

Ivy Academy's Skillern Elementary Registration Packet

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If you have any question or concerns please contact: Alicia Parrow,
aparrow@skillernelementary.com or Front office: 423-654-7308
www.skillernelementary.com

FAMILY HANDBOOK AGREEMENT
(To be Signed by all Parents)

After reading the Family Handbook, please sign the appropriate lines below and return to the Director of Recruitment.

We, the parent(s)/guardian(s) of _____
have read and understand the contents of the Ivy Academy's Skillern Elementary Family Handbook.

We agree to follow the policies outlined in the Family Handbook. We understand that the school reserves the right to amend policies and procedures when necessary, and that we will abide by changes.

The Family Handbook is not an enrollment contract.

Signature of Parent/Guardian _____ Date _____

Signature of Parent/Guardian _____ Date _____

PHOTO RELEASE

Child's Name _____

I give permission for my child's photo to be used on Ivy Academy's and Skillern Elementary's social media and promotional materials.

Signature

Printed Name

I do **NOT** give permission for my child's photo to be used on Ivy Academy's and Skillern Elementary's social media and promotional materials.

Signature

Printed Name

**SKILLERN ELEMENTARY
PARENT COMPACT**

(To be Signed by all Parents)

I have carefully discussed the Skillern Elementary Honor Code (included in the Family Handbook) with my child and he/she understands what it means. I pledge to encourage my child to be virtuous in conduct, to help him/her grow in scholarship and learning, and to foster in him/her a commitment to civic responsibility. I will hold my child to the highest standards of integrity and will discourage him/her from lying, cheating, or stealing.

Name(s)

Signature(s)

Date

**SKILLERN ELEMENTARY
STUDENT COMPACT**

(To be Signed by 2nd – 5th Grade Students)

I understand the Skillern Elementary Honor Code and have discussed it with my parent(s). I pledge to be virtuous in conduct, to grow in scholarship and learning, and to pursue a commitment toward civic responsibility. I will not lie, cheat, or steal, and I will discourage others from doing so.

Name

Signature

Date

Attendance Policy Contract

Absences

Excused Absences (Must be followed by a note within 5 school days)

- Personal Illness - Students who are sick and whose attendance would be detrimental to their health and the health of other students may be excused. A physician's statement will be required.
- Death in Immediate Family - Students may be excused for not more than 3 days in the event of a death in their immediate family (including parents, step-parents, siblings, and/or grandparents).
- Family Illness - Students with an illness in the family which requires them to give temporary help will be excused from attendance after receipt of a physician's statement concerning the necessity of a student's assistance.
- Religious Holiday - Students shall be excused on religious holidays regularly observed by their faith. Prior approval may be required.
- Personal - Students who are absent for a good cause (e.g., doctor, dental, or court appointment) may be excused upon proof of appointment.
- Approved School-Sponsored Activities - Students will be marked present when participating in a school activity away from the school building.

Unexcused Absences

The progressive truancy process begins once a student has accumulated 5 unexcused absences. Unless an absence is justified medically, or for one of the following reasons listed above, it is considered unexcused. When a student reaches 3 unexcused absences, the attendance clerk contacts and documents calls to parents/guardians reminding them of the attendance policy which they signed at Ivy registration. (TCA 49-6-3007) If the parent disagrees with the number of absences, it is their responsibility to contact the school for an attendance meeting and to provide documentation to support claims. Following are some of the most common situations considered to be an unexcused absence.

- Cutting class/walking away from the class, indoors or outside
- Family vacations/out of town without prior school notice and approval
- Early dismissals unless a doctor's note or court document is turned in to the school
- Absent without parent's permission and notification to school (skipping school)
- Absent without an excuse turned in within the required time limit (5 school days)
- Not checking in with front office upon late arrival (failure to follow check-in or check-out procedures)
- Missing the bus and not notifying the school
- Waiting in the office for dress code issues/being sent home due to dress code violation

Attendance Law, State of Tennessee

Families are notified of Attendance Law and Procedures through this handbook, available online or at the school office. The Attendance Notification Contract is in the Ivy registration packet. The school keeps a copy of the form signed by the parent/guardian in a designated file.

Excessive absences are governed by Tennessee State Law, which requires that school officials report to the court any parent, guardian, or other person in a parental relationship with a child who is unlawfully absent from school for any 5 days during the school year without adequate excuse (TCA 49-6-3007)

When a student reaches 3 unexcused absences, the attendance clerk contacts and documents calls to parents reminding them of the attendance policy which they signed at Ivy registration. (TCA 49-6-3007)

Tier 1 Intervention: When a student reaches 5 unexcused absences, the school will notify the parent/guardian by way of a letter mailed to the home address, requesting a mandatory meeting at the school to address absences and barriers to school attendance. (TCA 49-6-3009)

Tier 2 Intervention: When a student reaches 8-10 unexcused absences (no legal reason for absences as defined above), the school will make a referral to the School Social Worker. The parent will receive a Legal Notice, and the school social worker will contact the parent to set up a mandatory assessment to address continued absences and barriers to regular attendance. This assessment will take place at the school. (TCA 49-6-3009) Failure to appear at this meeting will automatically place the parent in Tier 3 Intervention. (TCA 49-6-3009)

Tier 3 Intervention: If a student continues to accrue unexcused absences after the school social worker completes the assessment, then the family will be required to meet before the Truancy Board to discuss continued barriers. The Board meets once a month and includes members from agencies in the community for the purpose of connecting families to resources. Failure to appear before the Truancy Board will result in automatic petition to Juvenile Court. (TCA 49-6-3009)

Failure to meet the expectations set forth by the Truancy Board will result in a truancy petition filed in Hamilton County Juvenile Court. See Appendix A for further definition of the Tennessee Compulsory Student Attendance Policy.

Truant students may not participate in any extra- school activities (before, during, or after school), including sports activities, field studies, after-school enrichment programs, promotion ceremonies, socials (including prom), after-school celebrations, and all senior activities, including senior trips and graduation.

I understand these state policies and will abide by them.

Printed Name

Signature

Date



**HAMILTON
COUNTY
SCHOOLS**

HAMILTON COUNTY SCHOOLS

3074 Hickory Valley Road
Chattanooga, TN 37421
(423) 498-7020

**HOME LANGUAGE SURVEY
CUESTIONARIO DE LENGUA NATAL**

School Name _____ **Date** _____

Nombre de la Escuela _____ **Fecha** _____

Student's Name _____ **Grade** _____

Nombre del Estudiante _____ **Grado** _____

1. What is the first language your child learned to speak?
¿Cual es el primer idioma que aprendio a hablar?

2. What language does your child speak most often outside of school?
¿Que idioma habla mas frecuentemente fuera de la escuela?

3. What language do people usually speak in your home?
¿Que idioma se habla generalmente en su casa?

4. What month/year did the student enter the U.S.?
¿En que mes / año entro el estudiante a los EE.UU.?

5. What month / year did the student enter Chattanooga?
¿En que mes / ano llego el estudiante a Chattanooga?

**Parent's Signature
Firma de Padre**

IVY ACADEMY'S SKILLERN ELEMENTARY

Ethnicity and Race

Student's Name: _____ Grade: _____
 Parent/Guardian Signature: _____ Date: _____

Please answer BOTH Question 1 AND Question 2

Question 1: Is this student Hispanic/Latino? CHOOSE ONLY ONE ETHNICITY:

- NO, not Hispanic/Latino
- YES, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

*The above question is about ethnicity, not race. No matter what you selected above, **please continue to answer the following Question 2** by marking one or more boxes to indicate what you consider your student's race to be.

Question 2: What is the student'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 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.

Office use only:	
Ethnicity - Choose only one: _____ NOT Hispanic/Latino _____ Hispanic/Latino	Race - Choose one or more: _____ American Indian or Alaska Native _____ Asian _____ Black or African American _____ Native Hawaiian or Other Pacific Islander _____ White
Date:	Staff Signature:

Tennessee Parent Occupational Survey



Under Title I, Part C of the Elementary and Secondary Education Act (ESEA) our school district provides supplemental services to the children of agricultural workers who have recently moved. This survey is to help the school identify if your child might qualify for these free supplemental services such as tutoring, school supplies, summer camps in select counties, and other free services. Please answer the following questions and return this form to your child's school. **The information provided below will be kept confidential.**

Today's Date

Parent/Guardian First & Last Name

Student First Name






Student Last Name

School Name

Student Grade

1. Have you or an immediate family member performed any agriculture or fishing jobs temporarily or seasonally, in any part of the United States, in the past 3 years? Check all that apply.

____ NO
____ YES. Check all that apply:

<p>Agriculture/Field Work: planting, picking, sorting crops, soil preparation, irrigation, fumigation</p>  <input style="float: right; margin-top: 10px;" type="checkbox"/>	<p>Processing & Packaging: fruit, vegetables, chicken, pork, beef, eggs, etc.</p>  <input style="float: right; margin-top: 10px;" type="checkbox"/>	<p>Dairy/Cattle Raising: feeding, milking, rounding up.</p>  <input style="float: right; margin-top: 10px;" type="checkbox"/>
<p>Nursery/Greenhouse: planting, potting, pruning, watering, harvesting</p>  <input style="float: right; margin-top: 10px;" type="checkbox"/>	<p>Forestry: soil preparation, planting, cutting trees; does not include landscaping.</p>  <input style="float: right; margin-top: 10px;" type="checkbox"/>	<p>Other: Any other agriculture or fishing work, please list here:</p> <p>_____</p> <p>_____</p>

2. In the past 3 years, has your family moved to another state, city, school district, and/or county?

____ NO
____ YES. My family has moved within the past 3 years. Indicate how long ago below.

_____ Years _____ Months _____ Weeks

If you answered "Yes" to question 1, please complete the information below. A staff from the Migrant Education Program will follow up with your family to verify if you qualify for free services.

Home Street Address

Apt #

City

Zip Code

Telephone Number

Language

Email Address

Best Day of Week and Time to Call

For School Use Only: Please forward all surveys with a "YES" response to Question 1 to your district migrant liaison for them to submit to the ID&R Team through tn.msedd.com. If you have any questions, email the TN MEP ID&R Team: idr@tn-mep.net

Student State ID:	Enrollment Date:	District ID:
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Emergency Contact and Medical Information: Please PRINT legibly! Grade _____

Student's Full Name

Preferred Name

Birthdate

Gender

Parent's/ Guardian's Full Name

Parent's/ Guardian's Full Name

() - () -
Cell or Home Phone Work Phone

() - () -
Cell or Home Phone Work Phone

Address

Address

City, State, Zip

City, State, Zip

Employer

Employer

Alternate Contact's Full Name

Alternate Contact's Full Name

() - () -
Cell or Home Phone Work Phone

() - () -
Cell or Home Phone Work Phone

Address

Address

City, State, Zip

City, State, Zip

Persons Permitted to Dismiss Student:

Persons NOT Permitted to Dismiss Student:

Continue to back →→→→→

Please list any allergies:

Please list any health conditions:

Please list all daily medications taken:

Last Date of Tetanus Shot: _____

Hospital/Clinic Preference: _____

Physician Name: _____ Contact #: (____) ____ - _____

Health Insurance Provider: _____ Contact #: (____) ____ - _____

Policy Holder's Name: _____ Employer: _____

Member ID Number: _____ Group Number: _____

Consent for Treatment

If necessary in the 2022-2023 school year, I, _____, parent/guardian of _____ (student), authorize Skillern Elementary staff members, and chaperones, to seek and arrange emergency medical treatment, hospitalization, or surgery that may become necessary in my absence and will assume full financial responsibility.