

Nye County School District

INSERT YOUR SCHOOL NAME HERE

2013 -2014

Enrollment Form



OFFICE USE ONLY	
Homeroom Teacher/Pod:	
Grade	School
Entry Code	Entry Date
ID#	
HL:	
Bus	Stop
Grid #:	
Guardian/Legal Documents on file at school: <input type="checkbox"/> Y <input type="checkbox"/> N	
Proof of Residency: <input type="checkbox"/> Y <input type="checkbox"/> N	

INSTRUCTIONS: Please print all information. Under Nevada State Law, all new students must present a birth certificate, immunization document and if available, the withdrawal from the school student previously attended.

Student Information

Last Name	First Name	Middle Name	Suffix (Jr., III)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address		City	State	Zip
Physical Address (if different from above)		Zip	County	Phone No. <input type="checkbox"/> unlisted
Birth date	Social Security No.			Place of Birth (City/County/State)
Student's Ethnicity <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> White				

Parent/Guardian Information (Step parent by marriage or guardian by notarized or legal document)

Relationship: <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Stepfather <input type="checkbox"/> Foster <input type="checkbox"/> Host Family	Last Name	First Name	Prefix (Mr., Mrs., Ms.)
Street Address	City	State	Zip
Employer	Work Phone - Ext.	Hours Worked	E-mail Address
Home Phone: Cell:			
Relationship: <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Stepmother <input type="checkbox"/> Foster <input type="checkbox"/> Host Family			
Last Name	First Name	Prefix (Mr., Mrs., Ms.)	
Street Address	City	State	Zip
Employer	Work Phone - Ext.	Hours Worked	E-mail Address
Home Phone: Cell:			

Non-Custodial Parent (joint legal custody but does not have physical custody) or Deceased Parent

Relationship <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Legal Guardian	Last Name	First Name	Prefix (Mr., Mrs., Ms.)	<input type="checkbox"/> Deceased
Street Address	City	State	Zip	Home Phone: Cell:

NOTE: Natural parents have full access to student information files, unless the court orders otherwise.

Emergency Contact Information is Required

Persons other than parent/guardian who may be contacted to pick up student if the parent/guardian is unable to be reached in an emergency:

Relationship	Last Name	First Name	Telephone Number
Relationship	Last Name	First Name	Telephone Number
Relationship	Last Name	First Name	Telephone Number

Health Screening Approvals

Yes No Vision & Hearing (Grades: K,4,7,10) Yes No Height & Weight (Grades: 4,7,10) Yes No Scoliosis (Grade 7 ONLY)

Medical Insurance Disclaimer/Release of Student Information

I understand that the school does not provide medical insurance for student injuries but does make voluntary student insurance available. I have received the insurance information on this program.

I decline the student insurance at this time I plan to enroll my child in this program

Parent/Guardian Signature: X Date: _____

RELEASE OF DIRECTORY INFORMATION: In accordance with the Family Education Rights and Privacy Act, and by Nye County School District Policy, your permission is required before the school can release any information about your students. (This includes honor roll, awards lists, and participation in sports that may be published in the newspaper or the yearbook.) IN NO CASE WILL YOUR CHILD'S ADDRESS OR TELEPHONE NUMBER BE RELEASED WITHOUT YOUR EXPRESSED APPROVAL.

Do not restrict release of student information
 RESTRICT release of student information

High School:
 _____ Do not restrict release of information to military recruiter(s)
 _____ RESTRICT release of information to military recruiter(s)

Parent/Guardian Signature: X Date: _____

School Background Information

Last school attended	City/County	State	Date
----------------------	-------------	-------	------

Has your child ever attended a school in Nye County? Yes (list below) No

Nye County school attended	City	State	Date
----------------------------	------	-------	------

Has your child ever attended a school in Nevada? Yes (list below) No

Nevada school attended	City/County	State	Date
------------------------	-------------	-------	------

Have parents/guardians moved within the last three years from another country/state due to working in agriculture, fishing, or dairy activities? Yes No

Special Services

Please indicate any Special Services the student has received:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Preschool | <input type="checkbox"/> Early Childhood | <input type="checkbox"/> Head Start | <input type="checkbox"/> Pre-K Program |
| <input type="checkbox"/> Special Education classes | <input type="checkbox"/> Speech/Language | <input type="checkbox"/> Special reading program | <input type="checkbox"/> Current IEP |
| <input type="checkbox"/> ESL / Bilingual Program | <input type="checkbox"/> Current 504 Plan | <input type="checkbox"/> Talented/Gifted program | <input type="checkbox"/> Adaptive P.E. |
| <input type="checkbox"/> Counseling services | <input type="checkbox"/> Resource Specialist Program | <input type="checkbox"/> Other: | |

Siblings in Nye County School District

NAME	GRADE	SCHOOL	BIRTHDATE
1.			
2.			
3.			
4.			

Home Language Survey (must answer)

- *1. Is a language other than English used in the home? No Yes (list) _____
- *2. Did the student have a first language other than English? No Yes (list) _____
- *3. Does the student most frequently speak a language other than English? No Yes (list) _____

If you have answered one of the above statements "Yes," please complete the information below:

Select the statement that best describes your child's language ability:

- * Speaks ONLY the language other than English
- * Speaks MOSTLY English but some of the language other than English
- * Speaks MOSTLY the language other than English, but speaks some English
- * Speaks BOTH the language other than English and English equally well

* If you have answered "yes" to any of these questions, your child will be tested for the Limited English Proficiency Program.

Country of birth: _____ **Most recent entry date to the U.S.:** _____

Previous Schools Attended: (list schools attended for the last three years)

Year	School Name	State/Country

EMERGENCY/MEDICAL INFORMATION

Please list any medical conditions your child has of which the school should be notified.

Medical Alert 1:	Medical Alert 2:
------------------	------------------

IN THE CASE OF AN EMERGENCY MY CHILD TAKES THE FOLLOWING MEDICATION(S) AT HOME AND/OR SCHOOL:

PLEASE NOTE: For medications given at school, a doctor's note and full instructions must accompany a clearly marked current child resistant prescription bottle for prescribed medication. You will also need to sign a parental permission form for NCSD personnel to administer medication (to be renewed each school year). This includes over the counter medication, i.e.: Aspirin, Acetaminophen, etc.

HEALTH INFORMATION

Indicate any health problems the student has:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Heart defect or disease | <input type="checkbox"/> Sight impaired | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Internal irregularities | <input type="checkbox"/> Surgical | <input type="checkbox"/> Convulsive seizures | <input type="checkbox"/> Kidney/Bladder |
| <input type="checkbox"/> Glasses/contacts | <input type="checkbox"/> Unable to take P.E. | <input type="checkbox"/> Unstable/Stable Diabetes | <input type="checkbox"/> Physical handicap |
| <input type="checkbox"/> Hearing loss | <input type="checkbox"/> Had chicken pox | <input type="checkbox"/> Allergies list: | <input type="checkbox"/> Mild <input type="checkbox"/> Severe |

Other health problems:

Preferred Doctor or Medical Facility

Telephone No.

FOR SCHOOL USE ONLY (Do not write in this area)

BC	IMM	FT= <input type="checkbox"/> Yes <input type="checkbox"/> No	DGS= <input type="checkbox"/> Yes <input type="checkbox"/> No	
INS <input type="checkbox"/> Yes <input type="checkbox"/> No	MEDS <input type="checkbox"/> Yes <input type="checkbox"/> No	RDG (K-1) <input type="checkbox"/> Yes <input type="checkbox"/> No	RDG (1-3) <input type="checkbox"/> Yes <input type="checkbox"/> No	Technology Use Form <input type="checkbox"/> Yes <input type="checkbox"/> No
Student Handbook <input type="checkbox"/> Yes <input type="checkbox"/> No	Release of Info <input type="checkbox"/> Yes <input type="checkbox"/> No	Enrollment Code	Nevada Supp <input type="checkbox"/> Yes <input type="checkbox"/> No	



Student Residency Questionnaire

NCS D School:

The information on this form is required to meet the law known as the McKinney-Vento Act 42 U.S.C. 11434a(2), which is also known as Title X, Part C, of the Elementary and Secondary Education Act. The answers you give will help the school determine the services the student may be eligible to receive.

Please **check only one box** that best describes where the **student** is presently living:

- In my own home or apartment (own or rent), in Section 8 housing, or in military housing.



IF YOU CHECKED THIS BOX, IT IS NOT NECESSARY TO COMPLETE OR TURN IN THIS FORM.



- Living in the home of a friend or relatives because I lost my housing (examples: lost job, fire, flood, divorce, domestic violence, kicked out by parents, parent in military/ deployed, parent(s) in jail)
- In a shelter because I do not have a permanent housing (examples: living in a family shelter, domestic violence shelter, children/youth shelter, FEMA housing)
- In transitional housing (housing that is available for a specific length of time only and is partly or completely paid for by a church, a nonprofit organization, or another organization)
- In a hotel or motel (examples: because of economic hardship, eviction cannot get deposits for permanent home, flood, fire, hurricane, etc.)
- In a tent, car, van, abandoned building, on the streets, at a campground, in the park, or other unsheltered location
- None of the above describe my present living situation **Briefly describe your situation:** _____

Factors contributing to student's current living situation (check all that apply):

- Economic hardship:
 - Loss of job resulting in inability to pay rent or mortgage
 - Income from part-time or low paying job does not cover cost of housing in the area
 - Loss of mortgage, including loss of mortgage of landlord if student/student's family is renting
 - Home issues such as lack of electricity, water, heat, adequate home repair due to lack of funds, overcrowding, mold, etc
- Eviction record and/or inability to produce deposits for rent or utilities
- Lack of affordable housing in the area
- Minor student unable to afford housing on my own
- High medical bills that leave little or no money for housing
- Family issues such as divorce, domestic violence, kicked out by parents, student left due to family conflict, etc. Incarceration of parent/guardian
- Incapacitation of parent or guardian due to health, mental health, drugs/alcohol, or other factors
- Military: Parent/guardian deployed, injured or killed in action
- Home fire not due to natural causes (i.e., faulty equipment/appliances/wiring, furnace, stove, fireplace, etc.)
- Natural disaster --- Tornado, storm, flood, etc. Hurricane, name: _____ Fire: prairie, forest, grass, lightning strike, etc.

None of the above describes the main reasons for my present living situation. **Briefly explain the contributing factors:** _____

Student Information:

Name of Student: _____ Gender: Male Female Birth Date: _____ Grade: _____

Check all that applies that best describes with whom the student resides:

- Parent(s) Legal Guardians(s)* Caregiver(s) who are not legal guardian(s) (Example: friends, relatives, parents of friends, etc.)* Other _____

Name of person with whom **student** resides: _____ Relationship: _____

Address: _____ City: _____ ZIP: _____

Home Phone #: _____ Cell Phone #: _____ Other Emergency #: _____

Students Length of Time at **Previous** Address: _____ Students Length of Time at **Present** Address: _____

Name of the school where student is enrolled or in which student is attempting to enroll: _____ Last School Attended: _____ Last District Attended: _____

(*Please note: legal guardianship may be granted only by a court; students living on their own or with friends or relatives who do not have legal guardianship are allowed to enroll in and attend school. The school cannot require proof of guardianship for enrollment or continued attendance for students who qualify for McKinney-Vento.)

Sibling Information:

Please provide the following information for pre-school and school-age siblings (brothers and/or sisters) of the student:

Name	Grade Level	School	District

X

Signature of Parent/Legal Guardian/Caregiver/Unaccompanied Student

Date

Presenting a false record or falsifying records is an offense under Section 37.10, Penal code, and enrollment of the child under false documents subjects the person to liability for tuition or other costs. TEC Sec. 25.002(3)(d).

For School Use Only:

Date Student was identified M-V:		Date Entered into PowerSchool:	
Homeless Status:			
<input type="checkbox"/> Living with Relatives	<input type="checkbox"/> Released from penal institution		
<input type="checkbox"/> Separated from Family	<input type="checkbox"/> Abandoned		
<input type="checkbox"/> Foster Care Pending	<input type="checkbox"/> Throwaway (kicked out of home or abandoned due to pregnancy, LGBT issues, family conflicts, parental mental health, or other issues)		
<input type="checkbox"/> Runaway	<input type="checkbox"/> Unaccompanied Youth		
Living Arrangements:			
<input type="checkbox"/> Double-up	<input type="checkbox"/> In shelter		
<input type="checkbox"/> In a hotel/motel	<input type="checkbox"/> Unsheltered (on the street, car, park, campground, abandoned building, trailer, substandard housing)		
<input type="checkbox"/> Other (Please describe):			
District Programs this Student is enrolled in (check all that apply):			
<input type="checkbox"/> Special Education	<input type="checkbox"/> English Language Learner (ELL)	<input type="checkbox"/> Alternative School	
Services Provided:			
<input type="checkbox"/> Transportation (School of Origin)	<input type="checkbox"/> School Supplies Provided	Community Agency Referral for:	
<input type="checkbox"/> School Counseling Support	<input type="checkbox"/> Tutoring/After School/School Break Prog.	<input type="checkbox"/> Family Issues/Support Service	<input type="checkbox"/> Emergency Clothing
<input type="checkbox"/> Free Breakfast/Lunch Asst. (FRL)	<input type="checkbox"/> Free Waivers	<input type="checkbox"/> Economic Support	<input type="checkbox"/> Emergency Food
<input type="checkbox"/> Hygiene Supplies	<input type="checkbox"/> Parent Involvement	<input type="checkbox"/> Housing Support	<input type="checkbox"/> Healthcare/Immunization Referral
<input type="checkbox"/> Other:	<input type="checkbox"/> Domestic Violence Program		

Please send this completed and signed form to the District McKinney-Vento Liaison office. Thank you.

 McKinney-Vento Liaison Signature

 Date

TONOPAH ELEMENTARY and TONOPAH MIDDLE SCHOOL ATTENDANCE POLICY and AGREEMENT

ATTENDANCE PHILOSOPHY

School attendance for kindergarten through grade 12 is essential to students' academic success and personal growth. In order to meet or exceed the state and district academic standards and develop habits of punctuality, self-discipline and responsibility, students must attend and participate in their prescribed educational program.

Attendance is a shared responsibility of students, parents/legal guardians, school staff and community.

TARDY DEFINED

If a student comes to class late they will be marked tardy. Tardiness will be reviewed by the school and appropriate intervention will be determined.

ABSENCE DEFINED

Kindergarten Absence (Half-Day only): If a student is absent for 75 minutes or less, he/she is marked absent for a half day. If a student is absent for 76 minutes or more, he/she is marked absent for a full day.

Elementary Absence (including Full-Day Kindergarten): If a student is absent for 150 minutes (2.5 hours) or less, he/she is marked absent for a half day. If a student is absent for 151 minutes or more, he/she is marked absent for a full day.

Secondary Absence (Including Middle School): If a student misses an entire class period, he/she will be marked absent.

CHRONIC ABSENTEEISM

Chronic Absenteeism is defined as any student who is absent for more than eighteen (18) days or periods in the same class during the school year. Required minimum attendance for students in the school district, *pursuant to NRS 392.122, #1*, is ninety percent (90%) of their enrollment in order to be promoted to the next higher grade, or to earn credit. *Students are legally required to attend 90% of the enrollment period.*

TRUANCY DEFINED

Students are required by law to attend all their scheduled classes and it is illegal for them to be truant. Also, according to NRS 392.210 a parent, guardian or other person who has control or charge of any child and to whom notice has been given of the child's truancy as provided in NRS 392.130 and 392.140, and who fails to prevent the child's subsequent truancy within that school year, is guilty of a misdemeanor. As required by law (NRS 392.144), if a pupil is a habitual truant pursuant to NRS 392.140, the principal of the school shall report the pupil to a school police officer or to the local law enforcement agency for investigation and issuance of a citation, if warranted, in accordance with NRS 392.149.

Truancy, as defined by NRS 392.130, is an absence which has not been approved pursuant to subsection 1 or 3 and has been deemed an unapproved absence. In the event of an unapproved absence, the teacher, attendance officer or other school official shall deliver or cause to be delivered a written notice of truancy to the parent, legal guardian, or other person having control or charge of the child.

Habitual truant, as defined by NRS 392.140, is any student who has been declared truant three (3) or more times within one (1) school year. Any student who has once been declared a habitual truant and who in an immediately succeeding school year is absent from school without written approval may again be declared a habitual truant. The Principal is required by law to follow school district procedures in reporting any student who is a habitual truant.

PARENT/LEGAL GUARDIAN RESPONSIBILITIES

1. The parent/legal guardian *shall* provide an oral or written excuse explaining the cause of the absence within three (3) days after the student returns to school (NRS 392.130).
2. *The parent/legal guardian shall notify the school of any student health problems, verified by a medical professional, which may result in lengthy/chronic absences from school.*
3. *The purpose of notification is to discuss possible educational alternatives. (NCSD Policy)*
4. *It is the parent's/legal guardian's responsibility to attend conferences relating to attendance if requested by the school.*

SCHOOL RESPONSIBILITIES

1. The school will attempt to contact the parent/legal guardian on the day of the student's unverified absence. (Blackboard Connect).
2. The school will inform the parent/legal guardian of each student who is enrolled in the school that the student and parent/legal guardian are required to comply with the provisions governing the attendance and truancy of students as set forth in NRS 392.040 to 392.160, inclusive, and any other policies concerning attendance/truancy adopted by the school district's board of trustees.
3. The parents/legal guardians shall be informed of any known or suspected truancy involving their child.
4. Whenever a student's lack of attendance jeopardizes his/her continued educational progress, the school administration shall contact the parents/legal guardians and request a conference to determine causes and solutions. Whenever possible, the conference shall include the parents/legal guardians, student and appropriate school personnel.
5. Schools will indicate on academic warning notices, progress reports and/or report cards information regarding absences.

CONSEQUENCES OF ABSENCES - (NRS 392.122)

For the purposes of this section, the days on which a pupil is not in attendance because the pupil is absent for up to 10 days within 1 school year with the approval of the teacher or principal of the school pursuant to NRS 392.130, must be credited towards the required days of attendance if the pupil has completed course-work requirements. *The teacher or principal of the school may approve the absence of a pupil for deployment activities of the parent or legal guardian of the pupil, as defined in NRS 392C.010.* If the board of trustees of a school district has adopted a policy pursuant to subsection 5, the 10-day limitation on absences does not apply to absences that are excused pursuant to that policy.

APPEAL OF DECISION TO FAIL/RETAIN DUE TO ATTENDANCE

If it is determined a student will fail or will not be promoted to the next grade because he/she has absences in excess of 10%, the student's parent/legal guardian may appeal this decision. If the student is able to pass the course and can be promoted to the next grade the student will be considered for this option based on his/her content knowledge, motivation and maturity. At the discretion of the Principal the student may be given the opportunity to earn credit in the class or be promoted if all of the following conditions are met:

1. The student or parent/legal guardian requests an administrative review of the absences and the student's failing academic status.
2. The student's positive attitude, desire to attend school, and motivation to pass the class or be promoted warrants a second chance.
3. The administrator with the teacher in question will determine if the student can still pass the class academically or be promoted, given what the student must accomplish academically and given the amount of time remaining in the semester or school year.
4. The student and parent/legal guardian agree, in writing (contract), that:
 - a. any further unexcused absence or, truant absence will result in an "F" for the course or the student not being promoted.
 - b. the student will successfully complete all make-up work according to a schedule developed cooperatively with the teacher(s).
 - c. the student will successfully complete all subsequent class work and course/class requirements on time.

The decision of the Principal and Superintendent is final. (District Policy 7222)

 Detach and return this portion of the page to school.

***TONOPAH ELEMENTARY and TONOPAH MIDDLE SCHOOL
 ATTENDANCE POLICY AGREEMENT
 2013-2014 School Year***

**Parent/Guardians, please sign and return this form to your child's teacher.

I, (print Parent/Guardian's name) _____, have received and read the TONOPAH ELEMENTARY and TONOPAH MIDDLE SCHOOL ATTENDANCE POLICY and agree to and understand that my child's attendance is will be a direct result of his/her educational achievement. Therefore, to the best of my ability, I agree to adhere to the policies and procedures outlined in the attendance policy and agreement.

Student's Name: _____ Grade: _____

Teacher: _____

Parent/Legal Guardian Signature: _____ Date: _____

**Nye County School District
ANNUAL RELEASE AND NETWORK ACCESS FORM**

Student Name (Print): _____ Student ID Number: _____
Last First

School: _____ Grade: _____ School Year: _____

Please read the attached Instruction Sheet carefully before signing this document. The parent/guardian must complete all three sections below: (1) Restrict Release of Directory Information (parent/guardian may opt-out); (2) Media and Public Release; and (3) Computer Network Access.

If the materials only contain Directory Information (which is defined below) then Section 1 applies. If the materials contain information beyond Directory Information (such as electronic photographs or other personally identifiable information) then Section 2 applies.

1. RESTRICT RELEASE OF DIRECTORY INFORMATION

The term "Directory Information" means one or more of the following: student name, date and place of birth, address, school attended, years of attendance, grade level, photographs (only when used in printed school publications as defined in NCSD Policy 7800 FERPA, participation in officially recognized activities and sports, weight and height of members of athletic teams, and diplomas and awards received.

FERPA allows the Nye County School District (NCSD) to release Directory Information without the consent of the parent/guardian. However, a parent/guardian has the right to opt-out of that disclosure.

Leave this section **BLANK** if you request **NO** restrictions. Select one of the following **IF** you are requesting NCSD to **restrict** release of Directory information from the following sources:

- Withhold Directory Information from military only (11th & 12th grade students only)
- Withhold Directory Information from all outside sources
- Withhold Directory Information from all outside sources, and also restrict Directory Information in NCSD school publications such as the **annual yearbook**, playbills, honor roll or other recognition lists, graduation programs, printed newsletters and sports activity programs/sheets

Please note if you selected "all outside sources" in Section 1, you should be aware that giving permission in Section 2 below will allow the release of personally identifiable information beyond Directory Information about your student.

2. MEDIA AND PUBLIC RELEASE (BEYOND DIRECTORY INFORMATION)

At times, the NCSD may seek to release additional personally identifiable student information beyond Directory information in either print or electronic format to be utilized in either internal or external media sources that may be released to the public. This information may include the student's electronic (digital) photograph, a description of school activities or achievements that contains personally identifiable information, and/or audio/video/film reproduction of your student. This information may be used in media publications, newspaper articles, television coverage, websites (including <http://www.nye.k12.nv.us>), school newsletters (**including those in electronic formats**), video presentation, and/or school district or public presentations.

I **give** **do not give** permission to release information described above about my student for use in **NCSD OWNED/PRODUCED** materials. Examples include school newsletters posted on <http://www.nye.k12.nv.us> that contain student photographs and school district PowerPoint or video presentations that include personally identifiable student information.

I **give** **do not give** permission to release information described above about my student for use in **NON-NCSD OWNED/PRODUCED** materials. Examples include information produced and broadcast by the news media on television and newspaper articles written and published by the local newspapers.

3. COMPUTER NETWORK ACCESS

I **give** **do not give** permission for my student to access, produce, video conference, and communicate information on the District computer network resources in accordance with the Acceptable use Policy of the Nye County School District. Student work, artwork or projects will be identified by first name, grade, and school only. Students who do not have parent/guardian permission to use the District's computer network will be given alternative educational activities.

The signature of the parent/guardian below applies to all three sections set forth above. The student understands and will abide by the Acceptable Use Policy of the Nye County School District. The student understands that violating the Acceptable Use Policy may result in loss of network privileges and/or other District disciplinary measures.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Student Signature

Date

Nye County School District
ANNUAL RELEASE AND NETWORK ACCESS FORM INSTRUCTION SHEET

The **parent/guardian** must complete all three sections on the attached Annual Release and Network Access Form: (1) Restrict Release of Directory Information; (2) Media and Public Release; and (3) Computer Network Access.

Once signed and dated, the attached form shall remain in effect until the end of the current school year. However, at any time during the school year, the parent/guardian may revoke this permission for future use by notifying, in writing, the principal of the school.

1. RESTRICT/RELEASE OF DIRECTORY INFORMATION (to be completed by **parent/guardian** only)

The Family Educational Rights and Privacy Act (FERPA) allow the Nye County School District (NCS D) to release Directory Information without the consent of the parent/guardian. However, parents have the right to have Directory Information restricted upon request.

Directory Information is information not generally considered harmful, or an invasion of privacy if disclosed. The term Directory Information means one or more of the following: student name; date and place of birth; address; school attended; grade level; years of attendance; photographs (only when used in printed school publications are defined in NCS D Policy 7800 FERPA); participation in officially recognized activities and sports; weight and height of members of athletic teams; and degrees and awards received.

2. MEDIA AND PUBLIC RELEASE – BEYOND DIRECTORY INFORMATION (to be completed by **parent/guardian** only)

This section will apply if the materials contain personally identifiable information beyond Directory Information. The first box pertains to information for use in NCS D owned or produced materials. The second box pertains to information for use in non-NCS D owned or produced materials.

Personally identifiable information is any information about a student contained in his or her education records that cannot be disclosed unless there is parental consent or an exception to FERPA applies. The term personally identifiable information includes the student's: phone number; parent or other family member's name; personal identifier (e.g., social security number or student number); mother's maiden name; or other information that is linked or linkable to a specific student that would allow a reasonable person in the school community, who does not have personal knowledge of the relevant circumstances, to identify the student with reasonable certainty. Additional examples of personally identifiable information include student grades, student discipline records, health records, and special education status.

****Note:** If the materials only contain Directory Information then Section 1 applies. If the materials contain information beyond Directory Information (such as electronic photographs or other personally identifiable information) then Section 2 applies. For example, a school newsletter will fall under Section 1 if it contains only Directory Information regarding your student; however, it will fall under Section 2 if it contains an electronic photograph of your student and/or other personally identifiable information.

3. COMPUTER NETWORK ACCESS

Parent Agreement:

Please read the terms and conditions for the Nye County School District's Acceptable Use Policy. Access to the Nye County School District's educational network resources is designed for educational purpose, and the District has taken precautions to eliminate access to controversial material. However, please recognize it is impossible for the District to restrict access to all controversial materials. Furthermore, if your student does not follow the Nye County School District's Acceptable Use Policy, privileges to access the District computer network resources may be revoked.

Student Agreement:

Students must also indicate that they understand and will abide by the Acceptable Use Policy of the Nye County School District. Furthermore, they must understand that violating the Acceptable use Policy may result in loss of network privileges and/or other district disciplinary measures.

WHAT ARE THE RULES OF THE BUS STOP? 2013/14

SAFETY AND CONDUCT AT THE BUS STOP AND WALKING TO AND FROM THE BUS STOP

NRS 392.375 requires the District to provide safety information and rules for proper and appropriate conduct for students who use the provided school bus system. This includes the time a student travels to and from the stop, along with the time they are at the stop.

SAFETY

- 1) Parents should practice with their student so they can identify their bus stop and the path they will travel between the stop and their home.
- 2) Wear light colored clothes to improve their visibility to vehicles.
- 3) Plan to leave home in enough time to arrive at the stop ten (10) minutes prior to the scheduled pick up time.
- 4) Walk out of the roadway whenever possible. Stay close to the edge of the roadway when this is not possible.
- 5) While at the stop, stay away from the edge of the roadway (10 feet + if possible).
- 6) **DO NOT PLAY IN THE ROADWAY**
- 7) Do not approach the bus until it comes to a complete stop.

CONDUCT

- 1) No horseplay while en route to and from home or while at the stop.
- 2) Keep your hands to yourself.
- 3) Do not throw anything at other students, vehicles, animals or property.
- 4) Stay off of **Private Property**. Do not sit on fences.

**Please remember... IF IT IS AGAINST THE RULES AT SCHOOL,
IT IS AGAINST THE RULES AT THE BUS STOP!!!!**

CONSIDERATION

Parents do not block private driveways while waiting at the stop with your student.
Students, remember that you are in front of private residences.
Please do not yell and scream while talking with other students.
Please do not leave trash at the bus stop.

WHAT ARE THE RULES OF THE SCHOOL BUS? 13/14

A. Rules of Passenger Conduct (while en route to and from bus stop, at bus stop and on bus)

The safety of school bus passengers is the most important consideration of the school bus operation. Failure to comply with the listed rules will result in a disciplinary report to the school administrator.

Passengers must:

1. Comply with the directions of the driver.
2. Behave in an orderly manner while en route to, waiting for, entering, riding or exiting the bus.
3. Remain properly seated **AT ALL TIMES**.
4. Be at the bus stop five minutes prior to the scheduled stop.
5. Not extend any part of their bodies out of the bus or throw any item in or out of the bus.
6. Not bring any food or drink on the bus. Bus drivers may make exceptions for athletic runs and special occasions.
7. Not do damage to any part of the bus or another student's property.
 - a. For any infractions involving damage, restitution will be required for all damages, along with the assigned consequence.
8. Not bring skateboards, glass containers, large instruments, sports equipment, animals, weapons, liquor, tobacco, drugs or any other item that can not be held on lap or could interfere with passenger safety.
9. Not participate in loud talking, use of profanity, displaying obscene gestures, scuffling, throwing things, spraying perfume, cologne, hairspray etc, standing or changing seats, or any other action which creates a safety hazard or which distracts the attention of the driver.
10. Follow the bus driver's directions and signals when crossing the road, and while entering or departing the bus.
 - a. Crossing behind the bus is prohibited. Do not touch the outside of the bus.
11. Not ride a bus other than their assigned bus. Students will board and disembark from the bus only at their assigned bus stop
12. Kindergarten students must be met at the bus stop by an approved parent/guardian/adult.

B. Consequences of Violating Bus Rules

THE SITE ADMINISTRATOR WILL ENFORCE THE FOLLOWING DISCIPLINARY ACTION

First Report	=	Warning or Suspension from bus for one to three days
Second Report	=	Suspension from bus for one to three days
Third Report	=	Long-term suspension from bus for four to ten school days
Fourth Report	=	Removal from bus for up to one school year (date to date)

Any severe misbehavior that potentially causes a safety problem could result in an immediate suspension from bus transportation. These inappropriate behaviors may include:

1. Physical harm or threat to another student.
2. Physical harm or threat to bus driver.
3. Fighting, pushing, tripping, smoking, possession or use of: alcohol, weapons or drugs.
4. Property damage (restitution will be required).
5. Refusal to obey bus driver.

If a student receives an incident report, parent contact would be a copy of the report sent home with the student and one mailed to the address listed on the student's records.

Any suspension from the bus would result in a good faith attempt, by the school, to contact parents immediately by phone.

NYE COUNTY SCHOOL DISTRICT - TRANSPORTATION DEPARTMENT

2013-2014 SCHOOL YEAR

SCHOOL BUS APPLICATION & REGISTRATION

I request the privilege of having my child (one student per application) ride the School Bus and agree to be responsible for his/her behavior. I have read and understand the Bus Safety Rules and have discussed them with my child. I further understand, should my child be suspended from school bus privileges, I am responsible to ensure his/her attendance at school as required by the Compulsory Education Laws of the State of Nevada.

STUDENT NAME: _____

SCHOOL: _____ GRADE: _____

RESIDENCE ADDRESS: _____

MAILING ADDRESS: _____

PARENT / GUARDIAN NAME: _____

HOME TELEPHONE #: _____ DAYTIME TELEPHONE #: _____

EMERGENCY CONTACT NAME: _____ PHONE #: _____

PARENT / GUARDIAN SIGNATURE: _____ DATE: _____

CLOSEST CROSS STREETS: _____

This application must be completed and returned to the NCSD Transportation Office. Students MUST BE REGISTERED in order to be a school bus rider and be assigned a bus stop. Elementary students must live one (1) or more miles from their zoned school and Middle School and High School students must live two (2) or more miles from their zoned school to be eligible for School Bus Transportation.

School Transportation, when provided, is limited to "home to school ~ school to home, same bus ~ same stop" (address as listed on school registration).

NOTES TO SCHOOL / BUS DRIVERS ARE NOT ACCEPTED.

Variance / special circumstance requests must be submitted to the Transportation Office in writing for consideration.

=====

****** PLEASE RETURN THIS APPLICATION / REGISTRATION SHEET TO ******

NCSD TRANSPORTATION - 1900 S. Woodchips Rd. - Pahrump, NV 89048

Office: (775) 727-2443 Fax #: (775) 727-2445

**BUSES MAY BE EQUIPPED WITH VIDEO / AUDIO RECORDING DEVICES
STUDENTS ARE TO FOLLOW THE RULES**

******* TRANSPORTATION OFFICE USE ONLY *******

- all info correct new student new school new address new phone new bus stop input

ROUTE #: _____ BUS STOP: _____

AM PICK-UP TIME: _____ PM DROP-OFF TIME: _____

ASSIGNMENT NOTIFICATION GIVEN:

TO: _____ BY: _____ DATE: _____ fax / in person / phone / driver (circle)

GRID _____

[NYE COUNTY SCHOOL DISTRICT]

Dear Parent/Guardian:

Children need healthy meals to learn. [Nye County School District] offers healthy meals every school day. Breakfast costs [\$1.00 for elementary students, \$1.25 for middle school and \$1.50 for high school students,]; lunch costs [\$2.25 for elementary students, \$2.45 for middle school students and \$2.65 for high school students]. Your children may qualify for free meals or for reduced price meals. Reduced price is [\$0.30] for breakfast and [\$0.40] for lunch.

1. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Complete the application to apply for free or reduced price meals. *Use one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: [the kitchen manager at the school your children attend.].
2. WHO CAN GET FREE MEALS? All children in households receiving benefits from (SNAP) formerly the Food Stamp Program, the Food Distribution Program on Indian Reservations (FDPIR) or (TANF), can get free meals regardless of your income. Also, your children can get free meals if your household's gross income is within the free limits on the Federal Income Eligibility Guidelines.
3. CAN FOSTER CHILDREN GET FREE MEALS? Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals. Any foster child in the household is eligible for free meals regardless of income.
4. CAN HOMELESS, RUNAWAY, AND MIGRANT CHILDREN GET FREE MEALS? Yes, children who meet the definition of homeless, runaway, or migrant qualify for free meals. If you haven't been told your children will get free meals, please call or e-mail the food service coordinator, homeless liaison or migrant coordinator to see if your child(ren) qualify.
5. WHO CAN GET REDUCED PRICE MEALS? Your children can get low cost meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on this application.
6. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE APPROVED FOR FREE MEALS? Please read the letter you got carefully and follow the instructions. Call the school food service coordinator at [775-727-7882 or 877-727-7705 ext. 260] if you have questions.
7. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT ANOTHER ONE? YES. Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.
8. I GET WIC. CAN MY CHILD(REN) GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out an application.
9. WILL THE INFORMATION I GIVE BE CHECKED? Yes and we may also ask you to send written proof.
10. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.

11. **WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION?** You should talk to school officials. You also may ask for a hearing by calling or writing to **THE Superintendent, Nye County School District, 484 S. West St. Pahrump, NV. 89048**
12. **MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN?** Yes. You or your child(ren) do not have to be U.S. citizens to qualify for free or reduced price meals.
13. **WHO SHOULD I INCLUDE AS MEMBERS OF MY HOUSEHOLD?** You must include all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.
14. **WHAT IF MY INCOME IS NOT ALWAYS THE SAME?** List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
15. **WE ARE IN THE MILITARY. DO WE INCLUDE OUR HOUSING ALLOWANCE AS INCOME?** If you get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.
16. **MY SPOUSE IS DEPLOYED TO A COMBAT ZONE. IS HER COMBAT PAY COUNTED AS INCOME?** No, if the combat pay is received in addition to her basic pay because of her deployment and it wasn't received before she was deployed, combat pay is not counted as income. Contact your school for more information.
17. **MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for **[SNAP]** or other assistance benefits, contact your local assistance office.

If you have other questions or need help, call **[the Food Service Manager at your child's school or you may call the Food Service Coordinator at 775-751-6871 or 877-727-7705 ext. 260].**

NYE COUNTY SCHOOL DISTRICT 2013/2014 FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION

PART 1. ALL HOUSEHOLD MEMBERS

Names of <u>all</u> household members (First, Middle Initial, Last)	Name of school for each child/or indicate "NA" if child is not in school	Check if a foster child (legal responsibility of welfare agency or court) * If all children listed below are foster children, skip to Part 5 to sign this form.	Check if NO income
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Part 2. BENEFITS

IF ANY MEMBER OF YOUR HOUSEHOLD RECEIVES [State SNAP], [FDPIR] OR [State TANF Cash Assistance], PROVIDE THE NAME AND CASE NUMBER FOR THE PERSON WHO RECEIVES BENEFITS AND SKIP TO PART 5. IF NO ONE RECEIVES THESE BENEFITS, SKIP TO PART 3.

NAME: _____ CASE NUMBER: _____

PART 3. IF ANY CHILD YOU ARE APPLYING FOR IS HOMELESS, MIGRANT, OR A RUNAWAY CHECK THE APPROPRIATE BOX AND CALL your school, homeless liaison, migrant coordinator. HOMELESS MIGRANT RUNAWAY

PART 4. TOTAL HOUSEHOLD GROSS INCOME. You must tell us how much and how often.

1. NAME (List only household members with income)	2. GROSS INCOME AND HOW OFTEN IT WAS RECEIVED EXAMPLE: \$100/MONTHLY \$100/TWICE A MONTH \$100/EVERY OTHER WEEK \$100/WEEKLY			
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security, SSI, VA Benefits	All Other Income
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____

PART 5. SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN)

An adult household member must sign the application. If Part 4 is completed, the adult signing the form also must list the last four digits of his or her Social Security Number or mark the "I do not have a Social Security Number" box. (See Privacy Act Statement on the back of this page.)

I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted.

Sign here: _____ Print name: _____ Date: _____

Address: _____ Phone Number: _____

City: _____ State: _____ Zip Code: _____

Last four digits of Social Security Number: *** - * * - ____ I do not have a Social Security Number

PART 6. CHILDREN'S ETHNIC AND RACIAL IDENTITIES (OPTIONAL)

Choose one ethnicity:

- Hispanic/Latino
 Not Hispanic/Latino

Choose one or more (regardless of ethnicity):

- Asian American Indian or Alaska Native Black or African American
 White Native Hawaiian or other Pacific Islander

DO NOT FILL OUT THIS PART. THIS IS FOR SCHOOL USE ONLY.

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice A Month x 24 Monthly x 12

Total Income: _____ Per: Week, Every 2 Weeks, Twice A Month, Month, Year Household size: _____

Categorical Eligibility: ___ Date Withdrawn: _____ Eligibility: Free___ Reduced___ Denied___

Reason: _____

Temporary: Free___ Reduced___ Time Period: _____ (expires after ___ days)

Determining Official's Signature: _____ Date: _____ (REQUIRED)

Confirming Official's Signature: _____ Date: _____ (REQUIRED)

Verifying Official's Signature: _____ Date: _____

Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.

INCOME ELIGIBILITY GUIDELINES					
EFFECTIVE FROM		JULY 1, 2013		TO	JUNE 30, 2014
REDUCED PRICE MEALS					
Household size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	21257	1772	886	818	409
2	28694	2392	1196	1104	552
3	36131	3011	1506	1390	695
4	43568	3631	1816	1676	838
5	51005	4251	2126	1962	981
6	58442	4871	2436	2248	1124
7	65879	5490	2745	2534	1267
8	73316	6110	3055	2820	1410
For Each Additional Family Member Add	7437	620	310	287	144

Privacy Act Statement: This explains how we will use the information you give us.

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly. "In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."

TONOPAH ELEMENTARY SCHOOL 2013-2014

© PLEASE PUT YOUR CHILD'S NAME ON THE REMAINDER OF THE 2nd GRADE SUPPLY LIST BELOW

1 Pair of Fiskar@ Scissors
1 Plastic Pencil Box

1 Composition Notebook

PLEASE DO NOT SEND TRAPPER KEEPERS, LARGE ZIPPERED FOLDERS, OR PENCIL SHARPENERS

K-2 RESOURCE

1 Package #2 Pencils

2 Large Boxes Kleenex

1 Box of Crayons

1 Package Colored Pencils

3RD GRADE

4 Packages #2 Pencils

1 Packages Wide Ruled Note book Paper

2 Large Glue Sticks

2 Large Boxes Kleenex

1 Package Post-It Notes

12 Dry Erase Markers

1 Packages 48 Count Crayons

1 ruler

4TH GRADE

1 pkg Wide Rule paper

3 pkg #2 Pencils

1 red and 1 blue pen

1 pkg black Expo Dry Erase markers

1 pkg asst. colors Expo Dry Erase markers

1 clean - old sock

2 Large Boxes Kleenex

Colored Pencils

1 box Markers

Fiscar @ Scissors

2 glue sticks

4 Composition Notebook (7 inch)

3 Pink erasers

1 pencil sharpener

Please do not send: trapper keepers or other large zippered folders

5TH GRADE

#2 Pencils (4 packages)

Loose Leaf Paper (college rule - 2 packages)

1 Large Glue Stick

4 Dry Erase Markers

1 Clean - Old Sock

2 Boxes Kleenex

5 Pocket Folders

3 Composition Notebooks

1 Box of Crayons

2 Black Sharpie Markers

2 Highlighters

NO 3-RING BINDERS - NO COLORED PENCILS

NO PENCIL SHARPENERS

3-5 RESOURCE

#2 Pencils (1 Package)

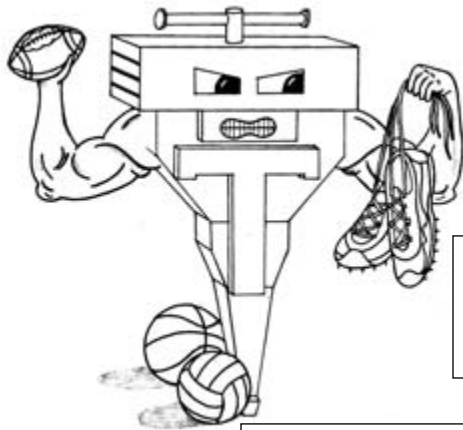
Crayons, Markers, or Colored Pencils

Loose Leaf Notebook Paper

2 Large Boxes Kleenex

2 Notebooks

Your child's teacher may have additional supply requests throughout the year. They will send home these requests as needed.



REQUIRED
2013-2014
GRADES K-5



*****ALL STUDENTS WILL HAVE
PHYSICAL EDUCATION CLASSES
THIS YEAR AND EVERY STUDENT
MUST HAVE NON-MARKING SOLED
ATHLETIC SHOES EXCLUSIVELY FOR
P.E. CLASS**

Please remember to put your child's name on his/her backpack, lunch box, and coat. Some classrooms share paper, pencils, crayons, etc.

Kindergarten

2 containers WetOnes@ for hands & face(no baby wipes)

4 pink erasers

2 Large Boxes Kleenex

1 box crayons (12 or 18 count)

1 largebox snack crackers(goldfish,cheese-its,saltines,etc)

1 large box cookies (vanilla wafers, graham crackers,etc)

1 large pkg #2 pencils

1 box quart size ziplock plastic bags

1ST GRADE

4 Dry Erase Markers

2 Boxes 16 or 24 Crayola (no larger)

#2 Papermate Pencils -24

4 Large Pink Erasers

6 Glue Sticks

1 Plastic Pencil Box

1 Backpack w/ child's name

1 Clean - Old Sock

3 Boxes Graham or Other Crackers

2 Large Boxes Kleenex

DO NOT PUT NAMES ON SUPPLIES AS THEY ARE SHARED

WITH ALL THE CHILDREN IN OUR CLASSROOM

2ND GRADE

2 Large Boxes Kleenex*

4 Large Pink Erasers*

4 Black Expo@ Dry Erase Markers*

3 Pack #2 Pencils*

3 Small Glue Sticks*

2 pkgs crayons* (16 or 24 Count - no larger, please)

1 Nylon Zipper Pencil Bag*

1 clean - old sock

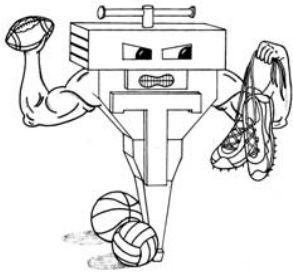
Girls - 1 Box Gallon Size Ziploc Bags*

Boys - 1 Box Quart Size Ziploc Bags*

WE SHARE ALL STARRED* ITEMS

TONOPAH MIDDLE SCHOOL 2013-2014

JACKHAMMERS



SCHOOL SUPPLY LIST 2013-2014 GRADES 6-8

***ALL STUDENTS WILL HAVE
PHYSICAL EDUCATION CLASSES
THIS YEAR AND EVERY STUDENT
MUST HAVE NON-MARKING SOLED
ATHLETIC SHOES EXCLUSIVLEY FOR
P.E. CLASS

REQUIRED:

- 5- Separate Notebooks or
- 3-Ring Binder (Trapper Keeper)
- 5- Folders (one for each subject required to be kept in the classroom ~ unless using separate subject notebooks)
- Plenty of pencils (if mechanical, extra lead)
- Pens (blue or black ink for formal writing) **other colors for checking**
- 2 - Boxes Kleenex
- 1 - Highlighter (any color)
- 1 - Daily planner or small notebook to be used as a daily planner
- 4 - Large Book Covers
- 1 - Small Book Cover

NICE TO HAVE

Protractor ~ Ruler ~ Large Pencil Eraser ~
Glue Stick ~ Markers ~ Colored Pencils ~
College Rule Loose Leaf Notebook Paper*
(*Only if not using 5 separate Notebooks)

PLEASE NOTE:

All students in grades 6 - 8 should have a sturdy backpack to carry work and papers in.

Required replacement at frequent intervals:

- Notebook paper
- Pens
- Folders
- Pencils or Pencil Lead

To do their best work, pupils in all grades must have necessary materials.

Please have your child bring these materials on the first day of school and each day regularly to class.

Students are EXPECTED to come to class prepared. Valuable class time is wasted if they are not prepared to do their work.

We appreciate your cooperation and we know that together - parents, teachers and school staff will help your child have a happy and well-rounded education.