2019-2020 REGISTRATION PACKET FOR NEW STUDENTS

SALEM HIGH SCHOOL 400 SPARTAN DRIVE SALEM, VA 24153

Telephone: 540/387-2437 FAX: 540/387-2439

Counselors:	Mr. Barrett -	last Name A - E
	Dr. Snow -	last Name F - J
	Ms. Arbogast (Director) -	last Name K - Q
	Mrs. Parrish -	last Name R - Z
	W(13.1 a) 1311	idst Numer - Z
Guidance Secretary/Registrar: Mrs. Tammy Chitwood		
The following documents are REQUIRED at your appointment:		
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1.	Birth Certificate - this can no lo	-
2.	Unofficial transcript from last school and last report card	
3.	Custody papers if applicable	
4. 5.	IEP or 504 if applicable (cannot create a schedule without it)	
	Checkout/Withdrawal sheet from last school - N/A for summer	
6.	2 Verification of Residency form and documents (cannot be seen without this)	
The following documents will be requested from your previous school:		
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1.	 last DPT/TD must be after age 4 last Polio must be after age 4 	
	 2 MMR (Measles, mum 	•
	•	s entering 6 th grade after July 1, 2001
	must have three doses	s of Hepatitis B
2.	SOL/test scores	

	*****Registration is by appointment only!*****	