

NEW STUDENT ENROLLMENT

Date _____

Name _____

Do you live in the Dewey School District? _____

If you are a Transfer (student NOT currently living in the Dewey School District), what school district do you live in? _____

Name of previous school _____

Address of previous school _____

Date of withdrawal from previous school _____

Are you currently under suspension from any other school? _____

Have you been a student at Dewey Schools before? _____

If so, what grade did you last attend? _____

Have you ever been enrolled in any special programs/classes? _____

Have you ever had an IEP? _____

Student Information Sheet

Please fill out and return to the school office.

First Name _____ Middle Name _____

Legal Last Name _____ Suffix (Jr, III, etc.) _____

Nickname (If student goes by any name other than full first name) _____

Date of Birth MM/DD/YY ____/____/____ City and State of Birth _____, _____

Parent Phone Number: _____ Type (Cell, Home, Work) Unlisted? _____

Social Security Number: _____ - _____ - _____ Gender (Male, Female)

Ethnicity (circle all that apply):

White (non-Hispanic) Percentage _____

American Indian (non-Hispanic) Percentage _____

Black (non-Hispanic) Percentage _____

Asian (non-Hispanic) Percentage _____

Pacific Islander (non-Hispanic) Percentage _____

Hispanic

Listing race percentages is optional. However, if no percentages are listed, please check all that apply, and circle the primary race.

Grade classification upon entry (what grade will the student be classified as when he/she starts attending DHS)

____ Freshman-9th Grade ____ Sophomore-10th Grade ____ Junior-11th Grade ____ Senior-12th Grade

Please list any special needs or requirements for this student.

Please list any people who are **RESTRICTED** from having contact with or picking up this student. (If non-custodial parent is listed we must have a copy of legal documentation stating restrictions.)

Mailing Address:

Street Address _____

City _____ State ____ Zip _____

County _____

Physical Address (Leave blank if same as mailing)

Street Address _____

City _____ State ____ Zip _____

County _____

Birth Certificate Number _____

Citizenship/Nationality _____

Student Email Address _____

Guardian/Contact Information

Student Name: _____

Please list all parents, guardians, and contacts for this child. **Please list each person separately**, even if married.

Contact:

First Name: _____ Last Name: _____ Male / Female

Phone (list preferred number first): Number _____ Type (Cell, Home, Work) Unlisted? _____

Number _____ Type (Cell, Home, Work) Unlisted? _____

Number _____ Type (Cell, Home, Work) Unlisted? _____

Street Address _____

City _____ State ____ Zip _____ County _____

Relationship to Student: _____

Check all that apply: _____ This person is a family member _____ This person is an emergency contact
_____ This person can pick up the student from school _____ This person can receive mailings
_____ This person is allowed online access to student grades

Non-English Speaking? _____ Email Address _____

Employer Name: _____

Contact:

First Name: _____ Last Name: _____ Male / Female

Phone (list preferred number first): Number _____ Type (Cell, Home, Work) Unlisted? _____

Number _____ Type (Cell, Home, Work) Unlisted? _____

Number _____ Type (Cell, Home, Work) Unlisted? _____

Street Address _____

City _____ State ____ Zip _____ County _____

Relationship to Student: _____

Check all that apply: _____ This person is a family member _____ This person is an emergency contact
_____ This person can pick up the student from school _____ This person can receive mailings
_____ This person is allowed online access to student grades

Non-English Speaking? _____ Email Address _____

Employer Name: _____

Contact:

First Name: _____ Last Name: _____ Male / Female

Phone (list preferred number first): Number _____ Type (Cell, Home, Work) Unlisted? _____

Number _____ Type (Cell, Home, Work) Unlisted? _____

Number _____ Type (Cell, Home, Work) Unlisted? _____

Street Address _____

City _____ State ____ Zip _____ County _____

Relationship to Student: _____

Check all that apply: _____ This person is a family member _____ This person is an emergency contact
_____ This person can pick up the student from school _____ This person can receive mailings
_____ This person is allowed online access to student grades

Non-English Speaking? _____ Email Address _____

Employer Name: _____

Notice to Parent/Guardian

Dewey Schools will carry all school records (including but not limited to: transcripts, grade cards, test records, class lists, honor rolls, publicity releases, etc.) in the **legal name** of the student, as established and verified by the given name listed on the student's birth certificate. Any assumed "goes by" last name **will not replace the legally given name** in any publication of school records. A change in the legal name will need to be verified by presenting the school office **a record of the name change by court order**.

Non-custodial parents will have right to any information or record relating to a minor child which is available to the custodial parent, including teacher/parent conferences, **unless restricted by court order**. In such case, it is the responsibility of the custodial parent to provide a copy of the legal restrictions to the school office.

Verification of Residence

Student's Name _____

Please check those that apply.

___ The student AND his or her guardian(s) rent / own a residence in the Dewey School District.

Our family residence is located at the following address.

Must have a street address or Rural Route and box, including directions to that location. No PO Box addresses. **A copy of Verification of Residence must be provided at enrollment. (i.e. City Utility Bill – water, electric or gas or Rental/Lease Agreement)**

And we are **now living in said residence**.

___ The student and guardian(s) rent / own a residence outside the Dewey School District.

___ The student and guardian are staying with family or friends in the Dewey School District.

___ The student and guardian are staying in a Hotel, Shelter, or other Temporary Housing.

___ The student is living with someone other than his or her guardian. Please describe relationship of the individual to the student. _____

If the student resides outside the district, has he / she been approved for transfer to Dewey High School? Yes No

My signature verifies that the information above is true and accurate. The penalty for giving false enrollment information can be expulsion from the school system. Signature must be that of the legal parent or guardian for the child enrolling.

Parent or Guardian's Signature

Date

ACHIEVING CLASSROOM EXCELLENCE ACT (ACE) Parental Curriculum Choice Letter Template

Dear Parent or Legal Guardian:

Senate Bill 1792 was passed by the Oklahoma Legislature and signed into law by Governor Henry, effective July 1, 2006. The law requires eighth grade students entering the ninth grade to complete the college preparatory/work ready curriculum as outlined in Senate Bill 1792, unless the student's parent or legal guardian approves the student to enroll in the core curriculum. The college preparatory/work ready curriculum and the core curriculum requirements are attached. Successful completion of either curriculum will result in a student receiving a standard diploma.

Choosing the courses a student takes in high school is an important decision for you and your child. A college preparatory curriculum is challenging and may help determine a student's future success in higher education and the world of work. Students who take a college preparatory curriculum designed to prepare them for both college and career have more opportunities.

According to the law, your child will automatically be enrolled in the college preparatory/work ready curriculum. You do not need to do anything. However, if you choose the core curriculum, you must complete the information below and return it to the school prior to enrollment. Please contact the high school principal or school counselor if you have questions or need additional information.

As the parent or legal guardian, I am selecting the following curriculum for my student:

Check one: Core Curriculum College preparatory/work ready curriculum

STUDENT'S NAME (Please print)

GRADE

NAME OF HIGH SCHOOL

PARENT/GUARDIAN'S NAME (Please print)

PARENT/GUARDIAN'S SIGNATURE

DATE



OKLAHOMA
STATE DEPARTMENT *of* EDUCATION
— JOY HOFMEISTER —
STATE SUPERINTENDENT *of* PUBLIC INSTRUCTION

CODE OF CONDUCT FOR COMPUTER USE AND INTERNET ACCESS

The purpose of providing computer applications and Internet access is to develop communication skills and promote the exchange of information and ideas within the global community. The following represents a guide to the acceptable use of the technology provided by this district. All network use must be consistent with policies and goals of the school district.

Inappropriate use of district technology will result in the loss of technology use, disciplinary action, and/or referral to legal authorities.

Each system user is expected to comply with all district policies governing Internet access and to abide by generally accepted rules of network etiquette. The general rules include, but are not limited to, the following:

(a) **Appropriate language** – Do not use abusive language in messages to others. Be polite. Do not use obscene, indecent, lewd or profane language, vulgarities, rude or disrespectful language. Do not engage in personal attacks or activities intended to distress, harass or annoy another user.

(b) **Safety** – Do not reveal personal contact information about yourself or any other person. This information includes telephone numbers and addresses. Do not use the Internet access to arrange meetings with persons you have met on line. Users will promptly disclose to the teacher, District system administrator or to some other member of the faculty or staff any message they consider to be inappropriate or which makes them feel uncomfortable.

(c) **Electronic mail** – Users should be aware that electronic mail (Email) may not be assumed to be a private communication. The District and system administrators do have access to Email. Messages relating to or in support of illegal activities will be reported to the authorities. System users should not post any message which is intended to be private.

(d) **Network resources** – System users should not use the network in a way that will disrupt the use of the network by other users. **The network should be used for educational, professional and career development activities only.** System users should refrain from downloading large files unless absolutely necessary, and then only when the system is not being heavily used. Such files should be removed from the system computer to the user's personal computer as soon as possible.

(e) **Intellectual property** – Do not plagiarize work obtained from the Internet. Users must respect the rights of copyright owners and comply with all limitations imposed upon use of copyrighted material.

With access to such vast storehouses of information and instant communication with millions of people from all over the world, material will be available that may not be considered to be of educational value by the District or which is inappropriate for distribution to children. The District has taken available precautions, including but not limited to enforcing the use of filters that block access to obscenity, child pornography and other materials harmful to minors. However, on a global network, it is impossible to control all material and an industrious user may obtain access to inappropriate information or material. The District firmly believes that the value of the information and interaction available on the Internet far outweighs the possibility that students and employees may procure material that is not consistent with our educational goals.

Any user of District Internet capabilities implies an understanding of, and agreement with, the above terms and conditions of this Internet Acceptable Use Policy, and agrees to abide by all terms and conditions described. If a parent wishes to limit their students access to the Internet while at school they may request such in writing at a building office.

Student Internet Access Agreement

Student Section:

Student Name _____
(Last) (First) (Middle)

I have received a copy of the Internet Acceptable Use Policy as contained in the Student Handbook. I have read and agree to abide by their provisions. I understand that any violation of the use provisions may result in disciplinary action including, but not limited to, suspension and/or revocation of network privileges and suspension from school.

Student's Signature _____ Date ___/___/___

Parent or Guardian Section (Required):

I have read the Internet Acceptable Use Policy as contained in the Student Handbook for Dewey Public Schools. I understand that the District has taken reasonable precautions to ensure that access to inappropriate material is limited to the extent possible. I realize, however, that it is not possible to completely prevent access to inappropriate material. I release Dewey Schools from liability in the event that my child acquires inappropriate material through use of the District's technology resources. I will monitor my child's use and access to the Internet and will accept full responsibility for supervision when my child is not in a school setting. I request that the District issue an account for my child and certify that the information contained on this form is correct.

Parent's Signature _____ Date ___/___/___

Home Address _____ Phone _____

Dewey Public Schools Statement of Policy, Drug Free School

- A. All students will participate in a developmentally based drug and alcohol education and prevention program.
- B. Students are hereby notified that the use, possession, or distribution of illicit drugs, and alcohol is wrong and harmful to themselves as well as to others.
- C. **Standard of Conduct:** The use, possession, distribution, sale, or being under the influence of alcohol, illicit drugs, and or inhalants will not be tolerated on school property or within one thousand feet of school property. Compliance is mandatory.
- D. **Disciplinary Sanctions:** Students who violate paragraph "C" shall be subject to discipline deemed appropriate in view of all the facts and circumstances. Discipline will be consistent with local, state and federal law. Disciplinary sanctions may include the possibilities of:
 - 1. In school suspension
 - 2. Suspension from school (short or long term)
 - 3. Alternative education placement (as appropriate)
 - 4. Referral to law enforcement officials
 - 5. Completion of an appropriate and rehabilitation program.
- E. Information about drug and alcohol counseling and rehabilitation and re-entry program are available in the principal's and/or the counselor's office.
- F. Students and Parent will receive a copy of this Statement of Policy for a Drug Free School. (See Parent/Student Handbook)
- G. A biennial review of the policies will be conducted. Disciplinary Sanctions paragraph "D" will be consistently enforced.
- H. This record of notification and compliance of the Drug Free School policy will be kept in the student's cumulative record folder.

Parent Statement of Acknowledgement

I have read the statement of Policy, Drug Free School, and understand my child, while in attendance in this school district will be governed by such policy. (Sign and return to building office)

Student's Name _____ Grade _____

Parent/Guardian Signature: _____ Date ___/___/___

Dewey Public Schools Enrollment Questionnaire

This form is intended to address the McKinney-Vento Act. Your answers will help determine residency necessary for enrollment and ensure that certain needs will be met for this student.

Presently, where is the student living? *Mark one line as it applies to your student*

<u>Section A</u>	<u>Section B</u>
<input type="checkbox"/> In a shelter _____	<input type="checkbox"/> Choices in Section A do NOT apply.
<input type="checkbox"/> Temporarily with more than one family due to loss of job, loss of housing, etc.	Stop: If you marked this section, you do <u>not</u> need to complete the remainder of this form.
<input type="checkbox"/> In a motel, car, or campsite	
<input type="checkbox"/> In temporary foster care awaiting placement	
<input type="checkbox"/> Alone without parental support (independent living student)	
Continue: If you marked a line in Section A, please complete the remainder of this form.	

Date of Birth: _____

Student Name: _____

School: _____ Grade: _____ Male - Female (circle one)

Parent/Guardian: _____ Date: _____

Present Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Last School attended: _____ City: _____ State: _____

DEWEY PUBLIC SCHOOLS

#1 BULLDOGGER ROAD
Dewey, Oklahoma 74029

Authorization for RELEASE OF STUDENT RECORDS

I authorize _____
School District/Agency LAST ATTENDED

Street Address/P.O. Box City State Zip

To release to **Dewey High School** copies of the official transcript, withdrawal grades to date, cumulative folder data, health records and any confidential records pertaining to special placement for the following student(s):

Name of Child Birth Date Grade

Name of Child Birth Date Grade

Name of Child Birth Date Grade

Signature of Parent or Guardian Date

Address

Education records are maintained and released in accordance with the Family Education Rights and Privacy Act (FERPA). Parents or eligible students shall be provided a copy of the records to be disclosed if requested. Further disclosure of the above records will be in accordance with 34 CFR 99.31.