

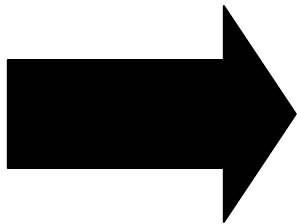
# From the Principal's Office

Often, our phone lines are busy handling calls that could easily be facilitated with your help.  
Suggestions to relieve the congestion on school office phones:

1. Photocopy your child's schedule so you know where they are each period of the day.
2. Know the name of your child's homeroom teacher.
3. Photocopy the teacher phone extension and email address page from the Parent Handbook to keep handy at work, near the phone at home or in your car.
4. Make a copy of the monthly school calendar to refer to at work as well as at home. After school activities are listed on the monthly calendar. Weekly morning announcements and other helpful information are on the District web site daily.
5. Consult your Parent Handbook for instructions regarding what to do in the event of emergency closings.
6. Consult your Parent Handbook for instructions regarding the process when it is necessary to remove your child from school early. **DO NOT CALL THE OFFICE TO HAVE YOUR CHILD EXCUSED.**
7. Messages for you child can be left on an emergency basis only. Let your child know before leaving for school who will pick them up, where they should go after school or what they should do if you are not there at dismissal time. Knowing what to do in advance of a situation is always less confusing for a child. Although it is disruptive to the education process in the classroom, if you must speak to you child in a non-emergency situation, dial your child's homeroom teacher's extension and leave a voicemail to be delivered at the teacher's convenience. This may not be until the end of the day.
8. If your child forgets a lunch, folder, gym shoes, water bottle, etc., and you drop it off at school during the day, the secretaries will NOT interrupt class to call your child down to the office. If your child is expecting an item, he/she should go to the office at the appropriate time to retrieve the item (i.e. right before lunch if a lunch is dropped off). Homework, library books, etc. will be placed in the teacher's mailbox and picked up later in the day.
8. Be sure your child always knows how to contact you.
9. The office cannot handle the volume of calls at the end of the day to page your child. If you are outside the building waiting for your child to exit, please come into the building to locate your student.

We appreciate your cooperation in following policies and procedures.

Monthly  
calendar and  
issues of  
SEGways are  
now on the  
website.



Improvements have  
been made to link  
you to your  
child's teachers  
and curriculum!  
Please visit the  
District 95  
website:

The Parent  
Handbook can  
be found on  
the website.  
Click on the  
photo of S.E.  
Gross School -  
then the  
handbook tab.

June 2011

Dear Parent or Guardian,

The S.E. Gross Middle School staff and administration would like to welcome you to another great school year! We are looking forward to the first day of school, Wednesday, August 24, 2011. For our parents' convenience, we will collect registration forms and fees by mail. Please refer to the registration form inside this packet. This form lists the specific items, which must be completed and returned to the office by July 15, 2011. You will need to add two stamps for return postage. There is a fee incentive this year for those who pay student fees by the due date. If you need to discuss a fee payment plan, we encourage you to call the office as soon as you receive this packet. *Fee waiver forms for those families meeting Federal guidelines are available in the school office and must meet the same July 15<sup>th</sup> deadline.*

Elective classes and the eligible bus students will be posted on the Lincoln Ave. windows on Friday, August 14, 2011. **ALL SCHOOL FEES MUST BE PAID TO HAVE ELECTIVE CLASSES LISTED OR YOU MUST MAKE A FEE PAYMENT PLAN WITH THE OFFICE.**

The first day of school is Wednesday, August 24<sup>th</sup>. This will be a HALF day of attendance for all students. School begins at 8:05 and ends at 11:05.

Bus service will begin on Thursday, Aug. 25, 2011. Bus transportation is provided for students who registered and paid bus fees at Brook Park earlier this year. Your bus registration must be paid by July 15<sup>th</sup> or your child will be dropped from the bus list. If you did not register for the bus Before June 1<sup>st</sup>, you will need to do so at S.E. Gross Middle School before July 15<sup>th</sup>.

Several important items will be passed out on the first day of school. Please make sure you check all the information that is sent home with your child. Parent Handbooks will be passed out at the beginning of the school year. We ask that you take the time to read over the handbook and familiarize yourself and your child with the policies and practices of S.E. Gross Middle School.

Picture Day is scheduled for Thursday, September 8<sup>th</sup> for all grades. Graduation pictures in cap and gown will be taken later in the year. More information will be coming through your child's homeroom.

Please reserve the evening of Thursday, September 1<sup>st</sup> for S.E. Gross Middle School's Curriculum night.

We hope you have an enjoyable summer. We are looking forward to a new and exciting school year.

Sincerely,

Todd T. Fitzgerald  
Principal

**6:235 - Access to Electronic Networks****Access to Electronic Networks**

Electronic networks, including the Internet, are a part of the District's instructional program and serve to promote educational excellence by facilitating resource sharing, innovation, and communication. The Superintendent shall develop an implementation plan for this policy and appoint system administrator(s). The School District is not responsible for any information that may be lost or damaged, or become unavailable when using the network, or for any information that is retrieved or transmitted via the Internet. Furthermore, the District will not be responsible for any unauthorized charges or fees resulting from access to the Internet.

**Curriculum**

The use of the District's electronic networks shall: (1) be consistent with the curriculum adopted by the District as well as the varied instructional needs, learning styles, abilities, and developmental levels of the students, and (2) comply with the selection criteria for instructional materials and library-media center materials. Staff members may, consistent with the Superintendent's implementation plan, use the Internet throughout the curriculum. The District's electronic network is part of the curriculum and is not a public forum for general use.

**Acceptable Use**

All use of the District's electronic network must be: (1) in support of education and/or research, and be in furtherance of the goals stated herein, or (2) for a legitimate school business purpose. Use is a privilege, not a right. Students and staff members have no expectation of privacy in any material that is stored, transmitted, or received via the District's electronic network or District computers. General rules for behavior and communications apply when using electronic networks. The District's *Authorization for Electronic Network Access* contains the appropriate uses, ethics, and protocol. Electronic communications and downloaded material, including files deleted from a user's account but not erased, may be monitored or read by school officials.

**Internet Safety** Each District computer with Internet access shall have a filtering device that blocks entry to visual depictions that are:

(1) obscene, (2) pornographic, or (3) harmful or inappropriate for students, as defined by federal law and as determined by the Superintendent or designee. The Superintendent or designee shall enforce the use of such filtering devices. An administrator, supervisor, or other authorized person may disable the filtering device for bona fide research or other lawful purpose, provided the person receives prior permission from the Superintendent or system administrator.

The Superintendent or designee shall include measures in this policy's implementation plan to address the following:

1. Ensure staff supervision of student access to online electronic networks,
2. Restrict student access to inappropriate matter as well as restricting access to harmful materials,
3. Ensure student and staff privacy, safety, and security when using electronic communications,
4. Restrict unauthorized access, including "hacking" and other unlawful activities, and
5. Restrict unauthorized disclosure, use, and dissemination of personal identification information, such as, names and addresses.

**Authorization for Electronic Network Access** Each staff member must sign the District's *Authorization for Electronic Network Access* as a condition for using the District's electronic network. Each student and his or her parent(s)/guardian(s) must sign the *Authorization* before being

granted unsupervised use. All users of the District's computers to access the Internet shall maintain the confidentiality of student records. Reasonable measures to protect against unreasonable access shall be taken before confidential student information is loaded onto the network. The failure of any student or staff member to follow the terms of the *Authorization for Electronic Network Access*, or

this policy, will result in the loss of privileges, disciplinary action, and/or appropriate legal action. LEGAL REF.: No Child Left Behind Act, [20 U.S.C. §6777](#). Children's Internet Protection Act, [47 U.S.C. §254\(h\) and \(l\)](#). Enhances Education Through Technology, [20 U.S.C §6751 et seq. 720 ILCS 135/0.01](#). CROSS REF.: [5:100](#) (Staff Development Program), [5:170](#) (Copyright), [6:40](#) (Curriculum

Development), [6:210](#) (Instructional

Materials), [6:230](#) (Library Media Program), [6:260](#) (Complaints About Curriculum, Instructional Materials, and Programs), [7:130](#) (Student Rights and Responsibilities), [7:190](#) (Student Discipline), [7:310](#) (Publications)

**ADOPTED: DECEMBER 13, 2007**

**S.E. GROSS MIDDLE SCHOOL  
REGISTRATION FORM 2011-2012  
Federal ID# CR36-6004317**

Family Last Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Please print each child's information on a separate line.

- |    |       |           |           |       |                          |
|----|-------|-----------|-----------|-------|--------------------------|
| 1. | _____ | _____     | _____     | _____ | _____                    |
|    | Name  | Soc. Sec# | Birthdate | Grade | Medicaid # if applicable |
| 2. | _____ | _____     | _____     | _____ | _____                    |
|    | Name  | Soc. Sec# | Birthdate | Grade | Medicaid # if applicable |
| 3. | _____ | _____     | _____     | _____ | _____                    |
|    | Name  | Soc. Sec# | Birthdate | Grade | Medicaid # if applicable |

Material Fee (Grades 6-8) \$ 100.00 (On or before July 15, 2011)

Material Fee (Grades 6-8) \$ 110.00 (After July 15, 2011)  
(Includes textbook rental, lab tech fee, assignment notebook and student ID)

PE uniform (separate order sheet enclosed) \$15.00

TOTAL AMOUNT ENCLOSED: \_\_\_\_\_

\*Applications for fee waivers are available in the school office. These MUST be completed and returned by July 15, 2011.

Parent/Guardian signature \_\_\_\_\_

Please MAIL back all completed forms (listed below) and payment for registration in the enclosed envelope to:

S.E. Gross Middle School - Registration  
3524 Maple Avenue  
Brookfield, Il 60513

Make your check/money order payable to Board of Education, District 95. Print your child's name on your check/money order. All registration materials must be returned no later than July 15, 2011.

**DELAY IN PAYMENT BEYOND THE JULY 15<sup>TH</sup> DUE DATE MAY RESULT IN BELATED DELIVERY OF SUPPLIES TO YOUR CHILD(REN). THIS WILL INCLUDE CLASSROOM POSTING ON AUGUST 15, HOT LUNCHES, ASSIGNMENT NOTEBOOK, ETC.**

Required forms:

- |                                                  |                                     |
|--------------------------------------------------|-------------------------------------|
| _____ Fees check                                 | _____ Fraudulent Residency Form     |
| _____ 2 Part Registration form (DO NOT SEPARATE) | _____ Updated Release Requests Form |
| _____ Emergency Information Form                 |                                     |

.....  
DO NOT WRITE IN THIS AREA – FOR OFFICE USE ONLY

Check No. \_\_\_\_\_ Total Fees Paid \_\_\_\_\_

Material Fee \_\_\_\_\_ PE Uniform \_\_\_\_\_

THE PARENT COPY WILL BE RETURNED TO YOU AFTER PROCESSING THE 1<sup>ST</sup> WEEK OF SCHOOL.

Office copy: White

Parent/Guardian copy: Yellow

**BOARD OF EDUCATION**  
**BROOKFIELD-LAGRANGE PARK SCHOOL DISTRICT #95**  
**RELEASE REQUESTS**  
**(for new students only)**

**12/9/2010**

**1. Directory Information**

Parents give consent for District 95 to release student information, including name, address, grade, phone, parent's name to the PTO/BPC for use in the PTO/BPC Student Directory's only.

**Yes, you may release my directory information**                      **No, you may not**                      **(circle one)**

**2. E-Mail Address – (optional)**

If you would like to list your email address along with your Directory Information – please fill in below:

---

**3. Photo-Video-Web Site Release**

**Pictures of Unnamed Students.** Students may occasionally appear in photographs and video recordings taken by school staff members, other students, or other individuals authorized by the Building Principal. The school may use these pictures, without identifying the student, in various publications, including the school yearbook, school newspaper, and school website. No consent or notice is needed or will be given before the school uses pictures of unnamed students taken while they are at school or a school-related activity.

**Pictures of Named Students.** Sometimes the school may want to identify a student in a school picture. For example, school officials want to acknowledge those students who participate in a school activity or deserve special recognition.

In order for the school to publish a picture with a student identified by name, one of the student's parents or guardians must sign the consent below. Please complete and sign this form to allow the school to publish and otherwise use photographs and video recordings, with your child identified, while he or she is enrolled in this school.

**I grant consent to the School District to identify a picture of my child, by full name and/or the school he or she attends, in any school sponsored material, publication, video recording, or website. This consent is valid for the entire time my child is enrolled in the District. I may revoke this consent at any time by notifying the Building Principal.**

**Yes, I give my consent**                      **No, I do not give my consent**                      **(circle one)**

**Pictures of Students Taken By Non-School Agencies**

While the school limits access to school buildings by outside photographers, it has no control over news media or other entities that may publish a picture of a named or unnamed student. School staff members will not, however, identify a student for an outside photographer.

LEGAL REF.: *Family Educational Rights and Privacy Act*, 20 U.S.C. Section 1232(g)

34 C.F.R. Part 99 *Illinois School Student Records Act*, 105 ILCS 10/1 *et seq.* 23 Ill. Admin. Code 375

**4. Application of Pesticides**

Do you wish to be notified at least two business days prior to any pesticide (insecticides, herbicides, rodenticides and fungicides) application in your child's school.

**I wish to be notified**                      **I do not wish to be notified**                      **(circle one)**

\_\_\_\_\_  
**Parent Guardian** (please print)

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**5. Internet Information**

Parents give consent for their student to use the Internet as an Instructional Tool. Policy/Description is included.

**Yes, my student may use the Internet**                      **No, my student may not use the internet**                      **(circle one)**

**Student Name** (please print) \_\_\_\_\_ **Student Signature** \_\_\_\_\_

**Parent Name** (please print) \_\_\_\_\_ **Parent Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

TO: 2011/12 Students and Parents  
FROM: S.E. Gross Middle School, Todd Fitzgerald, Principal  
RE: Physical Education Uniform Requirement

Dear Parents:

As a student at S.E. Gross Middle School, your child will be required to wear a P.E. uniform for daily gym class. New uniforms are available for purchase through the school, and orders are now being taken. ALL students are required to have a P.E. uniform.

The form below details the shirt and shorts cost and sizes. Please note the size chart when making your selection.

Your pre-ordered uniform will be ready for pick-up on the first day of school.

In order that we may insure availability, please return this order form with payment in your registration envelope. Orders not made at this time may be delayed beyond the first week of school, so you are urged to order in advance.

Thank you and if you have questions or concerns, please call the school at 485-0600 Ext. 8803.

Please return with your registration by July 15, 2011.

SAMPLES AVAILABLE IN S.E. GROSS SCHOOL OFFICE

S	32-34
M	36-38
L	40-42
XL	44-46

Cost of Shirt \$6.50  
Cost of Shorts \$8.50

**ADD THE COST OF YOUR UNIFORM TO THE FEE REGISTRATION SHEET**

Name \_\_\_\_\_

Shirt Size \_\_\_\_\_ Quantity \_\_\_\_\_

Short Size \_\_\_\_\_ Quantity \_\_\_\_\_

Amount Enclosed \_\_\_\_\_

\*\*\*\* FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE \*\*\*\*

CHECK #

HOMEROOM #

The students at S.E. Gross Middle School have the opportunity to participate in many extracurricular activities. These activities and clubs are designed to be educational and fun. For your information, we've listed all of the activities, their requirements, fees and season.

Please discuss this list with your child to help him/her make a decision about participation. You do not need to make a decision at this time; more information will be available the evening of our Open House. *Do not send activity money at this time.* The activity sponsor will collect fees. The maximum paid in a year will be \$180, all activities after that will be free. Soccer tryouts will be during the first week of school. Please remind your child to listen for more information during the morning announcements.

**Students may not participate in activities until all school fees have been paid.**

<u>Activity</u>	<u>Participants</u>	<u>Fee?</u>	<u>Physical</u>	<u>Tryouts</u>	<u>Offered</u>
Art Club**	Girls/Boys 6-8	\$30 session	none	lottery	fall, winter, spring
Art Crew/Musical	Girls/Boys 6-8	no	none	yes	pending musical
Basketball 7th	Girls 6-7	\$60	yes *	yes	early winter
Basketball 8th	Girls 8	\$60	yes*	yes	early winter
Basketball 7th	Boys 6-7	\$60	yes *	yes	winter
Basketball 8th	Boys 8	\$60	yes *	yes	winter
Builders Club	Girls/Boys 6-8	no	no	no	all year
Chamber Choir	Girls/Boys 6-8	\$60	none	yes	Sept. - May
Cheerleading 7th	Girls 7	\$60	yes *	yes	winter
Cheerleading 8th	Girls 8	\$60	yes *	yes	winter
Computer Club	Girls/Boys 6-8	no	none	no	all year
Cooking Club**	Girls/Boys 6-8	\$30 session	none	lottery	Sept. - Oct., Nov. - Dec. & Jan. - Mar.
Industrial Arts Club**	Girls/Boys 6-8	\$30 session	none	lottery	Oct. - Dec. & Jan. - Feb.
Intramurals	Girls 6-8	\$60	none	no	Sept. - May
Intramurals	Boys 6	\$60	none	no	Sept. - May
Intramurals	Boys 7-8	\$60	none	no	Nov. - May
Jazz Band 6-8	Girls/Boys 6-8	\$60	none	no	Sept. - May
Jazz Ensemble 6-8	Girls/Boys 6-8	\$60	none	no	Sept. - May
Math Olympiad	Girls/Boys 6-8	no	none	no	Nov. - Feb.
Nature Club	Girls/Boys 6-8	\$60	none	no	Nov. - May
National Junior Honor Society	Girls/Boys 7 & 8	no	none	invitationall year	
Newspaper	Girls/Boys 6-8	no	none	no	Oct. - May
School Play	Girls/Boys 6-8	no	none	TBA	TBA
School Spirit Club	Girls/Boys 6-8	no	none	no	all year
Science Club	Girls/Boys 6-8	\$20	none	no	Nov. - Mar.
Soccer/Co-Ed 8th	Girls/Boys 7-8	\$60	yes*	yes	fall
Soccer/Co-Ed 7th	Girls/Boys 6-7	\$60	yes *	yes	fall
Spanish Club	Girls/Boys 6-8	\$30 session	none	no	Sept. - Dec. & TBA
Speech & Drama Team	Girls/Boys 6 & 7/8	\$60	none	yes	Oct. - Mar.
Student Council	Girls/Boys 6-8	no	none	elected	all year
Track-Boys 7th & 8th	Boys 6-8	\$60	yes *	yes	spring
Track-Girls 7th & 8th	Girls 6-8	\$60	yes *	yes	spring
Volleyball 7th	Girls 6-7	\$60	yes *	yes	fall
Volleyball 8th	Girls 8	\$60	yes *	yes	fall
Yearbook	Girls/Boys 6-8	no	none	no	Sept.- May

\*Physical must have been performed within 12 months of the start of any activity listed and be on file in our Health Office **before** trying out for any sport

\*\*Additional material's fees may be added that require a high amount of consumable materials.

**FAMILY EMERGENCY INFORMATION**

BUS ROUTE \_\_\_\_\_

Family Last Name \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail(required) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

First & Last Name

Birthdate

Grade

Teacher/Room

Student lives with (PLEASE CIRCLE): Father - Mother - Guardian - Foster Parent - Step/Mother-Father

Father's Full Name \_\_\_\_\_ Mother's Full Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

***Phone number to be given to the automated message system in the event of an emergency school closing: \_\_\_\_\_***

In case of an illness, accident, etc, I hereby permit and authorize school officials to release my child to/or contact the below named individual(s).

1. \_\_\_\_\_  
Print Name Signature Phone Relationship to Child

1. \_\_\_\_\_  
Print Name Signature Phone Relationship to Child

1. \_\_\_\_\_  
Print Name Signature Phone Relationship to Child

1. \_\_\_\_\_  
Print Name Signature Phone Relationship to Child

Special Medical Needs \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

## Requirements for Enrollment

Parent/Guardian must provide:

**1. Certified Birth Certificate of student**

**2. Evidence of residence submitted (minimum of four). All documents must be current.**

In order for us to comply with the Illinois School code, we must establish legal residence. This is also done in your best interests and that of this community. Your tax dollars support our schools and are used solely to educate the students who reside in Brookfield-LaGrange Park District 95. We appreciate your cooperation and assistance in completing this form.

**Category I (one document required)**

**HOMEOWNERS:** Mortgage Papers

**RENTERS:** Current Lease agreement

**Category II (three documents required)**

Utility Bill

Driver's License or State ID

Home Insurance

Income tax return

Real Estate tax bill

Vehicle registration

Voter registration card

**Category III (required prior to 1<sup>st</sup> day of student attendance)**

Current physical examination and immunization record

Transfer form from latest school showing last day attended and grade level. Illinois State Transfer form if transferring from another Illinois public school

### In Addition

If a child has special needs, records for special placement

Custodial agreements, decrees, judgments, or other documents if applicable

District 95 Health Services

In an effort to keep your child's health record complete and current, please complete the following health questionnaire. Please return it to school with your student's registration materials. Thank you for your assistance. Mrs. Preston RN ILCSN District Nurse

Answer YES/NO and if YES, please specify details

Does your child have any special health conditions? \_\_\_\_\_

Has your child had any serious illness, injury, or operations? \_\_\_\_\_

Has your child ever lost consciousness or had a concussion? \_\_\_\_\_

Does your child have asthma? \_\_\_\_\_

Does your child have diabetes? \_\_\_\_\_

Does your child have any known allergies? \_\_\_\_\_

Is your child allergic to insect stings? \_\_\_\_\_

Does your child wear glasses or contact lenses? \_\_\_\_\_

Does your child have a known hearing loss or wear a hearing aid? \_\_\_\_\_

Does your child take any medication on a regular basis? \_\_\_\_\_

Does your child have weight issues (underweight or overweight)? \_\_\_\_\_

Is there anything else concerning your child's health that the teacher or nurse should know? \_\_\_\_\_

I/We \_\_\_\_\_, give \_\_\_\_\_ /do not give \_\_\_\_\_, our permission to the school nurse and/or health aide to share the above information with the appropriate faculty and staff of School District 95 as necessary to meet our child's health and educational needs.

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

**Fraudulent Residency**

Section 5/10-20.12b of the *Illinois School Code* requires that the Board of Education impose a nonresident tuition charge if the District determines that a nonresident student is attending the schools of the District. This tuition charge will be imposed in the case of any student who is determined a nonresident during a school year, and shall be retroactive to the first date of the student's nonresident attendance.

A person who knowingly enrolls or attempts to enroll in the District's schools a student known to be a nonresident of the District is guilty of a Class C misdemeanor. In addition, a person who knowingly or willfully presents to the District any false information regarding the residency of a student in order to attend the District's schools without the payment of nonresident tuition is also guilty of a Class C misdemeanor.

I affirm that the information given to verify residency in District 95 is correct and that I have legal custody of the registering student.

I certify that I am the parent/legal guardian of the registering student and that this child's residence has not been established solely for the purpose of attending District 95. I understand that

District 95 may contact other schools for family/student information if there are questions pertaining to residency.

This information is correct to the best of my knowledge.

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name \_\_\_\_\_

BOARD OF EDUCATION  
BROOKFIELD-LAGRANGE PARK SCHOOL DISTRICT #95

**AFFIDAVIT TO ESTABLISH BONA FIDE RESIDENTIAL STATUS**

In order for us to comply with the Illinois School code, we must establish legal residence. This is also done in your best interests and that of this community. Your tax dollars support our schools are used solely to educate the students who reside in Brookfield-LaGrange Park District 95. We appreciate your cooperation and assistance in completing this form.

Name of Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_  
(If guardian, legal guardianship papers must be presented)

Name of Student(s) \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Address of Student(s) \_\_\_\_\_  
Street Town Zip

**VERIFICATION OF RESIDENCY**

Evidence of residence submitted (minimum of four). One of those listed below on the left and three on the right. All documents must be current.

**\*REQUIRED DOCUMENTS**

**\*HOMEOWNERS:** Mortgage Papers \_\_\_\_\_

(Minimum of three in addition to required documentation. All **MUST** be current.)

OR

- \_\_\_\_\_ Utility Bill
- \_\_\_\_\_ Home insurance
- \_\_\_\_\_ Real Estate tax bill
- \_\_\_\_\_ Local Driver's License or State ID
- \_\_\_\_\_ Voter registration card
- \_\_\_\_\_ Income tax return
- \_\_\_\_\_ Vehicle registration

**\*RENTERS:**

\_\_\_\_\_ Lease or Rental Agreement  
Dated from \_\_\_\_\_ to \_\_\_\_\_

School Official Signature \_\_\_\_\_  
Date \_\_\_\_\_

BROOKFIELD-LAGRANGE PARK  
SCHOOL DISTRICT 95  
3524 MAPLE AVE.  
BROOKFIELD, IL 60513

CERTIFICATE OF RESIDENCE

NAME OF STUDENT: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Town Zip

SOCIAL SECURITY NUMBER: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Town Zip

HOME PHONE NO. \_\_\_\_\_ WORK PHONE NO. \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Town Zip

SOCIAL SECURITY NUMBER: \_\_\_\_\_

**I certify that I am the parent/guardian of the above named student and that this child's residence has not been established solely for the purpose of attending District 95. I further certify that the above information is correct to the best of my knowledge.**

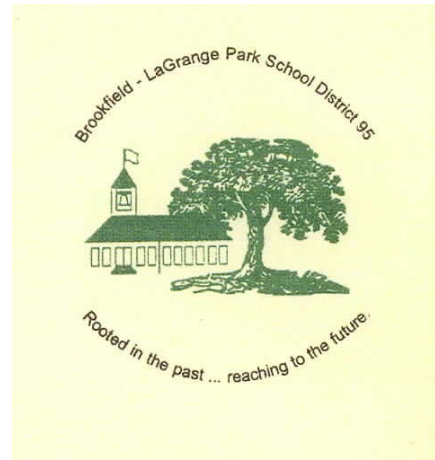
\_\_\_\_\_  
Parent(s) or Guardian(s) Signature

\_\_\_\_\_  
Date

NOTE: It is contrary to the policy of the Board of Education to admit students who do not legally reside with their parents or legal guardians within the District boundaries. The information you provide will be used by school officials to help establish the eligibility of each applicant for admission. Falsification of information on this form may result in your child being excluded from school, and may expose you to monetary liability under Illinois law for payment of tuition for such time as your child was illegally enrolled in District 95.

# Brookfield – LaGrange Park School District 95

Office of the Administration  
3524 Maple Avenue  
Brookfield, Illinois 60513  
708-485-0606 • Fax: 708-485-8066  
www.district95.org



## REQUEST TO OBTAIN STUDENT RECORDS

Date \_\_\_\_\_

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dear Records Custodians:

In accordance with the enacted Federal Family Educational Rights and Privacy Act, we are hereby submitting a signed release and respectfully request that the records of the following student be forwarded to:

**Brook Park School (K-5)**

or

**S.E. Gross Middle School (6-8)**

30th & Raymond

3524 Maple Avenue

LaGrange Park, Illinois 60526

Brookfield, IL 60513

Attn: Mrs. C. Rita, Records Custodian

Attn: Ms. M. Krzos, Records Custodian

Student \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

First day attending \_\_\_\_\_

Name of Parent or Guardian \_\_\_\_\_

Sincerely, \_\_\_\_\_  
Principal

I am the Parent/Guardian of the student named above. I authorize the release of school records, counseling and psychological reports, Special Education records, test scores, health and dental records from the above named school for educational purposes.

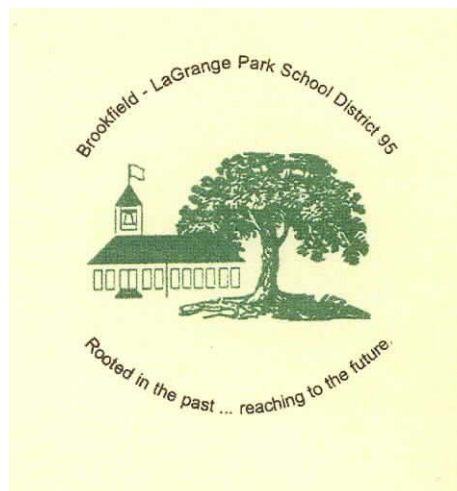
Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_

**For 7<sup>th</sup> & 8<sup>th</sup> graders please indicate whether or not the Illinois and/or US Constitution test(s) have been passed.**

# Brookfield – LaGrange Park School District 95

Office of the Administration  
3524 Maple Avenue  
Brookfield, Illinois 60513  
708-485-0606 • Fax: 708-485-8066  
www.district95.org

Dr. Mark L. Kuzniewski  
*Superintendent*



September 14, 2010

Dear Parent or Guardian:

In fall 2007, the U.S. Department of Education issued new guidance on the collection and reporting of race and ethnicity data for public school students and staff. The guidance implements new federal race and ethnicity categories that were developed to obtain a more accurate picture of the nation's diversity. The new data collection process requires respondents to answer a two-part question, indicating ethnicity first and then one or more of five races. (In the past, individuals were allowed to choose only one race or ethnicity category.)

***The Illinois State Board of Education (ISBE) will use the new categories starting with data to be reported for the 2010-2011 school year.*** This requires school districts to re-identify race and ethnicity for all students—and the identification is to be done by parents or guardians. If a student's parents or guardians decline to indicate race and/or ethnicity, observer identification by school district staff is required.

The new race and ethnicity data will be used in the same manner as previously collected data, e.g., in reporting and analyzing test results by race and ethnicity. The information will not be used to check immigration status, and the confidentiality of individual student information will be protected.

Enclosed is a sheet that provides additional information about the data collection and reporting changes. Also enclosed is the form that parents or guardians need to complete to identify race and ethnicity for their children. Please complete one form per child, and be sure to answer both parts of the two-part question. (Remember that school district staff is required to provide any missing information by observer identification.) Return the completed form to your child's school by **September 25, 2010**.

Thanks you for your cooperation in providing the needed data. Please direct any questions you may have to S.E. Gross Middle School Principal, Mr. Todd Fitzgerald.

Sincerely,

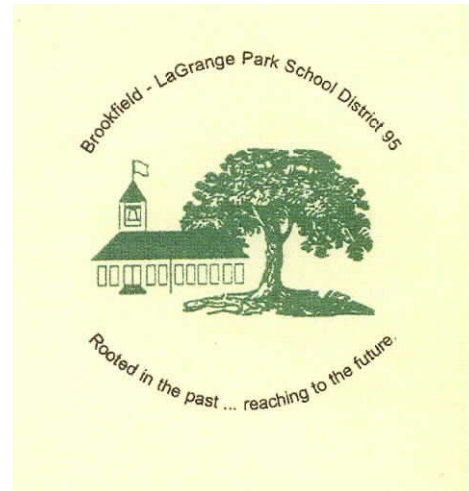
Dr. Mark L. Kuzniewski  
*Superintendent*

MLK/rc

# Brookfield – LaGrange Park School District 95

Office of the Administration  
3524 Maple Avenue  
Brookfield, Illinois 60513  
708-485-0606 • Fax: 708-485-8066  
www.district95.org

Dr. Mark L. Kuzniewski  
*Superintendent*



## Illinois State Board of Education U.S. Department of Education Race and Ethnicity Data Standards

**Student's Name :** \_\_\_\_\_

**Student's SIS ID:** \_\_\_\_\_ **(school will complete)**

**INSTRUCTIONS:** This form is to be filled out by the student's parents or guardians, and both questions must be answered. **Part A** asks about the student's ethnicity and **Part B** asks about the student's race. If you decline to respond to either question, the school district is required to provide the missing information by observer identification.

**Part A. Is this student Hispanic/Latino?** (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.) **Choose only one.**

**No, not Hispanic/Latino**

**Yes, Hispanic/Latino**

*The question above is about ethnicity, not race. No matter which answer you selected, continue and respond to the question below by marking one or more boxes to indicate what you consider this student's race to be.*

**Part B. 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.)

Note: Data collected on this form must be maintained by the school district for three years. However, when there is litigation, a claim, an audit, or another action involving this record, the original responses must be retained until the completion of the action.

# HOME LANGUAGE SURVEY

Date \_\_\_\_\_ Gender Male \_\_\_\_\_ Female \_\_\_\_\_

Student's Name \_\_\_\_\_  
First Middle Last

Student's Address \_\_\_\_\_

Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_ Country of Birth \_\_\_\_\_

Last school attended \_\_\_\_\_ Last grade completed \_\_\_\_\_

## Circle the best answer to each question.

1. Was English the first language the student learned? Yes No

2. Does the student speak a language other than English? Yes No

If yes, which language? \_\_\_\_\_

3. Which language does the student use most often when speaking to parents? English Other

4. Which language does the student use most often when speaking to friends? English Other

5. Does anyone in your home speak a first language **other than English on a daily basis?** Yes No

If yes, which language? \_\_\_\_\_

How is this person related to the child? \_\_\_\_\_

6. Has the student ever been enrolled in a Bilingual and/or ELL (English Language Learner) program? Yes No

If yes, give the name and location of the school where the student received Bilingual/ELL Instruction. \_\_\_\_\_

7. How many years has your child been a student in U.S. schools? \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_

## Operational Services

### Free and Reduced-Price Food Services

#### Notice

The Superintendent shall be responsible for implementing the District's free and reduced-price food services policy and all applicable programs.

#### Eligibility Criteria and Selection of Children

A student's eligibility for free and reduced-price food services shall be determined by the income eligibility guidelines, family-size income standards, set annually by the U.S. Department of Agriculture and distributed by the Illinois State Board of Education.

#### Notification

At the beginning of each school year, by letter, the District shall notify students and their parents/guardians of: (1) eligibility requirements for free and reduced-price food service; (2) the application process; (3) the name and telephone number of a contact person for the program; and (4) other information required by federal law. The Superintendent shall provide the same information to: (1) informational media, the local unemployment office, and any major area employers contemplating layoffs; and (2) the District's website (if applicable), all school newsletters, or students' registration materials. Parents/guardians enrolling a child in the District for the first time, any time during the school year, shall receive the eligibility information.

#### Nondiscrimination Assurance

The District shall avoid publicly identifying students receiving free or reduced-price meals and shall use methods for collecting meal payments that prevent identification of children receiving assistance.

#### Appeal

A family may appeal the District's decision to deny an application for free and reduced-price food services or to terminate such services as outlined by the U.S. Department of Agriculture in 7 C.F.R. §245.7, Determining Eligibility for Free and Reduced-Price Meals and Free Milk in Schools. The Superintendent shall establish a hearing procedure for adverse eligibility decisions and provide by mail a copy of them to the family. The District may also use these procedures to challenge a child's continued eligibility for free or reduced-price meals or milk.

During an appeal, students previously receiving food service benefits shall not have their benefits terminated. Students who were denied benefits shall not receive benefits during the appeal.

The Superintendent shall keep on file for a period of 3 years a record of any appeals made and the hearing record. The District shall also maintain accurate and complete records showing the data and method used to determine the number of eligible students served free and reduced-price food services. These records shall be maintained for 3 years.

LEGAL REF.: U.S. Dept. of Agriculture, Food and Nutrition Service, National School Lunch Program, 7 C.F.R. Part 210. U.S. Dept. of Agriculture, Food and Nutrition Service, Determining Eligibility for Free and Reduced-Price Meals and Free Milk In Schools, 7 C.F.R. Part 245. 105 ILCS 125/ et seq. and 126/. 23 Ill.Admin.Code 305.10 et seq.

ADOPTED: May 7, 2009

## Operational Services

### Waiver of Student Fees

The Superintendent will recommend to the Board of Education a schedule of fees, if any, to be charged students for the use of textbooks, consumable materials, extracurricular activities, and other school student fees. Students must also pay for the loss of or damage to school books or other school-owned materials.

Fees for textbooks, other instructional materials, and driver education are waived for students who meet the eligibility criteria for a fee waiver as described in this policy. In order that no student is denied educational services or academic credit due to the inability of parents/guardians to pay student fees, the Superintendent will recommend to the Board which additional fees, if any, the District will waive for students who meet the eligibility criteria for fee waiver. In order that no student is denied educational services or academic credit due to the inability of parents/guardians to pay fees, the following fees are also waived for students who meet the eligibility criteria for fee waiver: athletic participation fees, lock fees, towel fees, shop fees, laboratory fees, and registration fees. Students receiving a fee waiver are not exempt from charges for lost and damaged books, locks, materials, supplies, and equipment.

#### Notification

The Superintendent shall ensure that applications for fee waivers are widely available and distributed according to State law and ISBE rule and that provisions for assisting parents/guardians in completing the application are available.

#### Eligibility Criteria

A student shall be eligible for a fee waiver when the student currently lives in a household that meets the same income guidelines, with the same limits based on household size, that are used for the federal free meals program.

The Superintendent or designee will give additional consideration where one or more of the following factors are present:

- Illness in the family;
- Unusual expenses such as fire, flood, storm damage, etc.;
- Unemployment;
- Emergency situations;
- When one or more of the parents/guardians are involved in a work stoppage.

#### Verification

The Superintendent or designee shall establish a process for determining a student's eligibility for a waiver of fees in accordance with State law requirements. The Superintendent or designee may require family income verification at the time an individual applies for a fee waiver and anytime thereafter but not more often than once every 60 calendar days. The Superintendent or designee shall not use any information from this or any independent verification process to determine free or reduced-price meal eligibility.

If a student receiving a fee waiver is found to be no longer eligible during the school year, the Superintendent or designee shall notify the student's parent/guardian and charge the student a prorated amount based upon the number of school days remaining in the school year.

Determination and Appeal

Within 30 calendar days after the receipt of a waiver request, the Superintendent or designee shall mail a notice to the parent/guardian whenever a waiver request is denied. The denial notice shall include: (1) the reason for the denial, (2) the process and timelines for making an appeal, and (3) a statement that the parent/guardian may reapply for a waiver any time during the school year if circumstances change. If the denial is appealed, the District shall follow the procedures for the resolution of appeals as provided in the Illinois State Board of Education rule on waiver of fees.

LEGAL REF.: 105 ILCS 5/10-20.13, 5/10-22.25 and 5/28-19.2.  
23 Ill.Admin.Code §1.245 [may contain unenforceable provisions].

CROSS REF.: 4:130 (Free and Reduced-Price Food Services)

ADOPTED: September 9, 2010

PERSONAL DATA:

Name of Pupil \_\_\_\_\_ Sex \_\_\_\_\_  
(Last) (First) (Middle)  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Birth Certificate No. \_\_\_\_\_  
Social Security # \_\_\_\_\_ Place of Birth \_\_\_\_\_

HEALTH DATA:

Date of Last Physical Exam \_\_\_\_\_ Family Physician \_\_\_\_\_  
Address \_\_\_\_\_

SCHOOL DATA:

Date of Entry \_\_\_\_\_ From \_\_\_\_\_  
(City) (State)

OTHER SCHOOLS ATTENDED:

Name \_\_\_\_\_ Place \_\_\_\_\_ Dates \_\_\_\_\_  
Name \_\_\_\_\_ Place \_\_\_\_\_ Dates \_\_\_\_\_  
Name \_\_\_\_\_ Place \_\_\_\_\_ Dates \_\_\_\_\_

FAMILY DATA:

Father or Guardian:

Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Place of Birth \_\_\_\_\_ Place of Employment/Occupation \_\_\_\_\_  
Education \_\_\_\_\_ Business Phone \_\_\_\_\_

Mother or Guardian:

Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Place of Birth \_\_\_\_\_ Place of Employment/Occupation \_\_\_\_\_  
Education \_\_\_\_\_ Business Phone \_\_\_\_\_

Brothers and Sisters:

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Status of Parent: (Check)

- Living together  Father Deceased  Stepfather
- Living Apart  Mother Deceased  Stepmother
- Divorced  Foster Parents

Pupil lives with:

\_\_\_\_\_ (Indicate with whom)

Others living in household

\_\_\_\_\_ (Indicate Relationship)