



# Kashmere Senior High School

6900 Wileyvale, Houston Texas 77028  
Phone: 713-636-6400 – Fax: 713-636-6433

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ ID# \_\_\_\_\_

Birthdate: \_\_\_\_\_ Last School Attended: \_\_\_\_\_

## Forms Needed to Enroll

\_\_\_\_\_ Birth Certificate

\_\_\_\_\_ Social Security Card

\_\_\_\_\_ Parent/Guardian's Identification (Current Driver's License, ID Card, Passport)

\_\_\_\_\_ Immunization Record (Shot Record)

\_\_\_\_\_ Proof of Residence (Utility Bill: electricity, water, gas), Deed of Trust or Lease.  
If living with others: STATEMENT OF RESIDENCE MUST BE PROVIDED

\_\_\_\_\_ Transcript/Report Card

\_\_\_\_\_ Test Scores

\_\_\_\_\_ Withdrawal form (if applicable)

Nurse's Office – Immunization Records \_\_\_\_\_

Nurse

Special Ed Office – Has child ever received Special Ed Services? Yes No \_\_\_\_\_

SPED Coor.

LEP/ESL – Has your child ever received LEP/Bilingual Services? Yes No \_\_\_\_\_

LEP Clerk

504 Verification – Has your child ever received 504 services? Yes No \_\_\_\_\_

504 Coor.

Power Up Laptop - \$ 25 due upon Registration \_\_\_\_\_

Power Up Rep.

Registrar's Office – Transcript Review \_\_\_\_\_

Registrar

Counselor's Office – Scheduling \_\_\_\_\_

Counselors

# Houston Independent School District

## Enrollment Information

20 23 - 20 24

Homeroom Teacher:

Has student ever attended an HISD School? <input type="checkbox"/> Yes <input type="checkbox"/> No		Last School/Daycare Attended			
HISD Student ID	Date of Enrollment	Date of Birth		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade
Legal Student Last Name	First Name	Middle Name	Generation (Jr., III, etc.)	Student SS# / State Alt. #	
Student Birthplace: City, State, Country		Year Started School in US	Student Lives with <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other <input type="checkbox"/> Both Parents		
Federal Student Ethnicity (Select One) <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino	Student Race (Select all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White				
Student Address Street Number Street Name Apartment City State Zip County		Home Phone			
Student Cell Phone			Student e-mail Address		
Texas Education Code §25.002(f) requires the school district to record the name, address, and birth date of the person enrolling a child.					
Contact #1 Name (Last, First)		Relationship	Street Number Street Name Apartment City State Zip		
Employer	Occupation	Home Phone	Work Phone	Cell Phone	
Preferred Language <input type="checkbox"/> English <input type="checkbox"/> Spanish	<input type="checkbox"/> Vietnamese <input type="checkbox"/> Other	Translator Needed? <input type="checkbox"/> Yes <input type="checkbox"/> No		e-mail Address	
Contact #2 Name (Last, First)		Relationship	Street Number Street Name Apartment City State Zip		
Employer	Occupation	Home Phone	Work Phone	Cell Phone	
Preferred Language <input type="checkbox"/> English <input type="checkbox"/> Spanish	<input type="checkbox"/> Vietnamese <input type="checkbox"/> Other	Translator Needed? <input type="checkbox"/> Yes <input type="checkbox"/> No		e-mail Address	
Contact #3 Name (Last, First)		Relationship	Street Number Street Name Apartment City State Zip		
Employer	Occupation	Home Phone	Work Phone	Cell Phone	
Preferred Language <input type="checkbox"/> English <input type="checkbox"/> Spanish	<input type="checkbox"/> Vietnamese <input type="checkbox"/> Other	Translator Needed? <input type="checkbox"/> Yes <input type="checkbox"/> No		e-mail Address	
What type of medical insurance do you carry for this child? <input type="checkbox"/> CHIP <input type="checkbox"/> Medicaid <input type="checkbox"/> HCHD <input type="checkbox"/> Private Insurance <input type="checkbox"/> None			Family Physician		Physician Phone
List the names of all brothers and sisters under 18 years of age. (If additional room is needed, write on reverse side.)					
Last, First, and Middle Names	Gender	Birthdate	Grade	Address of This Child	
Signature below certifies that all the information above is true and accurate.					
Enrollment of the child under false documents subjects the person to liability for tuition or costs under Texas Education Code §25.001(h).					
Signature of Contact 1/Legal Guardian		TX Driver's License Number		Date of Birth (Contact 1/Legal Guardian)	
Signature of Contact 2/Legal Guardian		TX Driver's License Number		Date of Birth (Contact 2/Legal Guardian)	
Total Monthly Family Income:			Total Number In Household:		

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## ADDITIONAL CONTACTS/CONTACTOS ADICIONALES

<b>Name/Nombre:</b>	
<b>Relationship/Relación:</b>	
<b>Telephone/Telefono:</b>	

<b>Name/Nombre:</b>	
<b>Relationship/Relación:</b>	
<b>Telephone/Telefono:</b>	

<b>Name/Nombre:</b>	
<b>Relationship/Relación:</b>	
<b>Telephone/Telefono:</b>	

<b>Name/Nombre:</b>	
<b>Relationship/Relación:</b>	
<b>Telephone/Telefono:</b>	

<b>Name/Nombre:</b>	
<b>Relationship/Relación:</b>	
<b>Telephone/Telefono:</b>	

<b>Name/Nombre:</b>	
<b>Relationship/Relación:</b>	
<b>Telephone/Telefono:</b>	



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## 2023 - 2024 STUDENT RESIDENCY QUESTIONNAIRE (SRQ)

All information MUST be completed by parent, school personnel or community liaison.

School \_\_\_\_\_ Date \_\_\_\_\_

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ HISD ID \_\_\_\_\_

Current Address \_\_\_\_\_ Grade \_\_\_\_\_ ☐ Male ☐ Female

Lives with: ☐ Both Parents, ☐ Mother, ☐ Father, ☐ Legal Guardian, ☐ Caretaker/Relative without legal guardianship, ☐ Other: \_\_\_\_\_  
(relationship)

Is the student currently in the conservatorship of the Department of Family & Protective Services (Foster Care)? ☐ Yes ☐ No

If Yes – name of DFPS Case Manager: \_\_\_\_\_ Contact Information : \_\_\_\_\_

Was the student previously in the conservatorship of the Department of Family & Protective Services (Foster Care)? ☐ Yes ☐ No

Does the student reside at a residential treatment center? ☐ Yes ☐ No

Facility Name: \_\_\_\_\_ Case Manager: \_\_\_\_\_ Contact Information: \_\_\_\_\_

**Please complete the Current Housing Situation AND Background Situation sections below to determine McKinney-Vento eligibility:**

### Part A: CURRENT HOUSING SITUATION – Check the student's current housing situation:

#### I CURRENTLY LIVE:

☐ In my own home or apartment, in Section 8 housing, HUD Subsidized housing or in military housing with parent(s), legal guardian(s), or caregiver(s)

☐ In my own home or apartment, in Section 8 housing, HUD Subsidized Housing or in military housing with parent(s) with parent(s) but lacks

☐ My home has no electricity ☐ My home has no running water

#### OR I CURRENTLY LIVE IN A TRANSITIONAL HOUSING SITUATION:

☐ Living in a shelter

☐ Living in a motel or hotel

☐ Living with more than one family in a house or apartment (Doubled-up) due to economic hardship

#### Unsheltered

☐ Moving from place to place

☐ Living in a structure not usually used for housing

☐ Living in a car, park, campsite, camper, or outside

UNACCOMPANIED YOUTH: ☐ Yes ☐ No (An unaccompanied youth is a student who is not in the physical custody of a parent or legal guardian. This would include students living with non-custodial relatives or friends without a parent or legal guardian).

PARENTING STUDENT: ☐ Yes ☐ No (A student who has a child/children).

### Part B: BACKGROUND SITUATION (If a Transitional Housing Situation is checked above – please check any below that apply)

☐ Catastrophic illness/ Medical expenses / disability

☐ House fire or other destruction

☐ Parent(s) involved in military

☐ New to Town

☐ Natural disaster/evacuation

☐ Parent Incarcerated/Recently released

☐ Loss of Employment

☐ Domestic Issue

☐ Student has been previously incarcerated

☐ Economic hardship/low earnings

☐ Migrant work in fishing or agriculture

☐ Awaiting placement in foster care/CPS custody

☐ Evicted/kicked out

☐ Student is a parent

☐ COVID-19 impacted: \_\_\_\_\_

### Part C: NEEDED SERVICES – based on availability (Check services needed and call 713-556-7237 to speak to an Outreach Worker)

☐ Enrollment Assistance

☐ Transportation

☐ Emergency Clothing, Uniforms

☐ School Supplies

☐ Personal Hygiene Items

☐ Free Lunch/ Breakfast

☐ Immunizations

☐ SNAP/Medicaid/ TANF/CHIP

☐ Housing

☐ Food

☐ Homeless Verification Letter for FAFSA

☐ Other: \_\_\_\_\_

To the best of my knowledge this information is true and correct.

Name (PLEASE PRINT): \_\_\_\_\_ Signature: \_\_\_\_\_ Phone #'s \_\_\_\_\_

**School Personnel:** This form is intended to address the McKinney-Vento Act U.S.C. 11435. If any "Transitional Housing Situation" is checked under "Current Housing Situation" AND the family has indicated one of the "Background Situations" (1) immediately add PEIMS Coding in HISD Connect under the Homeless tab (2) Code all of the McKinney-Vento Panels on that screen (the start date should be the date the form was completed and also add the end date, and (3) Add requested services under the Services Tab (4) Email forms to [HomelessEducation@houstonisd.org](mailto:HomelessEducation@houstonisd.org). If information is missing, please follow-up with the parent/guardian/school personnel who completed the form to make sure each section is completed, as needed.



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## SOCIOECONOMIC INFORMATION FORM

Complete and return one form to each school where you have a child enrolled. **Print using a pen.**

**\*CONFIDENTIAL\* - For HISD purposes only**

Houston ISD is required to collect the socioeconomic status of each student as a performance indicator for student achievement (TEC § 39 for Texas state requirements and ESEA §§1111 and 1116 for U.S. Department of Education requirements) and for use in disbursement of federal funds (ESEA §1113). This information is not shared with outside agencies.

**It is very important that families complete this socioeconomic form in order for schools to receive Title I and State Compensatory Education funding.** This funding will directly benefit your child's school. Title I and State Compensatory Education funding can be used to hire personnel, provide tutoring services, order technology, and provide professional development for teachers. We want to continue to provide these necessary learning supports, but without your assistance we may not be able to.

Campus ECO Code: \_\_\_\_\_

For office use only

### STEP 1 (List all Houston ISD students in the household)

Student ID (office use only)	First Name	Last Name	MI	Date of Birth	School Name	Grade Level

### STEP 2

Do you receive Supplemental Nutrition Assistance (SNAP)? ☐ YES ☐ NO

Do you receive Temporary Assistance to Needy Families (TANF)? ☐ YES ☐ NO

If you answered YES on either of the above, skip Step 3 and continue to Step 4.

If you answered NO on both of the above, you must complete Steps 3 and 4.

### STEP 3 (Complete only if all answers in Step 2 are NO)

How many total members are in the household (include all adults and children)? \_\_\_\_\_

TOTAL YEARLY INCOME BEFORE DEDUCTIONS OF **ALL** HOUSEHOLD MEMBERS \_\_\_\_\_

Include wages, salary, welfare payments, child support, alimony, pensions, Social Security, worker's compensation, unemployment, and all other sources of income **(before any type of deductions)**

### STEP 4 (Check one of the following two boxes as appropriate and sign below.)

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

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

☐ I choose not to provide this information. I understand that the school's disbursement of federal funds and accountability rating may be affected by my choice.

\_\_\_\_\_  
Parent/Guardian Name (Print)

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

\_\_\_\_\_  
Date



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## FAMILY SURVEY

STUDENT NAME:	DATE OF BIRTH:
CAMPUS NAME:	GRADE LEVEL:

Dear Parent/Guardian:

The Houston Independent School District is assisting the state of Texas to identify students who may qualify for the Migrant Education Program to receive additional services. **The information provided below will be kept confidential.**

Please answer the following questions and return this form to your child's school.

1. Have you or anyone in your household moved within the last 3 years from one school district to another in Texas or within the United States?


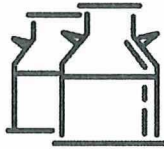
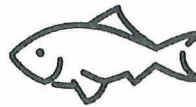





YES ☐ (Continue to question 2)

NO ☐ (Stop here and return survey to your child's school)

2. Were any of these moves made to find temporary/seasonal work in agriculture or fishing? (e.g., field work, canneries, dairy work, meat processing, etc.)

YES ☐ (Please check all that apply below)

NO ☐ (Stop here and return survey to your child's school)

 Fruit, vegetables, sunflower, cotton, wheat, grain, farms or ranches, fields & vineyards <input type="checkbox"/>	 Dairy farm <input type="checkbox"/>	 Fishery <input type="checkbox"/>	 Cannery <input type="checkbox"/>
 Poultry farm <input type="checkbox"/>	 Plant nursery, orchard, tree growing or harvesting <input type="checkbox"/>	 Slaughterhouse <input type="checkbox"/>	 Other similar work, please explain: <input type="checkbox"/>

If you answered "yes" to the questions above, an education representative will contact you to provide additional information. Please complete the following information:

Parent/Guardian Name	Home Address	Telephone Number

— FOR SCHOOL USE ONLY—  
PLEASE SUBMIT THIS INFORMATION AND FORMS AT

[MigrantProgram@HoustonISD.org](mailto:MigrantProgram@HoustonISD.org)

MIGRANT EDUCATION PROGRAM

4400 W. 18<sup>th</sup> Street, Route 1 | Houston, TX 77092 | 713-556-6980 Fax  
HISD Multilingual Education Department | 713-556-7288 | May 2018

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## HOME LANGUAGE SURVEY

19 TAC Chapter 89, Subchapter BB, §89.1215  
(Home Language Survey applicable ONLY if administered  
for students enrolling in prekindergarten through grade 12)

### TO BE COMPLETED BY PARENT OR GUARDIAN FOR STUDENTS ENROLLING IN PREKINDERGARTEN THROUGH GRADE 8 (OR BY STUDENT IN GRADES 9-12):

The state of Texas requires that the following information be completed for each student who enrolls in a Texas public school for the first time. It is the responsibility of the parent or guardian, not the school, to provide the language information requested by the questions below.

Dear Parent or Guardian:

To determine if your child would benefit from Bilingual or English as a Second Language program services, please answer the two questions below.

If either of your responses indicates the use of a language other than English, then the school district must conduct an assessment to determine how well your child communicates in English. This assessment information will be used to determine if Bilingual or English as a Second Language program services are appropriate and to inform instructional and program placement recommendations. If you have questions about the purpose and use of the Home Language Survey, or you would like assistance in completing the form, please contact your school/district personnel.

For more information on the process that must be followed, please visit the following website:  
<https://projects.esc20.net/upload/page/0081/docs/JuneUpdates/EnglishLearnerIdentification-ReclassificationFlowchart.pdf>

**This survey shall be kept in each student's permanent record folder.**

NAME OF STUDENT: \_\_\_\_\_ STUDENT ID #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

CAMPUS: \_\_\_\_\_

**NOTE: PLEASE INDICATE ONLY ONE LANGUAGE PER RESPONSE.**

1. What language is used in the child's home **most of the time**? \_\_\_\_\_

2. What language does the child use **most of the time**? \_\_\_\_\_

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student if Grades 9-12

\_\_\_\_\_  
Date

**NOTE:** If you believe you made an error when completing this Home Language Survey, you may request a correction, in writing, only if:  
1) your child has not yet been assessed for English proficiency; and  
2) your written correction request is made within two calendar weeks of your child's enrollment date.



**Texas Education Agency  
Texas Public School Student/Staff Ethnicity and Race Data Questionnaire**

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race. *United States Federal Register (71 FR 44866)*

**Part 1. Ethnicity: Is the person Hispanic/Latino? (Choose only one)**

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

**Part 2. Race: What is the person's race? (Choose one or more)**

- ☐ **American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- ☐ **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- ☐ **Black or African American** - A person having origins in any of the black racial groups of Africa.
- ☐ **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ **White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

_____ Student/Staff Name (please print)	_____ (Parent/Guardian)/(Staff) Signature
_____ Student/Staff Identification Number	_____ Date



## Kashmere High School Attendance Policy Reminder



Student Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Student you are receiving this reminder of Texas Compulsory Attendance Laws and District Policy because you have at least 3 Unexcused Absences to school this year. Please review the following reminders and initial that you understand them. You will receive a copy of this form signed by your Assistant Principal to take home to your parents, who have been notified of your absences.

- \_\_\_\_ 1. Students are required by law to be at school and in every class every day.
- \_\_\_\_ 2. If you are not physically in the room when the bell rings, you are marked Unexcused Absent.
- \_\_\_\_ 3. If you arrive at school/class late, you must check in at the sweep station closest to your class and receive an Infraction (Tardy Calculator) to have your attendance amended to a Tardy
- \_\_\_\_ 4. If you miss even 1st period in a school day with an Unexcused Absence, you are considered legally Truant that day.
- \_\_\_\_ 5. If you have 10 or more days that you are Truant (10 or more days with any Unexcused Absences from any periods), you can have legal charges filed against you AND your parents/guardians for Truancy in Harris County Court
- \_\_\_\_ 6. Possible legal consequences for Truancy could include fines and fees, suspension of driver's license; additional court appearances, community service; required counseling, or more severe or alternate consequences at the Court's discretion.
- \_\_\_\_ 7. Additionally, you can get school consequences for skipping class, being out of the designated area, leaving campus, or truancy, including Detention, Saturday Class, ISS, Suspension, Loss of Privileges, or other consequences at the school's discretion.
- \_\_\_\_ 8. If you need to miss school for an excused reason (for example, a doctor's appointment) you need to submit your signed documentation to the Attendance Office with 48 hours of your return. Excused Absences do NOT count towards your Truancy total.
- \_\_\_\_ 9. Check your attendance on the Parent Portal daily. If your teacher mistakenly marks you absent, politely contact your teacher and have them send a correction to the Attendance Office. Only that teacher can correct their attendance records for their classes,
- \_\_\_\_ 10. Missing class can also result in having your credit denied. If you miss class for ANY reason (Excused or Unexcused) more than 10% of the semester, you will be denied credit for that class even if you have a passing grade until you complete makeup "Credit Recovery." This is separate from Truancy law and policy. This can affect your Graduation status.
- \_\_\_\_ 11. Call home right now to alert your parents of this meeting and to expect a copy of this Form.

**YOUR ATTENDANCE MATTERS - Every class. Every day.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_





# Kashmere Senior High School

6900 Wileyvale, Houston, Texas 77028  
Phone: 713-636-6400 • Fax: 713-636-6433  
Brandon Dickerson, Principal

## Transportation Application 2023-2024



### Rules:

Students are to always remain seated  
Eating and/or drinking is prohibited  
Profanity and/or disrespect is not allowed  
Fighting is automatic removal

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ ID# \_\_\_\_\_

Parent/ Guardian Name: \_\_\_\_\_

Address (must match records): \_\_\_\_\_

City: \_\_\_\_\_ Zip \_\_\_\_\_

Just a  
reminder...

Arrive to your stop early  
Never walk in front of the bus without the driver giving "CLEAR"  
Must ride assigned bus-**YOUR FRIEND CAN NOT RIDE YOUR BUS**  
**NO DANGEROUS WEAPONS, OBJECTS, ALCOHOL OR TOBACCO-STATE LAW**

**\*THIS APPLICATION DOES NOT GUARENTEE THAT YOUR CHILD WILL BE  
ASSIGNED A BUS**

**ADDITIONAL QUESTIONS – 713-556-9400- HISD TRANSPORTATION**



This document is to be maintained in the Student's Cumulative Folder



## REQUEST FOR FOOD ALLERGY INFORMATION

Dear Parent:

This form allows you to disclose whether your child has a food allergy or severe food allergy that you believe should be disclosed to the District in order to enable the District to take necessary precautions for your child's safety.

"Severe food allergy" means a dangerous or life-threatening reaction of the human body to a food-borne allergen introduced by inhalation, ingestion, or skin contact that requires immediate medical attention.

Please list any foods to which your child is allergic or severely allergic, as well as how your child reacts when exposed to the food that is listed.

☐ No information to report.

Food	Nature of allergic reaction to food	Life-Threatening?

**TO REQUEST A SPECIAL DIET, MODIFICATION OF A MEAL PLAN OR PROVIDE OTHER INFORMATION FROM YOUR DOCTOR ABOUT YOUR CHILD'S FOOD ALLERGY, YOU MUST CONTACT THE SCHOOL NURSE OR SCHOOL ADMINISTRATOR WHERE YOUR CHILD ATTENDS SCHOOL.**

The District will maintain the confidentiality of the information provided above and may disclose the information to teachers, school counselors, school nurses, and other appropriate school personnel only within the limitations of the Family Educational Rights and Privacy Act and District policy.

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Date form received by Campus: \_\_\_\_\_



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## HEALTH INVENTORY

SCHOOL \_\_\_\_\_

DATE \_\_\_\_\_

TEACHER \_\_\_\_\_

SCHOOL LAST ATTENDED \_\_\_\_\_

Please fill in this form and return to the teacher or nurse. The information given on this form will help the school staff to have a better understanding of your child's health needs:

Name \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_ Birth weight \_\_\_\_\_

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

Have you ever been told by a doctor that your child had:

	Age First Identified	Under Doctor's Care?		Age First Identified	Under Doctor's Care?
Asthma			Bone/Joint Problem		
Allergies			Rheumatic Fever		
Blood Disorder			Surgery/Fractures		
Diabetes			T. B. Disease		
Epilepsy/Seizures			Hearing Loss		
Heart Disease			Vision Loss		
Kidney Disorder			Severe Menstrual Cramps		
Cancer			Eating Disorder		

Please check if you have observed any of the following in your child:

\_\_\_\_\_ Tires easily      \_\_\_\_\_ Earaches      \_\_\_\_\_ Wheezing, shortness of breath with exercise  
\_\_\_\_\_ Frequent headaches      \_\_\_\_\_ Difficulty making friends      \_\_\_\_\_ Nail Biting  
\_\_\_\_\_ Fainting      \_\_\_\_\_ Coughs frequently at night      \_\_\_\_\_ Restlessness

Has your child been seen by a doctor for any of the above? ☐ Yes ☐ No

Is your child on any kind of medication? ☐ Yes ☐ No

If so, what? \_\_\_\_\_

For what condition? \_\_\_\_\_

Further comment \_\_\_\_\_

What type of medical insurance do you carry for this child?

CHIP ☐ Medicaid ☐ HCHD ☐ Private Insurance ☐ None ☐

Please see the School Nurse (or School Principal) if your child has other needs or is:

- A pregnant or parenting teen  
and/or
- Has a severe life-threatening food allergy

Signature \_\_\_\_\_

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## SCHOOL ENROLLMENT HISTORY

(Only for students enrolling in 2<sup>nd</sup> grade or above whose Home Language Survey indicates a language other than English)

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Grade Level: \_\_\_\_\_

School: \_\_\_\_\_

Date of Enrollment in U.S. schools: \_\_\_\_\_

Has student ever attended school outside the U.S.?

☐ **No** If "no" then stop. No need to continue filling out this form.

☐ **Yes** If "yes" please provide student's academic history below.

### Student History Worksheet

School Year	Grade	Country/ U.S. State	Total Time Enrolled	If student did not attend school for a full academic year, specify months attended	For Office Use Document TELPAS Reading rating if available/Yrs in U.S. Schools
	Kinder		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	1 <sup>st</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	2 <sup>nd</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	3 <sup>rd</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	4 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	5 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	6 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	7 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	8 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	9 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	10 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	11 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		
	12 <sup>th</sup>		<input type="checkbox"/> All Year <input type="checkbox"/> No Schooling <input type="checkbox"/> Partial ( <b>Specify</b> )		

Please use the back of this form if more space is needed.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**KIM OGG**  
District Attorney



Criminal Justice Center  
1201 Franklin, Suite 600  
Houston, Texas 77002-1901

## **HARRIS COUNTY DISTRICT ATTORNEY**

Dear Parent(s)/ Guardian(s):

This letter is to inform you of the law regarding failure to attend school.

I am sure you are aware of the importance of your child receiving a quality education. However, you may be unaware that your child's failure to attend school constitutes an offense for which you could be criminally charged and your child could be referred to a civil Truancy Court. It is the parent's duty to monitor a student's school attendance and require the student to attend school. Thus, it is important that all parents and guardians are aware of the consequences of unexcused absences from school.

Under Texas Law if your child has three (3) unexcused absences from school, you will receive a notice of those absences from the school district. In this notice school officials will request that you attend a conference at the school to discuss your child's absences. The purpose of the conference will be to find ways to solve your child's attendance problem before it becomes necessary for school officials to refer your child to the Truancy Court and/or to file criminal charges against you. School officials will also inform you about the truancy prevention measures they have adopted to help resolve your child's attendance problems. If you have any questions about your child's attendance or this letter please contact the school in which your child is enrolled.

It is my sincere hope you will work with the officials at your child's school, and explain to your child how to avoid the troubles described above by making sure they attend school every day in order to receive the best education possible.

---

Kim Ogg



## Kashmere Senior High School

The Conrad O. Johnson School of Performing and Visual Arts

6900 Wileyvale, Houston, Texas 77028 | Phone: 713-636-6400 • Fax: 713-636-6433

Brandon Dickerson, Principal

### FALSIFICATION OF INFORMATION

Falsifying information is a violation of the Texas Penal Code and Texas Education Code.

**TEXAS PENAL CODE:** Section 37.10 – Tampering with Government Records: Class A Misdemeanor punishable by up to one year in jail, a fine of up to \$4,000, or both jail time and a fine.

**TEXAS EDUCATION CODE:** Section 25.001(h) – In addition to the penalty provided by Section 37.10, Texas Penal Code, a person who knowingly falsifies information on a form required for enrollment of a student in a school district is liable to the district if the student is not eligible for enrollment but is enrolled based on the false information. The person is liable for the period during which the ineligible student is enrolled, for the greater of:

- (1) The maximum tuition fee the district may charge under Section 25.038 of this code; or
- (2) The amount the district has budgeted for each student as maintenance and operating expenses.

Falsification will result in immediate withdrawal of the student(s) and maintenance and operating expenses for the current year will be charged for each student on a per school day basis.

Records must be updated immediately if there is any change in demographic information, i.e. change of address, phone number, etc. It is the sole responsibility of the parent/guardian to notify the school of such changes and provide the appropriate updated documentation (including, but not limited to updated driver's license as well as current lease, mortgage agreement or deed, and current gas/electric bill).

I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION.

Parent Name (Print) \_\_\_\_\_

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

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

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## MILITARY-CONNECTED STUDENT SURVEY

All information **MUST** be completed by parent, school personnel or community liaison.

School \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

Student Name \_\_\_\_\_ HISD ID# \_\_\_\_\_

Dear Parent or Guardian:

The State of Texas requires schools to collect data relating to the enrollment of military-connected students. This collection is done to allow educational institutions the ability to monitor critical elements of education success for children who are dependents of military personnel and show the state's commitment to military personnel and their children.

### For students in grades Kindergarten through 12:

1. Is the student a dependent of an active-duty member of the United States military?  
☐ Yes ☐ No
2. Is the student a dependent of a current member of the Texas National Guard (Army, Air Guard, or State Guard)?  
☐ Yes ☐ No
3. Is the student a dependent of a current member of a reserve force in the United States military?  
☐ Yes ☐ No

### For pre-kindergarten students only:

4. Is the student a dependent of an active-duty member of the armed forces of the United States, including the state military forces or a reserve component of the armed forces, who is ordered to active duty by proper authority or who was injured or killed while serving on active duty?  
☐ Yes ☐ No

### For students in grades Kindergarten through 12:

5. Is the student a dependent of a former member (veteran) of the following: the United States military, the Texas National guard (Army, Air Guard, or State Guard), or a reserve force in the United States military?  
☐ Yes ☐ No
6. Is the student a dependent of a member of a military or reserve force in the United States military who was killed in the line of duty?  
☐ Yes ☐ No

**If you answered "Yes" to the questions above, district personnel will contact you to provide additional information. Please complete the following information:**

Parent/Guardian	Home Address	Telephone Number

— FOR SCHOOL USE ONLY —

For any "YES" responses scan/email this survey to [MilitaryConnected@HoustonISD.org](mailto:MilitaryConnected@HoustonISD.org)  
Office of Student Assistance | 713-556-7237 | March 2023



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## MEDIA CONSENT AND RELEASE FORM

This release allows the Houston Independent School District (HISD) to print, photograph, record video and capture images of my student for use by HISD. HISD's use may include promotion of the district, its activities and achievements. This consent includes the ability to use print, photographic, and recorded materials to train teachers and/or increase public awareness of HISD through digital and print media including but not limited to newspaper, radio, television programming, billboards, websites, blogs, and social media channels (Facebook, Twitter, Instagram, YouTube, etc.), DVDs, displays, and brochures. The district's use of digital or print media includes the ability to display my child's work, image, name, location, and/or voice.

- ☐ I, \_\_\_\_\_ **GIVE** HISD and its employees and representatives permission to print, photograph, and record my child for use in electronic, digital, and printed media.
- ☐ I, \_\_\_\_\_ **DO NOT GIVE** HISD and its employees and representatives permission to print, photograph, and record my child for use in audio, video, film or any other electronic, digital, or printed media.

I agree to release the Houston Independent School District, its past, present and future trustees, officers, employees, representatives, and agents, from any and all liability, claims, demands, and causes of action arising out of the use of this material.

I certify that I have read this document and fully understand its terms and conditions. I also understand that I may withdraw consent at any time by sending a written request to the principal of my child's school.

### PLEASE PRINT

Student Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

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

Date \_\_\_\_\_ Phone Number \_\_\_\_\_

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## CODE OF STUDENT CONDUCT CÓDIGO DE CONDUCTA ESTUDIANTEL

Students and parents are expected to become familiar with the provisions of the districtwide *Code of Student Conduct* and the rules and regulations adopted and implemented by individual schools. Students are also expected to abide by the policies set forth in the *Code* so that they can get the most out of their years in school.

*Todos los estudiantes y sus padres deben familiarizarse con las directivas del Código de Conducta Estudiantil vigente en el Distrito y con las reglas y normativas adoptadas e implementadas en las escuelas. Es de esperar también que los estudiantes cumplan con las normas del Código para que puedan lograr el máximo provecho de su carrera escolar.*

You may access the entire *HISD Code of Student Conduct* online at [www.HoustonISD.org/CodeofConduct](http://www.HoustonISD.org/CodeofConduct) or by requesting a copy at the front office of your student's school.

*El Código de Conducta Estudiantil de HISD completo se encuentra en [www.HoustonISD.org/CodeofConduct](http://www.HoustonISD.org/CodeofConduct) y es posible además obtener una copia impresa en la recepción de la escuela de su hijo.*

### Parent and Student Acknowledgement and Optional Request for Printed Copy of the *Code of Student Conduct*

*Confirmación de recibo del Código de Conducta Estudiantil y opción de solicitar una copia impresa*

☐ No, I do not want a printed copy of the *HISD Code of Student Conduct*, as I will access it online at [www.HoustonISD.org/CodeofConduct](http://www.HoustonISD.org/CodeofConduct).

☐ No, no necesito una copia impresa del Código de Conducta Estudiantil de HISD ya que lo consultaré en línea en [www.HoustonISD.org/CodeofConduct](http://www.HoustonISD.org/CodeofConduct).

☐ Yes, I do want a printed copy of the *HISD Code of Student Conduct*.

☐ Sí, quiero tener una copia impresa del Código de Conducta Estudiantil de HISD.

It is important that every student understands the *Code of Student Conduct* and is expected by his or her parent(s) or guardian(s) to follow the rules and regulations set forth in it. By signing below, the parent and student acknowledge that they understand how to access and obtain a printed copy of the *Code*. These signatures also certify that both parent and student accept their responsibilities as described in the *Code of Student Conduct*.

*Es importante que todos los estudiantes entiendan el Código de Conducta Estudiantil y que sus padres o tutores les exijan que sigan las reglas y directivas establecidas en él. Al firmar al pie, los padres y el estudiante afirman que comprenden cómo lograr acceso al Código en línea y cómo obtener una copia impresa. Las firmas certifican también que tanto los padres como el estudiante aceptan las responsabilidades descritas en el Código de Conducta Estudiantil.*

Student Last Name  
Apellido del estudiante

First Name  
Nombre

Grade  
Grado

Student ID Number  
Núm. de identificación estudiantil

Student Signature  
Firma del estudiante

Date  
Fecha

Parent or Guardian's Signature  
Firma del padre o tutor

Date  
Fecha

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## PRIVACY CODE: STUDENT RECORDS, RIGHTS, AND RESPONSIBILITIES

**Student Records:** State law requires the Houston Independent School District (HISD) to maintain an education record for each student attending its schools. These records contain identifying data pertaining to the student and may include information concerning demographics, grades, attendance, health, discipline, guidance, assessment, and appraisals.

**Access to Records:** In addition to HISD employees, who have a legitimate educational interest in a student's records, parents, guardians, and the student are the only persons who have access to student records maintained by the district.

Both parents—married, separated, or divorced—have access to a student's records until the student becomes 18 years of age and is no longer a dependent student under Section 152 of the Internal Revenue Code. A parent's rights to access student records may be restricted by a court order. Legal guardians have the same rights of access as parents. Parents and students may review records during regular school hours by contacting their school principal.

After the student becomes 18 and is no longer a dependent, only the student has access to his or her records. However, that student may consent to others having access.

Under certain restricted conditions, other individuals may review a student's records. These conditions include:

- Other schools to which a student is transferring.
- Specified officials for audit or evaluation purposes.
- Appropriate parties in connection with financial aid to a student.
- Accrediting organizations.
- State and local juvenile justice system authorities pursuant to state law.
- Appropriate officials in cases of health and safety emergencies.

Records may also be reviewed to comply with a judicial order or lawfully issued subpoena provided the parent and student received notice before compliance. No other persons are allowed to review a student's records without either permission of the parent or that of the student if over 18 years of age.

**Challenge to Content of a Record:** If a parent or a student over 18 feels that the student record contains information which is misleading, incorrect, or a violation of the privacy or other rights of the student, that person may challenge the contents of the record in an informal hearing. To initiate this procedure, contact your school principal.

**Copies:** A student 18 years of age or over or a parent or guardian of a student under 18 years of age requesting copies of his or her child's official district records for a purpose other than the transaction of the official business of the district shall pay 10 cents a page for each copy. A limit of three high-school transcripts will be provided free to post-secondary schools. Each additional copy will cost \$1. The Inactive Student Records Department microfilms high-school transcripts for permanent retention.

**Special Education Records:** The district maintains Special Education records for seven years after the last date of service and then destroys the records in accordance with state law. A "Notice of Destruction of Special Education Records" is published annually through the district's website ([www.houstonisd.org](http://www.houstonisd.org)) advising the parent or adult student how they may request a copy of the records before they are destroyed. It is important that the parent or adult student keep a copy of all Special Education records for use in later years.

**Complaints:** Parents or a student over the age of 18 have the right to file a complaint with the U.S. Department of Education concerning alleged failures of the district to comply with the provisions of the Family Education Rights and Privacy Act of 1974.



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## SAFETY ACKNOWLEDGMENT FORM

Safety is a top priority for HISD, and the district is committed to providing a safe environment for our students and staff. Safety drills and training are conducted as required by Texas Education Code and under guidance from organizations including but not limited to the Texas School Safety Center, Safe and Secure Schools, Sandy Hook Promise, and State Code Compliance.

### REQUIRED SAFETY DRILLS CONDUCTED INCLUDE:



In the event of an emergency or incident that requires reunification of students with their parents or guardians, the district has adopted the "I Love U Guys" Foundation Standard Reunification Method (SRM). The SRM provides a proven method for planning, practicing, and achieving a successful reunification. During any emergency situation the district will use multiple resources including, news outlets, social media, automated calls, and/or email to communicate with its targeted audience.

The district is committed to being proactive in emergency management and planning. This requires support and understanding. Safety starts with you. It is important to talk to your children about safety. If you see something, say something. Anonymous reporting of safety concerns, suspicious activity, student and/or workplace bullying, etc. is available to everyone by calling **713-641-7446**, online via the anonymous reporting system [HoustonISD.org/AnonymousReporting](https://HoustonISD.org/AnonymousReporting) or by downloading the **SAYSOMETHING MOBILE APP**. ***Ensure you have the most up to date information and emergency contact at the campus level for effective communication.***

\_\_\_\_ I HAVE READ THE HISD SAFETY ACKNOWLEDGMENT FORM

Student Last Name First Name Grade

Parent or Guardian's Printed Name Date

Parent or Guardian's Signature Date



# POLICE DEPARTMENT

## HOUSTON INDEPENDENT SCHOOL DISTRICT

3500 Tampa • Houston, TX 77021  
Tel: 713-842-3715 • Fax: 713-842-3752

Pedro "Pete" Lopez  
Chief of Police



[www.HoustonISD.org](http://www.HoustonISD.org)  
[www.twitter.com/HoustonISD](https://www.twitter.com/HoustonISD)

### RE: STATE OF TEXAS LAWS PERTAINING TO SAFE GUN STORAGE AND RESPONSIBILITIES OF PARENTS/GUARDIANS

Dear Parent/Guardian:

The Houston Independent School District (HISD) is dedicated to a safe learning environment at school and at home. In the U.S., gun violence on school campuses is alarming. In 2021, there were 202 incidents of gunfire on school campuses resulting in 49 deaths and 126 injuries. In Houston, 37 children were killed by firearms, and 161 were injured. HISD recognizes that proper gun storage education and laws are essential to ensuring a gun-free campus. To further our efforts to protect students from firearms, and as a courtesy to our families, HISD is informing parents and guardians of the legal obligations to protect minors from negligent gun storage. Please review the state statute on gun storage laws summarized below:

#### **Texas State Law 46.13 "Making a Firearm Accessible to a Child"**

In Texas, a "child" is defined as a person under the age of 17. The statute indicates that a person commits an offense if a child gains access to a readily dischargeable firearm and the person with criminal negligence:

- (1) failed to secure the firearm; or
- (2) left the firearm in a place the person knew or should have known the child would gain access to.

Respectfully,

Pedro "Pete" Lopez, Jr.  
HISD Chief of Police



CUT HERE AND RETURN TO YOUR SCHOOL PRINCIPAL

#### **SAFE GUN STORAGE ACKNOWLEDGEMENT FORM**

Please sign below acknowledging receipt of this information.

Student Name (Please Print) \_\_\_\_\_

Parent/Guardian Name (Please Print) \_\_\_\_\_

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

Date \_\_\_\_\_



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## STUDENT DEVICE LOAN AGREEMENT

A student device will be loaned to the student named below under the following conditions:

- This student device loan agreement, which is signed by the parent/guardian and student, will be kept on file at the school.
- Use of this equipment for any purpose other than educational use may result in loss of privileges.
- The district does not permit unethical use of the Internet, email, or any other media. Violation of this policy may result in the loss of device loan privileges and disciplinary action by the school.
- The configuration of the hardware equipment and all accompanying software may not be altered, nor can software be copied to or from the device, or installed on the device under any circumstances.
- Parents/guardians are required to pay a non-refundable fee of \$25 yearly. The payment must be made prior to the student receiving the device.
- Parents/guardians accept financial responsibility for cost related for replacement of a lost or stolen device or accessories, or for damage due to purposeful action or gross negligence. The district will proceed with legal action, should financial obligation be ignored.
- A lost or stolen device should be reported to the campus technologist or school administrator within one school day.
- The district will provide a padded device bag or protective case, which fits inside any backpack. The device must be carried in the bag or remain in the protective case at all times.
- The device, which is the property of Houston ISD, must be returned prior to the end of the school year, or in the event of school change or early withdrawal.
- The district has provided students with a Digital Citizenship Course and information for parents, via Open House events and handouts, including information about how to care for the device and how to make responsible use of technology.
- The student reads the "Acceptable Use Policy for Electronic Services for Students" handout.

We, the undersigned student and parent/guardian, agree to assume full responsibility for the proper care and educational use of the device described in this document.

Student Name (print) \_\_\_\_\_ Phone \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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

Student ID \_\_\_\_\_ Grade Level \_\_\_\_\_

School Name \_\_\_\_\_



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## ACCEPTABLE USE POLICY FOR ELECTRONIC SERVICES FOR STUDENTS

**Privacy:** The Family Educational Rights and Privacy Act ("FERPA") is a federal law that protects the privacy of student education records. Under FERPA, parents or eligible students have the right to inspect and review the student's education records maintained by the school. Students and qualified parents can view certain educational records of the student online through HISD's Parent Student Connect portal. These records are safeguarded through all available means, and access will be restricted to parents/guardians and the student through the use of user names and passwords.

**Acceptable Actions:** HISD students may use the network and electronic services provided by HISD to pursue educational activities. Students will learn how Internet resources can provide valuable educational information. Students will be expected to follow accepted rules of network etiquette. These rules include, but are not limited to, the following:

- Be courteous and respectful. Do not send or display offensive messages or pictures.
- Use appropriate language in any type of communication. No profane, abusive, or impolite language will be used to communicate, nor should materials be accessed that are not in line with the rules of school behavior.
- Keep personal information such as logins, passwords, addresses, and phone numbers confidential.
- Use electronic services for educational purposes only.
- If you encounter materials that violate the rules of appropriate use, disconnect immediately and notify an adult.

**Unacceptable Actions:** Improper use of electronic services provided by HISD is prohibited. Be prepared to be held accountable for your actions and for the loss of privileges if this Acceptable Use Policy is violated. In addition to the paragraph below labeled "Penalties for Improper Use," the HISD Student Code of Conduct addresses the consequences for violations. Actions that constitute unacceptable use include, but are not limited to, the following:

- Do not use a computer to harm other people or their work.
- Do not damage the computer or the network in any way.
- Do not interfere with the operation of the network by installing software, shareware, or freeware, including the alteration of any controls designed to provide Internet safety or alteration of HISD's default computer image.
- Do not violate copyright laws or participate in any criminal activities punishable by law.
- Do not view, send, or display offensive messages or pictures.
- Do not share your password with another person or offer access to any person via your account.
- Do not reveal your personal address or phone numbers or those of other students or colleagues, including the completion of profile data.
- Do not waste limited resources such as disk space or printing capacity.
- Do not distribute advertisements, solicitations, commercial ventures, or political lobbying.
- Do not trespass in another's folders, work, or files.
- Do not pursue internal or external "hacking," use anonymous e-mail sites, spread viruses, initiate spam, or attempt to access inappropriate material.

All HISD students are granted access to all electronic services available. If you DO NOT want your student to have access to electronic services, please complete and submit the opt-out form and access will be denied.

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## ACCEPTABLE USE POLICY FOR ELECTRONIC SERVICES FOR STUDENTS

**Penalties for Improper Use:** The use of the network is a privilege, not a right, and may be revoked if abused. Misuse, damage, or vandalism of HISD technology resources may also lead to disciplinary and/or legal action, including suspension, expulsion, or criminal prosecution by governmental authorities.

**Disclaimer:** HISD makes no guarantee about the quality of services provided and is not responsible for any claims, losses, damages, costs, or other obligations arising from the use of its network. Any charge accrued to the user of HISD's network are borne by the user. Statements by the user on the Internet are from the author's individual point of view and do not represent the views of HISD, its employees, or members of the Board of Education.

Student and parental/guardian signatures on the Student Code of Conduct represent consent to conform to the Acceptable Use Policy.