***Sanchez Charter Schools Parent Checklist***

**Sanchez Charter Secondary South**  **Sanchez Charter Secondary North**

*6001 E. Gulf Freeway Houston, TX 77023*

*T: (713) 926-1112*

*F: (713) 926-8129*

*170 Rittenhouse Houston, Tx 77076*

*T: (713) 742-0947*

*F: (713) 742-0674*

**Sanchez Charter Elementary South**  **Sanchez Charter Elementary North**

*6001 E. Gulf Freeway Houston, TX 77023*

*T: (713) 929-2434*

*F: (713) 926-8129*

*170 Rittenhouse Houston, Tx 77076*

*T: (346) 344-1311*

*F: (713) 742-0674*

 Birth Certificate

 Proof of Address

 Copy of ID of primary guardian enrolling student

 Immunization Record

 Current Transcript (if year not completed)

 Current Report Card (if year not completed)

 Final Report Card

 Final Transcript

**Optional Documents**

Social Security Card

Current Picture

***Sanchez Charter School does not discriminate on basis of race, color, religion, sex, or national origin.***

 **ENROLLMENT FORM**

SANCHEZ CHARTER SCHOOL DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, SEX, OR NATIONAL ORIGIN.

*\*How did you hear about us? Walk-in*  *Referral*  *Event*  *Website*  *Social Media Billboard: Other:*

**STUDENT**

|  |  |  |  |
| --- | --- | --- | --- |
| LAST | MIDDLE | FIRST | GENDER |
| SOCIAL SECURITY NUMBER | RACE*WHITE HISPANIC BLACK ASIAN OTHER* | DATE OF BIRTH | PLACE OF BIRTH |
| CURRENT MAILING ADDRESS | CITY, STATE | ZIP CODE |  |
| CONTACT PHONE NUMBER | FATHER’S CONTACT NUMBER | MOTHER’S CONTACT NUMBER |  |

**ACADEMIC**

|  |  |  |  |
| --- | --- | --- | --- |
| LAST SCHOOL ATTENDED | HOME SCHOOL |  |  |
| LAST GRADE ATTENDED | TOTAL CREDITS EARNED | CURRENT GRADE: (CIRCLE ONE)*PRE-K 3, 4 & Kindergarten. Grades 1st -5th*  *6th 7th 8th 9th 10th 11th 12th* | HAVE YOU BEEN HERE AT SANCHEZ BEFORE?*YES or NO*HOW LONG? |
| LIST ANY ADDITIONAL SCHOOLS ATTENDED: |  |  |  |

**FAMILY**

|  |  |  |  |
| --- | --- | --- | --- |
| FATHER’S FULL NAME | EMPLOYER | WORK PHONE | CELL PHONE NUMBER |
| MOTHER’S FULL NAME | EMPLOYER | WORK PHONE | CELL PHONE NUMBER |
| GUARDIANS FULL NAME (IF NOT LIVING AT HOME) | EMPLOYER | WORK PHONE | CELL PHONE NUMBER |
| FATHER’S EMAIL ADDRESS | MOTHER’S EMAIL ADDRESS | YEARS ATTENDING U.S. SCHOOLS (CHECK ONE):0 1 2 3 4 5 6 6 OR MORE |  |
| DOES STUDENT LIVE WITH PARENT? (CIRCLE ONE): IF NO, WHAT PARENT (CIRCLE ONE): DO YOU HAVE LEGAL DOCUMENATION FOR CUSTODY?YES or NO MOTHER or FATHER (CIRCLE ONE): YES or NO |  |  |  |

**EMERGENCY CONTACTS IF YOU CANNOT BE CONTACTED**

|  |  |  |
| --- | --- | --- |
| NAME | RELATIONSHIP TO STUDENT | PHONE |
| NAME | RELATIONSHIP TO STUDENT | PHONE |
| NAME | RELATIONSHIP TO STUDENT | PHONE |
| NAME | RELATIONSHIP TO STUDENT | PHONE |

*\*IN CASE OF AN EMERGENCY ONLY THE ABOVE PERSONS LISTED MAY PICK UP YOUR CHILD BUT CANNOT WITHDRAW STUDENT FROM CAMPUS. THE INFORMATION ABOVE IS NEEDED AS A PERMANENT SCHOOL RECORD OF YOUR CHILD AND WILL BE USED BY SCHOOL PERSONNEL ONLY.*

*George I Sanchez Charter Schools*

*TEXAS PUBLIC SCHOOL STUDENT/STAFF ETHNICITY AND RACE DATA QUESTIONNAIRE*

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race.

*United States Federal Register (71 FR 44866)*

**PART 1. ETHNICITY: Is the person Hispanic/Latino?** **Not Hispanic/Latino**

 **Hispanic/Latino** - **A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.**

**PART 2. RACE: What is the person's race? *(Choose one or more}***

**American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.

 **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

 **Black or African American** - A person having origins in any of the black racial groups of Africa.

 **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

 **White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***George I Sanchez Charter Schools***

***NOTICE OF PARENT AND STUDENT RIGHTS***

***FAMILY EDUCATIONAL RIGHTS AND PRIVACY*** *ACT (FERPA)*

*and DIRECTORY INFORMATION*

George I Sanchez Charter Schools maintains general education records which are available to the parent, guardian, or person standing in lawful control of the student under a court order. Both parents/guardians have access to the records unless the school is in possession of a court order limiting access.

Federal law provides that student "educational records" are confidential. School records are defined as being directly related to a student and maintained by the school including, but not limited to: attendance, grades, discipline, test scores, health and immunization, and psychological or counseling records. Directory information **is not** confidential under FERPA.

**Certain information about district students is considered directory information and will be released to anyone who follows the procedures for requesting the information unless the parent or guardian objects to the release of the directory information about the student. If you do not want George I Sanchez Charter Schools to disclose directory information from your child's education records without your**

**prior written consent, you must notify the district in writing by the tenth (10th) day of the school year.**

**George I Sanchez Charter Schools has designated the following information as directory information: student's name, address, telephone listing, electronic mail address, photograph, date and place of birth, major field of study, degrees, honors and awards received, dates of attendance, grade level, most recent educational institution attended, participation in officially recognized activities and sports, and weight and height of members of athletic teams.**

1. **Student directory information is available to the public unless the parent/guardian restricts the release of the information.** According to the Texas Public Information Act (TPIA), George I Sanchez Charter Schools must release directory information promptly upon request and may not ask requestors the reason for the requested information. Parents/guardians have the right to restrict the release of directory information, but must do so in writing within the first ten (10) days of the school year or enrollment or see number 4 below.
2. Parents/guardians may alter their choice regarding directory information at any time by completing and submitting the Student Directory Release form found in the list on the left of this webpage to their child's school. Decisions regarding directory information will remain until a subsequent written request is made to alter the previous decision.
3. Parents with a Parent Portal account may review their child's privacy status and make changes if wanted. Privacy codes may also be changed any time by completing a Student Directory Information Release form (found in the list on the left of this webpage) and submitting it to their child's school.
4. Schools must notify parents and eligible students of their FERPA rights annually. In addition to this form, FERPA information is found in the Student/Parent Handbook available in both English and Spanish online at the district website or a paper copy, by request, from your child's school.

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***George I Sanchez Charter Schools***

***STUDENT DIRECTORY INFORMATION RELEASE***

Please review the information below to indicate your current wishes regarding the privacy of your child's directory information. Select YES or NO for each statement. By submitting this form, you are signing, dating and indicating your preferences to the school district. **Forms that are not signed will result in the release of your child's directory information when requested.**

**Selecting NO below will result in blocking the release of directory information in the designated categories.**

**DISTRICT PUBLICATION**

George I Sanchez Charter Schools **has** my permission to release directory information for limited school sponsored purposes including, but not limited to: selected photography companies supporting campus pictures, and publicity (name and picture in yearbook, newsletters, awards, honors, PTA/PTO, booster clubs, etc.).

**Example: If you select NO, your child's name will NOT appear in the district's newsletter, the school's yearbook, etc.**

**O Yes O No**

**PRIVATE REQUESTERS;**

George I Sanchez Charter Schools **has** my permission to release directory information (name, address, phone number, etc.) to any requester in accordance with the Texas Publication Information Act (TPIA). The TPIA requires George I Sanchez Charter Schools to release this type of information to any company, individual, or group that requests it unless the parent/guardian requests the information not to be released. **Example: If you select NO, your child's directory information will NOT be released to vendors or others who may be soliciting products and services.**

**O Yes O No**

**HIGHER EDUCATION;**

The No Child Left Behind Act of 2001 requires schools to provide military recruiters and institutions of higher education student directory information unless the parent/guardian objects. George I Sanchez Charter Schools **has** my permission to release directory information to a military recruiter.

**O Yes O No**

George I Sanchez Charter Schools **has** my permission to provide the name, address, and telephone number of my secondary student to an institution of higher education.

**O Yes O No**

*Please consider your responses carefully prior to making final decisions. Should you have questions or need further assistance for a complete understanding, see your campus administrator.*

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***George I Sanchez Charter Schools***

***Falsification of Documents***

***Identity Verification of Person Enrolling Student***

**STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Falsification of Information**

Texas Education Code 25.001 (h) and (i) Texas Penal Code 37.10

A person who knowingly falsifies information on a form required for enrollment of a student in a school district is liable for the greater of the maximum tuition fee or the amount the district has budgeted for each student as maintenance and operating expenses if the student is not eligible for enrollment in the district but is enrolled on the basis of false information.

**NOTE:** Enrollment in specific magnet programs does not incur out of district tuition fees. Check with your individual counseling office if your student is enrolled in a magnet program.

DAILY TUITION RATES ARE SUBJECT TO CHANGE. TUITION RATES ARE REVISED YEARLY IN OCTOBER AND ANNOUNCED BY THE TEXAS EDUCATION AGENCY. STUDENTS WHO QUALIFY FOR SPECIAL EDUCATION SERVICES DIFFER FROM GENERAL EDUCATION STUDENTS DUE TO THE ADDITIONAL SERVICES THEY RECEIVE. CHECK WITH YOUR CAMPUS COUNSELING OFFICE FOR CURRENT TUITION RATES.

**Proof of Identity of Person Enrolling Student**

Regardless of whether or not a child's parent, guardian, or other person with legal control of the child under a court order is enrolling a child, Texas Education Code as amended in 2001, a district is required to record the name, address, and date of birth, of the person enrolling a child. TEC Section 25.002(f). Providing a copy of your government issued ID with photo satisfies this request.

I UNDERSTAND THAT I MUST PROVIDE MY CURRENT ADDRESS, AND PROOF OF IDENTITY. I ALSO UNDERSTAND THAT IF I HAVE KNOWINGLY FALSIFIED INFORMATION ON FORMS REQUIRED FOR ENROLLMENT, I AM LIABLE FOR TUITION FEES AS DESCRIBED ABOVE.

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***George I Sanchez Charter Schools***

***STUDENT MEDIA RELEASE***

(Read the form carefully and complete the form with the best possible information)

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

During the school year, opportunities arise to provide positive information and publicity about our programs and events to the general public or specific audiences. In some cases, we may receive requests from the news media or professional persons to interview, photograph, and/or film students for news or non-profit publications, television or radio broadcasts, or for educational information and training or various publications and brochures printed by George I Sanchez Charter Schools and parent-teacher organizations.

Permission is needed for your child to be the subject of any news media publicity or to be included in district publications. Your selection will be kept on file for future reference and will remain in effect unless revoked in writing by the parent/guardian.

|  |  |
| --- | --- |
| **O Yes O No** | I give permission for my child to be interviewed, photographed, and/or filmed for public news media, professional education information, or any other non-profit publication for public use (e.g. newsletters).In addition, I give permission for my child's name, work and likeness to appear on the Internet . |

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Acceptable Agreement of Student Internet Use 2024-2025**

**Sanchez Charter School**

**Internet Acceptable Use and Safety Policy**

*(Please read this document carefully before signing it).*

Internet access is available to students at Sanchez Charter School.

We are very pleased to bring this access to Sanchez Charter School and believe the Internet offers vast, diverse, and unique resources to our students. Our goal in providing this service to students is to promote educational excellence by facilitating resource sharing, innovation, and communication.

It is the policy of Sanchez Charter School to:

1. Prevent user access over its computer network to, or transmission of, inappropriate material via Internet, electronic mail, or other forms of direct electronic communication
2. Prevent unauthorized access and other unlawful online activity
3. Prevent unauthorized online disclosure, use, or dissemination of personal identification information of minors, and
4. Comply with the Children’s Internet Protection Act [(Pub. L. No. 106-554 and 47 USC 254(h)].

The Internet is an electronic highway connecting thousands of computers all over the world and millions of individual subscribers. Students have access to:

1. Electronic mail (e-mail) communication with people all over the world.
2. Public domain software and graphics of all types for school use.
3. Discussion groups on a plethora of topics ranging from culture to the environment to

 music to politics

1. Access to many University Library Catalogs, the Library of Congress
2. Graphical access to the Internet

With access to computers and people all over the world also comes the availability of material that may not be considered to be of educational value in the context of the school setting. Sanchez Charter School has taken precautions to restrict access to controversial materials by using Internet Filters to block access and monitor access to inappropriate information. Specifically, as required by the Children’s Internet Protection Act, blocking shall be applied to visual depictions of material deemed obscene or child pornography, or to any material deemed harmful to minors. Subject to staff supervision, technology protection measures may be disabled or, in the case of minors minimized only for bona fide research or other lawful purposes.

However, internet it is impossible to control all materials and an industrious user may discover controversial information. We at Sanchez Charter School firmly believe that the valuable information and interaction available on this internet far outweighs the possibility that users may procure material that is not consistent with the educational goals of Sanchez Charter School.

Internet access is coordinated through a complex association of government agencies, and regional and state networks. In addition, the smooth operation of the network relies upon the proper conduct of the end users who must adhere to strict guidelines. These guidelines are provided here so that users are aware of the responsibilities they are about to acquire. In general, this requires efficient, ethical and legal utilization

of the network resources. If a Sanchez Charter School user violates any of these provisions, his or her account will be terminated and future access could possibly be denied.

The signature(s) at the end of this document is (are) legally binding and indicates the party (parties) who signed has (have) read the terms and conditions carefully and understand(s) their significance.

**Internet--Terms and Conditions of Use**

1. **Acceptable Use** - The purpose of the backbone networks making up the Internet is to support research and education in and among academic institutions by providing access to unique resources and the opportunity for collaborative work. The use of a user account must be in support of education and research and consistent with the educational objectives of the Sanchez Charter School. Use of other organization's network or computing resources must comply with the rules appropriate for that network. Transmission of any material in violation of any national or state regulation is prohibited. This includes, but is not limited to: copyrighted material, threatening or obscene material, or material protected by trade secret. To the extent practical, steps shall be taken to promote the safety and security of users of the Sanchez Charter School online computer network when using electronic mail, chat rooms, instant messaging and other forms of direct electronic communication. Specifically, as required by the Children’s Internet Protection Act, inappropriate network usage includes unauthorized access, including so-called “hacking” and other unlawful activities and unauthorized disclosure, use, and dissemination of personal identification information regarding minors.
2. **Privileges** - The use of the Internet is a privilege, not a right, and inappropriate use will result in a cancellation of those privileges. (Each student or teacher who receives an account will be part of a discussion with a Sanchez Charter School staff member pertaining to the proper use of the network.) The system administrators will deem what is inappropriate use and their decision is final. Also, the system administrators may close an account at any time as required. The administration, faculty, and staff of Sanchez Charter School may request the system administrator to deny, revoke, or suspend specific user accounts.
3. **AAMA Network Etiquette** – Network users are expected to abide by the generally accepted rules of network etiquette. These include (but are not limited to) the following:
	* Be polite. Do not get abusive in your messages to others.
	* Use appropriate language. Do not swear, use vulgarities or any other inappropriate language.
	* Illegal activities are strictly forbidden.
	* Do not reveal personal address or phone numbers of students
	* Note that electronic mail (e-mail) is not guaranteed to be private. People who operate the system do have access to all mail. Messages relating to or in support of illegal activities may be reported to the authorities.
	* Do not use the network in such a way that would disrupt the use of the network by other users.
	* All communications and information accessible via the AAMA network should be assumed that there is no implicit right to privacy.
	* Students may not attempt to circumvent the web filtering in place to protect students from inappropriate material online.
	* **Guarantees** - Sanchez Charter School makes no warranties of any kind, whether expressed or implied, for the service it is providing. Sanchez Charter School will not be responsible for any damages suffered. This includes loss of data resulting from delays, no deliveries, mis-deliveries, or service interruptions caused by its own negligence or user errors or omissions. Use of any information obtained via the Internet is at the users’ own risk. Sanchez Charter School specifically denies any responsibility for the accuracy or quality of information obtained through its services.
	* **Security** - Security on any computer system is a high priority, especially when the system involves many users. If users feel they can identify a security problem on the Internet, they must notify a system administrator or teacher. Do not demonstrate the problem to other users. Do not use another individual's account without written permission from that individual. Attempts to logon as a system administrator will result in cancellation of user privileges. Any user identified as a security risk or having a history of problems with other computer systems may be denied access to Internet.
	* **Vandalism** - Vandalism will result in cancellation of privileges. Vandalism is defined as any malicious attempt to harm or destroy data of another user, Internet, or any of the above listed agencies or other networks that are connected to any of the Internet backbones. This includes, but not limited to, the uploading or creation of computer viruses.
	* **Supervision** – it shall be the responsibility of all members of Sanchez Charter School staff to educate, supervise and monitor appropriate usage of the online computer network and access to the Internet in accordance with this policy, the Children’s Internet Protection Act, the Neighborhoods Children’s Internet Protection Act, and the Protecting Children in the 21st Century Act. Procedures for disabling or otherwise modifying any technology protection measures shall be the responsibility of the AAMA IT Director or designated representatives.

This revised Internet Acceptable Use and Safety Policy was adopted by the Board of George I Sanchez Charter School at a public meeting, September 7 , 2012.

Amendments:

5 a – Security) All school owned electronic equipment has to access the Internet using a school provided connection while being used on campus. Any attempt to bypass this connection using alternate access points is a security violation. This would include using personal mobile phones as access points.

**Sanchez Charter School Internet Use Agreement**

STUDENT

I understand and will abide by the above Internet Acceptable Use and Safety Policy. I further understand that any violation of the regulations above is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action.

 Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT OR GUARDIAN

As the parent or guardian of this student, I have read the Internet Acceptable Use and Safety Policy. I understand that this access is designed for educational purposes. Sanchez Charter School has taken precautions to eliminate controversial material. However, I also recognize it is impossible for Sanchez

Charter School to restrict access to all controversial materials and I will not hold them responsible for materials acquired on the network. Further, I accept full responsibility for supervision if and when my child's use is not in a school setting. I hereby give permission to issue an account for my child and certify that the information contained on this form is correct.

**(Must be signed if the applicant is a student)**

All information obtained for this purpose will remain confidential. One form per student enrolled is required.

George I Sanchez Charter Schools

STUDENT HEALTH INFORMATION SHEET

**Campus Name: George I. Sanchez Charter Schools**

**Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student’s Age: \_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HEALTH HISTORY: Select Yes for any conditions that apply to your child and have been diagnosed**

**by a physician.**

**CONDITION RESPONSE DATE COMMENTS**

ADHD: O Yes O No

ADD: O Yes O No

Allergies: O Yes O No

Asthma: O Yes O No

Bladder/Bowel Issues: O Yes O No

Blood Disorder: O Yes O No

Bone/Muscle Issues : O Yes O No

Cancer: O Yes O No

Celiac Disease: O Yes O No

Chickenpox: O Yes O No

Diabetes: O Yes O No

Kidney: O Yes O No

Heart Disease: O Yes O No

Hepatitis: O Yes O No

Immune Disorder: O Yes O No

Mental/Behavioral Health:

O Yes O No

Migraine: O Yes O No

Neurological: O Yes O No

Scoliosis: O Yes O No

Seizures: O Yes O No

Surgery: O Yes O No

Other: O Yes O No

Other: O Yes O No

**Prescription medication to be given at school must be in the original bottle with the child's name and instructions for administration on the label. A permission form must be signed by the parent or guardian and kept on file in the nurse's office. In accordance with the Nurse Practice Act, a health plan must be developed for administering care for any ongoing chronic condition (i.e. diabetes, asthma, epilepsy etc.)**

**MEDICATIONS**

**COMMENTS**

Is your child prescribed an epinephrine injector such as Epi-Pen®? O Yes

 O No

Is your child on any prescriptive medications?O Yes

 O No

 If yes, state the name of the medications (s) and the reason it is being given.

Will the medication be given at school?

O Yes O No

**VISION COMMENTS**

Does your child have a vision problem? If yes, please describe: O Yes

 O No

Does your child wear glasses? O Yes

 O No

Does your child wear contacts? O Yes

 O No

**HEARING**

Is there a hearing loss or deafness? O Yes Left ear? Right ear?

 O No

 Does the child wear a hearing aid(s)? O Yes

 O No

When a child suffers any injury or illness while in school, an immediate and continuing effort will be made to contact parents. In cases of serious injury or illness, first aid will be rendered in accordance with local school policies.

**EMERGENCY HEALTHCARE CONSENT: I** represent

that I am a person who has the right to consent to medical, dental, psychological, and surgical treatment on behalf of the identified student. I authorize the George I Sanchez Charter Schools to contact the person(s) identified by the student's parent(s)/guardian(s) as emergency contact(s). In the event that the student's parent(s), legal guardian(s), emergency contact(s) and/or nonparent adult caregiver(s) authorized by Texas Family Code Chapter 34 cannot be immediately contacted by telephone, I authorize the George I Sanchez Charter Schools to consent to medical, dental, psychological, and surgical treatment on behalf of the student.

**o** Yes o No

**NOTE:** In the event the George I Sanchez Charter Schools consents to treatment of the student pursuant to this authorization, the George I Sanchez Charter Schools is immune from any and all liability for damages or amounts incurred, including the cost of emergency care or transportation, resulting from the examination or treatment of the identified student.

Hospital Preferred:

Physician Name and Phone Number:

 **SIBLING NAMES GRADE CAMPUS**

**George I Sanchez Charter Schools does not discriminate against any person because of race, color, religion, sex, national origin, disability, age, or on any other basis prohibited by law.**

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***George I Sanchez Charter Schools***

***Food Allergy Disclosure***

Dear Parents,

The George I Sanchez Charter Schools is required to request, at the time of enrollment, that the parent or guardian of each student attending a George I Sanchez Charter Schools school disclose the student's food allergies. This form will satisfy this requirement.

This form allows you to disclose whether your child has a food allergy or severe food allergy that you believe should be disclosed to the George I Sanchez Charter Schools in order to enable

George I Sanchez Charter Schools to take necessary precautions for your child's safety.

"Severe food allergy" means a dangerous or life-threatening reaction of the human body to a food-borne allergen introduced by inhalation, ingestion, or skin contact that requires immediate medical attention.

Please list any foods to which your child is allergic or severely allergic, as well as the nature of your child's allergic reaction to the food. **The parent will provide a doctor's note, notify the school nurse, and food & nutrition if your child has an anaphylactic food allergy that requires an EpiPen. The school must have an EpiPen prescribed for student in the event of an emergency.**

**FOOD: Nature of allergic reaction to the food**

George I Sanchez Charter Schools will maintain the confidentiality of this form and the information provided above and may disclose the information to teachers, school counselors, school nurses, and other appropriate school personnel only within the limitations of the Family Educational Rights and Privacy Act and district Policy. (See FL] **The district will maintain this form as part of your child's student record.**

**NAME OF STUDENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE: \_\_\_\_\_\_\_\_\_**

**Parent/Guardian Name:**

**Primary Phone:**

**Secondary Phone:**

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_All information obtained for this purpose will remain confidential. One form per student enrolled is required.**

**George I Sanchez Charter Schools**

**STUDENT RESIDENCY QUESTIONNAIRE**

**NAME OF STUDENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_ Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Attending: George I Sanchez Charter Schools Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grade: \_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_**

 **O Yes O No** Is your current address a temporary living arrangement?

**O Yes O No** Is your temporary living arrangement due to loss of housing or economic hardship?

If you answered **NO** to both of the questions above, DO NOT complete the rest of the form. Click Submit Data to sign and submit the form.

If you answered **YES to either of the questions above, proceed to Section A,** complete the rest of the form.

**Section A • Student Living Situation (Check all that apply)**

* + Live with parent/legal guardian in a home, apartment, or housing and does not share home with any other family.
	+ Live in a shelter because I do not have permanent housing (family shelter, domestic violence shelter, children/youth shelter, FEMA housing), includes living in transitional housing (housing available for a specific length of time only and partly paid by a Church or other organization).
	+ Live in the home of a friend or relative because I lost my housing (doubled up due to economic hardship, fire, flood, lost job, divorce, domestic violence, parent in military and was deployed, parent in jail, etc.)
	+ Live in a tent, car, van, abandoned building (living on the streets, campground, park, or unsheltered location), includes living without electricity, heat, and/or running water in a home/apartment.
	+ Live in hotel or motel (due to economic hardship, eviction, flood, fire, hurricane, etc.)
	+ Unaccompanied Youth (student is not living in the home of a parent or legal guardian)
	+ Child or youth placed by DFPS with a temporary guardian (DFPS provided a Parental Child Safety Plan or Authorization for Non-Parent or Voluntary Caregiver)
	+ None of these describe my present living situation. Briefly describe your situation:

**Section B: Factors contributing to the student's current living situation (Check all that apply):**

 □ Natural disaster □ Tornado, storm, flood, etc.

□ Hurricane, name:

J

 □ Fire: prairie, forest, grass, lightning strike, etc.

□ Family issues such as divorce, domestic violence, kicked out by parents, student left due to family conflict, etc.

□ Home issue such as lack of electricity, water, heat, adequate home repair due to lack of funds overcrowding, mold, etc.

□ Military: Parent/guardian deployed, injured or killed in action

□ Incarceration of parent or guardian due to health, mental health, drugs/alcohol, or other factors

□ Home fire not due to natural causes (i.e., faulty equipment/appliances/wiring, furnace, stove, fireplace, etc.

□ 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
	+ Eviction record and/or inability to produce deposits for rent or utilities

□ High medical bills that leave little or no money for housing

□ Lack of affordable housing in the area

□ Minor student unable to afford housing on my own

□ None of the above describe the main reason for my present living situation. Briefly explain the contributing factors:

**Section C: Parent/Legal Guardian/Caregiver/Unaccompanied Youth**

**Last Name: First Name: Middle Name: Relationship to Student:**

**Address: Zip: Telephone:**

**Student's length of time at present address:**

**Years: Months: Days: Number of Children Enrolled in District:**

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

**Name Grade School District**

*George I Sanchez Charter Schools*

*MIGRANT EDUCATION PROGRAM FAMILY SURVEY*

**District: George** I **Sanchez Charter Schools Campus:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level: \_\_\_\_\_\_\_\_\_\_\_**

Dear Parents,

In order to better serve your children, our school district is helping the State of Texas identify students who may qualify to receive additional educational services.

**The information below will be kept confidential.**

Please answer the following questions:

* + **Within the past 3 years have you, or your child, moved from one school district, city or state to another? O Yes O No**
	+ **If yes, did you, or your child, move so you could work or look for work in agriculture or fishing?**

**O Yes O No**

**If your answer above is NO, STOP here and submit form.**

If your answer is YES, please check all that apply below.

 Working in fruit, vegetable, sunflower, cotton, wheat, grain, farms or ranches, fields

& vineyards

 Working in a cannery

 Working on a dairy farm

 Working in a fishery

 Working on a poultry farm

Working in a plant nursery, orchard, tree growing or harvesting

 Working in a slaughter house

Other similar work, please explain:

**Please complete the following information:**

Best time to contact you: Telephone Number:

Parent/Guardian Name:

Home Address/Apt Name: City:

 Zip Code:

 Mailing Address: City: Zip Code:

*COMPLETE THIS FORM FOR ALL STUDENTS REGARDLESS OF SPECIAL EDUCATION STATUS*

George I Sanchez Charter Schools STATEMENT OF SPECIAL EDUCATION SERVICES

**NAME OF STUDENT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE: \_\_\_\_\_**

**School Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* + The above named student has **NEVER** received special education services.

 O **True** O **False**

If you answered **TRUE,** DO NOT complete the rest of the form.

If you answered **FALSE, proceed to Question 2** and complete the rest of the form.

* + The above named student **WAS RECEIVING** special education services at his/her prior school.

O **True** O **False** If you answered TRUE, complete the remainder of the form below.

This form serves as a release of information authorization in order to request your child's special education records. Please work with the campus Admission Review Dismissal (ARD) committee to assist in identifying services to support your child.

Disabling conditions(s): (LD, ED, 01, MR, etc. )

***Services received at previous school. Check all that apply:***

□Speech

□Self-Contained

□Auditory Impaired (hearing)

□CMC

□Visually Impaired Other services:

 Other Services:

* + The above named student received special education services in the past. **BUT WAS DISMISSED PER ARD**

**COMMITTEE.**

O **True** O **False**

If you answered TRUE, enter year dismissed:

* + Comments:

Name and address of previous school:

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*George I Sanchez Charter Schools*

*Military Connected Student Data*

**STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The Texas Education Agency is mandated by Texas State Law to collect data on military connected students enrolled in Texas public schools.

Section 25 006, Texas Education Code. The agency shall collect data each year from school districts and open­ enrollment charter schools through the Public Education Information Management System (PEIMS) relating to the enrollment of military-connected students.

**Please check appropriate box, If applicable:**

 **Student in grade KG** - **12 is a dependent of an active duty member of the United States military.**

 **Student in grade KG** • **12 is a dependent of a current member of the Texas National Guard (Army, Air Guard, or State Guard).**

 **Student in grade KG -12 is a dependent of a current member of a reserve force in the United States military.**

 **Pre-kindergarten student is a dependent of an active duty member of the armed forces of the United States, including the state military forces or a reserve component of the armed forces, who is ordered to active duty by proper authority OR is the child of a member of the armed forces of the United States, including the state military forces or a reserve component of the armed forces, who was Injured or killed while**

**serving on active duty.**

 **Student in grade KG -12 is a dependent of a former member of one of the following: The United States military, the Texas National Guard (Army, Air Guard, or State Guard), or a reserve force in the United States military.**

 **Student in grade KG -12 was a dependent of a member of a military or reserve force in the United States military who was killed in the line of duty.**

 **None of the above.**

**Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Texas Education Agency** Commissioner Mike Morath

1701 North Congress Avenue• Austin, Texas 78701-1494 • 512 463-9734 • 512 436-9838 FAX• tea.texas.gov

**Student Name: Student ID#:**

**District Name: Campus Name:**

**HOME LANGUAGE SURVEY**

19 TAC Chapter 89, Subchapter BB, §89.1215

(Home Language Survey only administered during **initial** enrollment in Texas public schools)

**Part One:**

The state of Texas requires that the following information be completed for each student who enrolls in a Texas public school for the first time. It is the responsibility of the parent or guardian, not the school, to provide the language information requested by the questions below.

**Dear Parent or Guardian:**

This survey shall be kept in each student's permanent record folder. A copy of this survey shall follow the student while enrolled in any public or open enrolled charter school in Texas.

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**Texas Education Agency** Commissioner Mike Morath

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**Part Two:**

Please answer the questions to the best of your ability.

* + What language(s) is/are used in the child's home most of the time? \_
	+ What language(s) does the child use most of the time? \_
	+ If the child had a previous home setting, what language(s) was/were used for communication

in that home setting? If no, previous home setting, answer Not Applicable (N/A).

**Note:** Please contact your school about the benefits of bilingual education services. The following resources may also provide information on program services that foster bilingualism.

* + Parent/ Guardian Rights
	+ Bilingual Education Program
	+ Program Information Videos

Please visit the Emergent Bilingual Support Portal (txel.org) for additional information.

Signature of Parent/Guardian Date \_ Signature of Student if Grades 9-12 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_

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