ASCENDER PARENT PORTAL

ASCENDER GUIDES

ASCENDER
ELEVATING TECHNOLOGY SOLUTIONS



formmanagement

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Forms Management 1

Forms Management

txConnect Admin > Administrator Options > Settings > Forms Management

This page allows district-level users to manage forms for new student enrollment, including static printable forms and customized forms for student online registration and demographic updates. This page can only be accessed from the Administrator Options page.

There are three types of forms that can be maintained via the Forms Management page: standard forms, static forms, and dynamic forms.

- ***Static forms*** cannot be updated online by parents; they can by viewed, printed, completed by hand, and returned to the campus. Static forms will vary by campus and district, and can be delivered in various formats, such as Microsoft Word, PDF, spreadsheet, etc. Calendars are an example of static documents. **Any static forms you upload should be ADA compliant.**
  - screen shot:

    <SCREENSHOT - sample static form>

- ***Dynamic forms*** are presented online and can be completed and submitted online. These forms may include student online registration and demographic updates, as well as document attachment fields and uploads. Dynamic forms are built from a list of available fields.
  - Screen shot:
  - Available fields:

    NOTES:

    - Default friendly names are initially provided in the program, but they can be changed by administrators as needed. This list reflects the names initially provided.
    - The following fields are required: **Contact: Last Name**, **Contact: First Name**, and **Contact: Relation**.
    - Field names that begin with DOCSTOR_ can be added to a form to allow parents to upload these documents. If the ParentPortal-provided standard forms are used in your district, it may not be necessary to use DOCSTOR_ fields for these particular forms.
    - Field names that begin with MOCK_ are reserved for New Student Enrollment forms (special programs) and cannot be selected for any other dynamic forms.

Field Name	Default Friendly Name - English	Default Friendly Name - Spanish
ADDR_APT_NBR	Apartment Number (Mailing)	Número de departamento (postal)
ADDR_CITY	City (Mailing)	Ciudad (postal)
ADDR_STATE	State (Mailing)	Estado (postal)
ADDR_STR_DIR	Street Direction (Mailing)	Calle y número (postal)
ADDR_STR_NAME	Street Name (Mailing)	Nombre de la calle (postal)
ADDR_STR_NBR	Street Number (Mailing)	Número(postal)
ADDR_ZIP	Zip (Mailing)	Código postal (postal)
ADDR_ZIP4	Zip4 (Mailing)	Código postal4 (postal)
APT_NBR	Contact: Apartment Number	Contacto: Número de departamento
APT_NBR_PHYS_ADDR	Apartment Number (Physical)	Número de departamento (físico)
CAMPUS_CD_PRV	Previous Campus	Campus anterior
CELL_PHONE	Contact: Cell Phone	Contacto: Teléfono celular
CITY	Contact: City	Contacto: Ciudad
CITY_NAME_PHYS_ADDR	City (Physical)	Ciudad (física)
DL_NBR	Contact: Driver License Number	Contacto: Número de licencia de conducir
DL_ST	Contact: Driver License State	Contacto: Estado de licencia de conducir
DOB (SR_PARENT)	Contact: Date of Birth	Contacto: Fecha de nacimiento
DOB (SR_STU_DEMO)	Date of Birth	Fecha de nacimiento
DOCSTOR_ACCEPTABLEUSEPOLICY	Student Acceptable Use Policy	Política de uso aceptable para estudiantes
DOCSTOR_BC	Birth Certificate Document	Documento de certificado de nacimiento
DOCSTOR_CAPP	Chemical Abuse Participation Form	Formulario de participación en abuso de sustancias
DOCSTOR_DIRECTORY	Directory Form	Formulario del directorio
DOCSTOR_DISTRICTHANDBOOK	District Handbook	Manual del distrito
DOCSTOR_DL	Driver License Document	Documento de licencia de conducir
DOCSTOR_EMP_SURVEY	Employee Survey Form	Formulario de encuesta para empleados
DOCSTOR_ETHRACEQUESTIONNAIRE	Ethnicity and Race Data Questionnaire	Cuestionario de datos de origen étnico y raza
DOCSTOR_FAMILYSURVEY	Family Survey	Encuesta familiar

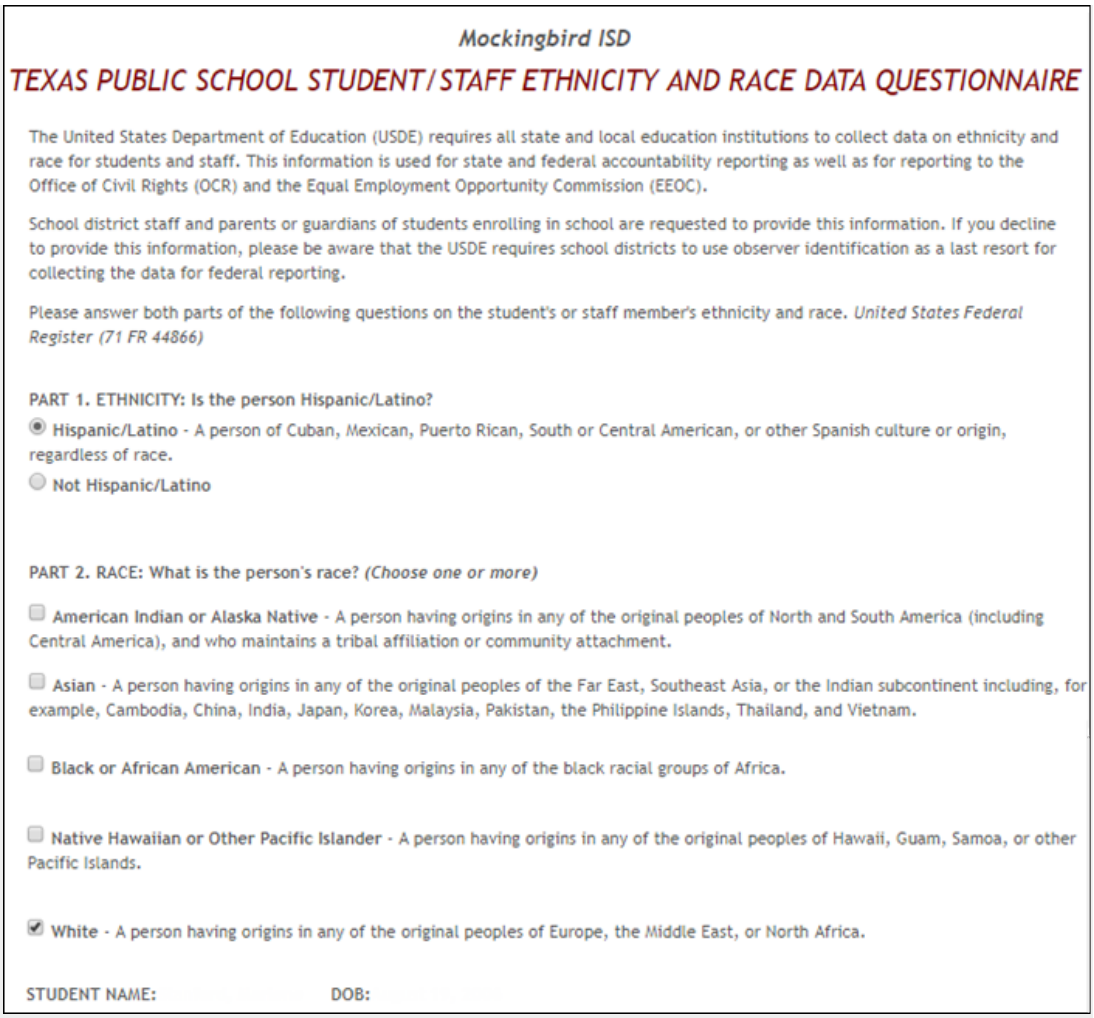
Field Name	Default Friendly Name - English	Default Friendly Name - Spanish
DOCSTOR_FOODALERGY*	Food and Allergy Form	Formulario de alimentos y alergias
DOCSTOR_FREELUNCH	Free Lunch (NSLP)	Almuerzo gratis (NSLP)
DOCSTOR_HISTSCHOOLATTENDANCE	History of School Attendance	Historial de asistencia escolar
DOCSTOR_HOMELANGSURVEY	Home Language Survey	Encuesta sobre idioma del hogar
DOCSTOR_IDENTITYVERIF	Identity Verification	Verificación de identidad
DOCSTOR_IMM*	Immunizations Document	Documento de inmunizaciones
DOCSTOR_MCVINTO	McKinney-Vento Form	Formulario McKinney-Vento
DOCSTOR_MILCONNECTEDSTUDATA	Military Connected Student Data	Datos de alumnos con conexiones militares
DOCSTOR_POR	Proof of Residency Document	Documento de comprobante de residencia
DOCSTOR_REGISTRATIONPACKET	Registration Packet	Paquete de registro
DOCSTOR_RELEASEOFINFO	Release of Information	Divulgación de información
DOCSTOR_SSC	Social Security Card	Tarjeta de seguro Social
DOCSTOR_STATEMENTSPECED	Statement of Special Education Services	Declaración de servicios de educación especial
DOCSTOR_STUDENTMEDIARELEASE	Student Media Release	Divulgación de información del alumno a medios de comunicación
EMAIL (SR_PARENT)	Contact: Email	Contacto: Correo electrónico
EMAIL (SR_STU_DEMO)	Student Email Address	Dirección de correo electrónico del estudiante
EMERGENCY_FLAG	Contact: Emergency Contact	Contacto: Contacto de emergencia
ETHN_HISPANIC	Hispanic/Latino	
FOOD_ALLERGY	Food Allergy	Food Allergy
GEN	Contact: Generation	Contacto: Generación
HOME_LANG_CD	Pri Language Spoken at Home	
LANG_CD	Contact: Language	Contacto: Idioma
LANG_PRI	Pri Language Spoken by Student	
MIGRANT_FLAG	Contact: Migrant	Contacto: Migrante

Field Name	Default Friendly Name - English	Default Friendly Name - Spanish
MIL_BRANCH	Contact: Branch of Service	Contacto: Rama del servicio
MIL_IND	Military Connection	
MIL_RANK	Contact: Rank	Contacto: Rango
MOCK_FOSTER_CARE	Foster care	Cuidado tutelar
MOCK_HOMELESS	Is student homeless?	¿Es un estudiante sin hogar?
MOCK_LAST_YEAR_GRADE	Last year's grade	Grado del año pasado
MOCK_PREV_IN_504	504 Program	Programa 504
MOCK_PREV_IN_ALT_PROG	Alternative Program	Programa alternativo
MOCK_PREV_IN_ARMED_FORCES	Family members serving our country	Miembros de la familia que sirven a nuestro país
MOCK_PREV_IN_BIL_ESL	Bilingual/ESL	Bilingüe/ESL
MOCK_PREV_IN_DAEP_JJAEP	DAEP/JJAEP	DAEP/JJAEP
MOCK_PREV_IN_DYSLEXIA	Dyslexia	Dislexia
MOCK_PREV_IN_GT	Was student previously in GT?	¿El estudiante estuvo antes en GT?
MOCK_PREV_IN_IMMIGRANT	Immigrant Program	Programa para inmigrantes
MOCK_PREV_IN_MIGRANT	Migrant Program	Programa para migrantes
MOCK_PREV_IN_OTHER_PROG	Other Programs	Otros programas
MOCK_PREV_IN_SOCIAL_SERVICES	Social Services	Servicios sociales
MOCK_PREV_IN_SPECIAL_ED	Special Education	Educación especial
MOCK_PREV_IN_SPECIAL_ED_TYPE	If yes, which one?	En caso afirmativo
MOCK_PRIOR_RETENTION	Prior student retention?	
NAME_F (SR_STU_ENROLL)	First Name	Nombre
NAME_F (SR_PARENT)	Contact: First Name	Contacto: Nombre
NAME_GEN_CD	Generation	Generacion
NAME_L (SR_STU_ENROLL)	Last Name	Apellido
NAME_L (SR_PARENT)	Contact: Last Name	Contacto: Apellido
NAME_M (SR_STU_ENROLL)	Middle Name	Segundo nombre
NAME_M (SR_PARENT)	Contact: Middle Name	Contacto: Segundo nombre
NAME_STU_GOES_BY	Nickname	Apodo
OCCUPATION	Contact: Occupation	Contacto: Ocupación
OTHER_PHONE_AC	Contact: Other Phone Area Code	Contacto: Código de área de otro teléfono
OTHER_PHONE_EXT	Contact: Other Phone Extension	Contacto: Extensión de otro teléfono

Field Name	Default Friendly Name - English	Default Friendly Name - Spanish
OTHER_PHONE_NBR	Contact: Other Phone	Contacto: Otro teléfono
PAR_NAME	Parent Name	Nombre del padre/madre
PHONE_AREA_CD	Contact: Area Code	Contacto: Código de área
PHONE_AREA_CD_BUS	Contact: Business Area Code	Contacto: Código de área del negocio
PHONE_EXT_BUS	Contact: Business Phone Extension	Contacto: Extensión del teléfono del negocio
PHONE_NBR (SR_STU_DEMO)	Student Phone	Teléfono del estudiante
PHONE_NBR (SR_PARENT)	Contact: Phone	Contacto: Teléfono
PHONE_NBR_BUS	Contact: Business Phone	Contacto: Teléfono del negocio
PHONE_PREF	Contact: Phone Preference	Contacto: Preferencia telefónica
PHYS_ADDR_STATE	State (Physical)	Estado (físico)
PREV_DIST	Previous District	Distrito anterior
PRI_PHONE	Primary Phone	Teléfono principal
PRIMARY_FLAG	Contact: Guardian	Contacto: Tutor
PRIORITY	Contact: Priority	Contacto: Prioridad
RACE_AMER_INDIAN	American Indian/Alaskan Native	Indio americano/Nativo de Alaska
RACE_ASIAN	Asian	Asiático
RACE_BLACK	Black/African American	Negro/Afroamericano
RACE_PACIFIC_ISL	Hawaiian/Pacific Islander	Hawaiiano/Islas del Pacífico
RACE_WHITE	White	Blanco
RCV_MAILOUTS	Contact: Receive Mailouts	Contacto: Recibir comunicaciones por correo
RELAT	Contact: Relation	Contacto: Relación
SCH_YR	Contact: School Year	Contacto: Año escolar
SCND_PHONE	Secondary Phone	
SEQ_NO	Contact: Sequence Number	Contacto: Número consecutivo
SEX	Sex	Sexo
SSN	Contact: SSN	Contacto: NSS
STATE_CD	Contact: State	Contacto: Estado
STATE_STU_ID		
STR_DRCTN_PHYS	Street Direction (Physical)	Calle y número (física)
STR_NAME	Contact: Street Name	Contacto: Calle

Field Name	Default Friendly Name - English	Default Friendly Name - Spanish
STR_NAME_PHYS	Street Name (Physical)	Nombre de la calle (física)
STR_NBR	Contact: Street Number	Contacto: Número
STR_NBR_PHYS	Street Number (Physical)	Número (físico)
STU_CELL_PH	Student Cell Phone	Teléfono celular del estudiante
STU_ID	Student ID	Identificación del estudiante
STU_PHONE_AC	Student Area Code	Código de área del estudiante
TRANSPORT_IND	Contact: Right to Transport	Contacto: Derecho a transportar
VEH_COLOR	Contact: Vehicle Color	Contacto: Color del vehículo
VEH_LIC	Contact: Vehicle License Plate Number	Contacto: Número de placas del vehículo
VEH_LIC_ST	Contact: Vehicle License State	Contacto: Estado de registro del vehículo
VEH_MDL	Contact: Vehicle Model	Contacto: Modelo de vehículo
VEH_MK	Contact: Vehicle Make	Contacto: Marca del vehículo
ZIP	Contact: Zip	Contacto: Código postal
ZIP_CODE_PHYS_ADDR	Zip (Physical)	Código postal (físico)
ZIP4	Contact: Zip4	Contacto: Código postal4
ZIP4_PHYS_ADDR	Zip4 (Physical)	Código Postal4 (físico)

- ***Standard forms*** are predefined district-level forms that are common throughout Texas. The forms cannot be edited, but you can determine whether or not they are available to parents by including (or excluding) them from groups. Most forms are submitted annually; the Home Language Survey only needs to be submitted once during the student's lifetime enrollment in the district.
    - Forms list:
        - Ethnicity and Race Data Questionnaire:



Mockingbird ISD

TEXAS PUBLIC SCHOOL STUDENT/STAFF ETHNICITY AND RACE DATA QUESTIONNAIRE

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

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

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

PART 1. ETHNICITY: Is the person Hispanic/Latino?

(•) **Hispanic/Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

( ) **Not Hispanic/Latino**

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

[ ] **American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.

[ ] **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

[ ] **Black or African American** - A person having origins in any of the black racial groups of Africa.

[ ] **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

[x] **White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

STUDENT NAME: DOB:

- Falsification of Documents & Identify Verification:

Mockingbird ISD

Falsification of Documents

Identity Verification of Person Enrolling Student

STUDENT NAME: DOB:

STUDENT ID:

Falsification of Information

Texas Education Code 25.001 (h) and (i)
Texas Penal Code 37.10

A person who knowingly falsifies information on a form required for enrollment of a student in a school district is liable for the greater of the maximum tuition fee or the amount the district has budgeted for each student as maintenance and operating expenses if the student is not eligible for enrollment in the district but is enrolled on the basis of false information.

NOTE: Enrollment in specific magnet programs does not incur out of district tuition fees. Check with your individual counseling office if your student is enrolled in a magnet program.

DAILY TUITION RATES ARE SUBJECT TO CHANGE. TUITION RATES ARE REVISED YEARLY IN OCTOBER AND ANNOUNCED BY THE TEXAS EDUCATION AGENCY. STUDENTS WHO QUALIFY FOR SPECIAL EDUCATION SERVICES DIFFER FROM GENERAL EDUCATION STUDENTS DUE TO THE ADDITIONAL SERVICES THEY RECEIVE. CHECK WITH YOUR CAMPUS COUNSELING OFFICE FOR CURRENT TUITION RATES.

Proof of Identity of Person Enrolling Student

Regardless of whether or not a child's parent, guardian, or other person with legal control of the child under a court order is enrolling a child, Texas Education Code as amended in 2001, a district is required to record the name, address, and date of birth, of the person enrolling a child. TEC Section 25.002(f). Providing a copy of your government issued ID with photo satisfies this request.

I UNDERSTAND THAT I MUST PROVIDE MY CURRENT ADDRESS, AND PROOF OF IDENTITY. I ALSO UNDERSTAND THAT IF I HAVE KNOWLINGLY FALSIFIED INFORMATION ON FORMS REQUIRED FOR ENROLLMENT, I AM LIABLE FOR TUITION FEES AS DESCRIBED ABOVE.

- FERPA and Directory Information Notice:

Mockingbird ISD

NOTICE OF PARENT AND STUDENT RIGHTS FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA) and DIRECTORY INFORMATION

Mockingbird ISD maintains general education records which are available to the parent, guardian, or person standing in lawful control of the student under a court order. Both parents/guardians have access to the records unless the school is in possession of a court order limiting access.

Federal law provides that student "educational records" are confidential. School records are defined as being directly related to a student and maintained by the school including, but not limited to: attendance, grades, discipline, test scores, health and immunization, and psychological or counseling records. Directory information **is not** confidential under FERPA.

Certain information about district students is considered directory information and will be released to anyone who follows the procedures for requesting the information unless the parent or guardian objects to the release of the directory information about the student. If you do not want Mockingbird ISD to disclose directory information from your child's education records without your prior written consent, you must notify the district in writing by the tenth (10th) day of the school year.

Mockingbird ISD has designated the following information as directory information: student's name, address, telephone listing, electronic mail address, photograph, date and place of birth, major field of study, degrees, honors and awards received, dates of attendance, grade level, most recent educational institution attended, participation in officially recognized activities and sports, and weight and height of members of athletic teams.

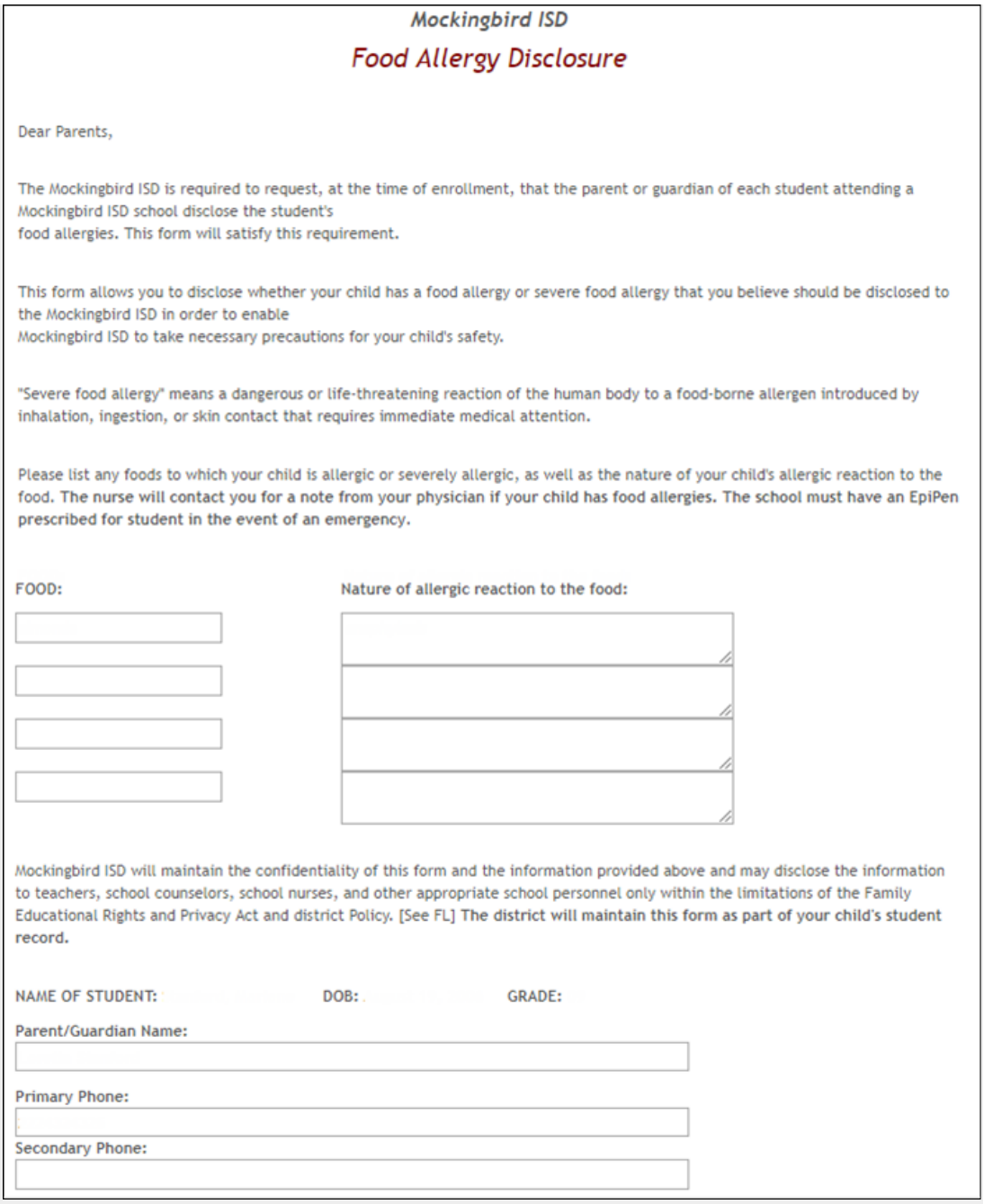
1. **Student directory information is available to the public unless the parent/guardian restricts the release of the information.** According to the Texas Public Information Act (TPIA), Mockingbird ISD must release directory information promptly upon request and may not ask requestors the reason for the requested information. Parents/guardians have the right to restrict the release of directory information, but must do so in writing within the first ten (10) days of the school year or enrollment or see number 4 below.

2. Parents/guardians may alter their choice regarding directory information at any time by completing and submitting the Student Directory Release form found in the list on the left of this webpage to their child's school. Decisions regarding directory information will remain until a subsequent written request is made to alter the previous decision.

3. Parents with a Parent Portal account may review their child's privacy status and make changes if wanted. Privacy codes may also be changed any time by completing a Student Directory Information Release form (found in the list on the left of this webpage) and submitting it to their child's school.

4. Schools must notify parents and eligible students of their FERPA rights annually. In addition to this form, FERPA information is found in the Student/Parent Handbook available in both English and Spanish online at the district website or a paper copy, by request, from your child's school.

- Food Allergy Disclosure:



Mockingbird ISD

Food Allergy Disclosure

Dear Parents,

The Mockingbird ISD is required to request, at the time of enrollment, that the parent or guardian of each student attending a Mockingbird ISD school disclose the student's
food allergies. This form will satisfy this requirement.

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

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

Please list any foods to which your child is allergic or severely allergic, as well as the nature of your child's allergic reaction to the food. **The nurse will contact you for a note from your physician if your child has food allergies. The school must have an EpiPen prescribed for student in the event of an emergency.**

FOOD: | Nature of allergic reaction to the food:

Mockingbird ISD will maintain the confidentiality of this form and the information provided above and may disclose the information to teachers, school counselors, school nurses, and other appropriate school personnel only within the limitations of the Family Educational Rights and Privacy Act and district Policy. [See FL] **The district will maintain this form as part of your child's student record.**

NAME OF STUDENT: DOB: GRADE:

Parent/Guardian Name:

Primary Phone:

Secondary Phone:

- History of School Attendance - Secondary:

Mockingbird ISD
HISTORY OF SCHOOL ATTENDANCE - SECONDARY

NAME OF STUDENT: GRADE:

1. Has your child ever been retained?
○Yes ○No

If YES, indicate which grade:

2. Has your child lived outside the U.S. for two or more consecutive years?
○Yes ○No

If YES, indicate when:
If YES, indicate where:

3. When your child lived outside the U.S., did he/she attend school regularly?
○ Yes, my child attended school in all previous grades outside the U.S.
○ No, my child missed significant portions of one or more school years as specified.

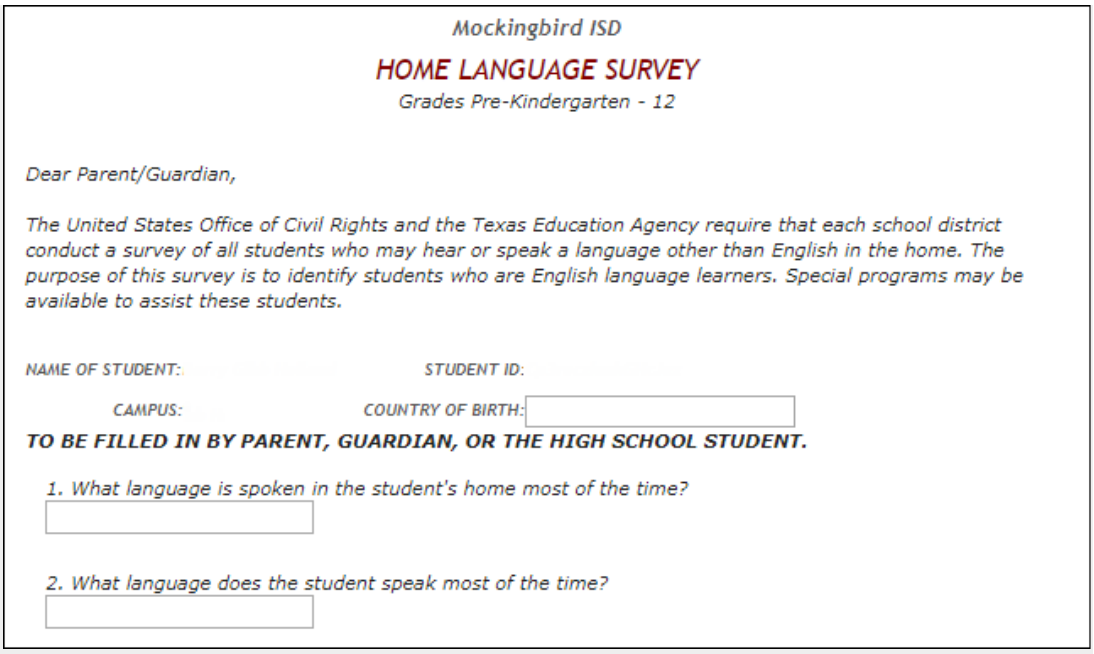
4. Where has your child attended school?

GRADE:	YEAR	NAME OF SCHOOL	CITY,STATE
Fifth			
Sixth			
Seventh			
Eighth			
Ninth			
Tenth			
Eleventh			
Twelfth			

5. Has your child participated in any of the following programs?
(Any other program may be added at the bottom of the list)

Program	Yes/No	If YES, When	If YES, Where
Bilingual	○ Yes ○ No		
ESL	○ Yes ○ No		
Dyslexia	○ Yes ○ No		
504	○ Yes ○ No		
Gifted & Talented	○ Yes ○ No		
Remedial Math	○ Yes ○ No		
Remedial Reading	○ Yes ○ No		
Speech Therapy	○ Yes ○ No		
Special Education	○ Yes ○ No		
	○ Yes ○ No		

- Home Language Survey *:



Mockingbird ISD

HOME LANGUAGE SURVEY

Grades Pre-Kindergarten - 12

Dear Parent/Guardian,

The United States Office of Civil Rights and the Texas Education Agency require that each school district conduct a survey of all students who may hear or speak a language other than English in the home. The purpose of this survey is to identify students who are English language learners. Special programs may be available to assist these students.

NAME OF STUDENT: STUDENT ID:

CAMPUS: COUNTRY OF BIRTH:

TO BE FILLED IN BY PARENT, GUARDIAN, OR THE HIGH SCHOOL STUDENT.

1. What language is spoken in the student's home most of the time?

2. What language does the student speak most of the time?

- Migrant Education Program - Family Survey:

Mockingbird ISD

MIGRANT EDUCATION PROGRAM - FAMILY SURVEY

District: Mockingbird ISD Campus:
Student Name: Age: Grade Level:

Dear Parents,

In order to better serve your children, our school district is helping the State of Texas identify students who may qualify to receive additional educational services.

The information below will be kept confidential.

Please answer the following questions:

1. Within the past 3 years have you, or your child, moved from one school district, city or state to another?

○ Yes ○ No

2. If yes, did you, or your child, move so you could work or look for work in agriculture or fishing?

○ Yes ○ No

If your answer above is NO, STOP here and submit form.

If your answer is YES, please check all that apply below.



☐ Working in fruit, vegetable, sunflower, cotton, wheat, grain, farms or ranches, fields & vineyards



☐ Working in a cannery



☐ Working on a dairy farm



☐ Working in a fishery



☐ Working on a poultry farm



☐ Working in a plant nursery, orchard, tree growing or harvesting



☐ Working in a slaughter house

Other similar work, please explain:

Please complete the following information:

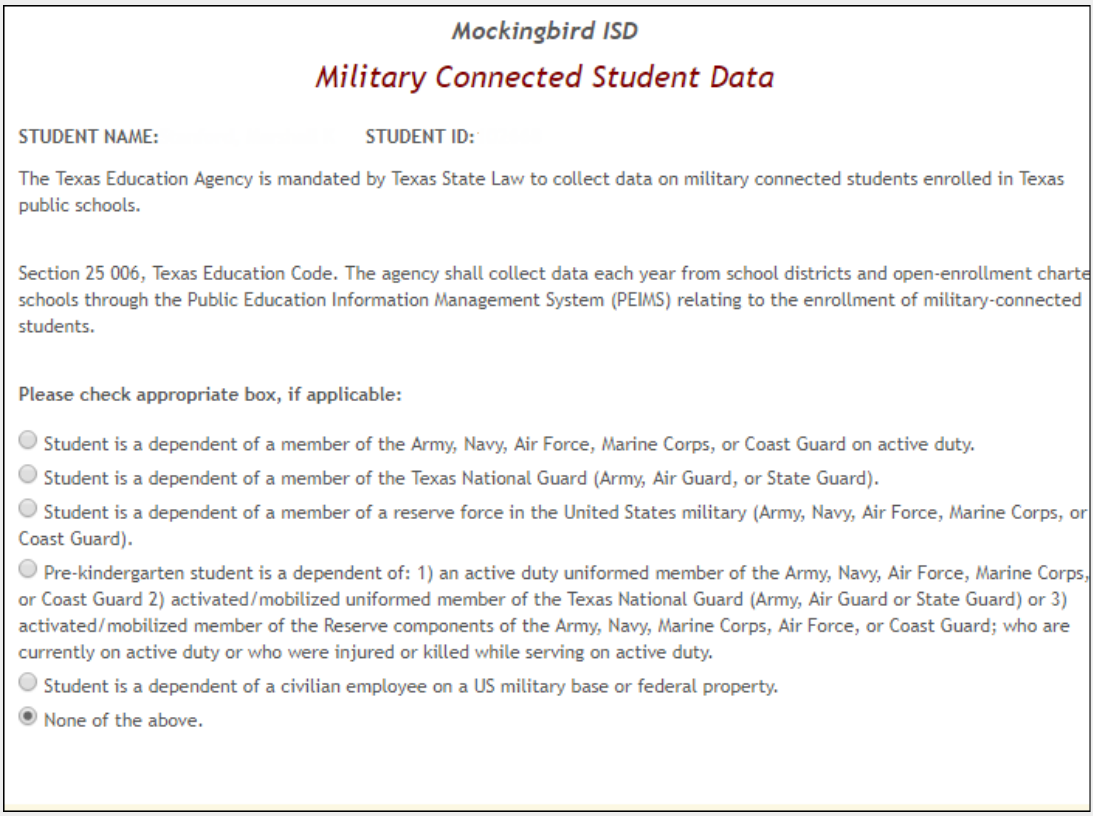
Best time to contact you: Telephone Number:

Parent/Guardian Name:

Home Address/Apt Name: City: Zip Code:

Mailing Address: City: Zip Code:

- Military Connected Student Data:



Mockingbird ISD

Military Connected Student Data

STUDENT NAME: STUDENT ID:

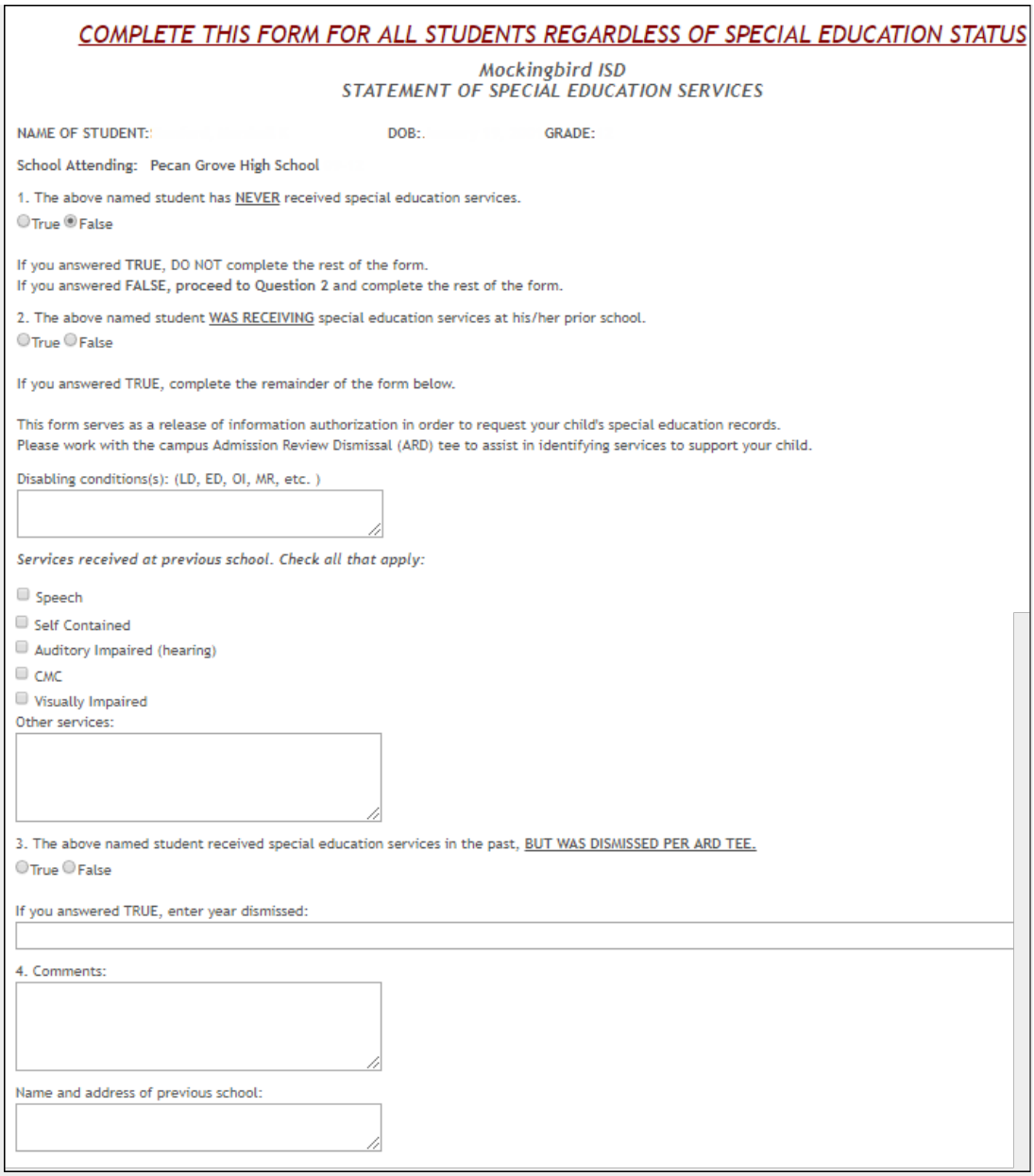
The Texas Education Agency is mandated by Texas State Law to collect data on military connected students enrolled in Texas public schools.

Section 25 006, Texas Education Code. The agency shall collect data each year from school districts and open-enrollment charte schools through the Public Education Information Management System (PEIMS) relating to the enrollment of military-connected students.

Please check appropriate box, if applicable:

- ○ Student is a dependent of a member of the Army, Navy, Air Force, Marine Corps, or Coast Guard on active duty.
- ○ Student is a dependent of a member of the Texas National Guard (Army, Air Guard, or State Guard).
- ○ Student is a dependent of a member of a reserve force in the United States military (Army, Navy, Air Force, Marine Corps, or Coast Guard).
- ○ Pre-kindergarten student is a dependent of: 1) an active duty uniformed member of the Army, Navy, Air Force, Marine Corps, or Coast Guard 2) activated/mobilized uniformed member of the Texas National Guard (Army, Air Guard or State Guard) or 3) activated/mobilized member of the Reserve components of the Army, Navy, Marine Corps, Air Force, or Coast Guard; who are currently on active duty or who were injured or killed while serving on active duty.
- ○ Student is a dependent of a civilian employee on a US military base or federal property.
- ◉ None of the above.

- Statement of Special Education Services:



COMPLETE THIS FORM FOR ALL STUDENTS REGARDLESS OF SPECIAL EDUCATION STATUS

Mockingbird ISD
STATEMENT OF SPECIAL EDUCATION SERVICES

NAME OF STUDENT: DOB: GRADE:

School Attending: Pecan Grove High School

1. The above named student has NEVER received special education services.
True False

If you answered TRUE, DO NOT complete the rest of the form.
If you answered FALSE, proceed to Question 2 and complete the rest of the form.

2. The above named student WAS RECEIVING special education services at his/her prior school.
True False

If you answered TRUE, complete the remainder of the form below.

This form serves as a release of information authorization in order to request your child's special education records.
Please work with the campus Admission Review Dismissal (ARD) tee to assist in identifying services to support your child.

Disabling conditions(s): (LD, ED, OI, MR, etc.)

Services received at previous school. Check all that apply:

Speech
Self Contained
Auditory Impaired (hearing)
CMC
Visually Impaired

Other services:

3. The above named student received special education services in the past, BUT WAS DISMISSED PER ARD TEE.
True False

If you answered TRUE, enter year dismissed:

4. Comments:

Name and address of previous school:

- Student Directory Information Release:

Mockingbird ISD

STUDENT DIRECTORY INFORMATION RELEASE

Please review the information below to indicate your current wishes regarding the privacy of your child's directory information. Select YES or NO for each statement. By submitting this form you are signing, dating and indicating your preferences to the school district. Forms that are not signed will result in the release of your child's directory information when requested.

Selecting NO below will result in blocking the release of directory information in the designated categories.

DISTRICT PUBLICATION
Mockingbird ISD has my permission to release directory information for limited school sponsored purposes including, but not limited to: selected photography companies supporting campus pictures, and publicity (name and picture in yearbook, newsletters, awards, honors, PTA, booster clubs, etc.). Example: If you select NO, your child's name will NOT appear in the district's newsletter, the school's yearbook, etc.

○ Yes ◉ No

PRIVATE REQUESTERS:
Mockingbird ISD has my permission to release directory information (name, address, phone number, etc.) to any requestor in accordance with the Texas Publication Information Act (TPIA). The TPIA requires Mockingbird ISD to release this type of information to any company, individual, or group that requests it unless the parent/guardian requests the information not to be released. Example: If you select NO, your child's directory information will NOT be released to vendors or others who may be soliciting products and services.

○ Yes ◉ No

HIGHER EDUCATION:
The No Child Left Behind Act of 2001 requires schools to provide military recruiters and institutions of higher education student directory information unless the parent/guardian objects. Mockingbird ISD has my permission to release directory information to a military recruiter.

◉ Yes ○ No

Mockingbird ISD has my permission to provide the name, address, and telephone number of my secondary student to an institution of higher education.

○ Yes ◉ No

Please consider your responses carefully prior to making final decisions. Should you have questions or need further assistance for a complete understanding, see your campus administrator.

Student Name:

- Student Media Release:

Mockingbird ISD

STUDENT MEDIA RELEASE

Student Name: **Student ID#:**

During the school year, opportunities arise to provide positive information and publicity about our programs and events to the general public or specific audiences. In some cases, we may receive requests from the news media or professional persons to interview, photograph, and/or film students for news or non-profit publications, television or radio broadcasts, or for educational information and training or various publications and brochures printed by Mockingbird ISD and parent-teacher organizations.

Permission is needed for your child to be the subject of any news media publicity or to be included in district publications. Your selection will be kept on file for future reference and will remain in effect unless revoked in writing by the parent/guardian.

○ Yes ○ No	I give permission for my child to be interviewed, photographed, and/or filmed for public news media, professional education information, or any other non-profit publication for public use (e.g. newsletters). In addition, I give permission for my child's name, work and likeness to appear on the Internet.

- Student Residency Questionnaire (McKinney-Vento):

Student Residency Questionnaire

The information on this form is required to address the McKinney-Vento Act 42 U.S.C. 11434a(2). The answers to this residency information help determine the services the student may be eligible to receive. Presenting a false record or falsifying records is an offense under Section 37.10, Penal code, and enrollment of the child under false documents subjects the person to liability for tuition or other costs. TEC Sec. 25.002(3)(d).

*Indicates a pending change.

All information obtained for this purpose will remain confidential. One form per student enrolled is required.

Mockingbird ISD

STUDENT RESIDENCY QUESTIONNAIRE

NAME OF STUDENT: Gender: Date of Birth:

School Attending: Pecan Grove High School Student ID:

GRADE: AGE:

○Yes ○No Is your current address a temporary living arrangement?

○Yes ○No Is your temporary living arrangement due to loss of housing or economic hardship?

If you answered NO to both of the questions above, DO NOT complete the rest of the form. Click Submit Data to sign and submit the form.
If you answered YES to either of the questions above, proceed to Section A, complete the rest of the form.

Section A - Student Living Situation (Check all that apply)

- ☐ Live with parent/legal guardian in a home, apartment, or housing and does not share home with any other family.
- ☐ Live in a shelter because I do not have permanent housing (family shelter, domestic violence shelter, children/youth shelter, FEMA housing), includes living in transitional housing (housing available for a specific length of time only and partly paid by a Church or other organization.
- ☐ Live in the home of a friend or relative because I lost my housing (doubled up due to economic hardship, fire, flood, lost job, divorce, domestic violence, parent in military and was deployed, parent in jail, etc.)
- ☐ Live in a tent, car, van, abandoned building (living on the streets, campground, park, or unsheltered location), includes living without electricity, heat, and/or running water in a home/apartment.
- ☐ Live in hotel or motel (due to economic hardship, eviction, flood, fire, hurricane, etc.)
- ☐ Unaccompanied Youth (student is not living in the home of a parent or legal guardian)
- ☐ Child or youth placed by DFPS with a temporary guardian (DFPS provided a Parental Child Safety Plan or Authorization for Non-Parent or Voluntary Caregiver)
- ☐ None of these describe my present living situation. Briefly describe your situation:

Section B: Factors contributing to the student's current living situation (Check all that apply):

- ☐ Natural disaster
  - ☐ Tornado, storm, flood, etc.
  - ☐ Hurricane, name:
  - ☐ Fire: prairie, forest, grass, lighting strike, etc.
- ☐ Family issues such as divorce, domestic violence, kicked out by parents, student left due to family conflict, etc.
- ☐ Home issue such as lack of electricity, water, heat, adequate home repair due to lack of funds, overcrowding, mold, etc.
- ☐ Military: Parent/guardian deployed, injured or killed in action
- ☐ Incarceration of parent/guardian
- ☐ Incarceration of parent or guardian due to health, mental health, drugs/alcohol, or other factors
- ☐ Home fire not due to natural causes (i.e., faulty equipment/appliances/wiring, furnace, stove, fireplace, etc.
- ☐ Economic hardship:
  - ☐ Loss of job resulting in inability to pay rent or mortgage
  - ☐ Income from part-time or low paying job does not cover cost of housing in the area
  - ☐ Loss of mortgage, including loss of mortgage of landlord if student/student's family is renting
  - ☐ Eviction record and/or inability to produce deposits for rent or utilities
- ☐ High medical bills that leave little or no money for housing
- ☐ Lack of affordable housing in the area
- ☐ Minor student unable to afford housing on my own
- ☐ None or the above describe the main reason for my present living situation. Briefly explain the contributing factors:

Section C: Parent/Legal Guardian/Caregiver/Unaccompanied Youth

Last Name:	First Name:	Middle Name:	Relationship to Student:

Address:	Zip:	Telephone:

Student's length of time at present address?

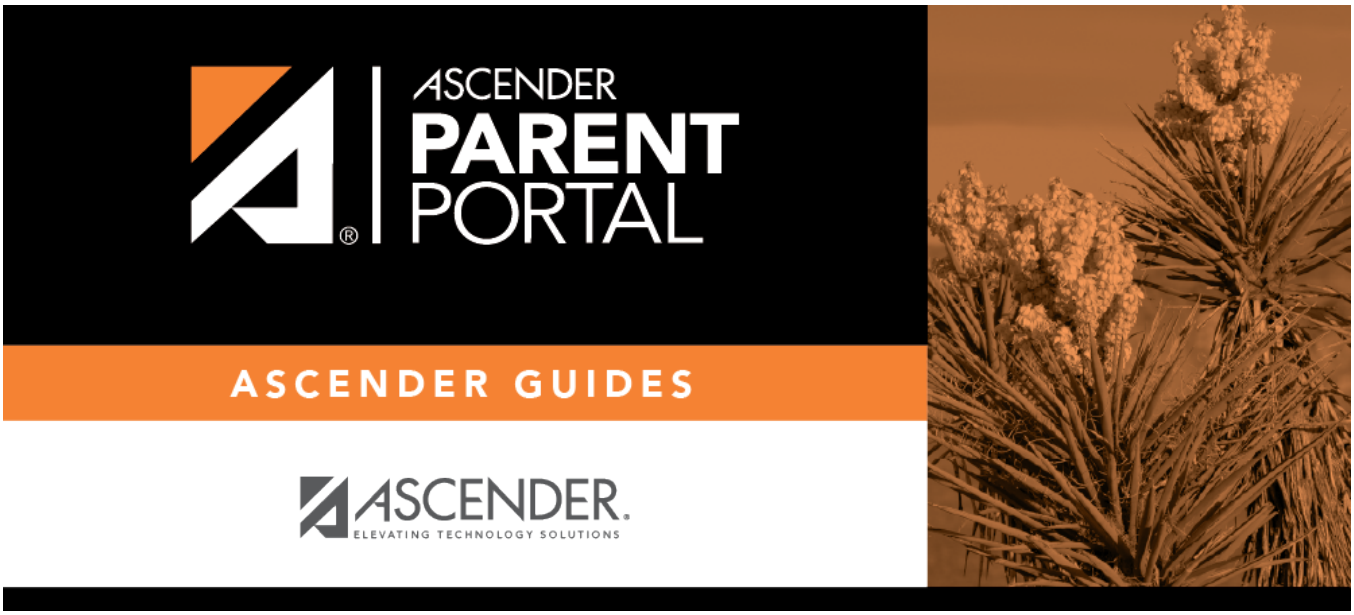
Years:	Months:	Days:	Number of Children Enrolled in District:

Please provide the following information for school-age siblings (brothers and/or sisters) of the student:

Name	Grade	School	District

* Only needs to be submitted once during the student's lifetime enrollment in the district.

Manage forms:


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