

#### **BAYLESS SCHOOL DISTRICT - REGISTRATION FORM**

(PLEASE PRINT)	Present Grade:	Date:
Student's Last Name:	First Name:	Middle Initial:
Date of Birth:///	Gender:	
	n the Bayless School District?   Yes	No If yes, when?
America, and who maintains tribal aff  Asian (A person having origins of  Black or African American (A person  Native Hawaiian or other Pacific	e (A person having origins in any of the origin	dian subcontinent) roups of Africa)
Samoa, or other Pacific Islands)  White (A person having origins in	any of the original peoples of Europe, the M	iddle East or North Africa)
or origin, regardless of race)	se only one)  f Cuban, Mexican, Puerto Rico, South or Cent  en at home?   Yes  No  If no, speci	
Does student have an existing Individual Does student have an existing Section Has student participated in a previous Has student been retained?    Yes	as Second Language Services?	n Services?
Is this student in a foster care placem	eent? 🔲 Yes 🔲 No	
If YES, Biological Parent Name:	Bio Parent Ad	dress:
Bio Parent School District:	Caseworker Name:	Caseworker Phone:
1) Are you sharing the housing of ot	ne definition of homeless that is within the Mither persons due to loss of housing, economi	c hardship, or similar reasons?  — Yes — No
• •	el/hotel, in a car, or at a campsite because yo	
because of economic reasons?  3) Are you currently residing in a she	elter?	☐ Yes ☐ No ☐ Yes ☐ No
,	rary housing arrangement due to economic h	

Siblings in the district?	l No If yes, please list their	names and the school they are/will attend.
Name:	DOB:	Grade:
Child care provider:		Phone:
EMERGENCY CONTACTS: (By listing person illness or emergency and allow him of		rmission for us to contact him or her in case of vent the parent cannot be reached.)
Name:	Relationship:	Phone Number:
Name:	Relationship:	Phone Number:
Name:	Relationship:	Phone Number:
PARENT/GUARDIAN'S INFORMATION  Biological Parent's marital status:   Are there existing legal documents relating the second of the countries of the countries.	ting to custody/visitation?	
*Alternate parent refers to the non-cus married families.	•	and/or the parent with custodial rights.  Ilternate parent portion for divorced or never
Primary Parent  ☐ Father ☐ Mother ☐ Ste	epfather 🗖 Stepmother	☐ Legal Guardian ☐ Other (explain)
Last Name:	First Name	9:
<ul><li>□ Not Military Connected (NM)</li><li>□ Unknown (UNK)</li></ul>		State: Zip:  National Guard or Reserve (NGR)  of contact.
☐ Household Phone Number:	Cell P	hone :
☐ E-mail:	U Work P	Phone Number:
Would you like to be contacted via text	: message?	

u	Father		Mother	, U	Stepfather	☐ Ste	pmother	u	Legal C	Guardian		Other (expl
Las	t Name:				·		_ First Na	ame:				
Add	dress:					Apt i	# Ci	ty, Stat	e:			Zip:
		-		(MM)		<b>A</b> ctive	Duty (AD)			National (	Guard	or Reserve (N
	Unknow	n (UN	K)		Please check	all prefer	red metho	ds of co	ontact.			
	Jawaah ala	l Dhan	a Numbar									
<b>_</b>	Tousenoic	Phone	e Number	•			ce	II PHOH	٠			
<b></b>	-mail:			<u>.</u>			<b>U</b> Wo	rk Phon	ne Num	ber:		
					_							
Wo	uld you li	ke to b	e contact	ed via	text message?	Yes	<b>□</b> No					
	· .											
	ernate Pa		Mathan		Stepfather	☐ C+/	anmathar		Logal (	Suardian		Other (eval
	rather	u	wother	ب	Stepratner	<u> </u>	spriiotriei		Legai	3 uaraian		Other (expi
Lac	t Name:				:		First Na	ame.				
Las	t Name			·			_ 11136146	arric				
Add	dress:					Apt	# Ci	tv, Stat	e:			Zip:
	Unknow	-		(,			, ,					
		,	•		Please check	all prefer	red metho	ds of co	ontact.			
	Household	l Phon	e Numbei	·•			□ Ce	ll Phon	e :			
	louserion		e Harribe	•					·			
	E-mail:						☐ Wo	rk Phor	ne Num	ber:		
Wo	uld you li	ke to b	e contact	ed via	text message?	? 🔲 Yes	☐ No					
	•				_							
Alt	ernate Pa	rent Sp	ouse									
	Father		Mother		Stepfather	☐ Ste	epmother		Legal (	Guardian		Other (expla
Las	t Name: _						_ First Na	ame:				
Add												
	Not Mili	tary Co	nnected	(MM)	Ţ	☐ Active	Duty (AD)			National (	Guard	or Reserve (N
	Unknow	n (UN	K)		,							
					Piease check	k ali prefer	red metho	ds of co	ontact.			
<b>□</b>	Household	l Phon	e Numbe	r:			🗅 Ce	ell Phon	e :			

#### PROOF OF RESIDENCY

To enroll a student, the parent or legal guardian must first establish proof of residency in the school district. Proof of residence requires current documentation, one item from List A and two items from List B, and a copy of parent/legal guardian's driver's license.

LIST A	LIST B
Real Estate Tax Bill	Unpaid Utility Bill/ Verification of Service from a utility
·	Provider
Mortgage Statement	Paycheck Stub
Residential Sales Contract	Municipal Occupancy Permit
Residential/Rental Agreement – signed by both	Voter ID Card
parties and listing occupants	
	Government Documents: Social Services, Social Security
	Statements, IRS returns or other Legal/Court Documents

A parent/legal guardian who residency is in our district, but is residing with another family member or friend will be required to complete an Affidavit of Residency. Verification of eligibility to enroll students will be determined by District Administration. An Affidavit of Residency certifying residency at address of property owner will be required. Both the property owner and parent/legal guardian are required to meet with the district registrar and sign this affidavit.

In accordance with Board Policy JECA, in cases where a student living in the district wishes to register, and such student is not able to provide proof that the parent is domiciled in the district, the student, parent, military guardian, legal guardian or person acting as a parent must request a waiver of proof of residency. The waiver of proof of residency may only be granted on the basis of hardship or good cause. Residency checks may be performed if student's non-residency in the district is suspected.

#### **AUTHORIZATION FOR LEGAL ACTION AND RESIDENCY CHECK**

I certify that I am the legal parent/guardian of the student being enrolled and that the information listed on the student data sheet is current and accurate. Pursuant to RSMO Sec. 167.020, submitting false statements or information relating to residency is defined as a class A misdemeanor. In addition, the District may seek to recover the cost of school tuition for any pupil who is enrolled pursuant to false information received from a parent or legal guardian regarding residency. I authorize the Bayless School District, its employees and agents, to inquire and obtain documents, regarding matters of my residency and the domicile of my child(ren), from my employer(s) and/or appropriate government agencies as deemed necessary. I hereby certify that all documents, papers and records submitted by me as proof of residency are true and correct.

Parent/Legal Guardian Signature:	Date:

Parents/guardians are required to provide proof of residency after grade 5 when moving to Bayless Junior High.

File may be reviewed periodically.

Bayless School District does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. Inquiries related to Bayless School District programs and to the location of services, activities and facilities that are accessible by persons with disabilities may be directed by letter or telephone to the Assistant Superintendent, Civil Rights Compliance (Title VI/Title IX/504/ADA/Age Act), Bayless School District, 4530 Weber Rd. St. Louis, MO 63123; telephone number: 314-314-256-8612.

# **Bayless Consolidated School District**



	STUDENT RECORD REQUEST	FORM Learning And Crowing Together Since 1868
Date		
To the Principal or Registrar of		
PREVIOUS SCHOOL		
ADDRESS OF PREVIOUS SCHOOL		
CITY, STATE, AND ZIP CODE		
TELEPHONE	FAX#	·
STUDENT NAME		
DATE OF BIRTH	GRADE	
Bayless High School 4532 Weber Road St. Louis, MO 63123 314-256-8660 FAX 314-544-6344 mhagan@bayless.k12.mo.us	Bayless Jr. High 4530 Weber Road St. Louis, MO 63123 314-256-8690 FAX 314-544-6326 cthorp@bayless.k12.mo.us	Bayless Elementary 4531 Weber Rd. St. Louis, MO 63123 314-256-8620 FAX 314-544-6320 sjugovic@bayless.k12.mo.us
<ul> <li>completed, please specify gra</li> <li>EOC (End of Course Exam)</li> <li>Record of immunization and</li> <li>Intelligence/individualized/st</li> <li>Discipline records</li> </ul>	e attained while in attendance at your ades at time of withdrawal. scores screening tandardized test scores/state-mandated d/or Section 504 records (evaluation/dvaluation/reports	school. If semester/quarter grades were not assessment scores (ACCESS ELL, MAP) current I.E.P./reports)
enrolling the pupil, including any special ed discipline records required by sub-section 7	ducation pupil, shall request records required of section 160.261 RSMo, from all schools p	ight hours of enrolling a pupil, the school official by district policy for student transfer and those previously attended by the pupil within the last er school shall respond to such request five (5)
enroll is not required by law. This trans	ool records to other public education institutions of the provided for in the Family Educational gobtained for educational purposes. Parent/ochial institutions.	Rights and Privacy Act (FERPA). I
Parent/Guardian Signature		Date
Thank you for your cooperation.		
	(Signature)School Regist	rar

Dates of Request(s)



# BAYLESS SCHOOL DISTRICT SAFE SCHOOLS ACT

tudent's Name:	
oes the student have a discipline record?   Yes   No	
the undersigned hereby certify and represent to the Bayless School District, for the purposes of the Missouri Safe schools Act, that:	
1. Is this student currently suspended or expelled from any other school district, for any offense relating to weapons, alcohol or drugs, or for the willful infliction of injury to another person?   Yes  No	
2. Has this student ever been suspended or expelled from any other school district, for any offense relating to weapons, alcohol or drugs, or for the willful infliction of injury to another person?   Yes  No	
<ol> <li>Has the student been convicted or charged with any of the following crimes in juvenile or adult courts?</li> <li>Yes</li> <li>No</li> </ol>	
If yes, indicate which crime (s):	
☐ First or Second Degree Murder (§\$565.020, .021, RSMo.) ☐ Voluntary Manslaughter (§565.023, RSMo.) ☐ Involuntary Manslaughter in the first or second degree (§565.024, .027, RSMo.) ☐ First or Second Degree Kidnapping (§ 565.110, .120, RSMo.) ☐ First, Second or Third Degree Assault (§\$ 565.050, .052, .054, RSMo.) ☐ Rape in the First or Second Degree (§\$ 566.030, .031, RSMo.) ☐ Sodomy in the First or Second Degree (§\$ 566.060, .061, RSMo.) ☐ Burglary in the First or Second Degree (§\$ 569.160, 170, RSMo.) ☐ Robbery in the First Degree (§ 570.023, RSMo.) ☐ Possession of a Weapon (Chapter 571, RSMo. 18 U.S.C. § 921) ☐ Manufacture of a Controlled Substance (§\$ 579.020, RSMo.) ☐ Delivery of a Controlled Substance (§\$ 579.020, RSMo.) ☐ Property Damage in the First Degree (§ 569.100, RSMo.) ☐ First, Second or Third Degree Child Molestation (§ 566.067, .068, .069, RSMo.) ☐ Sexual Misconduct Involving a Child (§ 566.083, RSMo.)	
Sexual Abuse in the First Degree (§ 566.100, RSMo.)	
☐ First Degree Harassment (§ 565.090, RSMo.) ☐ First Degree Stalking (§ 565.225, RSMo.)	
attest that all of the above information is correct and true. I understand that it is a crime pursuant to § 167.023, RSN I do not disclose the information requested or if I provide false information.	lo
ignature of Parent/ Legal Guardian Date	





## **Bayless School District Student Home Language Survey**

(To be completed for all students new to Bayless School District.)

1. Student Name	<b>^</b>						
1. Student Name	First	Middle	)		Last		
2. Grade Level:		_ 3. Date	of Birth: _		<u></u>		
			M	onth	Date	Year	•
4. Country of Bir	rth:			-			
5. Can the stude	ent speak a lan	guage other than	English?	YES	or	NO	
If yes, what lange	uage(s) are spo	oken?	<u></u>	·····			
6. Is any langua	ge other than E	nglish spoken at	home?	YES	or	NO	
If yes, what lang	uage(s) are spo	oken?		<del>,</del>	·		
7. Was English t	he first langua	ge the student lea	arned?	YES	or	NO	
8. In what langu		like to receive co		tion from s	school?		
9. On what date	did the studen	_	Month	/ Year			planta de la constitución de la
Parent/Guardi	an Informatio	<u>on</u>					
10			11. F	hone Num	ber: (	)	
First Name	Last	Name			,		
12. Do you rece	ive services as	a refugee?	YES	or NO			
13. When did yo	u arrive in the l	J.S.?/ Month	Year	_ 14.What	is the fa	amily country	of origin?
15. What is you	r relationship to	the student? (c	heck one)	·			<del>, , , , , , , , , , , , , , , , , , , </del>
☐Mother	☐ Father	Guardian	Oth	er:			
16. Parent/Guar	nowledge that the			ccurate. In		rovide effective	 instruction

Office Staff: Please file the original in student folder and forward a copy to the ELL Specialist at the appropriate grade level.



### **Bayless School District**

### **Migrant Worker Information**

(To be completed for all students new to Bayless School District.)

If you have a child aged 3 to 21, and you have moved from one school district to another school district within the past three school years, your child may be eligible for a program of supplemental services. Please answer the following to help us determine if your child is eligible:

	· · ·				
Before the move, was either parent or guardian or the child or the child's spouse employed in some form of temporary or seasonal agricultural work, such as:  - Planting or harvesting crops (vegetables, fruits, cotton, etc.)  - Transporting farm products to market  - Feeding poultry, gathering eggs, working hatcheries, processing poultry, beef, hogs, fruit, vegetables, etc.  - Working on a dairy farm or catfish farm  - Cutting firewood or logs to sell	Was the move from one school district to another made for the purpose of looking for or obtaining some form of temporary or seasonal agricultural work, such as:  - Planting or harvesting crops (vegetables, fruits, cotton, etc.)  - Transporting farm products to market  - Feeding poultry, gathering eggs, working hatcheries, processing poultry, beef, hogs, fruit, vegetables, etc.  - Working on a dairy farm or catfish farm  - Cutting firewood or logs to sell				
Is either parent (or guardian) of the child or the child's spouse now employed in some form of temporary or seasonal agricultural work such as:  - Planting or harvesting crops (vegetables, fruits, cotton, etc.)  - Transporting farm products to market  - Feeding poultry, gathering eggs, working hatcheries, processing poultry, beef, hogs, fruit, vegetables, etc.  - Working on a dairy farm or catfish farm  - Cutting firewood or logs to sell	Have you moved away with your child, or has your child moved away, only during the summer months to engage in crop harvesting or other seasonal agricultural work?				
☐ Yes ☐ No	☐ Yes ☐ No				
and the second s	Employees and an employees and an employees and an employees and an employees and also and a construction of the employees and an employees an employees and an employees and an employees an employees and an employees an employees an employees an employees an employees and an employee and an employees and an emp				



#### CONSENT FOR PHOTO/VIDEO RELEASE

The undersigned indicates by his/her signature on this statement that permission is granted to the Bayless School District to use his or her student's photograph/video image in the publicity of the District. The publicity may include, but is not limited to, newsletters, brochures, advertising, posters, stories by the news media, videotapes and Bayless' website.

STUDENT'S NAME			
SCHOOL:			
	***	***	
	☐ Yes	□ No	
PARENT/GUARDIAN	NAME:		
SIGNATURE:(Parent or Guardian)			
HOME ADDRESS:		<del></del>	
DATE:			

#### TECHNOLOGY USAGE

The Bayless School District's technology exists for the purpose of enhancing the educational opportunities and achievement of district students. Research shows that students who have access to technology improve achievement. In addition, technology assists with the professional enrichment of the staff and increases engagement of students' families and other patrons of the district, all of which positively impact student achievement. The district will periodically conduct a technology census to ensure that instructional resources and equipment that support and extend the curriculum are readily available to teachers and students.

The purpose of this policy is to facilitate access to district technology and to create a safe environment in which to use that technology. Because technology changes rapidly and employees and students need immediate guidance, the superintendent or designee is directed to create procedures to implement this policy and to regularly review those procedures to ensure they are current.

#### Definitions

For the purposes of this policy and related procedures and forms, the following terms are defined:

Technology Resources – Technologies, devices and services used to access, process, store or communicate information. This definition includes, but is not limited to: computers; modems; printers; scanners; fax machines and transmissions; telephonic equipment; mobile phones; audiovisual equipment; Internet; electronic mail (e-mail); electronic communications devices and services, including wireless access; multi-media resources; hardware; and software. Technology resources may include technologies, devices and services provided to the district by a third party.

*User* – Any person who is permitted by the district to utilize any portion of the district's technology resources including, but not limited to, students, employees, School Board members and agents of the school district.

User Identification (ID) - Any identifier that would allow a user access to the district's technology resources or to any program including, but not limited to, e-mail and Internet access.

Password – A unique word, phrase or combination of alphabetic, numeric and non-alphanumeric characters used to authenticate a user ID as belonging to a user.

#### **Authorized Users**

The district's technology resources may be used by authorized students, employees, School Board members and other persons approved by the superintendent or designee, such as consultants, legal

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counsel and independent contractors. All users must agree to follow the district's policies and procedures and sign or electronically consent to the district's User Agreement prior to accessing or using district technology resources, unless excused by the superintendent or designee.

Use of the district's technology resources is a privilege, not a right. No potential user will be given an ID, password or other access to district technology if he or she is considered a security risk by the superintendent or designee.

#### **User Privacy**

A user does not have a legal expectation of privacy in the user's electronic communications or other activities involving the district's technology resources including, but not limited to, voice mail, telecommunications, e-mail and access to the Internet or network drives. By using the district's network and technology resources, all users are consenting to having their electronic communications and all other use monitored by the district. A user ID with e-mail access will only be provided to authorized users on condition that the user consents to interception of or access to all communications accessed, sent, received or stored using district technology.

Electronic communications, downloaded material and all data stored on the district's technology resources, including files deleted from a user's account, may be intercepted, accessed, monitored or searched by district administrators or their designees at any time in the regular course of business. Such access may include, but is not limited to, verifying that users are complying with district policies and rules and investigating potential misconduct. Any such search, access or interception shall comply with all applicable laws. Users are required to return district technology resources to the district upon demand including, but not limited to, mobile phones, laptops and tablets.

#### **Technology Administration**

The Board directs the superintendent or designee to assign trained personnel to maintain the district's technology in a manner that will protect the district from liability and will protect confidential student and employee information retained on or accessible through district technology resources.

Administrators of district technology resources may suspend access to and/or availability of the district's technology resources to diagnose and investigate network problems or potential violations of the law or district policies and procedures. All district technology resources are considered district property. The district may remove, change or exchange hardware or other technology between buildings, classrooms or users at any time without prior notice. Authorized district personnel may install or remove programs or information, install equipment, upgrade any system or enter any system at any time.

#### Content Filtering and Monitoring

The district will monitor the online activities of minors and operate a technology protection measure ("content filter") on the network and all district technology with Internet access, as required by law. In accordance with law, the content filter will be used to protect against access to visual depictions that are obscene or harmful to minors or are child pornography. Content filters are not foolproof, and the district cannot guarantee that users will never be able to access offensive materials using district equipment. Evading or disabling, or attempting to evade or disable, a content filter installed by the district is prohibited.

The superintendent, designee or the district's technology administrator may fully or partially disable the district's content filter to enable access for an adult for bona fide research or other lawful purposes. In making decisions to fully or partially disable the district's content filter, the administrator shall consider whether the use will serve a legitimate educational purpose or otherwise benefit the district.

#### Online Safety, Security and Confidentiality

In addition to the use of a content filter, the district will take measures to prevent minors from using district technology to access inappropriate matter or materials harmful to minors on the Internet. Such measures shall include, but are not limited to, supervising and monitoring student technology use, careful planning when using technology in the curriculum, and instruction on appropriate materials. The superintendent, designee and/or the district's technology administrator will develop procedures to provide users guidance on which materials and uses are inappropriate, including network etiquette guidelines.

All minor students will be instructed on safety and security issues, including instruction on the dangers of sharing personal information about themselves or others when using e-mail, social media, chat rooms or other forms of direct electronic communication. Instruction will also address cyberbullying awareness and response and appropriate online behavior, including interacting with other individuals on social networking websites and in chat rooms.

This instruction will occur in the district's computer courses, courses in which students are introduced to the computer and the Internet, or courses that use the Internet in instruction. Students are required to follow all district rules when using district technology resources and are prohibited from sharing personal information online unless authorized by the district.

All district employees must abide by state and federal law and Board policies and procedures when using district technology resources to communicate information about personally identifiable students to prevent unlawful disclosure of student information or records.

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All users are prohibited from using district technology to gain unauthorized access to a technology system or information; connect to other systems in evasion of the physical limitations of the remote system; copy district files without authorization; interfere with the ability of others to utilize technology; secure a higher level of privilege without authorization; introduce computer viruses, hacking tools, or other disruptive/destructive programs onto district technology; or evade or disable a content filter.

#### Closed Forum

The district's technology resources are not a public forum for expression of any kind and are to be considered a closed forum to the extent allowed by law. The district's webpage will provide information about the school district, but will not be used as an open forum.

All expressive activities involving district technology resources that students, parents/guardians and members of the public might reasonably perceive to bear the authorization of the district and that are designed to impart particular knowledge or skills to student participants and audiences are considered curricular publications. All curricular publications are subject to reasonable prior restraint, editing and deletion on behalf of the school district for legitimate pedagogical reasons. All other expressive activities involving the district's technology are subject to reasonable prior restraint and subject matter restrictions as allowed by law and Board policies.

#### Records Retention

Trained personnel shall establish a retention schedule for the regular archiving or deletion of data stored on district technology resources. The retention schedule must comply with the *Public School District Records Retention Manual* as well as the *General Records Retention Manual* published by the Missouri Secretary of State. In the case of pending or threatened litigation, the district's attorney will issue a litigation hold directive to the superintendent or designee. The litigation hold directive will override any records retention schedule that may have otherwise called for the transfer, disposal or destruction of relevant documents until the hold has been lifted by the district's attorney. E-mail and other technology accounts of separated employees that have been placed on a litigation hold will be maintained by the district's information technology department until the hold is released. No employee who has been so notified of a litigation hold may alter or delete any electronic record that falls within the scope of the hold. Violation of the hold may subject the individual to disciplinary actions, up to and including termination of employment, as well as personal liability for civil and/or criminal sanctions by the courts or law enforcement agencies.

#### Violations of Technology Usage Policies and Procedures

Use of technology resources in a disruptive, inappropriate or illegal manner impairs the district's mission, squanders resources and shall not be tolerated. Therefore, a consistently high level of

personal responsibility is expected of all users granted access to the district's technology resources. Any violation of district policies or procedures regarding technology usage may result in temporary, long-term or permanent suspension of user privileges. User privileges may be suspended pending investigation into the use of the district's technology resources.

Employees may be disciplined or terminated, and students suspended or expelled, for violating the district's technology policies and procedures. Any attempted violation of the district's technology policies or procedures, regardless of the success or failure of the attempt, may result in the same discipline or suspension of privileges as that of an actual violation. The district will cooperate with law enforcement in investigating any unlawful use of the district's technology resources.

#### **Damages**

All damages incurred by the district due to a user's intentional or negligent misuse of the district's technology resources, including loss of property and staff time, will be charged to the user. District administrators have the authority to sign any criminal complaint regarding damage to district technology.

#### No Warranty/No Endorsement

The district makes no warranties of any kind, whether expressed or implied, for the services, products or access it provides. The district's technology resources are available on an "as is, as available" basis.

The district is not responsible for loss of data, delays, nondeliveries, misdeliveries or service interruptions. The district does not endorse the content nor guarantee the accuracy or quality of information obtained using the district's technology resources.

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Note: The reader is encouraged to check the index located at the beginning of this section for other pertinent policies and to review administrative procedures and/or forms for related information.

Adopted:

08/20/1997

Revised:

12/18/2002; 04/16/2008; 05/16/2012; 06/26/2012

Cross Refs:

AC, Prohibition against Discrimination, Harassment and Retaliation

GBCC, Staff Cell Phone Use

			: ,

FILE: EHB-AF1



#### BAYLESS SCHOOL DISTRICT TECHNOLOGY USAGE

(Parent/Guardian Technology Agreement)

I have read the Bayless School District Technology Usage policy and procedure. I understand that violation of these provisions may result in disciplinary action taken against my child including, but not limited to, suspension or revocation of my child's access to district technology and suspension or expulsion from school.

I understand that my child's use of the district's technology resources is not private and that the school district may monitor my child's electronic communications and all other use of district technology resources. I consent to district interception of or access to all of my child's electronic communications using district technology resources as well as downloaded material and all data stored on the district's technology resources (including deleted files) pursuant to state and federal law, even if the district's technology resources are accessed remotely.

I agree to be responsible for any unauthorized costs arising from use of the district's technology resources by my child. I agree to be responsible for any damages caused by my child's misuse of district technology.

I understand that this form will be effective for the duration of my child's attendance in the district unless revoked or changed by the district or me.

	☐ Yes	□ No	
•			
Name of Student:	· :		
Signature of Parent/Guardian			Date

FILE: EHB-AF2



#### BAYLESS SCHOOL DISTRICT TECHNOLOGY USAGE

(Student User Agreement)

I have read the Bayless School District Technology Usage policy and procedure and agree to abide by their provisions. I understand that violation of these provisions may result in disciplinary action taken against me including, but not limited to, suspension or revocation of my access to district technology and suspension or expulsion from school.

I understand that my use of the district's technology resources is not private and that the school district may monitor my electronic communications and all other use of district technology resources. I consent to district interception of or access to all of my electronic communications using district technology resources as well as downloaded material and all data I store on the district's technology resources, including deleted files, pursuant to state and federal law, even if the district's technology resources are accessed remotely. I understand that this form will be effective for the duration of my attendance in the district unless revoked or changed by the district or me.

Signature of Student		Date
Name of School:		



#### BAYLESS SCHOOL DISTRICT CONFIDENTIAL MEDICAL HISTORY

2017-2018 Student Name	Date of Birth	Grade
Do you have health insurance? Yes No		
If yes, what is the name of your health insurance company?	)	
Last physical exam within one year? Yes No Last dental exam within one year? Yes No	-	
*IF YOU HAVE A COPY OF A CURRENT F	PHYSICAL, PLEASE GIVE	IT TO THE NURSE.*
Physician:	Phone:	
Dentist:	Phone:	
Please check any current HEALTH CONCERNS your ch		
Allergies  Food - Milk - Yes No Peanut - Yes No Other Insect/animal Latex Medicine Environment Autism/Asperger's ADHD/ADD Mental Illness BiPolar OCD ODD Depression PTSS Anxiety Tourette's Eating/Nutrition Problems Asthma  If any are checked, please explain:	Headaches/Mig Seizures/Epilep Blood Disorder: Liver Disease Kidney/Bladder Heart Disease: Diabetes: Type Scoliosis Positive Lead L Menstrual Prob Tuberculosis Other (please de	r Disease Restrictions? Yes No e 1 Type 2 evel lems escribe)
Does your child take any medicine on a scheduled basis? Yo	es No	
If yes, please list the medication and why it is given:		
Please list any serious illness, operation, injury or handicap	your child has had a history	of:
EMERGENCY INFORMATION: In a medical emergen necessary, I also authorize the hospital/physician to perform attention and ambulance are the responsibility of the parent	necessary procedures. I une	
Print Name Si	gnature	Date

#### PARENT PERMISSION FOR THE ADMINISTRATION OF OVER-THE-COUNTER MEDICATION 2017-2018

CHILD'S NAME	
ALLERGIES	
SCHOOL	GRADE
the school nurse associated with prescription standing order medi	of the above named child, I give permission for the Bayless School District to give non- lections to my child as needed (except for any ll be effective for the 2017-2018 school year only.
PARENT'S NAME	
(please print)	
PARENT SIGNATURE	
DATE SIGNED	



# BAYLESS SCHOOL DISTRICT PARENTS PERMISSION FOR THE ADMINISTRATION OF OVER-THE-COUNTER MEDICATION

Under the direction of Dr. David Campbell of the Institute for Research and Education in Family Medicine, the health team of Bayless School District is covered to give the following medications.

Listed below are nonprescription medications that the nurses can give to students only with written parent permission. We hope that using these medications, as needed, will reduce both absenteeism and student discomfort while in school. If a student needs routine medications, other arrangements should be made. Medications will be given in age/weight appropriate doses. You will be informed if nonprescription medications are given to your child.

Those medications in bold print are readily available in the school health rooms. All other medications listed will need to be supplied by the parent.

- Acetaminophen (Tylenol) for headaches
- Ibuprofen (Advil, Motrin) for muscle aches and pains, cramps, sinus pain
- Maalox (or comparable nonprescription antacid) in liquid or tablet form for upset stomach
- Natural tears (or any saline eye drops) for eye dryness and/or itching
- Calamine or Caladryl lotion (or generic) for itchy rash (not to be applied around the eyes)
- Topical antibiotic ointment for minor cuts and scrapes
- Benzocaine Sting Wipes for insect bites and stings
- Topical Hydrocortisone Cream for minor skin irritations and rashes (not to be used on the face)
- Benadryl (Diphenhydramine HCL) tablets or syrup for allergy symptoms
- Loratadine (Claritin) for allergies and sinus

The following medications may be used, but will not be supplied by the school district.

- Pseudoephedrine (Sudafed) for sinus congestion
- Visine Allergy Eye Drops for itchy eyes
- Cough Syrup (non-alcohol based, such as Robitussin) for dry cough
- Oragel (or generic equivalent) for temporary relief of mild toothache

Please fill out the attached form giving permission for these medications to be administered. It will become part of your child's health file. If you do not want a certain medication given to your child, cross out the name of the medicine on the list above. No nonprescription medications will be given to students whose parents do not complete and return this form.



#### Notes from the Bayless School Nurse:

#### Guidelines for when to keep your child home from school:

It is sometimes difficult to decide when and how long to keep an ill child home from school. Often the way a child looks and acts can make the decision an obvious one. Keeping him/her home may protect them from further infection and avoid spreading the illness to others. The following guidelines should be considered when making your decision:

Common Cold-Irritated throat, watery discharge from nose and eyes, nasal stuffiness, headache, sneezing, cough, and general body discomfort or some of the things you may notice with a cold. They are often annoying/irritating, but should not deter your child from attending school. Your child should stay home only if the symptoms are serious enough to interfere with your child's ability to learn. Medical care should be obtained if symptoms persist beyond 7-10 days, fever develops, or nasal drainage becomes yellow or green. Consider keeping cold remedies in the health room for your child, to help with the sinus symptoms.

**Fever-** If your child's temperature is 100 degrees or higher, he/she should remain home until fever free for a full 24 hours without any fever-reducing medication, such as Tylenol or Ibuprofen. Remember, fever is a symptom indicating the presence of an illness.

**Flu-**Abrupt onset of fever, chills, headache, extreme fatigue, and sore muscles. Runny nose, sore throat, and cough are common as well. Your child should remain home from school until symptoms are improved and no fever for 24 hours.

Strep Throat and Scarlet Fever- Strep Throat begins with sore and red throat, tender swollen glands of the neck, possible pus spots on the back of the throat and fever. Stomach discomfort, nausea, and vomiting may occur also. Scarlet Fever may show all the previous symptoms, along with a strawberry appearance to the tongue and rash of the skin. Your child should remain home from school until receiving a full 24 hours of antibiotic therapy and until no fever or vomiting for 24hours. Many physicians will advise rest at home 1-2 days after strep infection also.

Vomiting and Diarrhea (Intestinal Viral Infections)- Stomachache, cramping, nausea, vomiting, and/or diarrhea, possible fever, headache, and body aches may occur. Your child should remain at home until without vomiting, diarrhea, and fever for a full 24hours without any fever-reducing medication, such as Tylenol or Ibuprofen. Please make sure your child has eaten and had no further vomiting or diarrhea, and has not had any symptoms during the night, before sending them to school the following day.

Pinkeye- Redness and swelling of the membranes of the eye with burning or itching, matter coming from one or both eyes, crusted eyelids (especially on waking in am), not to be confused with seasonal allergy symptoms. Extremely contagious, good handwashing practices and not touching the face are a must. See a physician, as your child needs to receive antibiotic therapy for a full 24hours and discharge has stopped, before returning to school.

Skin rashes- Rashes of unknown origin, especially those that are moist or draining should be evaluated by a physician before return to school.

Consult your physician for the most accurate diagnosis and treatment. Do not hesitate to call your child's school nurse with any further questions you may have.

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#### SCHOOL YEAR: 2017-2018

### BAYLESS STUDENT TRANSPORTATION REQUEST FORM

# ONLY ONE FORM PER FAMILY REQUIRED (PLEASE PRINT)

STUDENT NAME (LAST, FIRST)	GRADE LEVEL 2017-18			
·	<del></del>			
	· · · · · · · · · · · · · · · · · · ·			
	·			
HOME ADDRESS	·			
CONTACT # OF PARENT/GUARDIAN				
NO, I DO NOT WISH TO HAVE TRANSPO	RTATION SERVICES			
YES, MY CHILD(REN) WILL RIDE THE BU	JS. oth			
If not both, please describe transportation arrangements:  Car Rider  After School Child Care	(list organization)			
☐ Walker ☐ Sibling Pick-Up				
IF REQUESTING STUDENT BE DROPPED BY THE BUS AT THAN HOME, PLEASE COMPLETE THE FOLLOWING:	ANOTHER DISTRICT ADDRESS OTHER			
NAME OF SITTER:				
ADDRESS OF SITTER: PHONE NUMBER OF SITTER:				
Date: Parent's Name (PRINT)				
Completed by:				
TRANSPORTATION OFFICE USE ONLY:				
AMBUS # BUS STOP# PMBUS#	BUS STOP#			
AMPCKPTPMPCKPT _	·			



### **BAYLESS SCHOOL DISTRICT Parents as Teachers Program**

PLEASE PRINT)	Date:
meetings, screenings to assess your child's over esource network that links your family to othe children from birth to age five. Bayless School	vive: personal visits from a parent educator, parent group rall development as well as health, hearing and vision, and a er community services. Parents as Teachers serves families with District shares the Parents as Teachers Program with Hancock out enrolling in this FREE and voluntary program, please school.
Please list below any children in your family wh	no meet those requirements.
Name:	DOB:
Name:	DOB:
Name:	DOB:
Parent Contact information is required:	
Parents Name:	
Address:	
Home Phone:	Cell Phone:

Please complete and return this form to school. Someone will be in touch with you soon. Thank you.



#### **Bayless School District Community Advisory Committees**

Interested community members are invited and encouraged to participate in one of the district's Community Advisory Committees. They are Facilities (regarding the school district's safety, security, and facility concerns, Finance (regarding the school district's financial and fiscal concerns), and Student Achievement (regarding the district's student achievement progress). The Board of Education also has an Audit Committee (regarding the school district's financial reporting processes, internal controls, and financial statements) and Wellness Committee (regarding student wellness, including physical fitness and nutrition). These committees meet four times a year. Please indicate if you would be interested in participating in any of the following committees and someone will be in contact with you.

	Audit Com	mittee	Facilitie	es Committee		Finance Committee	
		Student Achiev	vement Comn	nittee [	☐ Wellness Co	ommittee	
Student's Name	e:						
	(Please Prin						
Phone:						Date:	
Email:							



### A+ Program Citizenship Agreement

# Printed Student Name Anticipated Graduation Year

Students participating in the A+ Schools Program must maintain a record of good citizenship as defined by law and stated in the Bayless High School Code of Conduct found in the Student Handbook. Certification of good citizenship will be based on the official discipline record maintained in the administrative offices. All four years are a part of the citizenship record. The A+ Coordinator will verify good citizenship each semester. Any student who does not meet the citizenship requirement will not be eligible for the A+ financial incentive.

#### Disqualification

The student and parent will be notified in writing if disqualification occurs.

- Possession, use, sale or transfer of any controlled substances as defined by law.
- Commit an offense involving drugs, alcohol, weapons, or other violent acts as described in the Student Handbook
- One suspension exceeding 10 days

#### Citizenship Review

The student and parent will be notified in writing if a Citizenship Review occurs. Appeal, probation or removal from A+ could occur as a result.

- Accumulates more than 10 PMD's during high school
- Accumulates more than 4 Thinkery assignments during high school

#### **Disciplinary Appeals Process**

The following process may be used by students/parents to appeal a disciplinary decision that may affect the student's A+ qualification:

- Students/parents will have 30 days from the date of notification of disqualification to appeal a decision that is made dealing with discipline or probation. Anyone making an appeal should use the A+ Appeal of Citizenship Form available from the A+ Schools Coordinator.
- The basis of the appeal and documentation must be submitted in writing through the office of the A+ Schools Coordinator.
- Upon receiving a written appeal, the A+ Schools Coordinator will convene the A+ Citizenship Appeals Committee composed of the following:
  - o The A+ Student's Guidance Counselor
  - School Principal and Assistant Principals
  - o The Advisory teacher of the student
  - Teacher who have taught the students
  - o A+ Coordinator

The A+ Coordinator will facilitate the A+ Citizenship Review Committee. After the A+ Citizenship Review Committee reaches a decision, the parents will be notified in writing.

All A+ Schools participants must sign and return this acknowledgement of the A+ Schools Program Citizenship Guidelines to the A+ Coordinator.

We have received studied and understand the A+ Schools Program Citizenship Guidelines.

me nave received, stadied, and anderstand me 11.	Schools 1 rogium Cinzensinp Guiaci	· · · · ·

Student Signatur	e	Date	
Parent Signature		Date	

# Bayless High School A+ Program Participation Agreement



Printed Student Name	Anticipated Graduation Year			

#### I wish to participate in the A+ Schools Program at Bayless High School.

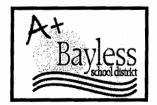
Provided state funds are available and Bayless High School maintains designation as an A+ School prior to my graduation, I will receive reimbursement for the college expenses determined by the Missouri General Assembly while attending a Missouri public community college or public career-technical school on a full-time basis. This reimbursement will be for the unpaid balance of tuition and general fees after federal post- secondary financial assistance funds (that do not require repayment) have been applied. This is on the condition that I meet the following requirements:

- 1. Attend Bayless High School or an A+ designated high school for three consecutive years prior to high school graduation.
- 2. Graduate from high school with a grade point average of 2.5 or higher on an unweighted, unrounded 4.0 scale.
- 3. Have at least a ninety-five percent (95%) attendance record for grades 9-12.
- 4. Graduate with fifty (50) documented hours of unpaid tutoring in approved settings.
- 5. Maintain a record of good citizenship and avoid the unlawful use of drugs and/or alcohol.
- 6. Achieve a qualifying math assessment score.
- 7. Make a good faith effort to secure federal post-secondary student financial assistance funds during the last semester of the senior year so as to obtain the A+ financial incentive.

To maintain eligibility after high school graduation, I understand that I must meet the following requirements:

- 1. Enroll and attend on a full-time basis a Missouri public community college or public career-technical school.
- 2. Maintain a grade point average of 2.5 or higher on a 4.0 scale.

Printed Name	Signature	Date
Student:		
Parent:		
A+ Coordinator		



The financial incentives of the A+ Schools Program are dependent upon Bayless High School's designation as an A+ School and state appropriations from the Missouri General Assembly. They are not the funding responsibility of the Bayless School District. 6/13/2016