

SOUTH EARLY COLLEGE HIGH SCHOOL



REGISTRATION 2020-2021

Date of Registration Re			Registration #					
Last Na	me							
First Na	me	M	Middle Name					
Address	S		Zip					
Sex		Date of Birth (Mon	ıth)	(Day)	(Year)		
Social S	Security #		Race					
City of Birth St								
Name of High and Middle School Attended (in order of a Name of High/Middle School City, State				attendance) HS Credits				
Past stu	ident of SECHS? Yes _	No	If ye	es, what year att	ended?			
Any ser	vices being provided for stu	dent? Special Ed _		504	ESL_			
Gifted/T	alented Free/Re	duced Lunch	Sch	ool Bus				
<u>Step 1</u> A	STRATIVE USE ONLY Administrative Approval Shot Records			Type of Transfer				
☐ Scho	ool Records Proof if documents are included with regist	of Residence		Local Code				
Step 2	Nurse			Grade Level		YE9 =		
Step 3	Services			HISD ID#_				
Step 4	Registrar			Request: TR	REX 🗌	Fax 🗌		
Step 4	Attendance							
Step 5	Dean			House Assig	nment _			

Houston Independent School District

Enrollment Information

20____ - 20____

Homeroom Teacher:

HisD Student ID								Homeroom rea	acrici.		
Logal Student Last Name	Has student ever attended an HISD School?		?	' □ Yes □ No				Last School/Daycare Attended			
Student Birthplace: Oky, State, Country Year Started School in US Student Lives with Mother State School in US Student School in US Student School in US State School in US School in US State School in US School in US State School in US School in US School in US School in US State School in US State School in US School in US State School in US School in US School in US State School in US	HISD Student ID Date of Enrollmen		nrollment	nt Date of E		Date of B	irth	☐ Male		Grade	
State Care	Legal Student Last Name		First Name	9	Middle Name				Stude	nt SS# / Sta	te Alt. #
Student Ethnicity Not Hispanic Ethnicity Not Hispanic Ethnicity Not Hispanic Ethnicity Student Street Name Apartment City State Zip County Home Phone	Student Birthplace: City, State,	Country		Year S	tarted Scl	nool in US	Studer	nt Lives with			
Student entitle of the person encoding a child.	Student Ethnicity			Race						Black or A	frican American
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 (Lest, First)	Address	Street Nan	ne	Apar	rtment	City			-	Home Phon	e
Relationship Street Number Street Name Apartment City State Zip	Student Cell Phone							Student e-mail A	ddress		
Relationship Street Number Street Name Apartment City State Zip	Texas Education Co	de §25.002	(f) requires th	e school di	strict to re	cord the na	me. address.	and birth date of	the person enr	olling a child	
Preferred			``						•		
Contact #2 Name (Lest, First) Relationship Street Number Street Name Apartment City State Zip	Employer	Occupat	ion	F	lome Pho	ne		Work Phone		Cell Phone	;
Employer Occupation Home Phone Work Phone Cell Phone Preferred English Vietnamese Translator Needed? 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 Employer Occupation Home Phone Work Phone Cell Phone Employer Occupation Home Phone Vertnamese Translator Needed? e-mail Address Employer Occupation Home Phone Work Phone Cell Phone Employer Occupation Home Phone Vertnamese Translator Needed? e-mail Address Employer Occupation Home Phone Work Phone Cell Phone Employer Occupation Home Phone Vertnamese Translator Needed? e-mail Address Employer Occupation Family Phone Cell Phone Employer Occupation Family Physician Physician Phone Employer Occupation Physician Phone Occupation Physician Phone Occupation Occu	Language		<u> </u>			Yes [] No				
Preferred							eet Name	<u>'</u>	nent City		·
Language Spanish Other Yes No Contact #3 Name (Last, First) Relationship Street Number Street Name Apartment City State Zip Employer Occupation Home Phone Work Phone Cell Phone Preferred English Vietnamese Translator Needed? e-mail Address Language Spanish Other Yes No What type of medical insurance do you carry for this child? 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 fultion 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)		Occupat	ion							Cell Phone	;
Employer Occupation Home Phone Work Phone Cell Phone Preferred	Language Spanish		ſ <u></u>			Yes [] No				
Preferred Language Spanish Vietnamese Other Yes No What type of medical insurance do you carry for this child? Family Physician Physicia							eet Name	•	ment City		·
Language Spanish Other	Employer	Occupat	tion	F						Cell Phon	e
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 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)	Language Spanish	☐ Other	<u> </u>			Yes 🗆					
Last, First, and Middle Names Gender Birthdate Grade Address of This Child Address of	☐ CHIP ☐ Medicaid	□ нсн	D 🗓	Private Ins	surance	□N	lone	Family Pn	iysician	Pnysi	cian Phone
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) TX Driver's License Number Date of Birth (Contact 2/Legal Guardian)					•	• ,			ite on reverse s	side.)	
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) TX Driver's License Number Date of Birth (Contact 2/Legal Guardian)											
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) TX Driver's License Number Date of Birth (Contact 2/Legal Guardian)											
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) TX Driver's License Number Date of Birth (Contact 2/Legal Guardian)											
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) TX Driver's License Number Date of Birth (Contact 2/Legal Guardian)		Signatuı	re below ce	rtifies tha	at all the	informat	ion above	is true and ac	curate.		
Signature of Contact 1/Legal Guardian TX Driver's License Number Date of Birth (Contact 1/Legal Guardian) TX Driver's License Number Date of Birth (Contact 2/Legal Guardian)		_								5.001(h)	
				, , , , , , , , , , , , , , , , , , ,							al Guardian)
Total Monthly Family Income: Total Number In Household:	Signature of Contact 2/L	egal Guard	dian		TX I	Oriver's Lice	nse Number		Date of Birth (0	Contact 2/Leg	al Guardian)
	Total Monthly Family Income:			<u> </u>		To	otal Number	In Household:			

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 F	PER RESPONSE.					
1. What language is spoken in the child's home most of	f the time?					
2. What language does the child speak most of the tim	e?					
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.

	FAMILY SURVEY						
STU	JDENT NAME:			DATE OF BIRTH:			
CAI	MPUS NAME:			GRADE LEVEL:			
Dea	Dear Parent/Guardian:						
	e Houston Independent School grant Education Program to rec						
Ple	ase answer the following ques	tions and return this form to yo	ur chil	d's school.			
1.	Have you or anyone in your h within the United States?	ousehold moved within the las	t 3 yea	ars from one school	district to another in Texas or		
	YES □ (Continue to questi	on 2) NO 🗆	(Stop	here and return su	ırvey to your child's school)		
2.	Were any of these moves mad dairy work, meat processing, e		work ir	agriculture or fishir	ng? (e.g., field work, canneries,		
	YES □ (Please check all the	at apply below) NO □	(Stop	here and return su	rvey to your child's school)		
	Fruit, vegetables, sunflower, cotton, wheat, grain, farms or ranches, fields & vineyards	Dairy farm	<	Fishery	Cannery		
		(Cogs)					
	Poultry farm □	Plant nursery, orchard, tree growing or harvesting	;	Slaughterhouse	Other similar work, please explain:		

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

https://form.jotform.com/200065674657156

MIGRANT EDUCATION PROGRAM

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 4486*6)

and race. United States rederal Register (711	and race. Officed States Federal Register (71 FR 44000)					
Part 1. Ethnicity: Is the person Hispanic/Latir	no? (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? (Ch	noose 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.						
Asia, or the Indian subcontinent including, for	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 havin Africa.	g origins in any of the black racial groups of					
	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 North Africa.	original peoples of Europe, the Middle East, or					
Student/Staff Name (please print) (Parent/Guardian)/(Staff) Signature						
Student/Staff Identification Number Date						
Texas Education Agency – March 2009						

STUDENT ASSISTANCE QUESTIONNAIRE (SAQ)
All information MUST be completed by parent, school personnel or community liaison.

School _					Date	<u> </u>		
Student	Name		D	ate d	of BirthH	ISD ID		
Current /	Address				Grade	□ Ma l e	□ Fema	le
Lives with	n: □ Both Parents, □ Mother, □ Father, □ L	egal (Guardian, □ Caretaker/R	elativ	ve without legal guardianship,	☐ Other _		
Is the stud	dent <u>currently</u> in the conservatorship of the Depart	ment	of Family & Protective Serv	vices	(Foster Care)?	□ Yes	relation	□ No
	name of DFPS Case Manager:		•		•			
	student <u>previously</u> in the conservatorship of the							□ No
Please o	complete the Current Housing Situation <u>A</u>	ND E	Background Situation s	secti	ions below to determine M	ckinney-Ve	ento eligi	bility:
Part A:	CURRENT HOUSING SITUATION - Chec	k the	student's current hou	ısing	g situation			
IC	URRENTLY LIVE:							
ca	In my own home or apartment, in Section 8 horagiver(s) (if you checked this box, check one My home has no electricity My home h	or bo	h of the boxes below, if a			nt(s), legal gu	uardian(s)	, or
0	R I CURRENTLY LIVE IN A TRANSITIONAL	HOUS	SING SITUATION:					
	Living in a shelter				Living in a motel or hotel			
	Living with more than one family in a house of	r apa	rtment (Doubled-up) due	to ec	conomic hardship			
<u>U</u>	<u>nsheltered</u>							
	Moving from place to place ☐ Living in a s	tructu	re not usually used for ho	usin	g □ Living in a car, park, c	ampsite, car	mper, or o	utside
	OMPANIED YOUTH - ☐ Yes ☐ No (, ardian. This would include students living with				nt who is not in the physical c thout a parent or legal guardia		parent or	
Part B	: BACKGROUND SITUATION (If a Transit	ional	Housing Situation is	chec	ked above - please Check	ANY below	w that ap	ply)
	Catastrophic illness / medical expenses / disa	ability			Natural disaster / evacuation	1		
	New to Town				Domestic Issue			
	Loss of Employment				Migrant work in fishing or agriculture			
	Economic hardship/low earnings				Awaiting placement in foster	care / CPS	custody	
	Evicted/kicked out				Parent(s) involved in military deployment			
	House fire or other destruction				Parent Incarcerated/Recently			
Part C:	NEEDED SERVICES – based on available	ility (Check services needed	d an	d call 713-556-7237 to spea	ak to an Οι	ıtreach V	Vorker)
	Enrollment Assistance		Transportation		☐ Emergency Clothing	g, Uniforms		
	Free Lunch/Breakfast (Child Nutrition)		School Supplies		□ Personal Hygiene It	tems		
	Immunizations		Medicaid/CHIP Assistar	ice	☐ Food Stamps (SNA	P) Assistand	се	
	Temporary Assistance for Needy Families (T	ANF)			□ Other			
To the I	pest of my knowledge this information is tru	ie and	d correct.					
Name (P	LEASE PRINT):		Signature		Phone #'s			
Housing At-risk r	Personnel: This form is intended to address the last situation" AND the family has indicated one of eason code 12, (2) code all of the McKinney-Venter and (3) Email forms to Homeless Education (2) had been seen and (3) Email forms to Homeless Education (3) Email for Homeless Education (3) Education (3) Email for Homeless Education (3) Educatio	f the ' o Pan	Background Situations" (1 els on that screen (the stat) imi rt dat	mediately add PEIMS Coding or te should be the date the form w	n the At-risk was complete	Chancery and also	panel fo add th

who completed the form to make sure each section is completed, as needed.

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.

<u>STEP 1 (</u> L	ist all Houston	ISD students in	the ho	ousehold)		Campus ECO C	For office use only
Student ID (office use only)	First Name	Last Name MI Date of Birth School N					Grade Level
STEP 2							
	eceive Supplem	ental Nutrition Ass	sistanc	e (SNAP)?		☐ YES	□ NO
If you an	swered YES on ei	y Assistance to N ther of the above, si th of the above, you	kip Step	3 and continu	e to Step 4	☐ YES	□ NO
•		f all answers in S			3 <i>anu</i> 4.		
How mar	ny total member	s are in the house	ehold (i	nclude all adu	ılts and ch	nildren)? _	
Include wa	ges, salary, welfare	EFORE DEDUCTION payments, child supert, and all other source	port, alir	mony, pensions,	Social Sec	curity, worker's	s
STEP 4 (C	Check one of th	e following two	boxes	as appropria	ate and s	ign below.))
of any progr evaluation ti participation	ram funded in whole o hat reveals informatio	s of the Protection of Pu or in part by the U.S. De on concerning income (o eceiving financial assist ardian.	epartment other thar	t of Education, to an athat required by	submit to a s law to deterr	curvey, analysis nine eligibility f	or or
	•	rmation on this form is e rated for accountab					
		this information. I un untability rating may l				ment of	

Date

Parent/Guardian Signature

Parent/Guardian Name (Print)

STUDENT MEDIA CONSENT AND RELEASE FORM

This release allows the Houston Independent School District (HISD) to print, photograph, and record my child for use in efforts to promote HISD's activities and achievements. The consent includes allowing my child to be included and/or featured in materials to train teachers and/or increase public awareness of HISD schools through digital and print media including: newspaper, radio, TV, websites, blogs, and social media channels (Facebook, Twitter, YouTube, etc.), DVDs, displays, and brochures. This release includes the use of my child's work, name, image, and/or voice.

	I attest that I am the parent or guardian of and <u>I GIVE</u> HISD and its employees and representatives permission to print, photograph, and record my child for use in electronic, digital, and
	printed media.
	I attest that I am the parent or guardian of and <u>I DO NOT GIVE</u> 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.
emplo	ee to release the Houston Independent School District, its past, present and future trustees, officers byces, representatives, and agents, from any and all liability, claims, demands, and causes of action gout of the use of this material.
	fy that I have read this document and fully understand its terms and conditions. I also understand that I vithdraw consent at any time by sending a written request to the principal of my child's school.
PLEA	SE PRINT
Name	of child Grade
Addre	ess
City, S	State, Zip
Name	of parent or guardian
Schoo	Heights High School
Signa	ture of parent or guardian
Date	Phone Number

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, quidance, 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) 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.

PRIVACY CODE: STUDENT RECORDS, RIGHTS, AND RESPONSIBILITIES

Directory Information: Certain information about district students is considered directory information and will be released to anyone who follows the procedures for requesting the information for school-sponsored purposes.

Directory information may include the following:

- Student name
- Address
- Telephone listing
- Date and place of birth
- Photograph
- Major field of study
- Participation in officially recognized activities and sports
- · Weight and height of members of athletic team
- Dates of attendance
- Awards received
- Most recent previous school attended by a student

If you DO NOT want to release directory information regarding your child, please check the appropriate box on the Privacy Code Form below and return it to your child's school.

Military Recruitment/Higher Education: Public Law 107-110 requires school districts receiving assistance under the No Child Left Behind Act of 2002 to provide a military recruiter or an institution of higher education, on request, with the name, address, and telephone number of a secondary student unless the parent has advised the district that the parent does not want the student's information disclosed without the parent's prior written consent.

If you DO NOT want your child's directory information released to military recruiters or institutions of higher education without your specific, prior, written consent, check the appropriate box on the Privacy Code Form below and return it to your child's school.

PRIVACY CODE FORM

Please check all boxes below that apply.

Library and the Netter of Ot deat Picks and	Decree 25 Trans. The Decree 11 to Ot of the Library of
Maintained by the Houston Independent School District.	Responsibilities with Respect to Student Records
I request that Houston ISD NOT release any direction required by law.	ctory information regarding my child, except as
I request that Houston ISD NOT release my child recruiter or an institution of higher education, without my	's name, address, and telephone number to a military specific written approval.
Student's Name	Student's Date of Birth
Students' School SECHS High School	Student's Grade
Name of Parent/Guardian	Date:
Parent/Guardian Signature	





2020-21 STUDENT LAPTOP LOAN AGREEMENT

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

- o The student and the student's parent/guardian must sign this laptop loan agreement. The school will keep this agreement on file.
- o The laptop may only be used for educational purposes. Any other use may result in the loss of laptop loan privileges.
- o The laptop may not be used for any inappropriate, unethical, or illegal purposes, to include activities on the Internet, use of email and messaging, and access to digital media and programs. Violations of this policy may result in the loss of laptop loan privileges and/or disciplinary action.
- o The laptop hardware and district-installed software may not be modified in any way. No software can be copied from the laptop, nor can any unapproved software be installed on the laptop. Occasionally teachers may direct students to install authorized software packages from the HISD Software Center.
- o Parents/guardians are required to pay a non-refundable fee of \$25.
- o The student's parent/guardian accepts financial responsibility for any intentional damage to the laptop or damage due to gross negligence. The district may take legal action to recover any unpaid costs of such damage. More information regarding the care of the laptop and instructional materials is in the student manual.
- o The district will provide a padded laptop bag or case to each student. The bag/case will fit inside a backpack. The laptop must always be secured and carried in its case when not in use or being moved.
- o The laptop is the property of Houston ISD. The laptop must be returned to the student's school prior to the end of each school year, or if the student withdraws from school or changes schools midyear. Laptops not returned as required may be reported to the police as stolen.
- o The student will promptly report to school officials if the laptop is lost, stolen, or damaged.
- o The district provides information to both students and parents/guardians about proper care of the laptop and the responsible use of technology. Students attend a digital citizenship orientation, and parents are invited to open house events with presentations and handouts on these topics.
- o The student and the student's parent/guardian have read both the: a) Acceptable Use Policy for Electronic Services for Students and b) Responsible Digital Citizenship Policy Agreement.

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

Student Name (print)	_ Phone
Address/City/State/Zip	
Student Signature	Date
Parent Signature	
Student ID	Grade Level
School Name: South Early College High School	



SOUTH EARLY COLLEGE HS LAPTOP LOAN AGREEMENT

School Year 2020 - 2021



In addition to the HISD Student Laptop Loan Agreement for the 2020 -2021 school year, students are to comply with the following guidelines.

- Laptops are to be used for school purposes only. Use of the laptop for any other reason may void the laptop agreement and result in the termination of laptop privileges.
- Chargers, Bags, Straps and laptop battery is NOT covered by the \$25. If these items are lost/stolen student is responsible for replacement, even if the device is lost or stolen.
- The laptop must always be secured and carried in its case when not in use or being moved

ITEM	REPLACEMENT COST	ITEM	REPLACEMENT COST
HP Laptop x360	\$1,100.00	Laptop Bag	\$38.00
HP Laptop Charger	\$55.00	Laptop Strap	\$9.00

Damage/Stolen/Lost Laptop

If a laptop is stolen, missing or damaged, the student must immediately report it to room 121 within 72 hours to Mr. Arauco.

- 1st offense: PowerUp Administrator explains to student about their laptop responsibilities and replaces the broken or stolen/missing laptop. Those that have already paid will receive a replacement. If the student has not paid the \$25 for loan agreement, the student will need to do so before a replacement is issued.
- 2nd offense: Student and Parent will be notified about their 2nd offense (missing/stolen or damaged) and will pay another \$25 before a new device is issued.
- 3rd offense: A missing, stolen or damaged laptop is considered intentional and/or negligent.
 - For damaged laptops, Parent is responsible for repairs per HISD contract and no laptop will be issued back under the HISD neglect clause.
 - o If laptop is stolen/lost and police report is filed twice within the same academic year, a laptop will not be issued per HISD contract.
 - o If a student loses laptop privileges, the student needs to bring their own personal laptop.

End of the Year Laptop Return

At the end of the academic year the laptop, charger, case and strap are turned at the time requested.

- Students who do not turn in an item from the previous year will not be issued that item the following year, until payment is complete.
- Seniors who do not turn in all laptop items will not be able to walk across the stage or be cleared for graduation, until all items are returned, or payment is complete.

Outside Devices

Non-PowerUp devices can't be 100% compatible with HISD network. Some access will be restricted.

Laptops are HISD Property

Laptops are the property of HISD and students are required to surrender their laptop to teachers, administrators, and other authorized HISD personnel when asked. Students should not alter, modify, or cosmetically change the laptop or case for any reason this includes but is not limited to stickers, writing or damage to laptop case in any manner. I understand and agree to assume full responsibility for the proper care and educational use of the laptop computer equipment as described in this document.

Student Name:	ID Grade
Student Signature	Date
Parent Signature	Parent email