



CURRENT STUDENT REGISTRATION DOCUMENTS CHECKLIST

In order to complete the registration and enrollment process for your student, you will need to provide the items listed below with your registration packet.

Completed	Item	Description
Registration Forms		The entire packet should be completed and returned.
	EGUSD Student Registration Forms	Complete the entire packet of documents.
	Master Agreement Form	Mandatory form that needs to be signed by both parent and student.
	Technology Use Form	Complete this form, sign and return.
	Health Information Form	Used to record any health issues
	Indian Education Form	Student eligibility certification.
	Opt-Out Form (optional)	This form should only be returned if you wish to opt your child out of one of the areas listed on the opt-out form.
	<u>Intra-</u> district Transfer Agreement	Have this form approved by school of residence if you live within the EGUSD Boundaries
	<u>Inter-</u> District transfer Agreement	This form can be obtained from you're your neighborhood school or school district and is REQUIRED if you live outside of the EGUSD Boundaries
Documentation needed for Registration		Personal documents needed to register.
	Birth Certificate or other reliable document for age verification	Copy of original
	Immunization Record	Copy of the most current record
	Legal Guardian's Identification	Driver's License – or Passport – or State ID
	Proof of Residency	See enrollment instruction guide



Members of the Board

Beth Albiani
Nancy Chaires Espinoza
Carmine S. Forcina
Chet Madison, Sr.
Dr. Crystal Martinez-Aliere
Anthony "Tony" Perez
Bobbie Singh-Allen

Robert L. Trigg Education Center
9510 Elk Grove-Florin Rd., Elk Grove, CA 95624

Elk Grove Unified School District New Student Welcome Packet

Dear Parents/Guardians:

The Elk Grove Unified School District is excited to welcome you and your child to our district!

This "New Student Welcome Packet" serves to collect the information needed to enroll your child in our schools and provide the best services for your child's learning and wellbeing. Additionally, this packet provides you with important information about our district, our schools, and the rights of parents and students in our district.

New Student Welcome Packets can be picked up at your resident/boundary school(s) during regular school hours.

The "New Student Welcome Packet" is divided into three sections:

- Part I: Student Enrollment Form
- Part II: Supplemental Student Information Form
- Part III: Information for Families

An Introduction to Elk Grove Unified School District

The Elk Grove Unified School District (EGUSD) is recognized nationally for having top-quality teachers and staff, innovative programs, and safe, well-maintained schools. We offer an excellent academic program, up-to-date technology, civic values and ethics education at all grade levels. We have strong behavior standards and a wide variety of academic programs designed to meet every child's needs. Our programs include accelerated learning courses, advanced placement classes, college and career academies and pathways and early intervention programs.

EGUSD covers 320 square miles that spreads across the communities of Florin, Franklin, Laguna Creek, Laguna West, Rancho Murietta, Sheldon, Sloughouse, Valley Hi, Vineyard, Wilton, all of the City of Elk Grove and parts of the cities of Sacramento and Rancho Cordova. The District lies in one of the most diverse areas of California.

Our students represent California's great diversity: Our students speak more than 110 languages, 12 percent are African American, 1 percent are American Indian, 24 percent are Asian, 6 percent are Filipino, 26 percent are Hispanic or Latino, 2 percent are Pacific Islander and 20 percent are White.

EGUSD operates 42 elementary schools, nine middle schools, nine high schools, three continuation schools, one K-12 independent study program, one charter school, one virtual online K-8 program and one special education school. In addition, the District offers preschool programs, an adult education program and a career training center for adults.



PART I: STUDENT ENROLLMENT FORM Enrollment Instructions

Several items are required to enroll your child in California public schools. Proof of citizenship is **not** required for enrollment purposes.

The following is required for enrollment in an Elk Grove Unified School District (EGUSD) school.

Completed enrollment forms will be accepted at your resident/boundary school during regular school hours. When returning the completed enrollment form, you must bring the following items with you as required by California Education Code, Sections 48000-48070.6:

- Age and legal name verification - **ONE** of the following:
 - Birth certificate
 - Other reliable document (e.g., passport, duly attested baptismal certificate, or other means prescribed by the Board [see EGUSD AR 5111])
- Immunization records (see Immunization Requirement Sheet in Part III of this packet)
- Parent or guardian photo ID
- Withdrawal grades/unofficial transcript (if applicable)
- Current proof of residence within the district (*Note: must be a street address; P.O. Box is not acceptable*) consisting of any **ONE** of the following with the present address and the name of the parent or legal guardian listed:
 - Property tax payment receipts
 - Mortgage statement, rental property contract, or lease agreement
 - Current utility service (e.g., PG&E, SMUD, water, garbage, sewer) contract, statement, or payment receipt
 - Rental property payment receipt
 - Parent or guardian's recent pay stub
 - Voter registration
 - Correspondence from a government agency (e.g., documentation from the Department of Human Assistance, court, documents, motor vehicle registration, driver's license).

Exceptions:

Any homeless or foster youth must be enrolled regardless of proof of residency. Support for families and schools is available through the District Liaison at 916-686-7568.

There are unique residency requirements for children whose parents are on active military duty and whose parents were residents of the state and departed the state against their will. Support for families and schools in this situation is available through the Student Supports and Health Services Department at (916) 686-7568.

Court Orders:

- If you are registering your child and have a current court order in place stipulating child custody, **please provide the court order to the school site.**
-

Additional Documents (as applicable)

Most forms below are available on the EGUSD website at <http://www.egusd.net/students-families/egusd-forms/>.

Affidavit of Non-Permanent Residence Form (available for download on the EGUSD website):

- Parent/Guardian and legal resident must complete and submit to the school **if:**
 - Your family does not have a permanent home and is living with a legal resident within the school's boundary, **or**
 - Your family rents a room from a legal resident within the school's boundary.

Caregiver's Authorization Affidavit (available for download on the EGUSD website):

- Qualified relative must complete and submit to the school **if:**
 - You are over the age of 18, **and** are a qualified relative as listed on the form,
 - You take care of a child who lives in your home, **but**
 - You do not have a court order that gives you custody of the child.
-

Intradistrict Transfer Request (available at your home school office):

If you are requesting to attend an Elk Grove Unified school which is located outside your home school attendance area, you **must enroll at your home school site** and submit the transfer request to the home school according to the intradistrict process guidelines. The home school will begin accepting completed intradistrict transfer requests for review and approval starting in April.

Note: Intradistrict transfers are subject to eligibility requirements based on space availability and childcare.

Verification of Child Care Form (available for download on the EGUSD website):

- Parent/Guardian of K-8 students must complete and submit **if:**
 - Your child is receiving before and/or after school care in a private home within the school's boundary for a minimum of three days per week. Your private home childcare provider must supply the school site with the documents listed on the form, **or**
 - Your child is enrolled at a before/after school care facility within the school's boundary for a minimum of three days per week. Ask your daycare facility to provide you with proof of registration at the daycare facility and take this to the school.
-

We look forward to partnering with you and your child's school to help your child grow into a happy, healthy, and well-educated individual. The Elk Grove Unified School District welcomes you and your child to our "Community of Learners."

For support with enrollment, visit our website at <http://www.egusd.net/enrollment/> or use the following contacts:

- Elementary (TK-6 Grade): 916-686-7704
- Secondary (7-12 Grade): 916-686-7706



____/____/____

Information on this page is required for enrollment.

STUDENT INFORMATION

Has student ever attended an EGUSD School (including Preschool): No Yes EGUSD Student ID # _____

Is this student currently expelled or pending an expulsion hearing in EGUSD or any other district? Yes No

Student's Full Legal Name _____
Last First Middle Suffix (Jr, III, IV)

Grade Level _____ Gender: Male Female Non-Binary Nickname _____

AKA/Other Name: Last Name _____ First Name _____ Middle Name _____ Suffix _____

Birth Date (Month/Day/Year) _____ Student's Email _____ Student's Cell _____

RACE/ETHNICITY

Ethnicity: Not Hispanic Hispanic/LatinX (person of Cuban, Mexican/ Puerto Rican, South/Central American or other Spanish culture or origin)

Race – Please select all that apply

- White African American/Black American Indian
 Chinese Japanese Korean
 Vietnamese Asian Indian Laotian
 Cambodian Hmong Other Asian
 Native Hawaiian Guamanian Samoan
 Tahitian Other Pacific Islander Filipinx

DEMOGRAPHICS

Residence Address _____
Number & Street – Apt City State Zip Code

Mailing Address _____
(if different from residence address) P.O. Box / Number & Street City State Zip Code

HOME LANGUAGE SURVEY

- 1. Which language did your child learn when they first began to talk? _____
2. What language does your child most frequently speak at home? _____
3. What language do you most frequently use at home when speaking with your child? _____
4. What is the language most often spoken by the adults in the home? _____
(e.g., parents, guardian, grandparents, or any other adults)

FOR OFFICE USE ONLY
School Name _____ Enrollment Date _____ Birth Date Verified
Birth Date Verification Method _____ Address Verification Method(s) _____
Immunizations Complete? YES NO Student Notifications? YES NO Permit Type _____ Permit Date _____
Track _____ Enrolled by _____ Date entered in Synergy _____

Information on this page is required for enrollment.

PARENT/GUARDIAN INFORMATION

Parent/Guardian _____ Legal Guardian Other
Relationship _____ Does this person live with student? Yes No Release contact Yes No
Mailing Address _____
(if different from student) Number & Street – Apt _____ City _____ State _____ Zip Code _____
Cell _____ Work _____ Home _____
Email Address _____ Preferred Language _____

Education level – please check one box that most closely applies:
 Not a high school graduate Some college or Associate’s degree Graduate school/post graduate
 Graduated from high school College graduate

Military Service:
 Active Armed Forces Full-Time National Guard Armed Forces Reserve

PARENT/GUARDIAN INFORMATION

Parent/Guardian _____ Legal Guardian Other Deceased
Relationship _____ Does this person live with student? Yes No Release contact Yes No
Mailing Address _____
(if different from student) Number & Street – Apt _____ City _____ State _____ Zip Code _____
Cell _____ Work _____ Home _____
Email Address _____ Preferred Language _____

Education level – please check one box that most closely applies:
 Not a high school graduate Some college or Associate’s degree Graduate school/post graduate
 Graduated from high school College graduate

Military Service:
 Active Armed Forces Full-Time National Guard Armed Forces Reserve

Name of person completing form (**please print**): _____ Relationship: _____
Signature of Parent/Guardian: _____ Date: _____
(certifying information provided is accurate)

*Thank you for completing the student enrollment process.
Your information will be reviewed to register your child in the
Elk Grove Unified School District.*



PART II: SUPPLEMENTAL STUDENT INFORMATION FORM Instructions

Upon review of your completed Student Enrollment Form and verification documents, your child will be enrolled in Elk Grove Unified School District.
Welcome to our school community!

The "Supplemental Student Information Form" is very important for identifying the programs and services that would best meet the needs of your child. It is not used for enrollment purposes.

The following important information will be collected:

- Education program participation
- Additional demographic information
- Emergency contacts
- Sibling information
- Previous school enrollment
- Health information record

The following optional forms may be completed and returned as well:

- EGUSD Student Opt-Out Form
- Title VI Indian Student Eligibility Certification Form

The "Supplemental Student Information Form" should be returned as soon as possible to the school office where you are enrolling your child.

Part II: Supplemental Student Information Form

Now that you have completed the required enrollment information, please provide us with additional information to support your student's placement and services.

Student Name: _____

Parent/Guardian: _____

EDUCATIONAL PROGRAM PARTICIPATION ELIGIBILITY

What special services has your child received?

None 504 Accommodation GATE Special Education English Language Development (ELD) Bilingual

Request for Migrant Education Migrant Student ID: _____

Do you have refugee status? Yes No

Are you a holder of a Special Immigrant Visa? Yes No

Which of the following best describes where this child is currently living, if applicable? (Federally Required)

- Homeless (If yes, please identify residence category): Yes No
 - Temporary Shelter Hotel/Motel Temporarily Doubled-up Temporarily Unsheltered
- Foster Primary Residence (if yes, please identify dwelling type): Yes No
 - Foster Family or Kinship Licensed Child Institution (Group Home)

PRESCHOOL ATTENDANCE

Did your child attend preschool? Yes No

If yes, what type of preschool? EGUSD Preschool Other Public Private

ADDITIONAL DEMOGRAPHIC INFORMATION

Birthplace: City _____ State _____ Country _____

U.S. School Entry Date: ___/___/___ City _____ State _____

NAMES OF ALL OTHER CHILDREN IN FAMILY (ALL AGES)

NAME	RELATIONSHIP	DATE OF BIRTH	SCHOOL OF ATTENDANCE	LIVING AT HOME

PREVIOUS ENROLLMENT

Previous School Attended _____ Last Date Attended _____

Address _____ City _____ State _____ Zip _____ Phone _____ Fax _____

Name of Previous School District _____

EMERGENCY CONTACTS: Individuals who may be contacted in an emergency when no parent or guardian can be reached.

Relationship _____ Name _____ Release Contact Yes No
Home Phone _____ Work _____ Cell _____

Relationship _____ Name _____ Release Contact Yes No
Home Phone _____ Work _____ Cell _____

Relationship _____ Name _____ Release Contact Yes No
Home Phone _____ Work _____ Cell _____

Daycare Provider _____
Name _____ Address _____ City _____ Zip _____
Home Phone _____ Work _____ Cell _____ Release Contact Yes No

ADDITIONAL CONTACTS

Physician Name _____ Phone _____ Ext _____ Hospital _____
Insurance Provider _____ MED Policy # _____
Social Worker (Agency) _____ Email _____ Phone _____
Social Worker (County) _____ Email _____ Phone _____
Probation Officer _____ Email _____ Phone _____

HEALTH RECORD PLEASE CHECK HERE IF STUDENT HAS NO KNOWN HEALTH PROBLEMS

Please check any and all conditions in this student's history. Use the area below to add an explanation/recommendation

Medical Alert (unlisted condition – describe below)

- | | | | | | |
|---|--|--|---|---|---|
| <input type="checkbox"/> ADHD | <input type="checkbox"/> Asthma | <input type="checkbox"/> Concussion | <input type="checkbox"/> Headache-Migraine | <input type="checkbox"/> Immunization Alert | <input type="checkbox"/> Specialized Healthcare Procedure |
| <input type="checkbox"/> Allergy – Non-food | <input type="checkbox"/> Autism | <input type="checkbox"/> Cystic Fibrosis | <input type="checkbox"/> Health Plan | <input type="checkbox"/> Intestinal Disorder | <input type="checkbox"/> Speech Impairment |
| <input type="checkbox"/> Allergy – Food | <input type="checkbox"/> Autoimmune Disorder | <input type="checkbox"/> Dental | <input type="checkbox"/> Hearing Impairment | <input type="checkbox"/> Orthopedic/Scoliosis | <input type="checkbox"/> Syndrome - Other |
| <input type="checkbox"/> Allergy – Nut | <input type="checkbox"/> Blood Disorder | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Pacemaker | <input type="checkbox"/> Tuberculosis |
| <input type="checkbox"/> Allergy – Peanut | <input type="checkbox"/> Cancer | <input type="checkbox"/> Eating Disorder | <input type="checkbox"/> Hepatitis | <input type="checkbox"/> Seizure Disorder | <input type="checkbox"/> Urinary Disorder |
| <input type="checkbox"/> Anxiety Disorder | <input type="checkbox"/> Celiac Disease | <input type="checkbox"/> Eczema | <input type="checkbox"/> Hypertension | <input type="checkbox"/> Sickle cell Anemia | <input type="checkbox"/> Vision Impairment |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Cerebral Palsy | <input type="checkbox"/> Fracture | <input type="checkbox"/> IEP Nursing Services | <input type="checkbox"/> Skin Condition – Other | <input type="checkbox"/> Weight Disorder |

Explanation/Recommendations regarding above: _____

Is the student currently taking medications? Yes No Is the medication required during school hours? Yes No

MEDICATION CANNOT BE DISPENSED AT SCHOOL WITHOUT A FORMAL REQUEST SIGNED BY A DOCTOR AND PARENT.
MEDICATION FORMS ARE AVAILABLE IN THE SCHOOL OFFICE.

I UNDERSTAND THAT IN AN EMERGENCY WHEN NO GUARDIAN OR EMERGENCY CONTACT CAN BE LOCATED, THE SCHOOL IS AUTHORIZED TO TAKE MY STUDENT TO THE FAMILY DOCTOR, LICENSED PHYSICIAN OR TO THE NEAREST HOSPITAL AT PARENT/GUARDIAN EXPENSE.

Name of person completing form (**please print**): _____ Relationship: _____

Signature of Parent/Guardian: _____ Date: _____
(certifying information provided is accurate)

EGUSD Student Opt-Out Form 2019-2020

This form provides parents the opportunity to opt their student out of public media coverage, posting of student images and names through EGUSD digital communication tools, release of directory information, viewing of PG-13 or R-rated films, and participating in family life education. Please read each section of the form carefully.

If you would like to opt your child out of any of the following sections, please fill out your child's information (one form per child), check the associated box, and sign the form.

Please note: This is an OPTIONAL form. The form should be returned to the school only if you wish to opt your child out of one of these areas.

If you have any questions about this form, please contact EGUSD Communications at (916) 686-7732.

Student Name: _____ ID# _____

Address: _____ Phone: _____

School: _____ Grade: _____

Multimedia Withhold Form

There are occasions when news media are on school campuses to interview, photograph and videotape students for print and broadcast stories. Many of these stories are positive and highlight the good things happening in EGUSD schools. However, there are times when the media seeks access to our schools on more controversial issues. At all times, our goal is to maintain student security and privacy.

If you want your child to be excluded from media stories, please check the box below and sign the form. Please know that there are times when the media will interview or photograph students off campus or without checking in with the front office. This form only acts as a guide to media coverage. It does not guarantee that your child will not be interviewed or photographed.

I **DO NOT** want media representatives to publish/broadcast interviews with or photographs/video identifying my child.

Posting of Student Images and Names on EGUSD Digital Communication Tools

EGUSD offers a number of opportunities to publicize positive school and student events and accomplishments through district and school digital communication tools. Parents have the choice to withhold their student's images (photos and video) and name from being posted by checking the area below. The publication of student image(s), along with both first and last name, requires prior written consent of the student's parent/guardian.

The only exception to this rule is the posting of student photos with first and last name into an EGUSD administrative system such as the student information system (Synergy) or the library system. These are closed systems that only EGUSD teachers, administrators and limited support staff have access to through password-protected logons. There is no opt-out of these closed systems.

By checking the box below you are choosing **NOT** to allow the posting of your student's name or image through digital communication tools. Please know that this will result in your student's name not being published electronically for recognitions, student honor roll, awards, events, contests, school newspaper articles and clubs.

I **DO NOT** want my student's image and name posted through any Elk Grove Unified digital communication tools.

Release of Directory Information/Yearbook Information

Pursuant to the Family Educational Rights and Privacy Act (FERPA) and the California Education Code, the District may release directory information to certain persons or organizations, as specified in this handbook, when it is requested. Directory information may include a student's name, photograph, address, telephone information, email address, major field of study, participation in officially recognized activities and sports, weight and height of members of the athletic teams, dates of attendance, degrees and awards received and the most recent previous public or private school attended. In the case of students who have been identified as having special needs or homeless, no material can be released without parent or guardian consent. Parents and guardians can opt-out of having their child's directory information released by checking the box below and signing the form.

If you do not want your child's directory information released, choose one of the following two options:

- Option A: NO student directory information released at all, including NO yearbook and award listings.**
- Option B: NO student directory information released generally; YES include in yearbook and awards listings.**

Electronic Parent and Student Handbook

Parents have the option to receive an electronic Parent and Student Handbook, the annual notification provided to families each year. If you would like to receive an electronic copy of this handbook by email only, please check the box below.

- YES**, I wish to receive an electronic copy only of the Parent and Student Handbook via email instead of regular mail.

Movies and Videos – Grades 6-12

The District has a policy limiting the types of movies shown in classrooms. PG-13 rated movies that are District approved may be shown only to grades 6-12. If you do not want your child to view PG-13 rated movies during the 2019-2020 school year, please check the box below:

- I **DO NOT** want my child to view approved PG-13 rated movies. I prefer that my child be given alternative assignments.

R rated movies that are district-approved may only be shown to grades 9-12. If you do not want your child to view R rated movies during the 2019-2020 school year, please check the box below:

- I **DO NOT** want my secondary student to view approved R rated movies. I prefer that my child be given alternative assignments.

5th and 6th Grade Family Life Education

Each year, District elementary schools offer a unit in Family Life Education to students in grades 5 and 6. The District's family life curriculum is based on abstinence and acknowledges the family as the primary provider of family life education. Under state law, parents have the right to excuse their children from the Family Life Program. If you do not want your child to participate in the Family Life Program during the 2019-20 school year, please check the box below and sign the form.

- I **DO NOT** want my child to participate in the Elementary Family Life program. I would prefer that my child be given alternative assignments.

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

Application for Title VI Indian Education Program

OMB Number: 1810-0021 Expiration Date: 02/29/2020

U.S. Department of Education
Office of Indian Education
Washington, DC 20202

TITLE VI ED 506 INDIAN STUDENT ELIGIBILITY CERTIFICATION FORM

Parent/Guardian: This form serves as the official record of the eligibility determination for each individual child included in the student count. You are not required to complete or submit this form. However, if you choose not to submit a form, your child cannot be counted for funding under the program. **This form should be kept on file and will not need to be completed every year.** Where applicable, the information contained in this form may be released with your prior written consent or the prior written consent of an eligible student (aged 18 or over), or if otherwise authorized by law, if doing so would be permissible under the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and any applicable state or local confidentiality requirements.

STUDENT INFORMATION

Name of the Child _____ Date of Birth _____ Grade _____
(As shown on school enrollment records)

Name of School _____

TRIBAL ENROLLMENT

Name of the individual with tribal enrollment: _____
(Individual named must be a descendent in the first or second generation)

The individual with tribal membership is the: _____ Child _____ Child's Parent _____ Child's Grandparent

Name of tribe or band for which individual above claims membership: _____

The Tribe or Band is (select only one):

- _____ Federally Recognized
- _____ State Recognized
- _____ Terminated Tribe (Documentation required. Must attach to form)
- _____ Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994. (Documentation required. Must attach to form)

Proof of enrollment in tribe or band listed above, as defined by tribe or band is:

A. Membership or enrollment number (if readily available) _____ OR

B. Other Evidence of Membership in the tribe listed above (describe and attach) _____

Name and address of tribe or band maintaining enrollment data for the individual listed above:

Name _____ Address _____

City _____ State _____ Zip Code _____

ATTESTATION STATEMENT

I verify that the information provided above is accurate.

Name Parent/Guardian _____ Signature _____

Address _____ City _____ State _____ Zip Code _____

Email Address _____ Date _____

INSTRUCTIONS FOR THE ED 506 FORM

FOR APPLICANTS:

PURPOSE: To comply with the requirements in 20 USC 7427(a), which provides that: "The Secretary shall require that, as part of an application for a grant under this subpart, each applicant shall maintain a file, with respect to each Indian child for whom the local educational agency provides a free public education, that contains a form that sets forth information establishing the status of the child as an Indian child eligible for assistance under this subpart, and that otherwise meets the requirements of subsection (b)".

MAINTENANCE: A separate ED 506 form is required for each Indian child that was enrolled during the count period. A new ED 506 form does **NOT** have to be completed each year. All documentation must be maintained in a manner that allows the LEA to be able to discern, for any given year, which students were enrolled in the LEA's school(s) and counted during the count period indicated in the application.

FOR PARENTS/GUARDIANS:

DEFINITION: Indian means an individual who is (1) A member of an Indian tribe or band, as membership is defined by the Indian tribe or band, including any tribe or band terminated since 1940, and any tribe or band recognized by the State in which the tribe or band resides; (2) A descendant of a parent or grandparent who meets the requirements described in paragraph (1) of this definition; (3) Considered by the Secretary of the Interior to be an Indian for any purpose; (4) An Eskimo, Aleut, or other Alaska Native; or (5) A member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect on October 19, 1994.

STUDENT INFORMATION: Write the name of the child, date of birth and school name and grade level.

TRIBAL ENROLLMENT INFORMATION: Write the name of the individual with the tribal membership. Only one name is needed for this section, even though multiple persons may have tribal membership. Select only one name: either the child, child's parent or grandparent, for whom you can provide membership information.

Write the name of the tribe or band of Indians to which the child claims membership. The name does not need to be the official name as it appears exactly on the Department of Interior's list of federally-recognized tribes, but the name must be recognizable and be of sufficient detail to permit verification of the eligibility of the tribe. Check only one box indicated whether it is a Federally Recognized, State Recognized, Terminated Tribe or Organized Indian Group. If Terminated Tribe or Organized Indian Group is elected, additional documentation is required and must be attached to this form.

- **Federally Recognized-** an American Indian or Alaska Native tribal entity limited to those indigenous to the U.S. The Department of Interior maintains a list of federally-recognized tribes, which OIE can provide you upon request.
- **State Recognized-** an American Indian or Alaska Native tribal entity that has recognized status by a State. The U.S. Department of Education does not maintain a master list. It is recommended that you use official state websites only.
- **Terminated Tribe-**a tribal entity that once had a federally recognized status from the United States Department of Interior and had that designation terminated.
- **Organized Indian Group-** Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

Write the enrollment number establishing the membership of the child, if readily available, or other evidence of membership. If the child is not a member of the tribe and the child's eligibility is through a parent or grandparent, either write the enrollment number of the parent or grandparent, or provide other proof of membership. Some examples of other proof of membership may include: affidavit from tribe, CDIB card or birth certificate. Write the name and address of the organization that maintains updated and accurate membership data for such tribe or band of Indians.

ATTESTATION STATEMENT: Provide the name, address and email of the parent or guardian of the child. The signature of the parent or guardian of the child verifies the accuracy of the information supplied.

The Department of Education will safeguard personal privacy in its collection, maintenance, use and dissemination of information about individuals and make such information available to the individual in accordance with the requirements of the Privacy Act.

PAPERWORK BURDEN STATEMENT According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1810-0021. The time required to complete this portion of the information collection per type of respondent is estimated to average: 15 minutes per Indian student certification (ED 506) form; including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Office of Indian Education, U.S. Department of Education, 400 Maryland Avenue, S.W., LBJ/Room 3W203, Washington, D.C. 20202-6335. OMB Number: 1810-0021 Expiration Date: 02/29/2020.



PART III: Information for Families Instructions

The final section of the “New Student Welcome Packet” is for parents/guardians to keep. The information here covers the following required district-wide topics:

- Immunization Requirement Sheet
- Health Care Coverage Options
- Information Regarding Protections for Immigrant Students (AB 699)
- EGUSD Non-discrimination and Title IX Guidance

Additional parent notifications can be found online in the EGUSD Parent and Student Handbook at <http://www.egusd.net/students-families/district-handbook/>.

Schools may include school-specific information in this section to welcome you and your child.

PARENTS' GUIDE TO IMMUNIZATIONS REQUIRED FOR SCHOOL ENTRY



Starting July 1, 2019

Students Admitted at TK/K-12 Need:

- **Diphtheria, Tetanus, and Pertussis (DTaP, DTP, Tdap, or Td) — 5 doses**
(4 doses OK if one was given on or after 4th birthday.
3 doses OK if one was given on or after 7th birthday.)
For 7th-12th graders, at least 1 dose of pertussis-containing vaccine is required on or after 7th birthday.
- **Polio (OPV or IPV) — 4 doses**
(3 doses OK if one was given on or after 4th birthday)
- **Hepatitis B — 3 doses**
(Not required for 7th grade entry)
- **Measles, Mumps, and Rubella (MMR) — 2 doses**
(Both given on or after 1st birthday)
- **Varicella (Chickenpox) — 2 doses**

These immunization requirements apply to new admissions and transfers for all grades, including transitional kindergarten.

Students Starting 7th Grade Need:

- **Tetanus, Diphtheria, Pertussis (Tdap) — 1 dose**
(Whooping cough booster usually given at 11 years and up)
- **Varicella (Chickenpox) — 2 doses**
(Usually given at ages 12 months and 4-6 years)

In addition, the TK/K-12 immunization requirements apply to 7th graders who:

- previously had a valid personal beliefs exemption filed before 2016 upon entry between TK/Kindergarten and 6th grade
- are new admissions

Records:

California schools are required to check immunization records for all new student admissions at TK/Kindergarten through 12th grade and all students advancing to 7th grade before entry. Parents must show their child's Immunization Record as proof of immunization.



HEALTH CARE FOR ALL FAMILIES

A PROJECT OF THE CHILDREN'S PARTNERSHIP

Enroll. Get Care. Renew. Health Coverage All Year Long

Health Coverage Options

Medi-Cal:

- ▶ Children—regardless of immigration status—foster youth, pregnant women, and legally present individuals—including those with DACA status—may be eligible for no- or low-cost Medi-Cal.
- ▶ Medi-Cal covers immunizations, checkups, specialists, vision and dental services, and more for children and youth at no or low cost.
- ▶ Medi-Cal enrollment is available year round.

Covered California:

- ▶ Covered California is where legal residents of California can compare quality health plans and choose the one that works best for them.
- ▶ Based on income and family size, many Californians may qualify for financial assistance.
- ▶ Enroll during Open Enrollment or any time you experience a life-changing event, like losing your job or having a baby. You have 60 days from the event to complete enrollment.

! Immigrant Families visit: www.allinforhealth.org/immigrantfamilies
Immigration status information is kept private, protected, and secure. It will not be used by any immigration agency to enforce immigration laws, but only to determine eligibility for health programs.

You and your family may qualify for financial help:

Household Size	If 2019 household income is less than...		If 2019 household income is between...
	\$17,237	\$33,244	\$17,237 - \$48,560
1	\$17,237	\$33,244	\$17,237 - \$48,560
2	\$23,336	\$44,981	\$23,336 - \$65,840
3	\$29,439	\$56,738	\$29,439 - \$83,120
4	\$35,535	\$68,495	\$35,535 - \$100,400
5	\$41,635	\$80,253	\$41,635 - \$117,680
6	\$47,735	\$92,010	\$47,735 - \$134,960
▶	Adults may be eligible for Medi-Cal	Children may be eligible for Medi-Cal	May be eligible for financial help to purchase insurance through Covered California

Enroll.

Three ways to enroll in Medi-Cal and Covered California:

- www.coveredca.com
- 1(800) 300-1506
- Find in-person help: www.coveredca.com/get-help/local/

Get Care.

- ▶ Find a primary care doctor in your network.
- ▶ Schedule an annual checkup for you and your family.
- ▶ Make sure to take your child to the dentist.
- ▶ Pay your monthly premium if your plan requires it.

Renew.

- ▶ Medi-Cal must be renewed every year. If you receive a renewal notice, complete and return. You can also renew online or by phone. For help, contact your local Medi-Cal office.
- ▶ Health plans through Covered California must be renewed every year. Renewal information will be mailed at the end of the year, or contact Covered California at 1 (800) 300-1506.



Unified School District



Protections for Immigrant Students

Understanding AB 699

Student Rights:

1. **Right to Public Education:** ALL children and youth have a right to a free public education.
2. **Guardians Role:** Guardians must enroll their children in school.
3. **Nondiscrimination by Immigration Status:** School districts cannot deny enrollment to any child based on child's immigration status.
4. **Enrollment Requirements:** Children do not need a green card, passport, alien registration number, social security number, or any other proof of immigration status to enroll in school.
5. **Data Collection for Enrollment:** Schools are not allowed to ask for or collect information about guardian or child's immigration status for enrollment purpose.
6. **Supplemental Data Collection:** After enrollment, schools may ask for address, age, place of birth, primary language, years of school attendance, previous school enrollment, and/or migration work status. This information has nothing to do with the immigration status of child or family, and is not required for enrollment.
7. **Protection from Discrimination:** Students cannot be discriminated or bullied based on their immigration status.

Understanding AB 699 – Protection for Immigrant Students:

1. **AB 699 – Safe Schools for Immigrant Student** is a 2018 law in California that provides important protections for students in immigrant families.
2. The law is also referred to as Safe Havens, Sanctuary Schools, and Safe Zones.
3. What is an **EGUSD Safe School**?
 - a. Schools will limit access of immigration enforcement like U.S. Immigration Customs Enforcement (ICE) and U.S. Customs and Border Protection (CBP) officers from coming on campus or using school records for immigration enforcement.
 - b. EGUSD provides helpful resources about immigration laws and action plans in case a family member or student is deported.

Schools Requirements to Support and Protect Immigrant Students?

1. **Bullying Prevention:** Schools must teach students about the harm of bullying students based on immigration status.
2. **Data Collection:** Schools cannot collect immigration status information from students and families.
3. **Reporting:** If police try to enforce immigration law on schools, it must be reported to the superintendent or designee.
4. **Emergency Contacts:** Schools must contact individuals listed on emergency information. Emergency contact information should include at least two family members or other parental chosen contacts in the event of the deportation of a parent or guardian.
5. **Parent Information:** Schools must inform parents about their children's right to a free public education and about school policies for communication with immigration enforcement at schools in a language accessible to the guardian.



District Policy Prohibiting Discrimination/Harassment/Intimidation/Bullying of Students

Nondiscrimination/Harassment/Intimidation/Bullying Policy

The Elk Grove Unified School District prohibits discrimination against, nor will it tolerate the intimidation, harassment or bullying of, any student by a student, employee, or any other person from or in the District, on the basis of the student's actual or perceived disability, sex, gender, gender identity, gender expression, nationality, immigration status, race, ethnicity, color, ancestry, religion, sexual orientation, age, marital or parental status or association with a person or group with one or more of these actual or perceived characteristics. Students, who harass, intimidate, or bully, other students on the basis of these prohibited bases shall be subject to counseling and appropriate discipline, up to and including expulsion. An employee who permits or engages in such harassment, intimidation and bullying may be subject to disciplinary action, up to and including dismissal. [BP 5145.3 (b)]

The Elk Grove Unified School District has a policy and practice of nondiscrimination in all District programs and activities for all students. The Board shall ensure equal opportunities for students in admission and access to educational programs, guidance and counseling programs, athletic programs, testing procedures, and other activities, regardless of a student's actual or perceived disability, sex, gender, gender identity, gender expression, nationality, immigration status, race, ethnicity, color, ancestry, religion, sexual orientation, age, marital or parental status, or association with a person or group with one or more of these actual or perceived characteristics. Lack of English language skills will not be a barrier to admission to and participation in career technical education programs or any other District program. School staff and volunteers shall carefully guard against segregation, bias, and stereotyping in instruction, guidance and supervision. Staff shall be on the alert for and immediately responsive to student conduct which may interfere with another student's ability to participate in or benefit from school services, activities or privileges. When providing or arranging for the provision of nonacademic and extracurricular services and activities, the District will ensure that a student with a disability participates with nondisabled persons in such activities and services to the maximum extent appropriate to the needs of the student with a disability in question. The District will provide nonacademic and extracurricular services and activities in such manner as is necessary to afford students with disability an equal opportunity for participation in such services and activities. [BP 5145.3 (a & b)]

The Elk Grove Unified School District also has a specific policy that prohibits bullying based on, among other things, actual or perceived disability, sex, gender, gender identity, gender expression, nationality, immigration status, race or ethnicity, religion, sexual orientation, or association with a person or group with one of more of these actual or perceived characteristics. [BP 5131.2] For purposes of this policy, bullying is defined as abusive action or conduct, which can be physical, verbal, written, psychological or sexual in nature. Examples of bullying in these different forms include but are not limited to:

- **Physical: hitting, kicking, spitting, and pushing;**
- **Verbal or Written: teasing, threatening, and name-calling;**
- **Psychological: social isolation, manipulation, spreading rumors, and intimidating; and/or**
- **Sexual: touching, assault, exhibitionism and many of the actions listed above**

Sexual Harassment Policy

The Elk Grove Unified School District prohibits unlawful sexual harassment of any student by any student, employee, or other person from or in the District. Any student who engages in the sexual harassment of any person from or in the District may be subject to disciplinary action, up to and including expulsion. Any employee who permits or engages in sexual harassment may be subject to appropriate disciplinary action up to and including dismissal. [BP 5145.7 (a)]

Prohibited sexual harassment includes, but is not limited to, unwelcome sexual advances, requests for sexual favors and other verbal visual or physical conduct of a sexual nature such as:

- **Unwelcome leering, sexual flirtations or propositions;**
- **Unwelcome sexual slurs, epithets, threats, verbal abuse, or derogatory comments;**
- **Touching an individual's body or clothes in a sexual way;**
- **Displaying sexually suggestive objects in the educational environment**

Reporting Procedures

Any student who feels that he or she or another student in the District is being unlawfully discriminated against, harassed, intimidated or bullied by any student, employee, or other person from or in the District should immediately notify school staff or an administrator such as the principal or a vice principal so that the concern can be investigated and addressed. A student or parent may also file a written complaint in accordance with the District's Uniform Complaint Procedures. [BP & AR 1312.3, BP 5131.2, and BP 5145.3] The District prohibits retaliatory behavior against any person filing a complaint or any participant or witness in the complaint process. Each complaint will be fully investigated in a way that respects the privacy of all parties concerned, and appropriate action will be taken to remedy a finding of discrimination, harassment, intimidation or bullying.

Additional Information

Additional information about these policies, your rights and responsibilities, or about how to file a complaint regarding alleged discrimination, harassment, intimidation, or bullying can be obtained by contacting the **Legal Compliance Specialist**, legalcompliance@egusd.net, 916-686-7795, Elk Grove Unified School District, 9510 Elk Grove-Florin Road, Elk Grove, CA 95624. For complaints regarding discrimination based on sex, contact the appropriate Title IX and Nondiscrimination Coordinator listed below:

For student against student complaints:

Assistant Superintendent, PreK-6 Education
(916) 686-7704; TitleIX@egusd.net
9510 Elk Grove-Florin Road
Elk Grove, CA 95624; or

Assistant Superintendent, Secondary Education
(916) 686-7706; TitleIX@egusd.net
9510 Elk Grove-Florin Road
Elk Grove, CA 95624

Executive Director, Education Services
(916) 831-2041; TitleIX@egusd.net
9510 Elk Grove-Florin Road
Elk Grove, CA 95624

For complaints against employees:

Legal Compliance Specialist, Human Resources
(916) 686-7795; TitleIX@egusd.net
9510 Elk Grove-Florin Road
Elk Grove, CA 95624

Copies of the District's policies prohibiting discrimination, harassment (including sexual harassment), and intimidation and bullying, and copies of the Uniform Complaint Procedures are also contained on the District's Internet site – www.egusd.net and can be located through the links "Students & Parents" and "District Policies/ Procedures/Notices."

VIRTUAL ACADEMY MASTER AGREEMENT FOR K-8

- Supplemented by *Course Assignment and Work Record Forms*

STUDENT ID #		NAME (last, first, mi)	
ADDRESS			GRADE
CITY		ZIP	AGE
PHONE #		WORK #	BIRTHDATE

ENTRY DATE	EXIT DATE	LOCATION
-------------------	------------------	-----------------

OBJECTIVES: The student will attempt to complete the courses listed below during the trimester as are outlined in the Elk Grove Virtual Academy course descriptions.

1. All course objectives will be consistent with the guidelines established by the Elk Grove Unified School District curriculum. Assignment and work forms include additional descriptions of the major objectives and activities of the course of study covered by the agreement, as well as the methods for evaluating the course work.
2. The Elk Grove Unified School District will provide the teacher services, instructional material and other necessary items and resources as specified for each assignment.
3. The student and parent agree to meet with or report to the teacher regularly according to the frequency, date, time and location specified in the assignment and work record form. Each assignment and work record form is incorporated in and made a part of this agreement.
4. According to district policy BP6158.(b) for independent study, no more than 1 week for K-3, and 2 weeks for grades 4-8 may elapse between the date an assignment is made by the teacher and the date it is due.

CERTIFICATION: *Report card or transcript.*

*SUBJECT	COURSE VALUE	*SUBJECT	COURSE VALUE

SIGNATURES: *We have read this agreement (back page) and hereby agree to all the conditions set forth within.*

Student _____ Parent/Guardian _____
 (Date) (If student is under age 18) (Date)

Teacher _____ Teacher _____
 (Date) (Date)

Teacher _____ Other _____
 (Date) (Date)

K-8 VIRTUAL ACADEMY

MASTER AGREEMENT *(Continued)*

STUDENT: *I understand that:*

- Virtual Academy is an optional education alternative that I have voluntarily selected.
- By enrolling in the Virtual Academy, I have not waived any rights as a student, and I am entitled to all Elk Grove Unified School District services and resources. If I'm a student with an individualized education program (I.E.P.), it must specifically provide for my enrollment in Virtual Academy.
- I must follow the discipline code and behavior guidelines of the Elk Grove Unified School District. Any violation of these guidelines or failure to meet school/district requirements could result in dismissal from the Virtual Academy.
- Visitation on any other school campus requires permission from that school.
- Students in grades K-6 will earn a passing grade in Reading/Language Arts, Writing, Math, Spelling, Social Studies, Science and P.E.

I agree to:

- Be supervised by a Virtual Academy teacher and/or other approved resource personnel.
- Meet or report regularly with assigned teacher and/or supervisor, and I understand that my parent/guardian must also attend the meeting. The frequency, date, time and location will be determined by my work assignments. I realize that it is my responsibility to promptly reschedule any appointment missed due to any emergency, and that failure to report to an appointment and/or failure to submit evidence of completed assignments could result in one or more of the following:
 1. A letter of concern to me and my parent, if appropriate.
 2. A specially scheduled school appointment.
 3. A meeting with the teacher and/or counselor.
 4. A meeting with the administrator, including parent or guardian, if appropriate.
 5. Placement on probation.
 6. Termination of the agreement and my return to a regular classroom of instruction or other appropriate alternative
- Obtain transportation to scheduled meetings. I understand that lack of transportation to the school site is not an acceptable reason for failing to meet with my teacher and/or supervisor to submit my completed assignments.
- Attend **all** state and district mandated tests as scheduled.
- In order to complete my school requirements, consistent with the traditional school, I need to complete more than the minimum study requirements. I must complete my assigned work and achieve at least the minimum performance requirements of the course of study. I understand that grades and/or credit, which are based on mastery of learning, can only be issued after I have successfully completed an activity and it has been evaluated.
- I am liable for the cost of replacement or repair for damaged or lost books and other materials that are checked out to me.

PARENT: *I understand that:*

- The major objective of the Virtual Academy is to provide a voluntary educational alternative for my son/daughter. I agree to the above conditions listed under STUDENT.

I also understand that:

- Individual course objectives are consistent with and evaluated in the same manner they would be if my son/daughter were enrolled in a traditional school program.
- I am liable for the cost of replacement or repair for damaged or lost books and other materials that are checked out to my son/daughter.
- Unless otherwise indicated, a teacher or supervisor will meet/communicate with me and my son/daughter on a regular basis to direct and measure progress. The time and location of meetings with the teacher or supervisor will be determined by the teacher or supervisor in consultation with me and my son/daughter.
- It is my responsibility to provide transportation to the school site for my son/daughter when required and for **all** state and district mandated tests as scheduled.
- I have the right to appeal any decision about my son/daughter's placement, school program or transfer, according to Elk Grove Unified School District's procedures.



EGUSD Use of Technology in Instruction Application for Educational Use of the Internet

Elk Grove Unified School District provides limited access to the Internet, which includes local, national and international sources of information via its local network. Every EGUSD user has the responsibility to respect and protect the rights of every other user in our community and on the Internet. Student account holders are expected to act in a responsible, ethical and legal manner on the Internet. Students are taught network etiquette and are expected to follow it. To become a user, students and their parents must complete this form and return it to their school.

Students using these systems are subject to having all activities, including e-mail, monitored by system or security personnel. EGUSD has taken all reasonable steps to ensure the Internet is used only for purposes consistent with the curriculum. The district or school cannot prevent the availability of material elsewhere on the Internet that may be deemed harmful or intended for adults, especially to someone determined to find it. Information obtained via the Internet is at the user's risk. Using the network is a privilege, not a right, and a student's privilege may be revoked at any time for unacceptable conduct. Please read the information online at http://www.egusd.net/discover_EGUSD/pdfs/AR_6162_7.pdf

Your signature below gives your permission for your student to use the district's network and Internet access, and also confirms your understanding of the rules associated with the network. You also understand that any user who breaches these guidelines may lose all privileges on the network and/or be subject to appropriate disciplinary or legal actions.

(please print)

Student's Name: _____

Date: _____

Home Address: _____

Student Signature: _____

Student Identification #: _____

Parent/Guardian's Signature: _____



ELK GROVE UNIFIED SCHOOL DISTRICT INTRADISTRICT TRANSFER REQUEST

PLEASE INITIAL WHERE INDICATED BELOW.

- I understand that this INTRADISTRICT TRANSFER REQUEST will be in effect only for the school year in which it has been granted. _____ (initials)
- I understand that this INTRADISTRICT TRANSFER REQUEST will be granted only on a space available basis. _____ (initials)
- I understand that this INTRADISTRICT TRANSFER REQUEST may be revoked if the pupil does not conform to attendance, academic and behavioral expectations. _____ (initials)
- I understand the pupil may be returned to his/her school of residence. _____ (initials)

REQUEST FOR ACADEMIC YEAR: _____ DATE: _____
 RESIDENT SCHOOL: _____ REQUESTED SCHOOL: _____

Student's Name	Student's ID #	Grade Level	Birthdate
Parent's/Guardian's Name	Home Phone	Work Phone	
Street Address	City, State	Zip Code	

IS THE STUDENT ENROLLED IN A SPECIAL EDUCATION PROGRAM: YES NO

REASON FOR REQUEST: _____

This request will be honored only for the academic year designated above. Parents/Guardians are responsible for submitting a request annually. Under this agreement parents/guardians assume responsibility for transporting their child to and from school. _____ (initials)

Student's Signature: _____ Date: _____

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

9-12 Intradistrict Transfer Only: Athletic Eligibility

Does your child plan to participate in any High School sports? YES NO Sport(s) _____

According to California Interscholastic Federation (CIF) policy, the granting of an Intradistrict Transfer does not guarantee eligibility to participate in interscholastic athletics at the requested school. _____ (initials)

If you would like to request a waiver of California Interscholastic Federation (CIF) eligibility restrictions, please check the box to the right and complete and return the attached waiver request.

For School Use Only

Approved Denied _____
Resident School Principal's Signature Date

Approved Denied _____
Requested School Principal's Signature Date

Principal's Reason for Approval/Denial _____