OWENS ELEMENTARY SCHOOL DISTRICT NO. 6, 14109 E. CHICKEN SPRINGS RD, PO BOX 38, WIKIEUP, AZ, 85360 – PH: 928-765-2311- FAX: 928-765-2335-

EMAIL: MIKEY.B@OWENS-WHITNEY.ORG

STUDENT ENROLLMENT DOCUMENTATION

Parent/Guardian must supply the following items for all NEW students upon enrollment.

Immunization records: Students must have proof of all immunizations, or valid exemption, in order to attend the **first day** of school. Arizona law allows exemptions for medical reasons, lab evidence of immunity and personal beliefs. Homeless students are allowed a five-day grace period. The Mohave County Department of Public Health will provide free immunizations to all AHCCS, kid's care, uninsured or underinsured and Native American or Alaskan native children. Take your child to your primary care provider if you have private health insurance which covers the cost of immunizations.
Note: For students PREVIOUSLY ENROLLED, we have immunization record on student's file.

Original Birth Certificate: This certificate is used to verify the correct legal name and birth date. In compliance with federal, state, and district guidelines, all students are enrolled using the legal name on the student's birth certificate UNLESS there has been a court-ordered name change and a photocopy of the name change has been provided at enrollment.
Note: For students PREVIOUSLY ENROLLED, we have copy of birth certificate in student's file.

Legal guardianship or custody papers: Are necessary, if applicable to this student based on the following scenarios:

- If an adoption has taken place, it is reflected with an amended birth certificate, and student lives with adoptive parents as listed on the amended birth certificate, that is sufficient.
- If student lives with **one custodial parent as the result of a divorce.**
- In case of an Emergency Custody Order we must have a copy as soon as possible.
- If the student lives with anyone else, i.e. grandparents, aunt, uncle, sibling, friends or other relatives. **We must have a copy of the court papers granting guardianship within 30 days of enrollment.**

Parent's Photo ID: Parents/Guardians need to provide a copy of Photo ID to keep on file for each student.

Homeless Education Assistance Survey: You must complete the Mc-Kinney Vento Homeless Education Survey to determine eligibility for potential services as a homeless individual.

Every Year for ALL students:

Residency: Parent/ Guardians must provide residency of physical address of where the student resides.

Age Limitation (*There are no exceptions to the age limitations stated below***)**
Enrollment information:

- **Kindergarten** – A student enrolling in kindergarten must be five (5) years of age on or prior to August 31st in the school year for which you are applying (Arizona Revised Statutes 15-821).

- **First Grade** – A student enrolling in first grade must be six (6) years of age on or before August 31 in the school year for which you are applying (Arizona Revised Statutes 15-821)

Arizona Department of Education
Arizona Residency Guidelines
REVISED 11/08/2021

Disclaimer: The Arizona Department of Education is providing these guidelines as technical assistance to the field. These guidelines are how the Arizona Department of Education interprets the below statutes and are not binding nor is it legal advice. If you have any legal questions, please consult an attorney.

INTRODUCTION

Local educational agencies are required to provide all children who reside within the school district with equal access to public education at the elementary and secondary level. The U.S. Supreme Court held in *Plyer v. Doe*, 457 U.S. 202 (1982), that the undocumented or non-citizen status of a student (or his or her parent/guardian) is irrelevant to that student's entitlement to an elementary and secondary public education. However, pursuant to A.R.S. § 15-823, a school district or charter school may not include non-Arizona-resident pupils in their student count and may not obtain state aid for those pupils.

In Arizona, the "district of residence" of a student is determined by the residency of the parent or guardian with whom the student lives. In some cases, the district of residence may also be determined by the residency of a relative who is seeking legal guardianship or custody of a student. A.R.S. § 15-821(D). In addition, if a school district governing board determines that a student's "physical, mental, moral or emotional health is best served by placement with a grandparent, brother, sister, stepbrother, stepsister, aunt or uncle who is a resident within the school district," and the placement with that relative is not "solely for the purpose of obtaining an education in this state without payment of tuition," the student is considered a resident of the district. A.R.S. § 15-823(C).[1]

Accordingly, it is the responsibility of the school districts and charter schools that receive state aid to ensure that student/parent residency information is accurate and verifiable. **While a district may restrict attendance to district residents based on available classroom space,[2] inquiring into students' citizenship or immigration status, or that of their parents or guardians, is not relevant to establishing residency within the district. A school district or charter school may not bar a student from enrolling because he or she lacks a birth certificate or has records indicating a foreign place of birth, such as a foreign birth certificate.[3]**

The Arizona Department of Education may audit schools to ensure that only Arizona resident students are reported for state aid. Any school district or charter school that cannot demonstrate the accuracy of any student's residency through documents provided by the parent/guardian may be required to repay the state aid received for that

[1] *See also Martinez v. Bynum*, 461 U.S. 321 (1983).
[2] Pursuant to A.R.S. § 15-816 and A.R.S. § 15-816.01, Arizona's mandatory open enrollment policies allow a student to apply for admission and transfer to any public school of his or her choice, based on available classroom space, even if it is outside of the student's district of residence. There are two basic types of open enrollment policies: 1) Intra-district: Students transfer to another school within the resident school district, or 2) Inter-district: Students transfer to a school outside of their resident district.
[3] For more information, please read https://www2.ed.gov/about/offices/list/ocr/letters/colleague-201405.pdf.

student. The following are examples of verifiable documentation parents may provide to demonstrate that they reside in a district.

VERIFIABLE DOCUMENTATION

A.R.S. § 15-802(B) requires school districts and charter schools to obtain and maintain verifiable documentation of Arizona residency upon enrollment in an Arizona public school. This document is designed to assist school districts and charter schools in meeting the legal requirements of the statute.

The documentation required by A.R.S. § 15-802 **must be provided at initial enrollment of a student in a school district or charter school in this state and reaffirmed, although not necessarily recollected, during the district or charter's annual registration process. This process will vary by the school, school district, or charter school (i.e. an annual form asking parents to confirm address).**

Every school district or charter school is required,[4] within 30 days of enrollment, to obtain a certified copy of a pupil's birth certificate or other reliable proof of the pupil's identity and age,[5] or a letter from the authorized representative of an agency having custody of the pupil pursuant to title 8, chapter 2 certifying that the pupil has been placed in the custody of the agency as prescribed by law. A school district or charter school MAY seek photo identification from the person enrolling a student to ensure that the adult is entitled to enroll the student in school, as long such a requirement does NOT unlawfully bar a student from enrolling in school.[6]

In case of an ADE Audit, the school, school district or charter school will be asked what process is used and what documentation is obtained via this process. If the student's residence has not changed, an affirmation (via a checkbox) that the previously provided proof of residency remains accurate should be sufficient. The documentation supporting Arizona residency should be maintained according to the school's records retention schedule.

For members of the armed services, a school may enroll a student if the parent provides a hard-copy or electronic document of their transfer or pending transfer to a military installation within the state. The parent must provide official documentation of residency within ten days after the arrival date which may include a temporary on-base billeting facility as their address. **PROOF OF RESIDENCY IS NOT REQUIRED FOR HOMELESS STUDENTS.[7]** 42 U.S.C.§ 11 432(g)(3)(C)(i).

In general, students will fall into one of two groups: (1) those whose parent or legal guardian is able to provide documentation bearing his or her name and address; and (2) those whose parent or legal guardian cannot document his or her own residence because of extenuating circumstances including, but not limited to, that the family's household is multi-generational. Different documentation is required for each circumstance.

1. **Parent(s) or legal guardian(s) that maintains his or her own residence:** The parent or legal guardian must complete and sign a form indicating his or her name, the name of the school district, school site, or

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[4] A.R.S. §15-828.

[5] Other proof of the pupil's identity/age includes: pupil's baptismal certificate, an application for social security number or original school registration records and an affidavit explaining inability to provide a copy of the birth certificate, A.R.S. § 15-828 (A)(1)-(3).

[6] For more information, please read U.S. DOJ Civil Rights Division "Fact Sheet: Information on the Rights of All Children to Enroll in School", https://www.justice.gov/sites/default/files/crt/legacy/2014/05/08/plylerfact.pdf.

[7] Per A.R.S. §15-824 (C), "Homeless student" means a pupil who has a primary residence that is: (1) A supervised publicly or privately operated shelter designed to provide temporary living accommodations; (2) An institution that provides a temporary residence for individuals intended to be institutionalize or; (3) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

charter school in which the student is being enrolled, and provide **one** of the following documents, which bear the parent or legal guardian's full name and residential address or physical description of the property where the student resides (no P.O. Boxes):

- Valid Arizona driver's license, Arizona identification card
- Valid Arizona motor vehicle registration
- Valid Arizona Address Confidentiality Program authorization card
- Property deed/Mortgage documents
- Property tax bill
- Rental agreement or lease (including Section 8 agreement or off-base military housing)
- Utility bill (water, electric, gas, cable, phone)
- Bank or credit card statement
- W-2 wage statement
- Payroll stub
- Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe located in Arizona
- Other documentation from a state, tribal, or federal agency (Social Security Administration, Veterans' Administration, Arizona Department of Economic Security, etc.)
- Temporary on-base billeting facility (for military families)
- Under A.R.S. § 41-5001(A), school districts and charter schools must accept consular identification cards that are issued by a foreign government as a valid form of identification if the foreign government uses biometric verification techniques in issuing the consular identification card.[8]

*A model Arizona Residency Documentation Form is available for schools at the end of this document.

2. **Parent(s) or legal guardian(s) that does not maintain his or her own residence:** The parent or legal guardian must have an **affidavit of shared residency** form completed indicating his or her name, the name of the school district, school site, or charter school in which the student is being enrolled, and submit a signed, notarized affidavit for the person who maintains the residence where the student lives attesting to the fact that the student resides at that address, along with a document from the bulleted list bearing the name and address of the person who maintains the residence.

*A model Affidavit of Shared Residence form is available for schools at the end of this document.

USE OF AND RETENTION OF DOCUMENTS BY SCHOOLS

School officials must **retain a copy** of the attestations or affidavits and copies of any supporting documentation presented for each student (photocopies acceptable) that school officials believe establish validity. Documents presented may be different in each circumstance, and unique to the living situation of the student. Documents retained by the school district or charter school may be used as an indication of residency; however, documentation is subject to audit by the Department.

Personally identifiable information other than name and address (SSN, account numbers, etc.) should be redacted from the documentation either by the parent/guardian or the school official prior to filing. **MOST INFORMATION PROVIDED BY PARENTS AND GUARDIANS TO ARIZONA PUBLIC SCHOOLS IS AN EDUCATIONAL RECORD MADE CONFIDENTIAL UNDER THE FEDERAL EDUCATIONAL RIGHTS AND PRIVACY ACT AND ARIZONA LAW UNLESS DESIGNATED BY THE SCHOOL AS**

[8] See *Amphitheater Unified Sch. Dist. No. 10 v. Harte,* 128 Hart Ariz. 233, 234 (1981), § 15-187(C); noting that school districts and charter schools are political subdivisions.

DIRECTORY INFORMATION. A PARENT OR GUARDIAN MAY OPT OUT OF DIRECTORY INFORMATION IN ACCORDANCE WITH DISTRICT POLICY. OTHERWISE, EDUCATIONAL RECORDS ARE ONLY USED FOR LEGITIMATE EDUCATIONAL PURPOSES.

Arizona Department of Education

Arizona Residency Documentation Form

Student_____ School _____

School District or Charter Holder _____

Parent/Legal Guardian _____

As the Parent/Legal Guardian of the Student, I attest* that I am a resident of the State of Arizona and submit in support of this attestation a copy of the following document that displays my name and residential address or physical description of the property where the student resides:

_____ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
_____ Valid Arizona Address Confidentiality Program authorization card
_____ Real estate deed or mortgage documents
_____ Property tax bill
_____ Residential lease or rental agreement
_____ Water, electric, gas, cable, or phone bill
_____ Bank or credit card statement
_____ W-2 wage statement
_____ Payroll stub
_____ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona
_____ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
_____ Temporary on-base billeting facility (for military families)
_____ Consular identification card issued by a foreign government as a valid form of identification if the foreign government uses biometric verification techniques in issuing the consular identification card
_____ I am currently unable to provide any of the foregoing documents. Therefore, I have provided an original affidavit signed and notarized by an Arizona resident who attests that I have established residence in Arizona with the person signing the affidavit.

_____ _____

Signature of Parent/Legal Guardian Date

*For members of the armed services, the provision of verifiable documentation does not serve as a declaration of official residency for income tax or other legal purposes. Armed service members may utilize a temporary on-base billeting facility as the address for proof of residency.

State of Arizona

Affidavit of Shared Residence

Student Name: _____

Parent/Legal Guardian Name:_____

School Name: _____

School District or Charter Holder: _____

Name of Arizona Resident: _____

I, (resident name) _____ swear or affirm that I am a resident of the State of Arizona and that the persons listed below reside with me at my residence, described as follows:

Persons who reside with me: _____

Location of my residence: _____

I submit in support of this attestation a copy of the following document that displays my name and current residence address or physical description of my property:

_____ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
_____ Valid Arizona Address Confidentiality Program authorization card
_____ Real estate deed or mortgage documents
_____ Property tax bill
_____ Residential lease or rental agreement
_____ Water, electric, gas, cable, or phone bill
_____ Bank or credit card statement
_____ W-2 wage statement
_____ Payroll stub
_____ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona
_____ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
_____ Consular identification card issued by a foreign government as a valid form of identification if the foreign government uses biometric verification techniques in issuing the consular identification card

Printed Name of Affiant: _____

Signature of Affiant: _____

Acknowledgement

State of Arizona
County of _____

The foregoing was acknowledged before me this __ day of_____, 20___,
By _____

My Commission Expires:

_____ _____
Notary Public

STUDENT INFORMATION

Name: Middle: Legal Last Name:

Date of Birth:

Student's Physical Address: City: Zip Code:

Mailing address:

Gender: ☐ Male ☐ Female Ethnicity: ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race: (mark all that apply) ☐ White ☐ Black or African American ☐ American Indian or Alaska Native

☐ Asian ☐ Native Hawaiian or other ☐ Pacific Islander

Grade (Mark One): KG ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐

Please mark the corresponding checkbox with your answer:

1) Do you currently have a device at home for your child (computer/tablet/laptop) ☐ YES ☐ NO

2) Access to the internet at home? ☐ YES ☐ NO

Has your child ever received any of the following: ☐ Special Ed ☐ Gifted ☐ Title I ☐ ELL ☐ Speech

Other:

Mother's information:

First Name:	**Last Name:**	**Home Phone:**
Address:		**Cell Phone:**
Mailing Address:	**Employer:**	**Work Phone:**
E-mail address:	**Date of birth:**	

Father's Information:

First Name:	**Last Name:**	**Home Phone:**
Address:		**Cell Phone:**
Mailing Address:	**Employer:**	**Work Phone:**
E-mail address:	**Date of birth:**	

Legal Guardian/Other Information: ☐ **Legal Guardian** ☐ **Step Parent** ☐ **Other:**

First Name:	**Last Name:**	**Home Phone:**
Address:		**Cell Phone:**

Mailing Address:	Employer:	Work Phone:
E-mail address:	Date of birth:	

Custody of Student: ☐ Joint ☐ Mother ☐ Father ☐ State ☐ Temporary ☐ Other:

Student lives with: ☐ Both Parents ☐ Mother ☐ Father ☐ Guardian ☐ Foster ☐ Other:

Other Children living in the home:

Name:	School and grade:	Age:
Name:	School and grade:	Age:
Name:	School and grade:	Age:
Name:	School and grade:	Age:
Name:	School and grade:	Age:

I Certify, by my signature, that I am either the parent or guardian of the above student and that the above information is true, accurate and up to date.

Parent/Guardian signature: **Date:**

PARENT NOTIFICATION

By law, if parents are legally separated or divorced, each parent has equal rights to the custody of the child/children, UNLESS a parent has a court order that indicates which parent has custody of the child/children.

The school MUST HAVE A COPY OF THE COURT ORDER on file, otherwise either parent may check the child out of the school with proper identification, and have parental rights regarding educational decisions for the child/children

I have read the above statement of the law.

STUDENT'S NAME: _____ **GRADE:** _____

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

NOTE: The courts must handle custody disputes. The school has no legal jurisdiction to refuse a biological parent access to their child and/or school records. The only exception is when signed restraining orders or proper divorce/custody papers, specifically stating visitation limitations, are on file in the school office. Any student release situation, which leaves the student's welfare in question, will be handled at the discretion of the site administrator or designee. Should any such situation become a disruption to the school, the Sheriff's Office will be contacted and a Deputy will be requested to intervene.

Parents are asked to make every attempt not to involve the school in custody matters.

NAME OF STUDENT:	GRADE:

STUDENT HEALTH HISTORY

BIRTH DATE: / / GENDER: MALE FEMALE

The following information may be helpful in assessing a child's health/learning. If you do not wish to complete the entire form you may speak personally with the school staff in charge.

PLEASE MARK BELOW IF YOUR CHILD HAS EVER HAD ANY OF THE FOLLOWING AND INDICATE AT WHAT AGE.

☐	Arthritis Age:	☐	Diabetes** Age:	☐	Kidney Disorder Age:	☐	Stomach problems Age:
☐	Allergies (Note below)	☐	Seizure disorder/epilepsy** Age:	☐	Migraines Age: (Diagnosed by a Doctor	☐	Strep/Tonsillitis Age:
☐	Anemia Age:	☐	Ear infections Age:	☐	Orthopedic problems Age:	☐	Tuberculosis Age:
☐	Asthma** Age ☐ Mild ☐ Moderate ☐ Severe	☐	Headaches:	☐	Osgood-Schlatter's Age:	☐	UTI (Diagnosed by Dr) Age:
		☐	Heart Concerns: Age:	☐	Rheumatic Fever Age:	☐	Valley Fever Age:
☐	ADD/ADHD Age:	☐	Hepatitis Age:	☐	Scarlet Fever Age:	☐	Emotional problems Age:
☐	Chicken Pox: Age:	☐	High blood pressure** Age:	☐	Speech problems Age:	☐	Other:

** These students must have a CURRENT treatment plan in file.**

Allergy type (food, medication, bee sting, etc.)	EPI Pen ☐ Y N	Inhaler ☐ Y N

Please respond "YES" or "NO" to the following questions:

☐ Y	☐ N	Is the student receiving treatment for any physical problems?	☐ Y	☐ N	Does the child wear tubes in ears or hearing aid?
☐ Y	☐ N	Has the child ever had an accident or injury requiring hospitalization or surgery?	☐ Y	☐ N	Are there any significant behaviors that may affect this child's performance in school or that may be of concern?
☐ Y	☐ N	Is your child restricted from any physical activities? (must have note from Doctor)	☐ Y	☐ N	Has the child ever had a psychological exam?
☐ Y	☐ N	Does the child wear glasses or contacts?	☐ Y	☐ N	Is the child enrolled in any special classes (Learning Disabilities, speech, reading, hearing, visual impaired, emotional or physical, handicap)?
☐ Y	☐ N	Does the child have any other vision difficulties?	☐ Y	☐ N	Does your child have any food or dietary restrictions?
☐ Y	☐ N	Does the Child have any hearing problems?	☐ y	☐ N	Is your child currently taking any medications? Note: prescriptions administered at school must be brought to school by the parent/guardian in original container showing clear, written instructions and with written permission by parent/guardian to administer medication.

PLEASE EXPLAIN YES ANSWERS

The school nurse, or designee, has my permission to give my child over the counter medication as checked. Please remember that some of the medication is not available at the school and it is the responsibility of the parent to provide them.

	Acetaminophen/Generic Tylenol Dosage:		Ibuprofen/Generic Advil Dosage:		Hydrocortisone Cream/ Itch Cream		Antacids/Tums
	Benadryl/Allergy		Cough Drops		Hydrogen Peroxide		Pepto Bismol/Nausea
	Antibiotic Ointment		Eye wash		Calamine/Caladryl lotion		

NOTE: Medication will not be given without written permission. All other medications must be supplied in the original container by the parent with written instructions and permission. Per A.R.S. § 15-344 medication may never be carried by the student. The only exceptions being asthma inhalers or epi-pens with written instructions from the physician and parent in the student's medical file.

EMERGENCY MEDICAL INFORMATION

NAME OF STUDENT:	GRADE:
BIRTH DATE: / / GENDER: ☐ MALE ☐ FEMALE	

MOTHER OR GUARDIAN:

NAME:

FATHER OR GUARDIAN:

NAME:

Your child will not be released to any other person without your written permission.

Name:	Relationship:	Phone Number:	Work Phone:
Name:	Relationship:	Phone Number:	Work Phone:
Name:	Relationship:	Phone Number:	Work Phone:
Name:	Relationship:	Phone Number:	Work Phone:

Health insurance provider:

AHCCS/Kids care:	**Policy Number:**	☐ **None**
Private:	**Policy Number:**	

Family physician: Phone Number:

Family Dentist: Phone Number:

I give permission for my child to be transported to the nearest emergency medical facility by whatever means necessary to secure further emergency care as determined by the school district. ☐ YES ☐ NO

I give consent for treatment deemed necessary for my child by my family physician or physician rendering services at a medical facility to which my child has been transported for emergency treatment. ☐ YES ☐ NO

I give permission for Owens-Whitney School District to secure emergency medical treatment for my child as needed in the event that I cannot be reached. It is understood that the school will make every effort to contact the parent or guardian and other persons listed above before arranging for transportation to an emergency facility. ☐ YES ☐ NO

Parent/Guardian Signature: _____ **Date:** _____

PERMISSION TO PICKUP STUDENT

Note: Each student is required to have this form on file.

I understand that if the person who requests to pick up my child is not listed below, he/she will not be able to take my child from school property.

Name:	Relationship to child:	Phone:

APPLICATION FOR TRANSPORTATION REIMBURSMENT

This is to certify that the undersigned is the parent/guardian of a minor child/children who live at least three miles from the District School. The undersigned hereby requests reimbursement funds for the transportation of said child/children to the District School. Transportation reimbursement will be 67 ¢ per mile.

If, for some reason, the mileage changes, it is the responsibility of the parent/guardian to notify the school in writing of the number of days and the distance of the alternate route. These changes must be submitted by the first Thursday of each month. If the changes are not submitted on time, reimbursement will be calculated using the original mileage.

NOTE: You may include all your children on one form. You do not need to fill out this form for each child.

TOTAL MILEAGE FROM HOME TO SCHOOL:		
NAME	AGE	GRADE

Parent/Guardian Signature: _____ **Date:** _____

Arizona Department of Education

Office of English Language Acquisition Services

Home Language Survey

The responses to this Home Language Survey (HLS) are used by the school to provide the most appropriate instructional programs and services for the student. **The answers below will determine if a student will take the Arizona English Language Learner Assessment (AZELLA).** Please respond to each of the three questions as accurately as possible. If you need to correct any of your responses, this must be done **before** the student takes the AZELLA Placement Test.

1. **What language do people speak in the home *most* of the time?**

   _____

2. **What language does the student speak *most* of the time?**

   _____

3. **What language did the student *first* speak or understand?**

   _____

Student Name_____ District Student ID_____

Date of Birth_____ SSID_____

Parent/Guardian Signature_____ Date_____

District or Charter_____

School_____

Please provide a copy of the Home Language Survey to the EL Coordinator/Main Contact on site.

In AzEDS, please enter all three HLS responses.

These HLS questions are in compliance with Arizona Administrative Code (R7-2-306(B)(1),(2)(a-c). (Revised 05-2023)

CONFIDENTIAL MCKINNEY-VENTO HOMELESS EDUCATION ASSISTANCE PROGRAM ELIGIBILITY QUESTIONNAIRE

Your child may be eligible for additional services through the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11435. To determine eligibility, please complete this form. All information is confidential.

1. Is the student's home address a temporary living arrangement? Yes ____ No ____
2. Is this temporary living arrangement due to loss of housing or economic hardship? Yes ____ No ____

If you answered YES to BOTH of the above questions please complete the remainder of the form.

If you answered NO to BOTH of the above questions, you may STOP here. Thank you.

Where is the student currently living?
_____ In a motel
_____ In a shelter
_____ Temporarily staying with one or more families in a residence
_____ Moving from place to place
_____ In a place not designed for ordinary sleeping accommodations such as a car, park, campsite or the forest
_____ In a place without electricity, heat, or water

Name of Student: _____ School: _____ Grade: _____

Other children in the family:
Name: _____ School: _____ Grade: _____
Name: _____ School: _____ Grade: _____
Name: _____ School: _____ Grade: _____
Name: _____ School: _____ Grade: _____

The undersigned Parent/Guardian certifies that the information provided is correct. False claims about living situations may affect enrollment.

Name of Parent(s)/Guardian(s): _____
Physical Address: _____
Telephone Numbers (cell, home, work or contact): _____

Signature of Parent/Guardian_____ Date_____

For School Staff Only: Please immediately forward completed form to McKinney-Vento Homeless Education Assistance Program Liaisons.

Parent/Guardian/Student Tear Form Here

If you have any questions or believe you qualify for the McKinney-Vento Homeless Education Assistance Program, please call Owens Whitney McKinney-Vento Liaison Lee Gurney at (928) 765-2311 to access services.

The following is a list of possible services available from Owens Whitney School District for eligible McKinney-Vento students.

- Immediate school enrollment, Transportation to/from School, School Supplies, Tutoring, Free School breakfast/Lunch, Clothing & Toiletries, Information and Referrals to Community Services, Assistance in obtaining immunization records and birth certificates

PROGRAM MEDIA RELEASE

Background: During the school year, students may be photographed, recorded or filmed by Owens-Whitney School staff or other approved individuals. Students may also create schoolwork and/or other intellectual property, such as artwork, essays, and poetry ("creative work") as part of the educational process.

Purpose: The purpose of this Release is to give the District permission and authority to use and/or publish your and/or your child's name, image, and/or creative works to further the District's educational mission.

Consent and release: By signing below, I do hereby:

1. Authorize Owens-Whitney Unified School District to use, release, and/or publish my and/or my child's photographs, pictures, portraits or images herein described in any and all forms and media and in all manners, including creative work, for the purposes of publicity, illustration, publishing (including publishing in electronic form on CDs or internet websites), for any product or services, or other lawful uses as may be determined by OWUSD, without prior notice or compensation. The District may exercise its rights as it deems appropriate for its productions, for advertising, Social Media, and for other purposes. By signing below, I intend for the District to rely upon this Release; and

2. Release the District and its legal representatives for any and all claims related to the description above. I waive the right to inspect or approve any finished product, including written or electronic, wherein mine or my child's name, recording or photographs appear.

I have read and fully understand the terms of this release.

Student Name: _____ **Date:** _____ **Grade:** _____

Parent/Guardian Printed Name: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____
(Required for all students under 18)

I am the parent or legal guardian of the above-mentioned minor and have the legal right and authority to execute the above release on behalf of the minor and knowingly and voluntarily do so.

INTERNET USE AGREEMENT

Please read this document carefully. When signed it becomes a binding agreement.

Terms and Conditions

Acceptable use. I will use the service to support personal educational objectives within the educational goals and objectives of the School District. Inappropriate use may result in cancellation of use of information services and/or appropriate disciplinary action. I will not submit, publish, display, or retrieve materials forbidden by statutes, laws, or District policies and regulations.

Personal responsibility. I will report any misuse of the information service to a parent, teacher, or the system administrator, as appropriate. I understand that many services and products are available for a fee and acknowledge the responsibility for any expenses incurred without District authorization.

Network etiquette. I am expected to abide by the generally acceptable rules of network etiquette. Therefore, I will:

- *Be polite and use appropriate language*. I will not send, or encourage others to send, abusive messages.
- *Respect privacy.* I will not reveal any home addresses or personal phone numbers.
- *Avoid disruptions.* I will not use the network in any way that would disrupt use of the system by others.
- *Observe these other considerations*:
    - Be brief;
    - Try to use correct spelling and make messages easy to understand;
    - Use short and descriptive titles for my articles;
    - Post only to known groups.

Services. The School District specifically denies any responsibility for the accuracy of information. While the District will make an effort to ensure access to proper materials, the user has the ultimate responsibility for how the electronic information service (EIS) is used and bears the risk of reliance on the information obtained.

I have read and agree to abide by the School District policy and regulations on appropriate use of the electronic information system as incorporated herein by reference. I understand that any violations of the above terms and conditions may result in disciplinary action and the revocation of my use of information services.

Student's Printed Name: _____ **Grade:** _____

Student's Signature: _____ **Date:** _____

As the parent or guardian of this student, I have read this agreement and understand it. I understand that it is impossible for the School District to restrict access to all controversial materials, and I will not hold the District responsible for materials acquired by use of the information services. I also agree to report any misuse of the information services to a School District administrator. Misuse may come in many forms but can be viewed as any messages sent or received that indicate or suggest pornography, unethical or illegal solicitations, racism, sexism, inappropriate language, or other issues described in this agreement.

I accept full responsibility for supervision if, and when, my child's use of the information services is not in a school setting. I hereby give my permission to have my child use electronic information services.

Parent/Guardian's Printed Name: _____

Parent/Guardian's Signature: _____ **Date:** _____

SPONSORING TEACHER

I have read this contract and agree to promote this agreement with the student. Because the student may use the network for individual work or in the context of another class, I cannot be held responsible for the student use of the network. As the sponsoring teacher, I agree to report any misuse of the information system to the District System Administrator. Misuse can come in any forms, but can be viewed as any message sent or received that indicate or suggest pornography, unethical or illegal solicitation, racism, sexism, inappropriate language and other issues described above.

Teachers Printed Name: _____ **Signature:** _____ **Date:** _____

****Fill out only if transferring from another school.*

AUTHORIZATION AND PERMISSION TO RELEASE MEDICAL, EDUCATIONAL AND/OR SPECIAL EDUCATION RECORDS

Student: _____ DOB: _____ Grade: _____

Previous School Attended: _____

Address (Previous School): _____

City/State/Zip (Previous School): _____

Phone Number (Previous School): _____

In compliance with the Family Education Rights and Privacy Act of 1974, I authorize the release of my child's school records, including gifted, educational, medical, social or special education information to Owens-Whitney Elementary School District No. 6.

Parent/Guardian Signature: _____ **Date:** _____

Relationship to Child: _____

Please send or fax all records, including Special Education Records to Owens-Whitney Elementary School's above address.

[ ] All records

[ ] Special Education Records: My child is currently receiving special education services in the following area(s)

[ ] Special Education Resource [ ] Special Education Self-Contained [ ] Speech [ ] ELL [ ] Title I

[ ] Other:

NOTE: Please refer to parent handbook for information about ***FAMILY EDUCATION RIGHTS AND PRIVACY ACT (FERPA)***

PARENTVUE AND STUDENTVUE

We have added a new parent and student platform which will help us keep an open communication between teachers, parents and students. *(Please read below)*

- ParentVUE provides parents with an opportunity to review their student's course progress and assists parents in the monitoring of their child's educational progress by allowing them to opt in for automatic notifications.
- Parents and students will have near real-time access to information on assignments and grades, attendance, class schedules, graduation status and more.
- ParentVUE offers a single sign-on to view school information for all siblings, regardless of the grade level or school of attendance.
- ParentVUE and StudentVUE are available as a mobile app for both Android and iOS devices. Downloadable documents are available on Mobile Apps page including a comparison of ParentVUE Web vs. Mobile App
- Parents can review contact information (phone numbers and email addresses).
- Communication tools throughout ParentVUE and StudentVUE promotes the contact between home and school.
- While the website is accessible over the Internet, access is secured via a user name and password. Parents can see information about their children, only, and cannot see the records of other students

To access ParentVUE for the first time, you will receive an activation key and instructions from your child's school to set up your account. You will be able to access via web browser or mobile app.

To access StudentVUE, students will be provided a user name and password with instructions from your child's teacher.

If you have questions about or want to update your child's information, please contact the school.

Please provide us with a valid email below to set up your ParentVUE account. Cut along the dotted line and return the bottom portion with enrollment packet.

Parent's name: _____

Email address: _____

Cell phone number: _____

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Technology

Acceptable Use Policy

You have a wonderful opportunity before you! You have the opportunity to use the school's technology resources for your education. These resources will broaden your horizons, provide diverse opportunities, and prepare you for the world of today. You will be able to access the Internet with school resources. The Internet has great promise for sharing ideas and knowledge; it also has the potential for misuse. The Owens-Whitney School District does filter the Internet in an effort to block material that is not appropriate for students. However, as with some tools, there are cautions to be taken. This Acceptable Use Policy (AUP) will outline some of those cautions, provide direction for the use of the resources, and you will affirm your commitment to comply with this AUP.

1. You agree to act responsibly and with good behavior on any computer or communications system using Owens-Whitney School District's wired or wireless network services. The user agrees to follow all School and District rules and policy for behavior and communications. Access is a privilege - not a right.

2. The primary purpose of the District network (including but not limited to the Internet, printers, laptops, etc.) is to allow users to conduct School business.

3. You agree not to tamper with or attempt to illegally access or "hack" any Owens-Whitney School District computer resources or network. Intentional damage or misuse of computers or computer networks will not be tolerated. Intentional creation or spreading of a computer virus will not be tolerated.

4. It is your responsibility to protect your privacy; keep your password to yourself. Sharing a password, or logging in for someone else or using someone else's password, is strictly forbidden. If you know of a security problem with your account or someone else's, inform the school administration immediately.

5. You agree to abide by the generally accepted rules of "netiquette" and conduct yourself in a responsible, ethical, and polite manner while using any Owens-Whitney School District technology resource.

6. The Owens-Whitney School District makes no warranties of any kind, whether expressed or implied, for the supervision and service it is providing. By signing below you agree that the

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Owens School District assumes no responsibility or liability for any loss of data. Use of any information obtained via the Internet is at your own risk. The Owens-Whitney School District specifically denies any responsibility for the accuracy or quality of information obtained through its services. Remember, all technological devices brought onto Owens-Whitney School District campus are subject to search and seizure.

7. Food and drink do not mix with electronic devices. Liquids, even water, will cause corrosion on the electrical parts inside. You are responsible for damage to district technological resources, whether the damage is a broken screen, a corroded electrical part, or a broken keyboard.

8. You are responsible for keeping your computer clean. Do not attach stickers to the inside or outside of your laptop. Stickers will be removed.

9. Help us to help you by reporting any vandalism or misuse of any school resources to the proper school personnel. In addition to the items above the following activities are not permitted:

• Sending or displaying offensive messages or pictures

• Using obscene language

• Giving personal information, such as complete name, phone number, address or identifiable photo, without permission from teacher and parent or guardian

• Harassing, insulting, cyber bullying, or attacking others

• Damaging or modifying computers, computer systems or computer networks

• Violating copyright laws

• Using others' passwords

• Trespassing in others' folders, work or files

• Intentionally wasting resources

• Employing the network for commercial purposes, financial gain, or fraud

Violations may result in a loss of access as well as other disciplinary or legal action, per student handbook and/or board policy.

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Vacant, Member

Discipline

The best discipline is self-discipline. Should the need arise for discipline beyond that regarding the use, or misuse, of your laptop, your school's administration will determine the appropriate action. The administration will follow the school's code of conduct and Owens-Whitney School Board policies, but there may be additional consequences for misuse of technology with possible disciplinary outcomes that could include: suspension, loss of access, or contact with appropriate legal entities such as law enforcement for possible misdemeanor or felony charges. In the event there is an allegation of misuse or violation of the AUP, you will be provided with a written notice of the alleged violation and have an opportunity to present an explanation. These are your Due Process rights. Access to the Owens-Whitney School District network is a privilege, not a right.

Publishing to the web

Parents, your child may have schoolwork that will be published on the Internet, most likely on the Owens-Whitney website or other district websites. Such publishing requires that the Owens-Whitney School District have your permission to publish that work. By agreeing to this AUP, you agree to allow the Owens-Whitney School District to publish your child's schoolwork where appropriate.

Additional Rules for Owens-Whitney Elementary

As you grow older, you take on more responsibilities. Your choice to enroll at Owens-Whitney Elementary School has some added responsibilities. An important job for you is your care of the laptop. Here are some excellent rules to keep in mind when using your laptop:

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Some Do's and Don'ts:

1. Remember that the laptop is not yours personally. It belongs to the school district. Keep nothing on it that is so private that you wouldn't share it with a teacher, the principal, the tech department, or your parents. Assume that your laptop can keep no secrets, because it can't. Your laptop will be treated like a school locker-it can be searched. Files stored on your laptop will not be private. You also agree to allow authorized Owens-Whitney School District personnel the ability to review any and all files, data, messages, and email at any time with or without notice. You understand and agree that your own personal electronic hardware (such as a different laptop computer) used on district property falls under this AUP. You also understand and agree that you assume all risks and responsibilities when using your own personal computer equipment and that you will not connect any network-capable devices without prior written permission of the Site Technology Coordinator. This connection privilege can be revoked without reason or notice.

2. Do not reveal identifying information about yourself or others through email or the Internet. That information includes name, age, address, phone number, photographs, or parents' names. Check with your teacher if something requires this information. It is better to be safe and guard your information.

Identity theft is a growing problem.

3. Don't attempt to override the Internet filtering software or other network configurations. You also agree not to disrupt Owens-Whitney School District's computer systems and network, or log in as an administrator for the purpose of bypassing or changing restrictions or settings. Attempting to override the filter, use or access proxies, access the internal portion of the laptop, or disrupt the School's systems or networks, will result in disciplinary action, which can include the possibility of felony charges.

4. Don't access, send, create, or forward any materials, communications, files, or images that are defamatory, obscene, pornographic, harassing, threatening, or illegal. If you receive any of those items, report it to a school administrator. This includes creating a website or webpage (this includes blogs or sites such as Facebook.com), or adding to an existing website or webpage in order to "bully", intimidate, denigrate, or harass another student or staff member even if you did not use district resources to create, modify, or access the site as this will be considered an interruption of the educational process at school.

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5. Don't use your laptop to gain access to the school's or other computer systems for any illegal activities, or go beyond their authorized access. This includes trying to login as another user or use another's account. This behavior is related to trespassing and will be treated as such.

6. Don't use your laptop or the network for commercial, political, or other private purposes. Your laptop is for your schoolwork.

Take good care of your laptop. Repairs are expensive. The insurance premium and deductible are needed to cover the cost of parts. Breaking your laptop is expensive. Keeping good care of your laptop is cheap and easy.

Keep your laptop safe. Don't leave your laptop sitting around unattended. Always putting your laptop back in the computer shelf is the best place for it.

Have the responsibility to treat your laptop correctly. Dropping it onto a desk or the floor can be damaging. Don't fling it around. Don't stack things on top of it. Don't hold it by one corner. Instead use two hands. If you think about how it might fall before it does fall, you can usually prevent that fall from happening in the first place. Don't loan your computer to someone else. You are the person responsible for what happens to your laptop or your assigned loaner laptop. You can't blame someone else for damage if you had the opportunity to stop damage from occurring. Friends and peers could do damage that you will be responsible for.

So what happens if some unfortunate thing happens? Report it to the school administration or the office as soon as possible. If it is damaged, contact the office. You may purchase insurance that will pay for repairs or replacement if something bad does happen. Insurance is not available for laptops not owned by the Owens-Whitney School District. If you choose not to purchase insurance, parents are responsible for the repair or replacement cost.

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Email – Google Account

Students may also be provided a district sponsored email account. It is very important that you keep your password secret! Someone else logging into your email and sending inappropriate messages will get you into trouble.

Email etiquette:

1. Keep your communications school-appropriate.

2. Don't engage in personal attacks or harassment.

3. Use clear, concise, and appropriate language. Think about what you have to say and how you say it.

Email doesn't show sarcasm or wit as well as you might think.

4. Respect privacy (yours and everyone else's). Do not re-post a message without the permission of the person who sent it. Don't share personal information.

5. Your district email can and will be monitored. Please use it appropriately. Infractions may result in the loss of email use or other consequences.

Copyright Infringement and Plagiarism

You must respect the rights of copyright owners. Copyright infringement happens when you inappropriately copy someone else's work that is protected by copyright. If you are unsure if something can be legally copied or not, request permission to copy from the copyright holder. You and/or your parents are responsible for any copyright penalties that you commit while using your laptop. You agree to abide by all patent, trademark, trade name, and copyright laws. Plagiarism is when you take someone else's work and present it as if it were your own. Plagiarism is not acceptable and is not tolerated. All sources must be cited.

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Labeling and Identifying

Each student laptop will be labeled. Owens-Whitney School will record the following information:

Laptop Serial Number

Ethernet ID Number

Wireless ID Number

Power Supply (Battery Charger) ID Number and Battery ID Number

You will use the same equipment as was originally issued, unless those parts fail or are stolen or damaged. Unless you agreed to the deferred purchase plan, you may or may not receive the same laptop each year you are at Owens-Whitney Elementary School. Bring damaged or failed parts to the office for evaluation and disposition. All replacement part IDs will be recorded as well.

Miscellaneous

From time to time Owens-Whitney may need to update your laptop. Your laptop can be remotely watched or even controlled. You will not be able to keep the laptop over the summer break.

A school issued laptop must be used in most cases. Configuration issues, ownership issues, software licenses, and many other considerations prevent us from allowing most other computing equipment to be used instead of the school issued equipment.

Laptop models and features can and do change from year to year. There is not an upgrade program, and the office will determine which laptop is assigned. The laptop you are issued is to be used throughout your attendance at Owens-Whitney School.

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Owens-Whitney School District

Owens-Whitney Elementary School

Acceptable Use Policy

By signing below, we accept and agree to the above Acceptable Use Policy while attending Owens-Whitney Elementary School. A separate application signifying Owens-Whitney School Self-Insurance acceptance or rejection has also been submitted.

Both the Acceptable Use Policy and Insurance Form can be viewed on the District website at;

www.owens-whitney.org

Student Name _____ Grade _____

Student Signature _____ Date _____

Parent Name _____

Parent Signature _____ Date _____

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Owens-Whitney Elementary School

Self-Insurance Policy

Various provisions in this policy restrict coverage. Please read the policy to understand your family's rights and responsibilities, and what is covered. Owens-Whitney Elementary School is self-insured. Please help us keep premiums and deductibles low by taking very good care of the laptop.

A. Costs

1. There is a one time fee of $25. This premium is good for the entire time your child attends Owens-Whitney Elementary. Fees are non-refundable after any use.

2. The school administration has the final say in determining insurance and repair situations.

B. Covered Equipment

The insurance provided applies to any laptop issued or owned by Owens-Whitney Elementary School.
The data contained on the laptop is not covered, nor are CD-ROMs or DVDs that may be in the laptop. There is no provision for the time or cost needed to replicate any missing data.

A laptop not owned by the Owens-Whitney School District is not eligible for this insurance.

C. Exclusions

Owens-Whitney Elementary School will not pay for loss or damage caused by or resulting from the following:

1. Deterioration, corrosion, erosion, wear and tear, faulty materials, or design errors. Please note that corrosion can occur from spills. Liquids and laptops don't mix. Not informing the office immediately of spill damage will void the insurance coverage for that incident. Loss caused by surge, lightning, or inappropriate electrical use.

2. Dishonest, fraudulent, or criminal acts.

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3. Any loss to accounts.

4. Loss caused by your failure to use all reasonable means to protect the laptop that has been damaged.

5. Disappearance.

D. Claim Procedures

1. Go directly to the District's Office.

2. The correct people will examine the laptop to determine if there is a qualified insurance claim. If there is a claim, the student will fill out paperwork in the office about the breakage and the deductible collection.

The office will forward the claim to Owens-Whitney School's administration.

3. In cases of theft or disappearance, a Police Report must accompany the student before a loaner laptop is issued. The Police Report must also directly mention the loss of the laptop and the circumstances surrounding the loss.

5. Your child will bring home a form from the Owens-Whitney School's office regarding the insurance claim. Please pay the deductible promptly. Payment plans are available. Non-payment of deductible funds can result in certain kinds of ineligibilities and other recourses.

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Insurance Acceptance Form

___ Yes, I accept Owens-Whitney Elementary School Districts insurance to cover my son/daughter's laptop. I understand the cost is a $25.00 one time fee.
Should there be a claim there is a $25.00 deductible per claim.
All Fees are non-refundable after any use.
Students will pay $25.00 maximum for the insurance premiums for their Entire attendance at Owens-Whitney. All Fees are non-refundable after any use.

___ No, I do not accept Owens-Whitney Elementary School Districts insurance to cover my son/daughter's laptop. I understand that I will be responsible for all damages to the laptop which could be full replacement at a cost up to $750.00

Student Name _____ Grade _____

Student Signature _____ Date _____

Parent Name _____

Parent Signature _____ Date _____

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Owens Elementary Parent/Guardians:

The Owens-Whitney Elementary school is happy to inform you that we will be offering reimbursements for parent provided breakfast and lunch this school year! Due to the high cost of providing school lunches to a small population, the Governing Board has approved a plan to reimburse parents/ guardians for providing their child/ children breakfast and lunch when school is in session. The school will not provide school meals.

The following guidelines have been developed for meal reimbursements:

* Breakfast will be reimbursed at a rate of $3.50 per day.

* Lunch will be reimbursed at a rate of $6.00 per day.

The following guidelines will apply if you wish to receive reimbursement for your students' meals:

1.) Meals must be brought to school, and consumed in the cafeteria at the designated meal times.

2.) Meals must be nutritious and balanced. (Not bare minimum and purely junk food)

It is our hope that this incentive will help you provide nutritious meals for your child/ children throughout the school year.

If you have any questions or concerns, please feel free to contact Mrs. Ballard at 928-765-2311 or email at : mikey.b@owens-whitney.org

Thank you,
Michael Ballard
Michael Ballard
Building Secretary

Student Meal Reimbursement Application

I _____ agree to provide my child/children

_____

a nutritious and balanced meal during the **2026-2027** school year. I understand by doing so Owens elementary will reimburse me $3.50 for breakfast and $6.00 for lunch per day, to be paid monthly.

I also understand that if I do not provide balanced nutritious meals I will not be reimbursed for those meals.

Signature:_____

Print Name:_____

Date:_____

Mailing Address:_____

_____

_____

Reimbursement Checks will be sent to the above address

2026 - 2027 School Rules and Guidelines

1. BREAKFAST:
    a. Breakfast is from 7:45 – 8:00 a.m.
    b. After the 8:00 a.m. bell rings, students need to go to the classroom straight from the cafeteria– NO detours to the restroom.
    c. If a student arrives after 8:00 a.m., they will go directly to the classroom.

2. CLASSROOM:
    a. NO CELL PHONES IN CLASS. All cell phones are to be placed in the box at the teachers' desks until the end of the school day.
    b. No personal laptop computers, music players, etc. will be allowed.
    c. ALL toys or anything that could be used as a distraction, should not be brought to school.
    d. Backpacks and coats are not allowed at desks and should be placed on the hooks provided in the classroom.
3. DRESS CODE:
    a. No hats or hoods will be worn in any building, except on a designated school spirit day.
    b. No sheer clothing (shirts or leggings) is allowed.
    c. Shorts must be longer than fingertips when placed straight by the side of the legs.
    d. Pants/shirts – no midriff (belly area) are to be shown when standing or moving
    e. Tank tops – straps must be wider than 3 inches
4. DISCIPLINE:
    a. No touching, kicking, pinching or name calling will be tolerated. This is Bullying and students will receive a write-up and/or detention.
    b. The following steps will be taken regarding discipline issues:
        1. Classroom teacher
        2. Mrs. Ballard
        3. Mrs. Gurney, Dean of Staff
        4. Letter home – to be signed and returned
        5. Detention from 3:30m pm – 4:00 pm.

5. SCHOOL WORK
    a. All class work will be done on time and turned in.
    b. If a student is absent, they will be given one day to make up their work for each day they were absent.

6. FOOD AND DRINKS:

   a. **<u>NO FOOD OR DRINK AT YOUR DESK when a computer is on your desk.</u>** If there is a school party, you may eat and drink at your desk- no computer though.

   b. No designated snack time.

   c. NO GUM on school property. Mints are allowed as long as trash is appropriately taken care of and the privilege is not abused (teacher's discretion).

   d**. No soda or coffee, only water is allowed and it must be in a clear container with a lid that locks or screws on.**

7. CONSTRUCTION: If construction of any kind is currently happening on school grounds, stay away from taped/blocked off areas. Teachers will give specific instructions, if necessary. Safety is important! Please follow the rules!