



School of Excellence in Education
2019-2020 school year

How Did You Hear About Us?

Please take time to answer our survey. This will allow us to determine how to advertise the School of Excellence in Education (SEE) to our community, friends and family. Thank you for your input.

Please select all that may apply:

Friend Relative Neighbor SEE staff SEE Parent

Radio: Gospel 1480 AM HOT 104.5 The BEAT 98.5 Other Station _____

Television: WOAI (Ch. 4) KENS (Ch. 5) KSAT (Ch.12) FOX (Ch. 29)

Cable: Network name: _____

Newspaper: Express News Register Observer Current other

Magazine: Military Kids Directory other

Print Ad: Post Card Flyer Event Ad/Program Ad

Other:

(Optional) Recommended by: We want to thank them, please give contact information:

Name: _____

Address: _____ (City, State, Zip Code) _____

Thank you again for taking time out to complete this survey.

Preparing Children Today for Tomorrow's Challenges



SCHOOL of EXCELLENCE
in EDUCATION

- Kelley Elementary, 802 Oblate Drive, SATX 78216
- Walker Elementary, 6500 IH-35 N, SATX 78218
- Saenz Junior High, 1830 Basse Road, SATX 78213
- Milton Lee Academy, 1830 Basse Road, SATX 78213

2019-2020
NEW STUDENT ENROLLMENT

Student Full Name: _____ Date: _____

Please Print

Last Year's Grade Level 2018-2019: _____ Grade Level 2019-2020: _____

PARENT/GUARDIAN: DO NOT WRITE BELOW THIS LINE. OFFICE USE ONLY.

Student Enrollment Date: _____ Student ID #: _____

Special Notes: _____

Enrollment Documentation required:

Staff Initials

- | | | |
|---|-------|-------------------------|
| 1. Student's Birth Certificate | _____ | |
| 2. Student's Social Security Card | _____ | |
| 3. Student's Immunization Records | _____ | Nurses' Initials: _____ |
| 4. Proof of current address (Utility Bill or Lease) | _____ | |
| 5. Last Report Card | _____ | |
| 6. Attendance Records | _____ | |
| 7. Discipline Records | _____ | |
| 8. Withdrawal Paperwork | _____ | |
| 9. STAAR/Standardized Test Scores | _____ | |
| 10. Transcript (High School ONLY) | _____ | |
| 11. Legal Documentation (Adoption, Divorce & Custody) | _____ | Type: _____ |
| 12. Additional School Records (If Applicable) | _____ | Type: _____ |
| 13. Parent/Guardian ID or Driver's License | _____ | |

Data Entered by _____ Date _____

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ADSE2011-006 Rev.



SCHOOL YEAR	CAMPUS
2019 - 2020	

STUDENT INFORMATION: PLEASE PRINT

STUDENT INFORMATION							
GRADE LEVEL	LAST NAME		FIRST NAME	MIDDLE NAME	SOCIAL SECURITY NUMBER		
RESIDENTIAL ADDRESS PLEASE INCLUDE APT #, CITY & ZIP CODE			MAILING ADDRESS PLEASE INCLUDE APT #, CITY & ZIP CODE				
			COMPLETE ONLY IF DIFFERENT FROM RESIDENTIAL ADDRESS				
STUDENT'S CELL PHONE NUMBER	SECONDARY PHONE NUMBER		GENDER	DATE OF BIRTH	PLACE OF BIRTH		
()	()		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE				
DO ANY SIBLINGS ATTEND OTHER SEE CAMPUSES? <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME OF SIBLING(S):				IS THIS STUDENT A FOSTER CHILD?		
	NAME OF CAMPUS:				<input type="checkbox"/> YES <input type="checkbox"/> NO LEGAL DOCUMENTATION MUST BE PRESENTED		
SCHOOL DISTRICT YOU CURRENTLY RESIDE IN			NAME OF SCHOOL IN YOUR CURRENT HOME DISTRICT THAT STUDENT WOULD BE ATTENDING				
HAS THE STUDENT EVER BEEN RETAINED? (NOT PROMOTED TO THE NEXT GRADE LEVEL) <input type="checkbox"/> YES <input type="checkbox"/> NO			IF YES, GRADE LEVEL(S) RETAINED _____ SCHOOL YEAR(S) RETAINED _____				
HAS STUDENT EVER ATTENDED THE SCHOOL OF EXCELLENCE IN EDUCATION?		HAS STUDENT EVER PARTICIPATED IN THE IMMIGRANT PROGRAM?		HAS STUDENT EVER PARTICIPATED IN THE MIGRANT PROGRAM?		DATE FIRST ENROLLED IN U.S. SCHOOLS	
<input type="checkbox"/> YES DATE _____		<input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO			
LIST PREVIOUS SCHOOLS ATTENDED		ADDRESS		YEAR	CITY	STATE	ZIP CODE
WAS STUDENT EVER ENROLLED IN SPECIAL PROGRAMS?			<input type="checkbox"/> YES <input type="checkbox"/> NO SPECIAL EDUCATION <input type="checkbox"/> YES <input type="checkbox"/> NO BILINGUAL/ESL <input type="checkbox"/> YES <input type="checkbox"/> NO GIFTED AND TALENTED <input type="checkbox"/> YES <input type="checkbox"/> NO 504 PROGRAM <input type="checkbox"/> YES <input type="checkbox"/> NO SPEECH <input type="checkbox"/> YES <input type="checkbox"/> NO DYSLEXIA <input type="checkbox"/> YES <input type="checkbox"/> NO OTHER				

Parent/Guardian Signature: _____ Date: _____

PARENT / GUARDIAN INFORMATION: PLEASE PRINT

WITH WHOM DOES THE STUDENT LIVE?		<input type="checkbox"/> BOTH PARENTS <input type="checkbox"/> FATHER <input type="checkbox"/> GUARDIAN <input type="checkbox"/> MOTHER RELATIONSHIP _____		CUSTODY PAPERS? <input type="checkbox"/> YES <input type="checkbox"/> NO
FATHER/GUARDIAN NAME		DOES FATHER/GUARDIAN HAVE CUSTODY OF STUDENT?		
LAST NAME	FIRST NAME	MIDDLE NAME	DL# & STATE	<input type="checkbox"/> YES <input type="checkbox"/> NO
RESIDENTIAL ADDRESS		PLACE OF EMPLOYMENT		ADDRESS OF EMPLOYMENT
		DOB		
CELL PHONE NUMBER	SECONDARY PHONE	WORK PHONE		E-MAIL ADDRESS

MOTHER/GUARDIAN NAME		DOES MOTHER/GUARDIAN HAVE CUSTODY OF STUDENT?		
LAST NAME	FIRST NAME	MIDDLE NAME	DL# & STATE	<input type="checkbox"/> YES <input type="checkbox"/> NO
RESIDENTIAL ADDRESS		PLACE OF EMPLOYMENT		ADDRESS OF EMPLOYMENT
		DOB		
CELL PHONE NUMBER	SECONDARY PHONE	WORK PHONE		E-MAIL ADDRESS

PHONE NUMBER TO BE USED FOR CALL ALERTS	()	CELL # <input type="checkbox"/> YES <input type="checkbox"/> NO
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INFORMATION OF PERSON ENROLLING STUDENT

NAME OF PERSON ENROLLING STUDENT		RESIDENTIAL ADDRESS
LAST NAME	FIRST NAME	
DATE OF BIRTH OF PERSON ENROLLING STUDENT		
SIGNATURE & DATE OF PERSON ENROLLING STUDENT		RELATIONSHIP TO STUDENT

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**School of Excellence in Education
Military Connected Student Form
2019-2020**

Is parent/guardian active military: Yes No
If yes, please complete entire form.

In 2009 The Texas Legislature adopted the Interstate Compact on Educational Opportunity for Military Students – Texas Education Code Chapter 162. This legislation requires schools to recognize and extend certain privileges to students who are military dependents and to assist military dependent students in the transition process of changing schools when their military parents are reassigned and forced to relocate.

Student Name: _____

Student Grade: _____ Student DOB: _____

Military Parent Name: _____

Branch of Service: _____ Rank: _____

Please check one box below to indicate your child is a dependent of a member of:
For all students:

Active Duty: Army, Navy, Air Force, Marine Corps, or Coast Guard
[This includes Missing in Action (MIA)]

Texas National Guard

Reserve Duty: Army, Navy, Air Force, Marine Corps, or Coast Guard

For Pre-Kindergarten students ONLY:

Armed forces or reserved forces of the United States (Army, Navy, Air Force, Marine Corps, or Coast Guard) or Texas National Guard who has been injured or killed while on active duty

Parent/Guardian Signature

Date

Military ID/Status confirmed by _____

2019-2020 Family Survey

Date:	District: School of Excellence	Campus:	
Student Name:		Date of Birth:	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. Please answer the following questions and return this form to your child's school. The information provided below will be kept confidential.

1. Within the past 3 years have you, or your child, moved from one school district, city or state to another? YES or NO

2. If yes, did you, or your child, move so you could work or look for work in agriculture or fishing?

NO (STOP here and return survey to your child's school.) YES (Please check all that apply below)

 <p>Fruit, vegetables, sunflower, cotton, wheat, grain, on farms or ranches, fields & vineyards</p> <input type="checkbox"/>	 <p>Working in a cannery</p> <input type="checkbox"/>	 <p>Working on a dairy farm or ranch</p> <input type="checkbox"/>	 <p>Working in a fishery</p> <input type="checkbox"/>
 <p><input type="checkbox"/></p>	 <p>nursery, orchard, tree growing or harvesting</p> <input type="checkbox"/>	 <p>Working in a slaughterhouse</p> <input type="checkbox"/>	 <p>Other similar work, please explain:</p> <p>_____</p> <p>_____</p>

Please complete the following information: (Please print)		Best time to contact you: _____	
Parent/Guardian Name:	Home Address/Apt Name:	City:	Zip Code:
Telephone Number:	Mailing Address:	City:	Zip Code:
Please list any children who reside in the home who are under age 22 and <u>NOT</u> enrolled in school:			

For School Use Only: Please email survey with two YES responses to Lydia.hernandez@esc20.net

Rev: 3/2018



SCHOOL of EXCELLENCE
in EDUCATION

Texas Education Agency

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? (Choose only one)

- Hispanic/Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Not Hispanic/Latino

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 (please print)

Parent/Guardian Signature

Student SSN or State ID Number

Date

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:

- _____ Hispanic / Latino
- _____ Not Hispanic/Latino

Race – choose one or more:

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

Observer signature:

Campus and Date:

Texas Education Agency – March 2017

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SCHOOL of EXCELLENCE
in EDUCATION

Student Residency Questionnaire
2019-2020 School Year

Student Name _____ Male Female
Last First Middle

Birth Date ____/____/____ Age ____ Grade ____ Campus _____

Presently, where is the student living? *Check only one box:*

SECTION A
<input type="checkbox"/> In a house or apartment that the student's parent/guardian owns or rents
STOP: If you checked Section A, you do not need to complete the entire form. Fill in Name of Student ONLY. Sign and date.
SECTION B
<input type="checkbox"/> In a Shelter
<input type="checkbox"/> With more than one family in a house or apartment (other family rents or own house or apartment)
<input type="checkbox"/> In a motel, car or campsite
<input type="checkbox"/> With friends or family members (other than parent/guardian)
CONTINUE: If you checked a box in Section B, complete the remainder of the form.

Address where student sleeps at night _____ Zip _____

How long has student been at this address? _____ Phone _____ Cell _____

Is this student currently placed in Texas Department of Family and Protective Services (TDFPS)? Yes No

Has this student ever been served through the TDFPS? Yes No Date(s) _____

Printed name of Parent/Guardian _____

Signature of Parent/Guardian _____ Date _____

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

NOTE: This form is included in order to help identify the students who are homeless as required by the McKinney-Vento Homeless Education Assistance Improvement Act, 42 U.S.C. 11435. The answers to this residency information help determine the services the student may be eligible to receive.

For Office Use Only

Homeless Status 0 2 3 4 5 Unaccompanied Youth 3 4
If identified as Homeless – Economic Disadvantage Code = SNAP 08 (use date below)

Signature

Title

Date

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CONSENT TO REQUEST CONFIDENTIAL INFORMATION

2019-2020 School Year

STUDENT INFORMATION (Please Print)

LAST NAME	FIRST NAME	MIDDLE NAME	Jr. Sr. III
GRADE	DATE OF BIRTH	SOCIAL SECURITY NUMBER	

RECORDS REQUESTED **Please send all records indicated below:**

- Transcript
- Academic Assessment
- Original Home Language Survey
- ESL/Bilingual Records
- Immunization Records
- Withdrawal Paperwork (including withdrawal grades)
- Attendance
- Discipline Records
- TAKS/STAAR/Standardized Test Scores
- Other: _____

PURPOSE OF DISCLOSURE:

Campus principal requires these documents for review and approval for enrollment.

Name of Last School Attended	Address		
City, State, Zip Code	Phone Number(s)	Fax Number	
Parent/Guardian Legal Name (Please Print)	Parent/Guardian Signature	Date	

- Kelley Elementary, 802 Oblate Drive, SATX 78216
- Walker Elementary, 6500 IH-35 N, SATX 78218
- Saenz Junior High, 1830 Basse Road, SATX 78213
- Milton Lee Academy, 1830 Basse Road, SATX 78213

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SCHOOL of EXCELLENCE
in EDUCATION

TEXAS EDUCATION AGENCY COMPULSORY ATTENDANCE LAW
2019-2020

NOTE: This form will remain in effect for the duration of the student's enrollment at the School of Excellence in Education.

Dear Parents/Guardians:

This letter is to inform all potential students and their parent/guardian that the School of Excellence in Education fully adheres to the requirements of attendance set forth in the Texas Education Agency Compulsory Attendance Law (Texas Education Code 25.085).

Compulsory attendance applies to students who are at least 6 years old as of September 1 of the applicable school year or has previously been enrolled in first grade, and who has not yet reached his/her 18th birthday, is required to attend school. A person who is not exempt by TEC 25.086 is required to attend school under this section and shall attend school each school day for the entire period the program of instruction is offered.

Those also required to attend school include:

- A child on enrollment in pre-kindergarten or kindergarten;
- A person in an extended year program for student identified as likely not to be promoted under Section 29.082, or in tutorial classes required by the district under Section 29.084;
- A person assigned to an accelerated instruction program under Section 28.0211;
- A child assigned to a basic skills program under Section 29.086;
- A child in a summer program provided under Section 37.08(1) or Section 37.021.

The law requires all children to attend a public or private school. The law states that a student with 3 unexcused absences within 4 weeks or 10 or more unexcused absences within 6 months (full days or parts of days, this includes tardies and leaving early) may be referred to the truancy courts.

NOTE: A person between the age of 18 and 21 years of age, who voluntarily enrolls or voluntarily stays in school after their 18th birthday, shall attend school each school day for the entire school year based on school board policy. At the discretion of the school district, the enrollment of the over aged student may be revoked after the person has more than 5 unexcused absences in a semester.

Failure by a student enrolled in the School of Excellence in Education School District to comply with this code, may result in truancy action being initiated by the School of Excellence in Education as lawfully prescribed.

NOTE: If a student is referred to the truancy courts, the following fines can be imposed on the parent/guardian and/or the student:

- * Community Service
- * Maximum Fine of \$500.00
- * Families receiving Section 8 housing can be evicted and funds suspended
- * Driver's License can be suspended
- * Arrest Warrants (Warrant fees will be applied to the fine already in place)

The signatures below indicate that parent/guardian and the student have read the above statements and acknowledge that they fully understand its meaning and will abide by the attendance law and district policies.

Parent/Guardian Signature _____ Date: _____

Parent/Guardian Name (print): _____

Student Signature _____ Date: _____

Student Name (print): _____

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SCHOOL of EXCELLENCE
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JJA/DAS FORM
2019-2020

During the past school year, did the student attend the Juvenile Justice Academy or a District Alternative School?

YES _____ NO _____

If yes, where? _____

Has the student completed the days assigned to JJA/DAS? YES _____ NO _____

If yes, you must provide the release documentation from the school.

Is the student currently required to attend the Juvenile Justice Academy or a District Alternative School?

YES _____ NO _____

If yes, where? _____

Are you eligible to return to your home district upon completion? YES _____ NO _____

I acknowledge that I have answered the questions above truthfully and I further acknowledge that if I make any false statements it will result in my expulsion from The School of Excellence in Education.

Student Name: _____ Grade: _____

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

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SCHOOL of EXCELLENCE
in EDUCATION

STUDENT CODE OF CONDUCT
2019-2020

NOTE: This form will remain in effect for the duration of the student's enrollment at the School of Excellence in Education.

Dear SEE Parent(s):

Let me be the first to welcome you to the School of Excellence in Education (S.E.E.), a school of choice. The following rules represent critical components of a safe learning environment that fosters excellence in behavior and academics.

We have high standards and we know that your child will reach excellence with us should you decide to enroll him or her after agreeing to abide by these standards. It is our intent to prepare our students to be tomorrow's leaders with high values and character. We expect them to successfully compete in the corporate world, military, or as business owners/leaders.

Educationally yours,
Superintendent of Schools

NOTE: The Superintendent reserves the right to add/modify the rules as deemed necessary.

Our Expectations for Parents (Following the expectations listed below will create a safe and engaging learning environment for your child.)

1. You may be required to pick up your child within 60 minutes and escort him/her the following school day for infractions, including dress code violations.
* Failure to pick up your child within the timeframe given may result in your child being suspended from school pending a principal conference.
* All infractions (including dress code violations) may be reported to the state.
2. Make arrangements for tutoring if S.E.E. determines it is necessary.
* Any student failing any part of STAAR will attend tutoring. Students who do not attend tutoring on their scheduled days are subject to disciplinary action by the principal.
3. Make arrangements for your child to attend summer school if your child did not pass TAKS/STAAR in any subject at any grade level.
* If your child is recommended for summer school and fails to attend, he/she may not be retained in the next school year.

Our Expectations for ALL Students (Failure to adhere to the policies below may result in immediate withdrawal from our district.)

1. Students will address all adults with either yes/no ma'am or sir.
2. Profanity will not be tolerated.
3. Disrespect to adults will not be tolerated. This includes facial expressions (rolling of the eyes and/or neck, etc.), hand gestures, verbal comments, walking away, not paying attention, etc.
4. Racial slurs to anyone, including students, will not be tolerated.
5. Boys will pull out chairs for girls during breakfast and lunch and hold the doors open for them.
6. No Headgear will be worn on campus. This includes hats of any kind, sunglasses, bandanas, combs, etc.
7. Hairstyles: Only natural hair colors may be worn. No Mohawks or spiked hair. Boys may not wear braids, corn rows, twisties, dreadlocks, etc. Boys may not wear rubber bands in their hair, unless in a single ponytail. Administrators reserve the right to determine if a hairstyle or hair color is distracting to the learning environment.
8. No public displays of affection: No kissing or hand holding while under school jurisdiction.
9. Sexual harassment is grounds for expulsion (this includes wanted and unwanted sexual advancements, including, but not limited to touching, grabbing, exposing, inappropriate language, verbal sexual language, etc.).
10. Shoes must be tied properly at all times, with a bow on top of the tongue of the shoe and velcro straps must be worn properly.
11. Dress code: All students must be in the proper uniform, including a belt, beginning the first day of school. New students enrolling during the school year will be allowed one week to purchase the proper uniform. See Uniform Policy on next page and "Parent Expectations, Number 1" at top of this page.
12. Bus Conduct: Bus transportation is a privilege, not a right! Bus privileges can be revoked.
13. No name calling, bullying, or hitting: This behavior will not be tolerated.
14. No Fighting: This behavior will not be tolerated.
15. Attendance: Students may not have more than 10 unexcused absences per school year. Truancy will be filed with a court as prescribed by law. (This includes leaving school early or coming in tardy.) Students must obtain a pass from the campus office upon their return to school in order to be admitted to class. SEE is a CLOSED campus. Students are not to leave the school at anytime, unless signed out by a parent or authorized pick-up. Students not attending the classes on their schedule are considered truant (hanging out in gym, hanging out in another classroom not on your schedule, etc.). These are considered absences towards the 10 unexcused absences. Parent absent notes are limited to 3 per semester. Exceptions are at the discretion of the principal.
16. Tardies: Students will not have more than 10 tardies during the school year. Students must obtain a pass from the campus office in order to be admitted to class. Tardies are considered partial day absences and will be considered during Attendance and Truancy cases.
17. Skipping Classes: This behavior will not be tolerated.
18. All high school students must complete a minimum of 25 hours of community service each school year beginning their freshman year. Students are responsible for keeping track of their hours on a yearly basis and turning the information in to their counselor at the end of each school year. Documentation must be on organization's letterhead for community service hours to count.

Preparing Children Today for Tomorrow's Challenges

Uniform Policy: Failure to adhere to the uniform policy listed below may be grounds for withdrawal from our district.

* Elementary Students: **Maroon polo shirts and navy blue bottoms must be worn with a belt, ex: Skirts, skorts, dresses, jumpers, Capri's, Pants, and Shorts. Shorts, skorts, skirts, dresses, and jumpers MUST be knee length when standing, including slits on skirts, dresses, and jumpers. No hoodies allowed. Exceptions to the uniform policy must be pre-approved by the campus principal.**

* Saenz Junior High Students:

Maroon polo shirts with the school logo and khaki pants with a belt. Belts are required. Girls may wear khaki pants or knee-length skirts. Cargo pants and denim jeans are not allowed. All polo shirts must be purchased through an approved school vendor. Undershirts must be plain white. No hoodies allowed. Exceptions to the uniform policy must be pre-approved by the campus principal.

* Milton B. Lee Academy Students:

Gray polo shirts with the school logo and navy blue pants with a belt. Belts are required. Girls may wear navy blue pants or knee length skirt. Cargo pants and denim jeans are not allowed. Undershirts must be plain white. All polo shirts must be purchased through an approved school vendor. No hoodies allowed. Exceptions to the uniform policy must be pre-approved by the campus principal.

****Seniors MUST adhere to uniform policies set by Administration****

ID'S: Student at Saenz and Lee campuses must wear their SEE ID cards around the neck at all times. Replacement ID's can be purchased at your campus.

All Grade Levels: Failure to adhere to the polices listed below may be grounds for withdrawal from our district.

- A. Hair Style. Unconventional (as determined by the campus principal), multi-colored, spiked, carved designs, inappropriately long, rat tail or Mohawk like styled hair prohibited. Also, hair that obstructs vision or covers the face is not allowed. Boys whose hair extends below the collar must tie neatly back.
- B. Oversized clothing will not be worn. **Pants will be worn to the waist. Sagging or bagging will not be tolerated. Belts will be worn through all belt loops and excess tucked in the belt loop. Long, frayed, tight fitting, spandex, or cut off pants are not acceptable.**
- C. Shirts must be tucked in at all times **unless in P.E. Bunching or rolling of the shirts around the waist will not be permitted. The belt must be seen from the front and the back. Shirts MUST be buttoned at all times, including the collar on boys' shirts.**
- D. Only white, navy blue, or black shirts may be worn underneath uniform shirts. Only white shirts for Saenz Jr. High. No other color is acceptable.
- E. Nothing will be worn over the school uniform **except appropriate open front outerwear. All jackets, sweaters, and coats must be unzipped or unbuttoned at all times. No headgear unless during cold weather and approved by principal.**
- F. Body piercing jewelry is prohibited except for ear piercing. **Girls may wear only ONE (1) pair of earrings.** No earrings are accepted for boys. Spacers or other objects are not allowed to keep the hole from closing. Band-Aids are not allowed to cover the holes.
- G. Necklaces may be worn one at a time. **Charms over 2" in diameter and/or chains over 18" are not permitted.**
- H. Dangling key ring, lanyards, chains and/or suspenders will not be permitted on clothing, wallets, footwear, backpacks, or purses.
- I. Appropriate footwear must be worn. **Steel toed, flip flops, hard plastic toed and open back shoes are prohibited. House shoes, cloth shoes, heelies, roller skate shoes, etc. are prohibited. See "Dress Code" above for acceptable footwear for students.**
- J. Boys are not allowed to wear make-up of any kind.
- K. Grills are not permitted.
- L. Candy, gum, soda, or chips will not be allowed during school hours.
- M. Cell phones **may be used before school and after school ONLY. If seen out, on, or in use during school hours, they will be confiscated. Parents will have to make arrangements to pick these items up from the school principal. All other electronic devices are prohibited at S.E.E. (i.e. Ipods, MP3 players, games, CD players, etc.). SEE is not responsible for and will not replace or reimburse for lost, stolen or damaged items.**
- N. School technology equipment (computers, phones, laptops, cameras, etc.) must be used for school purposes ONLY. **Tampering with school equipment or using school equipment inappropriately is grounds for expulsion.**
- O. **Stealing is grounds for expulsion.**
- P. Engaging in gang activity, to include tagging (i.e. throwing gang signs, participating in a gang, writing gang or tag names, identifying with gangs or tag crews, or soliciting others to become members) is grounds for expulsion.
- Q. Selling, giving, delivering, possessing, using, or being under the influence of ANY amount of marijuana or controlled substance (prescription medication must be turned into the nurse), or other dangerous drug or alcoholic beverage **is grounds for expulsion.**
- R. Weapons (i.e. explosive weapon, switchblade knives, brass/plastic knuckles, armor piercing ammunition, chemical dispensing device [mace], firearm [gun clip], live ammunition, or clubs) are prohibited. **Bringing any type of weapon to campus is grounds for expulsion.**
- S. Tattoos must be covered.

Parent Affidavit: I have read and fully understand the importance of abiding by the rules listed on the "Student Code of Conduct." I realize and understand that this is a school of choice and that failure to adhere to the School of Excellence School District policies may result in disciplinary action.

Parent/Guardian Name (Print)

Parent/Guardian Signature

Date

Student Name (Print)

Student Signature

Date

The School of Excellence in Education does not discriminate on the basis of sex, disability, race, color, age, or national origin in its education programs, activities, or employment as required by Title IX, Section 504 and Title VI. La School of Excellence in Education no discriminan en base a sexo, discapacidad, raza, color, edad il origen nacional en sus programas educativos, actividades, o empleo como lo requiere el Titulo IX, Seccion 504 y Titulo VI.



NURSE'S EMERGENCY FORM 2019-2020

STUDENT NAME: _____ Grade _____ DOB _____ Campus _____
(Please Print)

In case of emergency, please contact: _____ Relationship _____
(Home) _____ (Work) _____ (Cellular) _____

In case of emergency, alternate contact: _____ Relationship _____
(Home) _____ (Work) _____ (Cellular) _____

EMERGENCY CARE CONSENT

If I cannot be reached to make plans for emergency medical care for my child at the time of an accident or illness, I give permission for the designated School of Excellence staff or ambulance service to take my child to the nearest hospital or clinic. I am also authorizing that the ambulance service, doctor, and/or hospital/clinic treat my child in case of an accident or illness.

_____ Date _____ Parent/Guardian Name (Please Print) _____ Parent/Guardian Signature _____

Physician's Name: _____ Physician's Office Phone: _____
Medical Insurance Company _____ Policy # _____

MEDICAL HISTORY

Allergies: medication/food/plant/bites: _____

Special Diet _____

Fitness/Health Conditions (Please check any condition that relates to the student):

___ Asthma Takes asthma medication: _____ at School? _____
___ Diabetes Takes medication/insulin: _____ at School? _____
___ Hearing Problems: _____ Vision Problems: _____ wears glasses/contact lenses
___ Heart Problems: _____
___ Major surgery this year: _____
___ Physical Handicap: _____
___ Seizures: _____
___ Takes medication during school hours: _____

List any known conditions not listed /or explain any check marks above: _____

School of Excellence Nurse Support/ Campus Designee Consent for Care

It is necessary to obtain consent to assist your child with health complaints, routine medications specified by the parent, minor injuries and health screening during school hours. A campus nursing support assistant under direct supervision of the District Nurse; or principal's designee; and/or coach will be available to assist your child on any campus.

By signing below, you give your consent for campus health services and nursing care assistance.

_____ Parent/Guardian Signature _____ Date _____



SCHOOL of EXCELLENCE
in EDUCATION

School of Excellence in Education



Publicity/Promotional Permission Form (2019-2020)

Campus: _____

Note: This form will remain in effect for the duration of the student's enrollment. Parents can update the form anytime in the Campus Registrar's office.

(Permission for publicity, promotional activities, television, radio, and print advertisements.)

Periodically students enrolled in the School of Excellence in Education may be photographed, filmed, taped, or interviewed. We need your signed permission for your child to participate for the school publicity and promotional materials. The school will NOT release any information such as addresses and telephone numbers with the photographs, films, tapes or other promotional materials.

_____ **Yes**, I give permission for my child to participate in photographs, films, tapes, or interviews as they pertain to the School of Excellence in Education and I understand that such pictures, films, tapes, or interviews may be used to promote or publicize school events or to demonstrate how federal funds are being used to help students.

_____ **NO**, I do not give my permission for my child to be photographed, filmed, taped or interviewed. I will tell my child that he/she is NOT to be involved in any School of Excellence in Education publicity or promotional activities.

Student Grade: _____

Student's Last Name

First Name

MI

Parent's Last Name

First Name

MI

Parent Signature: _____

Date _____

The School of Excellence in Education

1826 Basse Road
San Antonio, Texas 78213
(210) 431-9881 ext. 2114

TRANSPORTATION INFORMATION 2019-2020 School Year

Safety for our students is our primary concern. This not only means safety at school, but also transportation safety as well. Every effort will be made to provide safe, comfortable and pleasant transportation services. The purpose of this form is to make sure our students have parent/guardian permission to ride the school bus and to designate their boarding and exit locations. **For questions or concerns, please contact the Transportation Department at 210-431-9881, ext. 2114.**

Name of Child

Grade

Campus

If your child will NOT be riding a school bus, indicate how the child will be getting to and from school every day:

Parent Pick/Drop Off Remain in after school care Walking home Take VIA bus Other: _____

If your child WILL be riding one of our school buses, indicate which bus your child will be using:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Artisan at Willow Springs (535 Gemblar Road, 78219) | Campuses: Kelley, Saenz, Lee |
| <input type="checkbox"/> Boy's and Girl's Club (3503 Martin Luther King, 78220) | Campuses: Kelley, Walker, Saenz, Lee |
| <input type="checkbox"/> David C. Walker Elementary (6500 IH 35 N, 78218) | Campuses: Kelley, Saenz, Lee |
| <input type="checkbox"/> Davis Scott YMCA (1213 Iowa, 78203) | Campuses: Kelley, Walker, Saenz, Lee |
| <input type="checkbox"/> Dollar General (611 WW White Road, 78220) | Campuses: Kelley, Walker, Saenz, Lee |
| <input type="checkbox"/> Furniture for a Cause (5254 Blanco Road, 78216) | Campuses: Kelley, Saenz, Lee |
| <input type="checkbox"/> Oak Manor Apts. (2333 Austin Hwy., 78218) | Campuses: Kelley, Walker, Saenz, Lee |
| <input type="checkbox"/> Wal-Mart (1603 Vance Jackson, 78213) | Campuses: Kelley, Saenz, Lee |
| <input type="checkbox"/> Wal-Mart (8923 W Military Drive, 78245) | Campuses: Kelley, Saenz, Lee, |
| <input type="checkbox"/> Wal-Mart (4096 Foster Road, 78244) | Campuses: Kelley, Walker, Saenz, Lee |
| <input type="checkbox"/> West Ave. Apartments (3747 West Ave., 78213) | Campuses: Kelley, Saenz, Lee |
| <input type="checkbox"/> Westside YMCA (2900 Ruiz Street, 78228) | Campuses: Kelley, Saenz, Lee |

My child may leave their designated bus for the purpose of (check all that apply):

- Parent/Guardian Pick Up at Bus Site
- Catch the VIA bus
- Remain at YMCA (**must have prior arrangements made with the YMCA**)
- Remain at David C. Walker Elementary Campus (after school care)
- Walking home—**only grades 6th and above may select this option**
- Remain at Boys & Girls Club (**must have prior arrangements made with the Boys & Girls Club**)

If this form is not on file, your child will not be allowed to ride the bus. Students allowed off the bus to walk home or catch the VIA bus must exit the bus stop area immediately. If your child remains at the YMCA or Boys & Girls Club, the student is required to enter the YMCA or Boys & Girls Club immediately. **Parents please pick up your student immediately upon arrival of the school bus. For arrival times please check with your student bus driver.**

Parent's/Guardian's Printed Name

Parent's/Guardian's Signature

Date

Address

Home Phone Number

Cell Phone Number

Work Number

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SCHOOL OF EXCELLENCE IN EDUCATION
STUDENT DIRECTORY INFORMATION RELEASE FORM

Failure to return this form will result in a default YES for each of the items below.
This form will remain in effect for the duration of enrollment or until the parent or an eligible student completes a new release.

According to the Family Education Rights and Privacy Act (FERPA) Federal law and the Texas Public Information Act, 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/guardian or eligible student objects to the release of the directory information. If you do not want the School of Excellence in Education to disclose your child's directory information without your prior written consent, you must notify the district in writing. Failure to return this form will result in the release of directory information upon request.

A parent/guardian or eligible student is allowed to record their objection to the release of all directory information on one or more specific category of directory information. SEE has designated the following information as directory information:

- Student's name, address and telephone number
- Photograph, participation in officially recognized activities and sports, and weight/height of athletic team members
- Dates of attendance, grade level, enrollment status, awards received in school, and most recent school attended

A check in the "NO" box below will result in the blocking of directory information to any requester.

SEE has my permission to release directory information to any requestor in accordance with the Texas Public Information Act (PIA). The PIA requires SEE to release this type of information to any company, individual, or group that requests it.

SEE has my permission to provide directory information to be released to a military recruiter.

SEE has my permission to provide to an institution of higher education with the name, address, and telephone number of my secondary level student.

YES

NO

Student Name (Please Print)

Student ID #

Grade

Student Signature

Date

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Date

Revised 3/28/17

EMERGENCY CONTACT AND PICK-UP AUTHORIZATION FORM 2019-2020

Student Name _____ Grade _____ Teacher _____

Parent Pick Up: _____ After-School Care: _____ Bus: _____

Emergency Contacts & Right to Pick-up or Transport

Enrolling Parent/Guardian:	Relationship - Choose One: Mother Father Other	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
2 nd Parent/Guardian:	Relationship - Choose One: Mother Father Other	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
Name:	Relationship to student:	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
Name:	Relationship to student:	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
Name:	Relationship to student:	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
Name:	Relationship to student:	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
Name:	Relationship to student:	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One
Name:	Relationship to student:	Right to Pick-up/Transport Yes No
Cell #:	Alternate #:	Circle One

PARENT/GUARDIAN SIGNATURE _____ DATE _____

School of Excellence
Socioeconomic Information Form 2019-2020
***CONFIDENTIAL**

Student Name _____ Student Grade _____ Student Date of Birth _____

School Name _____ Student ID _____

The information you provide helps to qualify the School of Excellence to provide free meals to all students.
School of Excellence is required to collect and report the socioeconomic status of each student to the Texas Education Agency for purposes of the annual state accountability ratings and for federal reporting. Please note that this form is not sent to the Texas Education Agency and that the income levels indicated for your family are not reported to the Texas Education Agency. Only the Economic Disadvantaged status of each student as determined by the information provided is reported to the Texas Education Agency

SECTION A

Do you receive Supplemental Nutrition Assistance (SNAP)? Yes No # _____

Do you receive Temporary Assistance to Needy Families (TANF)? Yes No # _____

If you answered YES on either of the above, skip SECTION B and continue to the SIGNATURE section.

SECTION B (Complete only if all answers in SECTION A are NO)

TOTAL YEARLY INCOME BEFORE DEDUCTIONS OF **ALL** HOUSEHOLD MEMBERS (check one box below):
Include wages, salary, welfare payments, child support, alimony, pensions, Social Security, worker's compensation, unemployment and all other sources of income (**before any type of deductions**).

How many members are in the household (include all adults and children)? _____

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$0 – 23,107 | <input type="checkbox"/> \$47,639 – 55,815 | <input type="checkbox"/> \$80,347 – 88,523 | <input type="checkbox"/> \$113,055 – 121,231 |
| <input type="checkbox"/> \$23,108 – 31,284 | <input type="checkbox"/> \$55,816 – 63,992 | <input type="checkbox"/> \$88,524 – 96,700 | <input type="checkbox"/> \$121,232 – 129,408 |
| <input type="checkbox"/> \$31,285 – 39,461 | <input type="checkbox"/> \$63,993 – 72,169 | <input type="checkbox"/> \$96,701 – 104,877 | <input type="checkbox"/> \$129,409 – 137,585 |
| <input type="checkbox"/> \$39,462 – 47,638 | <input type="checkbox"/> \$72,170 – 80,346 | <input type="checkbox"/> \$104,878 – 113,054 | <input type="checkbox"/> \$137,586 and above |

SIGNATURE

In accordance with the provisions of the Protection of Pupil Rights Amendment (PPRA) no student shall be required, as part of any program funded in whole or in part by the U.S. Department of Education, to submit to a survey, analysis, or evaluation that reveals information concerning income (other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program), without the prior written consent of the adult student, parent or legal guardian.

I certify that all the information on this form is true and that all income is reported. I understand the school will receive federal funds and will be rated for accountability based on the information I provide.

Parent/Guardian Name (Print)

Parent/Guardian Signature

Date

Office Use: Eco Dis Code: 00 99 Registrar Signature _____ Date _____ Data Entry