

Dakota Community Unit School District
NEW STUDENT CHECK LIST



New Student Information Packet

- **PROOF of Residency**
- **Permanent Enrollment Record**
- **Student Record Release**
- **Health Form for School Nurse**
- **Home Language Survey**

Registration Packet for **NEW STUDENTS** to the District only

Returning Students will use on-line registration through Skyward

- **Student Registration Authorization**
 - Student(s)
 - Skylert
 - Family information
 - Residency (Family 1 Residential) (Family 2 Non-Residential)
 - Emergency Contacts
 - Emergency Medical consent
 - Parent/Student Handbook

Registration Permissions (attachments)

- **Media Consent**
- **BioMetric Consent (Grade 7-12 only)**
- **Electronic Network Access: Acceptable Use Policy Agreement**
- **Chromebook**
- **Bus Transportation Information**
- **Student Driving** (if the student drives to school or CareerTEC)

What to bring on Tuesday, July 24th between 2pm - 6:30pm

- Completed New Student Information and Registration Packet
- Residency Verification Documents
- Student Certified Birth Certificate
- Student social security card
- If applicable: Child Custody Verification (legal)

Registration is not complete until school personnel verify address in person.

Questions can be directed to either office @ the phone number 1-844-632-5682 or 1-844-6-DAKOTA

PROOF OF RESIDENCY

Grade

Name of Students _____

Parents Name _____

Address _____

Evidence of proof of residency presented:

Category 1 (one document)

- Real Estate Tax Bill
- Mortgage Papers
- Signed Lease
- An Agreement of Sale
- Affidavit from local resident attesting registrant is living with the owner at no cost (Additional form necessary)

Category II (two documents showing proper address)

- Driver's License
- Auto Registration
- Voter Registration
- Credit Cards
- Library Card
- Public Aid Card
- Gas or Electric Bill (Telephone bill not accepted)
- Home/Apartment Insurance Papers



Dakota Community Unit District 201

400 Campus Drive
Dakota, Illinois 61018
1-844-632-5682

Bob Prusator
Interim Superintendent
Craig Mathers
Interim Superintendent
Jason Grey
7-12 Principal
Jeff Milburn
PreK-6 Principal

PERMANENT ENROLLMENT RECORD

Date: _____

To the Parent: We are asking for the following information so that we may know and understand your child and be able to deal with her/her as intelligently as possible. We shall appreciate your cooperation in completing this record; where applicable, as completely as you can, recognizing that information we seek is for the welfare of your child.

1. CHILD

FULL NAME: _____

LAST, FIRST MIDDLE

GRADE ENTERING _____

AGE _____

SEX _____

SSN _____

DATE OF BIRTH _____

PLACE OF BIRTH (city/state) _____

STREET/ROAD _____

PO BOX _____

CITY/ZIP _____

ETHNICITY (circle)

NO – not Hispanic/Latino

YES - Hispanic/Latino

RACE (circle)

White
Asian

Black or African American
Native Hawaiian

American Indian or Alaska Native;
or other Pacific Islander

TRANSFER FROM

YEAR

SCHOOL

LOCATION

YEARS ATTENDED

2. FATHER

If Deceased: Date: _____

NAME _____

DOB _____

BIRTH PLACE _____

EMPLOYER /OCCUPATION _____

PHONE/ HOURS _____

BUSINESS ADDRESS _____

EDUCATION _____

3. MOTHER

If Deceased: Date: _____

MAIDEN NAME _____

DOB _____

BIRTH PLACE _____

EMPLOYER /OCCUPATION _____

PHONE/ HOURS _____

Continue back

BUSINESS ADDRESS _____

EDUCATION _____

Continue back

4. Does your child currently receive special education services?

5. Has your child EVER received special education services? If so when?

6. Has there been anything in the home conditions or the family situation which you think may have affected or is affecting the child?

7. Names and Birth dates of ALL children: [List in order of oldest/youngest]

8. Other members of the household and relationship:

9. Does the child have any unusual problems at home?

Pre-K Students Only: 10. Was the child's development unusual in any way? (walking/talking etc.)

PARENT OR GUARDIAN SIGNATURE

RELATIONSHIP TO CHILD



Dakota Community Unit District 201

400 Campus Drive
Dakota, Illinois 61018
1-844-632-5682

Bob Prusator
Interim Superintendent
Craig Mathers
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7-12 Principal
Jeff Milburn
PreK-6 Principal

STUDENT RECORD RELEASE FORM

Date: _____

I hereby
authorize:

School in which the student is transferring from

Address City State Zip

- To Release:
1. Cumulative Records
 2. Health Records
 3. Psychological Records
 4. IEP
 5. Special Education Testing
 6. Student Transfer Form (IL)
 7. Other _____

For: _____
STUDENT FULL NAME

STUDENT DATE OF BIRTH

Forward Information to:	Dakota High School	Dakota Elementary School
	Attn: Student Records	Attn: Student Records
	300 Campus Drive	400 Campus Drive
	Dakota IL 61018	Dakota IL 61018
	FAX: 815.449.2322	FAX 815.449.2459

PARENT OR GUARDIAN SIGNATURE

RELATIONSHIP



Dakota Community Unit District 201

400 Campus Drive
Dakota, Illinois 61018
1-844-632-5682

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DAKOTA SCHOOLS HEALTH FORM

Student's Name _____ Grade _____ Birth Date _____

Address _____ City _____ Zip _____

Phone _____ Parents/Guardians _____

Doctor's Name _____ Phone _____

Dentist's Name _____ Phone _____

Please CIRCLE the following and DESCRIBE symptoms as it pertains to your child:

Asthma _____ Frequent Ear Infections _____

Seizures _____ Frequent Strep Throat _____

A.D.D. _____ Bladder/Bowel Problems _____

Allergies _____ Congenital Defects _____

Bee Sting Allergy _____ Heart Condition _____

Epinephrine Kit? _____ Positive TB Test _____

Medications _____ Diabetes _____

Bleeding Disorder (frequent nose bleeds, hemophilia)

Other _____

Hospitalizations _____

Surgeries _____

Has the child ever had an illness that kept him/her out of school for a month or more? _____

If so, When? _____

Explain any other medical problems that the school should be aware of

Birth History/Family History:

Full Term Pregnancy _____ Premature _____ Weeks Gestation _____

Any Complications? _____

Alcohol use/Drug use in pregnancy? _____

Child walked at age _____ Child spoke at age _____

Any Medical problems with family members? _____

Child lives with _____

Number of Siblings in family _____

Have there been any stresses in your child's life that you would like us to be aware of?

THIS INFORMATION IS CONFIDENTIAL AND WILL BE TREATED AS SUCH. THANK YOU FOR YHOUR COOPERATION.

Diane Scaduto, RN Dakota School District Nurse



Home Language Survey

To be completed upon enrollment in Dakota CUSD201

The completed Home Language Survey is placed in the student's temporary record as defined in 23 Ill. Admin. Code 375 (Student Records)

Directions: Please answer the following questions. Sign your name and date at the bottom.

1. Is a language other than English spoken in your home? ___ Yes ___ No If yes, what is the language? _____

2. Does your child speak a language other than English? ___ Yes ___ No If yes, what is the language? _____

3. How many years has your child been enrolled in an English speaking school? _____

4. Has your child been screened for English Language Proficiency? ___ Yes ___ No If yes, when and where? _____

5. Has your child been enrolled in a Bilingual Program? ___ Yes ___ No If yes, when and where? _____

Signature of Parent/Guardian _____

Date _____

For Office Use Only

If the answer to either question is "Yes", the child is considered to have a non-English background.

The district shall, using the prescribed screening instrument, screen the English Language Proficiency of each student identified through the home language survey as having a non-English background.

1 Student Last Name	First	Middle	Date of Birth	Grade Entering
2 Student Last Name	First	Middle	Date of Birth	Grade Entering
3 Student Last Name	First	Middle	Date of Birth	Grade Entering

FAMILY 1 Custodial/Residential Household

()
Primary Phone – SKYLERT

This number will be used to **notify all parents by phone within minutes** of an emergency or unplanned event that causes early dismissal, school cancellation or late start. This call could come in early morning or evening or sometimes during school hours.

Residential Address _____ City _____ IL _____ Zip _____

I certify that my child or ward resides within the boundaries of Dakota C.U.S.D. #201 and meets the statutory requirement for attendance at one of the Dakota schools. I understand that I may be asked to provide proof of eligibility to attend and that fraudulent enrollment will result in my child's removal from school and in legal action to recover per diem attendance costs as well as legal expenses.

**If there is a change of address, documentation needs to be given to the school district when the move takes place.*

Student resides at this address with whom: (CIRCLE) **Mother / Father / Step-Mother / Step-Father / Guardian**

1 Parent/Guardian Name	Relationship To Child	Phone	Type: Cell/Home	Email
	Place of Employment	Phone		Work Hours
2 Parent/Guardian Name	Relationship To Child(Phone	Type: Cell/Home	Email
	Place of Employment	Phone		Work Hours

FAMILY 2 Non-Residential Household

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Primary Phone – SKYLERT

This number will be used to **notify all parents by phone within minutes** of an emergency or unplanned event that causes early dismissal, school cancellation or late start. This call could come in early morning or evening or sometimes during school hours.

Address _____ City _____ St _____ Zip _____

1 Parent/Guardian Name	Relationship To Child	Phone	Type: Cell/Home	Email
	Place of Employment	Phone		Work Hours
2 Parent/Guardian Name	Relationship To Child	Phone	Type: Cell/Home	Email
	Place of Employment	Phone		Work Hours

EMERGENCY CONTACTS – *other than* Mother/Father/Guardian *Please list at least (2) two.*

_____ Name	_____ Relationship To Child	_____ Phone	_____ Type: Cell/Home
_____ Name	_____ Relationship To Child	_____ Phone	_____ Type: Cell/Home
_____ Name	_____ Relationship To Child	_____ Phone	_____ Type: Cell/Home

EMERGENCY Medical Treatment Consent:

If I cannot be reached and if in the judgment of school authorities immediate medical attention is indicated, I authorize responsible school personnel **permission for emergency medical treatment** or to send my child(ren) to an available hospital.

_____ Parent Name	_____ Parent Signature	_____ Date
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Student Handbook and Discipline Code Sign-off:

I have read, shared with my child, and agreed to the conditions of the Student/Parent Handbook and School Board policy on student behavior which is available on the District Website

I have read and shared with my child these materials and understand all the rules, responsibilities and expectations and I understand that I am responsible for all information contained therein.

_____ Parent Name	_____ Parent Signature	_____ Date
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ATTACHMENTS:

MEDIA CONSENT: Using a Photograph or Videotape of a Student

BioMETRIC CONSENT OF A STUDENT

ELECTRONIC NETWORK ACCESS: Acceptable Use Policy Agreement

CHROMEBOOK USER AGREEMENT

TRANSPORTATION INFORMATION FORM

STUDENT DRIVING FORM

Distribute to parent(s)/guardian(s) at the time they register a child for school and/or annually at the beginning of the school year.

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

Pictures of Named Students. Many times, however, the school will want to identify a student in a school picture. School officials want to acknowledge those students who participate in a school activity or deserve special recognition.

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

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

Parent/Guardian Signature

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

Exhibit – Letter to Parent(s)/Guardian(s) Regarding Student Use of the District’s Electronic Networks

Dear Parent(s)/Guardian(s),

We have the ability to enhance your child’s education through the use of electronic networks, including the Internet. The Internet offers vast, diverse, and unique resources. The District’s goal in providing this service is to promote educational excellence by facilitating resource sharing, innovation, and communication. Your authorization is needed before your child may use this resource.

The Internet electronically connects thousands of computers throughout the world and millions of individual subscribers. Students and teachers may have access to:

- Limited electronic mail communications with people all over the world
- Information from government sources, research institutions, and other sources
- Discussion groups
- Many libraries, including the catalog to the Library of Congress, and the Educational Resources Information Clearinghouses (ERIC).

With this educational opportunity also comes responsibility. You and your child should read the enclosed *Authorization for Electronic Network Access* and discuss it together. The use of inappropriate material or language, or violation of copyright laws, may result in the loss of the privilege to use this resource. Remember that you are legally responsible for your child’s actions.

The District takes precautions to prevent access to materials that may be defamatory, inaccurate, offensive, or otherwise inappropriate in the school setting. On an unregulated network, however, it is impossible to control all material and a user may discover inappropriate material. Ultimately, parent(s)/guardian(s) are responsible for setting and conveying the standards that their child or ward should follow. To that end, the School District supports and respects each family’s right to decide whether or not to authorize Internet access.

Please read and discuss the *Authorization for Electronic Network Access* with your child. If you agree to allow your child to have an Internet account, sign the *Authorization* form.

For purposes of this section, "biometric information" means any information that is collected through an identification process for individuals based on their unique behavioral or physiological characteristics, including fingerprints, hand geometry, voice, or facial recognition or physiological characteristics, including fingerprint, hand geometry, voice, or facial recognition or iris or retinal scans.

As a means to provide a secure and safe educational environment, the District collects biometric information from students and may utilize that information to identify students, to control access to school facilities, to minimize the possibility of improper use of stolen or lost student identification materials, and to prevent the fraudulent use of student identification materials.

The collection and use of student biometric information shall be in accordance with the following requirements:

1. Written permission from the individual who has legal custody of the student, as defined by Section 10-20.12b of the Illinois School Code, or from the student if he or she is 18 years of age or older, must be obtained. The failure to obtain such consent shall not serve as the basis for the refusal of any services otherwise available to the student from the District.
2. Student biometric information shall be collected, transmitted and stored in a manner designed to protect it from disclosure.
3. Student biometric information shall be used solely for identification and fraud prevention purposes.
4. The sale, lease, or other disclosure of the student biometric information to another person or entity other than the District is prohibited unless:
 - a. The individual who has legal custody of the student, or the student if he or she is 18 years of age or older, consents to the disclosure; or
 - b. The disclosure is required by court order.
5. The District shall discontinue the use of a student's biometric information upon either of the following occurrences:
 - a. The student's graduation or withdrawal from the school district; or
 - b. The receipt of a written request to discontinue the use of such information from the individual having legal custody of the student or from the student if he or she is 18 years or age or older.
6. In the event the District discontinues the use of a student's biometric information in accordance with section 5 above, the District shall destroy all of that student's biometric information within 30 days after the use of such information is discontinued.

Ref: LEGAL REF: 105 ILCS 5/10-20.40

Date Established: October 16, 2007

FOR PARENTS/LEGAL GUARDIANS

I acknowledge that I am have read and am familiar with the District's policy concerning the use of student biometric information and hereby consents to the collection and use of such information in accordance with District policy. The undersigned acknowledges his/her right to discontinue this consent by notifying the District in writing of his/her request to discontinue this consent.

Parent/Guardian Signature

Exhibit – Authorization for Electronic Network Access

Each teacher/staff member must sign this Authorization as a condition for using the District's Electronic Network connection. Each student and his or her parent(s)/guardian(s) must sign the Authorization before being granted unsupervised access. School Board members and administrators are treated like teachers for purposes of this Authorization. Please read this document carefully before signing.

All use of the Internet shall be consistent with the District's goal of promoting educational excellence by facilitating resource sharing, innovation, and communication. This Authorization does not attempt to state all required or proscribed behavior by users. However, some specific examples are provided. **The failure of any user to follow the terms of the *Authorization for Electronic Network Access* will result in the loss of privileges, disciplinary action, and/or appropriate legal action.** The signature(s) at the end of this document is legally binding and indicates the party who signed has read the terms and conditions carefully and understands their significance.

Terms and Conditions

1. **Acceptable Use** – Access to the District's electronic networks must be (a) for the purpose of education or research, and be consistent with the educational objectives of the District, or (b) for a legitimate business use.
2. **Privileges** – The use of the District's electronic networks is a privilege, not a right, and inappropriate use will result in a cancellation of those privileges. The system administrator will make all decisions regarding whether or not a user has violated this *Authorization* and may deny, revoke, or suspend access at any time; his or her decision is final.
3. **Unacceptable Use** – You are responsible for your actions and activities involving the network. Some examples of unacceptable uses are:
 - a. Using the network for any illegal activity, including violation of copyright or other contracts, or transmitting any material in violation of any U.S. or State law;
 - b. Unauthorized downloading of software, regardless of whether it is copyrighted or devirused;
 - c. Downloading copyrighted material for other than personal use;
 - d. Using the network for private financial or commercial gain;
 - e. Wastefully using resources, such as file space;

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- f. Gaining unauthorized access to resources or entities;
 - g. Invading the privacy of individuals;
 - h. Using another user's account or password;
 - i. Posting material authored or created by another without his/her consent
 - j. Posting anonymous messages;
 - k. Using the network for commercial or private advertising;
 - l. Accessing, submitting, posting, publishing, or displaying any defamatory, inaccurate, abusive, obscene, profane, sexually oriented, threatening, racially offensive, harassing, or illegal material; and
 - m. Using the network while access privileges are suspended or revoked.
4. Network Etiquette – You are expected to abide by the generally accepted rules of network etiquette. These include, but are not limited to, the following:
- a. Be polite. Do not become abusive in your messages to others.
 - b. Use appropriate language. Do not swear, or use vulgarities or any other inappropriate language.
 - c. Do not reveal the personal addresses or telephone numbers of students or colleagues.
 - d. Recognize that electronic mail (E-mail) is not private. People who operate the system have access to all mail. Messages relating to or in support of illegal activities may be reported to the authorities.
 - e. Do not use the network in any way that would disrupt its use by other users.
 - f. Consider all communications and information accessible via the network to be private property.

5. No Warranties – The District makes no warranties of any kind, whether expressed or implied, for the service it is providing. The District will not be responsible for any damages you suffer. This includes loss of data resulting from delays, non-deliveries, missed-deliveries, or service interruptions caused by its negligence or your errors or omissions. Use of any information obtained via the Internet is at your own risk. The District specifically denies any responsibility for the accuracy or quality of information obtained through its services.
6. Indemnification – The user agrees to indemnify the School District for any losses, costs, or damages, including reasonable attorney fees, incurred by the District relating to, or arising out of, any breach of this *Authorization*.
7. Security – Network security is a high priority. If you can identify a security problem on the Internet, you must notify the system administrator or Building Principal. Do not demonstrate the problem to other users. Keep your account and password confidential. Do not use another individual's account without written permission from that individual. Attempts to log-on to the Internet as a system administrator will result in cancellation of user privileges. Any user identified as a security risk may be denied access to the network.
8. Vandalism – Vandalism will result in cancellation of privileges and other disciplinary action. Vandalism is defined as any malicious attempt to harm or destroy data of another user, the Internet, or any other network. This includes, but is not limited to, the uploading or creation of computer viruses.
9. Telephone Charges – The District assumes no responsibility for any unauthorized charged or fees, including telephone charges, long-distance charges, per-minute surcharges, and/or equipment or line costs.
10. Copyright Web Publishing Rules – Copyright law and District policy prohibit the republishing of text or graphics found on the Web or on District Web sites or file servers, without explicit written permission.
 - a. For each re-publication (on a Web site or file server) of a graphic or a text file that was produced externally, there must be a notice at the bottom of the page crediting the original producer and noting how and when permission was granted. If possible, the notice should also include the Web address of the original source.
 - b. Students and staff engaged in producing Web pages must provide library media specialists with e-mail or hard copy permissions before the Web pages are published. Printed evidence of the status of "public domain" documents must be provided.
 - c. The absence of a copyright notice may not be interpreted as permission to copy the materials. Only the copyright owner may provide the permission. The manager of the Web site displaying the material may not be considered a source of permission.
 - d. The "fair use" rules governing student reports in classrooms are less stringent and permit limited use of graphics and text.
 - e. Student work may only be published if there is written permission from both the parent/guardian and student.

11. Use of Electronic Mail

- a. The District's electronic mail system, and its constituent software, hardware, and data files, are owned and controlled by the School District. The School District provides e-mail to aid students and staff members in fulfilling their duties and responsibilities, and as an education tool.
- b. The District reserves the right to access and disclose the contents of any account on its system, without prior notice or permission from the account's user. Unauthorized access by any student or staff member to an electronic mail account is strictly prohibited.
- c. Each person should use the same degree of care in drafting an electronic mail message as would be put into a written memorandum or document. Nothing should be transmitted in an e-mail message that would be inappropriate in a letter or memorandum.
- d. Electronic messages transmitted via the District's Internet gateway carry with them an identification of the user's Internet "domain." This domain name is a registered domain name and identifies the author as being with the School District. Great care should be taken, therefore, in the composition of such messages and how such messages might reflect on the name and reputation of this School District. Users will be held personally responsible for the content of any and all electronic mail messages transmitted to external recipients.
- e. Any message received from an unknown sender via the Internet should either be immediately deleted or forwarded to the system administrator. Downloading any file attached to any Internet-based message is prohibited unless the user is certain of that messages transmitted to external recipients.
- f. Use of the School District's electronic mail system constitutes consent to these regulations.

Internet Safety

1. Internet access is limited to only those "acceptable uses" as detailed in these procedures. Internet safety is almost assured if users will not engage in "unacceptable uses," as detailed in this *Authorization*, and otherwise follow this *Authorization*.
2. Staff members shall supervise students while students are using District Internet access to ensure that the students abide by the Terms and Conditions for Internet access contained in this *Authorization*.
3. Each District computer with Internet access has a filtering device that blocks entry to visual depictions that are (1) obscene, (2) pornographic, or (3) harmful or inappropriate for students, as defined by the Children's Internet Protection Act and as determined by the Superintendent or designee.
4. The system administrator and Building Principals shall monitor student Internet access.

Students, parent(s)/guardian(s), and teachers need only sign this *Authorization for Electronic Network Access* once while enrolled or employed by the School District.

I understand and will abide by the above *Authorization for Electronic Network Access*. I understand that the District and /or its agents may access and monitor my use of the Internet, including my E-mail and downloaded material, without prior notice to me. I further understand that should I commit any violation, my access privileges may be revoked, and school disciplinary action and /or appropriate legal action may be taken. In consideration for using the District's electronic network connection and having access to public networks, I hereby release the School District and its Board members, employees, and agents from any claims and damages arising from my use of, or inability to use the electronic network connection.

(Required if the user is a student:)

I have read this *Authorization for Electronic Network Access*. I understand that access is designed for educational purposes and that the District has taken precautions to eliminate controversial material. However, I also recognize it is impossible for the District to restrict access to all controversial and inappropriate materials. I will hold harmless the District, its employees, agents, or Board members, for any harm caused by materials or software obtained via the network. I accept full responsibility from supervision if and when my child's use is not in a school setting. I have discussed the terms of this *Authorization* with my child. I hereby request that my child be allowed access to the District's electronic network connection.

I have read, shared with my child, and agreed to the conditions of this District Authorization for Electronic Network Access User Agreement.

Parent Signature

Dakota CUSD #201 Student / Parent Chromebook User Agreement

Student Chromebook users will adhere to the following guidelines:

- Care for your Chromebook appropriately and do not leave it unattended for any reason.
- Charge your Chromebook's battery to full capacity each night. **DO NOT** bring your charger to school.
- Keep food and beverages away from your Chromebook. They will cause damage to the device.
- Do not disassemble any part of your Chromebook or attempt any repairs.
- Protect your Chromebook by keeping it in its case at all times and carrying it appropriately.
- Do not place decorations (stickers, markers, writing, etc.) on the Chromebook or its case.
- Understand that the Chromebook you are issued is subject to inspection at any time without notice and remains the property of DCUSD #201.
- Follow the policies outlined in the Chromebook Policy Handbook and the District Acceptable Use Policy while at school as well as outside the school day.
- You are responsible for filing a police report in the case of theft or damage caused by fire.
- You are responsible for all damage or loss caused by intentional neglect or abuse.
- Student agrees to return the Chromebook, power cord/charger, and case in good working condition at the end of each school year, or upon leaving the district.

Dakota CUSD #201 Chromebook Device Insurance Agreement:

Optional Chromebook insurance may be purchased through the Dakota Community Unit School District #201 prior to the deployment of the Chromebook to your child. The insurance cost is \$30.00 annually for each Chromebook. The first claim for damage will have no deductible; however, recurring claims will have deductibles increasing in increments of \$30.00 for each claim. Deductibles for lost or destroyed devices may be higher. If a lost Chromebook is found, the deductible fee will be fully refunded. If a student withdraws from Dakota Community Unit School District #201 and then re-enrolls later in the current school year, the coverage purchased at the student's initial registration will be reinstated along with the number of claims made prior to withdrawal.

Lost, Negligently Cared for, Intentionally Damaged, or Uninsured Devices and Accessories:

A Chromebook or any of its accessories that are lost (whereabouts unknown), negligently cared for, or intentionally damaged is the responsibility of the student and parent involved in the loss of property. The user will not be given another device or accessory for home use until the replacement, or repair, cost of the lost/damaged device or accessory is paid to the school.

- | | |
|-----------------------------------|----------------------|
| ● Replacement Chromebook - \$250 | ● Zip-Up Case - \$25 |
| ● Replacement motherboard - \$150 | ● Touch pad - \$40 |
| ● AC adapter & power cord - \$30 | ● Screen - \$55 |

The above costs would be assessed from Free, Reduced, or Full pay students, the same as for lost or damaged textbooks, library books, or other school equipment.

Purchase/Decline of Insurance is done at Skyward OnLine Registration.

_____ I would like to purchase Chromebook insurance for the annual fee of \$30.

_____ I am declining to purchase Chromebook insurance and will be responsible damages.

I have read, shared with my child, and agreed to the conditions of this Chromebook User Agreement.

Parent Signature

Freeport, Parochial & Dakota Transportation Information Form

2018- 2019 School Year

(Page 1 of 1)

Child's Legal Name: _____ Birth Date: _____
(Last Name, First Name, Middle Initial) (mm/dd/yyyy)

Home Address: _____
(Address, City, State ZIP Code)

Attending School: _____ Grade: _____

Where will the child be picked up? _____ Address: _____
Home, day-care, grandparents etc. (Address, City, State ZIP Code)

Where will the child be dropped off? Address: _____
Home, day-care, grandparents etc. (Address, City, State ZIP Code)

Parent/Guardian Name: _____ Phone 1: _____
Phone 2: _____ (10 digit - numbers only)

Childcare Provider: _____
(10 digit - numbers only)
Phone: _____ (Last Name, First Name)
(10 digit - numbers only)

Address: _____
(Address, City, State ZIP Code)

Where will your child be dropped off when school is let out early?

(Home, day-care, grandparents etc.)
Address: _____

(Address, City, State ZIP Code)
Name of person expecting your child: _____ Home Phone: _____

- _____ (Last Name, First Name, Middle Initial) _____ (10 digit - numbers only)
My child will walk to the early release location.
- I will pick my child up at school when there is an early dismissal.
- My child will ride the bus to this location. (Bus eligible children only)

Parent/Guardian Signature

Date

Student Driving Form

Date/School Year: _____

Student Name/Grade _____

Student Name/Grade _____

This form is required to be on file in the Dakota High School office for all student drivers

- Check mark this box if you are reporting a change or update. You are responsible for reporting any changes during the school year, including adding or removing a vehicle.

List all vehicles for which you may at one time or another drive to school.

License Plate	Make of Vehicle	Color
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of Student or Parent _____ Date _____

Career Tec Permission to Drive/Transport/Ride

Signing this does not mean you HAVE to drive. The School Bus to CareerTEC is always available. This gives the student permission to drive/ride when needed

Name _____ permission to:

- Drive to CareerTEC no passengers. Permission to drive to Career Tec on a permanent basis is being requested.
- To Drive and Transport: _____ Permission to transport another student(s) to Career Tec on a permanent basis is being requested. Both students and parents must sign their permit before being approved.
- Ride with: _____ Permission to ride to CareerTEC with another student on a permanent basis is being requested. Both students and parents must sign their permit before being approved.

Approval to drive or ride with another student is granted only when both forms from each student are on file.

I understand that being **tardy or absent** will be handled exactly the same as being tardy or absent from classes at Dakota. In other words, if there are car problems, etc., the consequences will be followed as listed in the discipline handbook. Any change in arrangements, must be cleared through the office prior to boarding the bus.

(Student Signature) _____ (Parent Signature)

CareerTEC LATE ARRIVAL: Permission for late arrival to school when CareerTEC classes are not scheduled, or on days that CareerTEC classes are cancelled.

(Parent signature) _____ (Date)