook Acknowledgement Form

2020-2021

I have reviewed or will review the Lostant CUSD 425 Student/Parent Handbook (Handbook) with my child to promote a better understanding of District 425 school rules and expectations. My signature below acknowledges receipt of the Handbook and recognition of rules and guidelines.

I understand that this Handbook may be amended during the year without notice. This Handbook in the latest version is applicable to all Lostant students in grades K-12 upon the implementation of any change. The Superintendent will notify all parents and students in writing, where possible, of any changes to the Handbook.

Parent/Guardian Name (*please print*)

Parent/Guardian Signature

Date

K-12 students must also sign.

I have received a copy of the Student/Parent Handbook. I have read or will read the Handbook and understand all the rules and expectations. I agree to be responsible for following all the rules and expectations of the District and understand the consequences for failing to follow the requirements.

Student name (*please print*)

Student Signature

Date

In the event the student does not sign and return this page, the student is not excused from the rules and expectations set forth in this Handbook. The parent signature is on file. Parents are responsible for educating their children of the language contained within this Handbook.

***This is a 2-SIDED Parent/Student Acknowledgement Form.
Please complete both sides and return to the office by
September 4, 2020***



This Acknowledgement Form MUST be signed by parent and student.