Dear RETURNING KINDERGARTEN – 8th Grade PARENT,
(Students who were enrolled during the 2018-2019 school year)

As you began to complete your child’s HISD file, please note the items listed below are required. HISD requires that all documents listed must be completed and submitted before each student in order to be a part of the HISD program, NO EXCEPTIONS! All slots are on a first come first serve basis to students enrolled for the full calendar year and who have completed records. If you have any questions regarding this YSAFE enrollment packet, please see or contact the charter school registrar’s office at 713-654-1400.

Thank you for your cooperation,

Nashe Riles, Registrar

Please ensure to attach required documents listed below. Incomplete applications will not be processed/accepted.

☐ 2018-2019 Enrollment Application
☐ Photocopy of parents state/government issued I.D.
☐ In District Transfer or Out of District Transfer (which ever applicable)
☐ Updated Immunization Records (2 copies
☐ Utility Bill (lights, gas, water, rent receipt, lease agreement, electric bill, or property tax). This is only if you have changed residencies during the 2018-2019 school year.
   *Please see the registrar’s office if you do not have a utility bill in your name.
   *When submitting completed packets, please be sure to staple all documents together.
## Houston Independent School District

### Enrollment Information

**20__ - 20__**

**Homeroom Teacher:**

<table>
<thead>
<tr>
<th>Has student ever attended an HISD School?</th>
<th>☐ Yes</th>
<th>☐ No</th>
<th>Last School/Daycare Attended</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HISD Student ID</th>
<th>Date of Enrollment</th>
<th>Date of Birth</th>
<th>Gender</th>
<th>Grade</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Legal Student Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Generation (Jr., III, etc.)</th>
<th>Student SS# / State Alt. #</th>
</tr>
</thead>
</table>

**Student Birthplace:** City, State, Country

**Year Started School in US**

<table>
<thead>
<tr>
<th>Student Lives with</th>
<th>☐ Mother</th>
<th>☐ Father</th>
<th>☐ Other</th>
<th>☐ Both Parents</th>
</tr>
</thead>
</table>

**Federal Student Ethnicity**
- ☐ Hispanic/Latino
- ☐ Not Hispanic/Latino

**Student Race**
- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian/Other Pacific Islander
- ☐ White

**Student Street Number**

<table>
<thead>
<tr>
<th>Street Name</th>
<th>Apartment</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**Student City Phone**

<table>
<thead>
<tr>
<th>Student e-mail Address</th>
</tr>
</thead>
</table>

Texas Education Code §25.002(f) requires the school district to record the name, address, and birth date of the person enrolling a child.

**Contact #1 Name (Last, First)**

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Street Number</th>
<th>Street Name</th>
<th>Apartment</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**Employer**

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Home Phone</th>
<th>Work Phone</th>
<th>Cell Phone</th>
</tr>
</thead>
</table>

**Preferred Language**
- ☐ English
- ☐ Spanish
- ☐ Other

**Translator Needed?**
- e-mail Address
- ☐ Yes | ☐ No

**Contact #2 Name (Last, First)**

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Street Number</th>
<th>Street Name</th>
<th>Apartment</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**Employer**

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Home Phone</th>
<th>Work Phone</th>
<th>Cell Phone</th>
</tr>
</thead>
</table>

**Preferred Language**
- ☐ English
- ☐ Spanish
- ☐ Other

**Translator Needed?**
- e-mail Address
- ☐ Yes | ☐ No

**Contact #3 Name (Last, First)**

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Street Number</th>
<th>Street Name</th>
<th>Apartment</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**Employer**

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Home Phone</th>
<th>Work Phone</th>
<th>Cell Phone</th>
</tr>
</thead>
</table>

**Preferred Language**
- ☐ English
- ☐ Spanish
- ☐ Other

**Translator Needed?**
- e-mail Address
- ☐ Yes | ☐ No

What type of medical insurance do you carry for this child?
- ☐ CHIP
- ☐ Medicaid
- ☐ HCHD
- ☐ Private Insurance
- ☐ None

Family Physician

Physician Phone

List the names of all brothers and sisters under 18 years of age. (If additional room is needed, write on reverse side.)

<table>
<thead>
<tr>
<th>Last, First, and Middle Names</th>
<th>Gender</th>
<th>Birthdate</th>
<th>Grade</th>
<th>Address of This Child</th>
</tr>
</thead>
</table>

Signature below certifies that all the information above is true and accurate.

Enrollment of the child under false documents subjects the person to liability for tuition or costs under Texas Education Code §25.001(h).

Signature of Contact 1/Legal Guardian

TX Driver's License Number

Date of Birth (Contact 1/Legal Guardian)

Signature of Contact 2/Legal Guardian

TX Driver's License Number

Date of Birth (Contact 2/Legal Guardian)

Total Monthly Family Income: 

Total Number In Household: 

v 4.3 - JK 07-04-2014
APPLICATION FOR STUDENT TRANSFER
STUDENT TRANSFER DEPARTMENT
HOUSTON INDEPENDENT SCHOOL DISTRICT
4400 W. 18th St.
Houston, Texas 77092-8501
Phone (713) 556-6734  Fax (713) 556-6784

DATE: ___________________________  ID Number: ___________________________

STUDENT INFORMATION

Student Name (Last Name) (First Name) (Middle Initial) Date of Birth  Gender
[ ] Male  [ ] Female

Student

Street number  Street Name  Apt#  City  State  Zip Code  Home Phone

Father / Guardian Name (Last, First)  Work Phone  Cell Phone  Email Address

Mother / Guardian Name (Last, First)  Work Phone  Cell Phone  Email Address

Is Parent / Guardian an HISD employee?  [ ] Yes  [ ] No  If yes, give location: ___________________________

TRANSFER REQUEST

Transfer Request for current year?  [ ] or next school year  [ ] Grade for school year of application: ___________________________

Did student use a transfer last semester?  [ ] Yes  [ ] No  If yes, to which school: ___________________________

To which school is the transfer requested? ___________________________

Reason for Transfer:

Choice Program Transfers
[ ] Career and Technical  [ ] Dual Language  [ ] International Baccalaureate (IB)
[ ] Language of Instruction

Special Transfers
[ ] Former Attendance Boundary  [ ] Grandparent Affidavit  [ ] Hardship
[ ] Home Field Advantage  [ ] Homeless  [ ] Public Education Grant
[ ] School-Based Employee  [ ] Special Education  [ ] Violent Crime Victim

Open Enrollment Transfers
[ ] Charter School  [ ] Pre-K Enrollment  [ ] Space Available
[ ] HISD Charter

Signature below certifies that all the information above is true and accurate to the best of my knowledge. If a transfer is granted on false information, it is subject to revocation. I understand that I am making a one year commitment. Transfers follow School Guidelines and Student Code of Conduct and can be revoked for unacceptable behavior and/or excessive absences at the end of the school year. Transfers will be approved based on the Office of School Choice deadlines and campus space availability.

Signature of Parent or Legal Guardian: ___________________________

OFFICE OF SCHOOL CHOICE USE ONLY—DO NOT WRITE BELOW THIS LINE

All Transfers must be signed by the Receiving Principal

Receiving Principal's Recommendation
[ ] Granted  [ ] Denied

Signature of Receiving Principal: ___________________________  Date: ___________________________

TRANSFER DEPARTMENT USE ONLY—DO NOT WRITE BELOW THIS LINE

Application
[ ] Granted  [ ] Denied

Reason Denied: ___________________________


# APPLICATION FOR OUT-OF-DISTRICT STUDENT TRANSFER

**STUDENT TRANSFER DEPARTMENT**

**HOUSTON INDEPENDENT SCHOOL DISTRICT**

ID Number: ____________

4400 W. 18th St.

Houston, Texas 77092-8501

Phone (713) 556-6734  Fax (713) 556-6784

Date: ______________

- NEW
- RENEWAL

## STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Student Name (Last, First, Middle Initial)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Street number</td>
<td>Street Name</td>
<td>Apt#</td>
</tr>
</tbody>
</table>

Student Lives with:  
- Mother  
- Father  
- Both  
- Other (Name/Relationship)

<table>
<thead>
<tr>
<th>Father / Guardian Name (Last, First)</th>
<th>Work Phone</th>
<th>Cell Phone</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother / Guardian Name (Last, First)</td>
<td>Work Phone</td>
<td>Cell Phone</td>
<td>Email Address</td>
</tr>
</tbody>
</table>

## TRANSFER REQUEST

<table>
<thead>
<tr>
<th>Transfer Request for current year?</th>
<th>or next school year</th>
<th>Grade for school year of application:</th>
</tr>
</thead>
</table>

School district in which student resides

School student would attend in that district 

School last attended

District

School Year

Did student use a transfer last semester?  
- Yes  
- No

If yes, to which school?

To which school is the transfer requested?

## THIS SECTION MUST BE COMPLETED BY PARENT OR GUARDIAN

<table>
<thead>
<tr>
<th>Parent/Legal Guardian</th>
<th>Date</th>
</tr>
</thead>
</table>

Is Parent / Guardian an HISD employee?  
- Yes  
- No

If yes, give location: ________________________

HISD Employee ID: ________________________

For Employees wishing to apply for a tuition-free-transfer, the parent must present:
- Certified copy of the student's birth certificate
- Social Security Number
- Latest pay statement indicating the employee contributes to TRS.

## SCHOOL USE ONLY

Signature below verifies that, according to HISD Board Policy FDA(Local), no qualified HISD resident student's transfer has been denied during the current school year.

GAGNGY

<table>
<thead>
<tr>
<th>Magnet Program</th>
<th>Receiving Principal's Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ Granted  □ Denied</td>
</tr>
</tbody>
</table>

Manager of Magnet Programs (If applicable)

Signature of Receiving Principal

**TRANSFER DEPARTMENT USE ONLY—DO NOT WRITE BELOW THIS LINE**

Signature of Student Transfer Department  
Date

Signature of Chief Academic Officer  
Date
HOUSTON INDEPENDENT SCHOOL DISTRICT
HEALTH INVENTORY

SCHOOL ____________________ DATE ____________________

TEACHER ____________________ SCHOOL LAST ATTENDED ____________________

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

Name ____________________ Sex ________ Birthdate ____________ Birth weight ________
Address __________________________________________ Phone ____________________

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

<table>
<thead>
<tr>
<th>Condition</th>
<th>Age First Identified</th>
<th>Under Doctor’s Care?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma</td>
<td></td>
<td>Bone/Joint Problem</td>
</tr>
<tr>
<td>Allergies</td>
<td></td>
<td>Rheumatic Fever</td>
</tr>
<tr>
<td>Blood Disorder</td>
<td></td>
<td>Surgery/Fractures</td>
</tr>
<tr>
<td>Diabetes</td>
<td></td>
<td>T. B. Disease</td>
</tr>
<tr>
<td>Epilepsy/Seizures</td>
<td></td>
<td>Hearing Loss</td>
</tr>
<tr>
<td>Heart Disease</td>
<td></td>
<td>Vision Loss</td>
</tr>
<tr>
<td>Kidney Disorder</td>
<td></td>
<td>Severe Menstrual Cramps</td>
</tr>
<tr>
<td>Cancer</td>
<td></td>
<td>Eating Disorder</td>
</tr>
</tbody>
</table>

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

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

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

Is your child on any kind of medication?  □ Yes  □ No
If so, what? ____________________________
For what condition? ____________________________
Further comment ____________________________

What type of medical insurance do you carry for this child?
CHIP□  Medicaid□  HCHD□  Private Insurance□  None □

Please see the School Nurse (or School Principal) if your child has other needs or is:
• A pregnant or parenting teen
and/or
• Has a severe life-threatening food allergy

Signature ____________________________

Health and Medical Services  GJ/slr 3/2012
Students and parents are expected to become familiar with the provisions of the districtwide Code of Student Conduct and the rules and regulations adopted and implemented by individual schools. Students are also expected to abide by the policies set forth in the Code so that they can get the most out of their years in school.

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

You may access the entire HISD Code of Student Conduct online at www.HoustonISD.org/CodeofConduct or by requesting a copy at the front office of your student’s school.

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

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

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

____ No, I do not want a printed copy of the HISD Code of Student Conduct, as I will access it online at www.HoustonISD.org/CodeofConduct.

____ No, no necesito una copia impresa del Código de Conducta Estudiantil de HISD ya que lo consultaré en línea en www.HoustonISD.org/CodeofConduct.

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

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

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

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

<table>
<thead>
<tr>
<th>Student Last Name</th>
<th>First Name</th>
<th>Grade</th>
<th>Student ID Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apellido del estudiante</td>
<td>Nombre</td>
<td>Grado</td>
<td>Núm. de identificación estudiantil</td>
</tr>
</tbody>
</table>

Student Signature  
Firma del estudiante  
Date  
Fecha

Parent or Guardian’s Signature  
Firma del padre o tutor  
Date  
Fecha
HOUSTON INDEPENDENT SCHOOL DISTRICT

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 I GIVE HISD and its employees and representatives permission to print, photograph, and record my child for use in electronic, digital, and printed media.

☐ I attest that I am the parent or guardian of ____________ and I DO NOT GIVE HISD and its employees and representatives permission to print, photograph, and record my child for use in audio, video, film or any other electronic, digital, or printed media.

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

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

PLEASE PRINT

Name of child ___________________________ Grade ______________

Address __________________________________________________________________________

City, State, Zip ______________________________________________________________________

Name of parent or guardian ____________________________________________________________

School ______________________________________________________________________________

Signature of parent or guardian __________________________________________________________

Date ___________________________ Phone Number _________________________________

HISD Media Relations | July 2018
**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.

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

<table>
<thead>
<tr>
<th>Student ID (office use only)</th>
<th>First Name</th>
<th>Last Name</th>
<th>MI</th>
<th>Date of Birth</th>
<th>School Name</th>
<th>Grade Level</th>
</tr>
</thead>
</table>

**STEP 2**

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

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

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

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

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

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

**TOTAL YEARLY INCOME BEFORE DEDUCTIONS OF ALL HOUSEHOLD MEMBERS** ____________

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

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

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

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

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

Parent/Guardian Name (Print) ____________ Parent/Guardian Signature ____________ Date ____________

HISD External Funding Department | June 2019
2019-2020 Dress Guidelines

Pre-Kindergarten – 8th Grade

All Students

Shoes- Closed-toe at all times, no sandals!
Backpacks- Clear or mesh and must be able to fit in the student's cubby/locker. Backpacks that are not clear or mesh will not be allowed on campus, no exceptions.

Pre-Kindergarten only- Towels/Blankets for nap time must be able to fit in cubby; a change of clothing that can be left at school (please label all items).
Kindergarten only- A change of clothing that can be left at school for emergencies.
6th-8th grade- Required attire for Leadership Day/Events- White button-down shirt, khaki bottoms, and black closed toe shoes.

Young Scholars Academy Dress Guidelines

1. No head coverings are permitted (unless approved for religious reasons). Hats, caps, scarves, bandanas, or dark glasses may not be worn in the school.
2. Although hooded jackets are allowed, students may not wear hoods on the head. Jackets will be confiscated and donated if students are found continuously violating this dress code.
3. Shorts, skorts, skirts and dresses must reach the knee while standing.
4. All shirts must be tucked neatly into the bottoms and belts must be worn with all bottoms requiring a belt, NO EXCEPTION!
5. All clothing and accessories must be free of profane, suggestive or provocative language and/or symbols, advertisement or promotion of alcohol, tobacco, or drug use, and/or reference to or association with gang activity. All clothing MUST COVER THE ENTIRE MID-RIFF AREA, CHEST, BACK AND TOP OF SHOULDER AREA (no spaghetti strap or off the shoulder tops are allowed).
6. Pants must be worn at the waist and held by a belt at all times. Students may not wear pants that by design or by the way they are worn create a safety hazard. Suspenders or overall tops must be worn on the shoulders.
7. Accessories/clothing which constitutes a safety hazard to self and/or others is unacceptable.

Failure to comply with the dress code will result in the student being issued a school uniform for the day, sent to the principal, or sent home. Continuous violations may result in uniform requirement for the remainder of the school year.
# YOUNG SCHOLARS ACADEMY 2019-2020 SCHOOL SUPPLY LIST

## Pre-K and Kindergarten

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 boxes</td>
<td>24 Crayons</td>
</tr>
<tr>
<td>1 pk</td>
<td>Pre-K/Kinder Handwriting Paper</td>
</tr>
<tr>
<td>1 box</td>
<td>8-10 Washable Markers</td>
</tr>
<tr>
<td>1 pkg</td>
<td>Baby Wipes</td>
</tr>
<tr>
<td>2</td>
<td>Elmers Liquid Glue</td>
</tr>
<tr>
<td>1 box</td>
<td>Kleenex</td>
</tr>
<tr>
<td>12</td>
<td>Ticonderoga, My First Pencil</td>
</tr>
<tr>
<td>2</td>
<td>Vinyl Folder, Blue</td>
</tr>
<tr>
<td>2</td>
<td>Vinyl Folder, Green</td>
</tr>
<tr>
<td>4</td>
<td>Vinyl Folders, Yellow</td>
</tr>
</tbody>
</table>

## First Grade

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 boxes</td>
<td>24 Crayons</td>
</tr>
<tr>
<td>4</td>
<td>1st Grade Writing Tablets</td>
</tr>
<tr>
<td>1 box</td>
<td>8-10 Washable Markers</td>
</tr>
<tr>
<td>2</td>
<td>Elmers Liquid Glue</td>
</tr>
<tr>
<td>1 pkg</td>
<td>Index Cards</td>
</tr>
<tr>
<td>1 box</td>
<td>Kleenex</td>
</tr>
<tr>
<td>1</td>
<td>Pencil Box</td>
</tr>
<tr>
<td>24</td>
<td>Pencils</td>
</tr>
<tr>
<td>2</td>
<td>Vinyl Folder, Blue</td>
</tr>
<tr>
<td>2</td>
<td>Vinyl Folder, Green</td>
</tr>
<tr>
<td>4</td>
<td>Vinyl Folders, Yellow</td>
</tr>
</tbody>
</table>

## Second Grade

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 boxes</td>
<td>24 Crayons</td>
</tr>
<tr>
<td>2</td>
<td>2nd Grade Writing Tablets</td>
</tr>
<tr>
<td>1 box</td>
<td>8-10 Washable Markers</td>
</tr>
<tr>
<td>3</td>
<td>Glue Sticks</td>
</tr>
<tr>
<td>2 pkg</td>
<td>Index Cards</td>
</tr>
<tr>
<td>1 box</td>
<td>Kleenex</td>
</tr>
<tr>
<td>1</td>
<td>Pencil Box</td>
</tr>
<tr>
<td>24</td>
<td>Pencils</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, blue</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, green</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, red</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, yellow</td>
</tr>
<tr>
<td>4</td>
<td>Vinyl Folders, Yellow</td>
</tr>
</tbody>
</table>

## Third and Fourth Grade

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 boxes</td>
<td>24 Crayons</td>
</tr>
<tr>
<td>1</td>
<td>Binder, 1 inch</td>
</tr>
<tr>
<td>3</td>
<td>Glue Sticks</td>
</tr>
<tr>
<td>2 pkg</td>
<td>Index Cards</td>
</tr>
<tr>
<td>1 box</td>
<td>Kleenex</td>
</tr>
<tr>
<td>1 box</td>
<td>Markers</td>
</tr>
<tr>
<td>2</td>
<td>Notebook Paper, Wide Rule</td>
</tr>
<tr>
<td>24</td>
<td>Pencils</td>
</tr>
<tr>
<td>2</td>
<td>Spiral Notebook, blue</td>
</tr>
<tr>
<td>2</td>
<td>Spiral Notebook, green</td>
</tr>
<tr>
<td>2</td>
<td>Spiral Notebook, red</td>
</tr>
<tr>
<td>2</td>
<td>Spiral Notebook, yellow</td>
</tr>
<tr>
<td>4</td>
<td>Vinyl Folders, Yellow</td>
</tr>
</tbody>
</table>

## Fifth Grade/Middle School

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Binder 1 inch, white</td>
</tr>
<tr>
<td>1 box</td>
<td>Colored Pencils</td>
</tr>
<tr>
<td>2</td>
<td>Composition Books</td>
</tr>
<tr>
<td>3</td>
<td>Glue Sticks</td>
</tr>
<tr>
<td>1 box</td>
<td>Markers</td>
</tr>
<tr>
<td>4</td>
<td>Notebook Paper, Wide Rule</td>
</tr>
<tr>
<td>24</td>
<td>Pencils</td>
</tr>
<tr>
<td>1</td>
<td>Plastic Folder, Blue</td>
</tr>
<tr>
<td>1</td>
<td>Plastic Folder, Green</td>
</tr>
<tr>
<td>1</td>
<td>Plastic Folder, Purple</td>
</tr>
<tr>
<td>1</td>
<td>Plastic Folder, Red</td>
</tr>
<tr>
<td>2</td>
<td>Spiral Notebook, blue</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, green</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, red</td>
</tr>
<tr>
<td>1</td>
<td>Spiral Notebook, yellow</td>
</tr>
</tbody>
</table>

Providing high quality, family-centered child care and education for more than 20 years
RESPONSIBLE USE OF LAPTOPS AND PROPER ONLINE BEHAVIOR

Students are expected to follow the same code of conduct on the Internet as they do in the classroom.

- Follow copyright laws
- Use appropriate language online
- Students will make available all messages or files upon parent, administrator or teacher request
- Like a textbook or a locker, HISD owns the laptop. Students are only permitted to use it for educational advancement
- Administrators have the capability to remotely view student computers

WHAT IS PROHIBITED?

Improper use of the laptop will result in consequences such as discipline, detention, and/or limited use of the device. The following actions are prohibited:

- Bypassing the filter
- Using another student's username or password
- Sharing passwords (other than with parents)
- Downloading or installing software that has not been approved
- Tampering with hardware
- Using chat rooms, IM, social networking; hosting non-school-approved web pages
- Accessing inappropriate material that is unacceptable in a school setting

5 COMMON SENSE RULES FOR PARENTS

1. Model good behavior
2. Pay attention
3. Share your values
4. Establish limits
5. Make kids accountable

SAFETY DON'TS FOR STUDENTS AND PARENTS

NEVER give out personal information
NEVER share passwords with anyone
NEVER arrange a face-to-face meeting with someone you met online
DO NOT OPEN an email if you do not know who sent it
DO NOT CLICK on banner ads or pop up ads on websites
NEVER USE bad language or send threatening emails

SOCIAL MEDIA

Although social media programs are blocked on all HISD student computers, parents should:

MONITOR all social media use
BE AWARE of which social media sites your child is using
TALK WITH YOUR CHILD about their digital footprint, which is any and all information about a person on the Internet
LOOK OUT FOR CYBER-BULLYING and notify the school immediately if you find evidence of it

Visit www.HoustonISD.org/CyberSafety for more advice and tips for parents.