



# KASHMERE SENIOR HIGH SCHOOL

*The Conrad O. Johnson School of Music and Fine Arts*

6900 Wileyvale • Houston, Texas 77028

Phone: 713-636-6400 • Fax: 713-636-6433

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## **Registration for Returning Students** **Only**

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

**ID#:** \_\_\_\_\_

### **Forms Needed**

**\*Proof of Residence (Utility Bill: light, water, gas)  
Deed of Trust or Lease**

**\*If living with others, must complete a Statement  
of Residence.**

**\*\*Please be sure to complete all forms included in  
this packet**

# Houston Independent School District

## Enrollment Information

20\_\_ - 20\_\_

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	
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>	
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<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)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Catastrophic illness/ Medical expenses / disability | <input type="checkbox"/> House fire or other destruction        | <input type="checkbox"/> Parent(s) involved in military                |
| <input type="checkbox"/> New to Town   | <input type="checkbox"/> Natural disaster/evacuation            | <input type="checkbox"/> Parent Incarcerated/Recently released         |
| <input type="checkbox"/> Loss of Employment                                  | <input type="checkbox"/> Domestic Issue                         | <input type="checkbox"/> Student has been previously incarcerated      |
| <input type="checkbox"/> Economic hardship/low earnings                      | <input type="checkbox"/> Migrant work in fishing or agriculture | <input type="checkbox"/> Awaiting placement in foster care/CPS custody |
| <input type="checkbox"/> Evicted/kicked out                                  | <input type="checkbox"/> Student is a parent                    | <input type="checkbox"/> COVID-19 impacted: _____                      |

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

- |   |   |   |  |   |
|---|---|---|--|---|
| <input type="checkbox"/> Enrollment Assistance                  | <input type="checkbox"/> Transportation | <input type="checkbox"/> Emergency Clothing, Uniforms | <input type="checkbox"/> School Supplies | <input type="checkbox"/> Personal Hygiene Items |
| <input type="checkbox"/> Free Lunch/ Breakfast                  | <input type="checkbox"/> Immunizations  | <input type="checkbox"/> SNAP/Medicaid/ TANF/CHIP     | <input type="checkbox"/> Housing         | <input type="checkbox"/> Food                   |
| <input type="checkbox"/> Homeless Verification Letter for FAFSA | <input type="checkbox"/> 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



**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.

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Kim Ogg



## 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 2022-2023



### 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**



# HOUSTON INDEPENDENT SCHOOL DISTRICT

## METRO Q<sup>®</sup> FARE CARD

**METRO** is offering Houston ISD students from kindergarten through 12th grade the opportunity to register and receive a discounted METRO Student Q<sup>®</sup> fare card on campus. The discounted METRO Student Q<sup>®</sup> fare card allows students to ride all METRO services for 50 percent off the regular fare when they use the Student METRO Q<sup>®</sup> fare card. METRO Local bus and light-rail service costs just 60 cents each way. (NOTE: Park & Ride service cost will vary). There is no cost to receive the Student METRO Q<sup>®</sup> fare card, but to participate and receive a discounted METRO Student Q<sup>®</sup> fare card on campus, students must have parental/guardian consent and they must register by providing the information below.

The deadline for students to provide a signed parental/guardian permission form to obtain a Student METRO Q<sup>®</sup> fare card on campus is [Date\_\_\_\_\_]. If a student already has a Student METRO Q<sup>®</sup> fare card, and applies for a second card, one of the cards will be deactivated. Students should only have one active card.

### PLEASE PRINT:

Student Name	Date of Birth
Address (Street, Apt.#, City, State, Zip)	
Email	Telephone Number
School	Student ID Number
Homeroom Teacher	Grade

### PLEASE CHECK ONE:

☐ **YES**, I am aware of the opportunity to register my child to receive a discounted Student METRO Q<sup>®</sup> fare card on campus. Houston ISD has my permission and is authorized to release any of the information above to METRO to facilitate my child's participation in the program.

☐ **NO**, I request that Houston ISD not release any of the information above to METRO to receive a discounted Student METRO Q<sup>®</sup> fare card on campus. I am aware of the opportunity for my child to receive the Student METRO Q<sup>®</sup> fare card on campus and I decline.

Parent/Guardian's Name	Parent/Guardian's Signature	Date
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**NOTE:** If this form is not on file at the school, your child will not receive a Student METRO Q<sup>®</sup> fare card on campus. If you have questions, you may contact METRO Client Services at 713-739-4015 or [Client.Services@ridemetro.org](mailto:Client.Services@ridemetro.org) or your child's school.

# 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

## 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

## 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

## 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.*

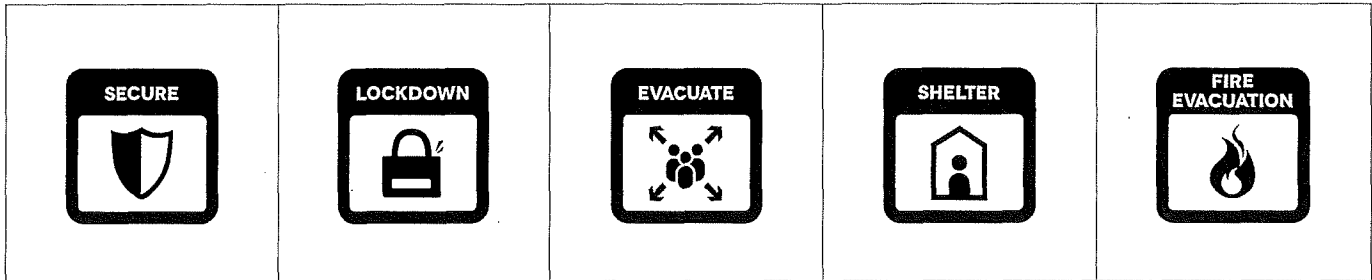
Student Last Name Apellido del estudiante	First Name Nombre	Grade Grado	Student ID Number Núm. de identificación estudiantil
Student Signature Firma del estudiante			Date Fecha
Parent or Guardian's Signature Firma del padre o tutor			Date Fecha

# HOUSTON INDEPENDENT SCHOOL DISTRICT

## 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** 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.**

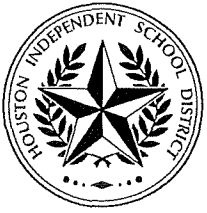
\_\_\_\_ I HAVE READ THE HISD SAFETY ACKNOWLEDGMENT FORM

Student Last Name	First Name	Grade
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Parent or Guardian's Printed Name	Date
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Parent or Guardian's Signature	Date
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**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  
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



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**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 \_\_\_\_\_