

# NOTICE

## DOCUMENTS TO BE RETURNED TO THE WACS OFFICE SIGNED AND DATED PARENT CHECKLIST

- \_\_\_\_\_ 1. Walton County School District Emergency Card (see front/back) - RETURN
- \_\_\_\_\_ 2. Student Registration Form - RETURN
- \_\_\_\_\_ 3. Student Residency Questionnaire Form - RETURN
- \_\_\_\_\_ 4. Free/Reduced Lunch Form (fill out even if you do not qualify) - RETURN
- \_\_\_\_\_ 5. Walton Academy Enrollment Acknowledgement Form - RETURN
- \_\_\_\_\_ 6. Transportation Acknowledgement Form - RETURN
- \_\_\_\_\_ 7. Title 1 Parent/Student/Teacher Compact Form - RETURN
- \_\_\_\_\_ 8. Parent/District Advisory Council Form - RETURN

\*\*\*\*\*

**All other documents inside the Enrollment Packet are for the parent/guardian/student. Please keep for your records.**



## **Walton Academy Charter School**

389 Dorsey Avenue

DeFuniak Springs, FL 32435

Phone: 850-892-3999

Fax: 850-892-7854

**2020-2021**

## **ENROLLMENT PACKET**

The mission of Walton Academy is to develop and sustain positive relationships, creating a respectful and responsible learning environment and community.



# Emergency Card

School Name		School Year	
Teacher Name		Grade	
Bus #	Bus Drive Name:	<input type="checkbox"/> Car Rider By Whom:	<input type="checkbox"/> Walker

Student's Name (Last, First, Middle)	Student Former Name of AKA (if applicable)
--------------------------------------	--

Student Age	Student DOB (mm/dd/yyyy)	Student Gender <input type="checkbox"/> M <input type="checkbox"/> F	Student Home Phone #	Student Cell Phone #
-------------	--------------------------	---	----------------------	----------------------

Student Physical Address (house number, street name, apartment number, city, state, zip code)	Student Mailing Address:
---	--------------------------

**Brief Directions to Home**

**Student Residence Information** Indicate who the student lives with (check only one) Legal Guardians and custody restraints require legal documentation.  
 Both Parents     Mother     Father     Grandparent     Foster Parent     Group Home

Mother or Guardian Name	E-mail Address
-------------------------	----------------

Day Telephone #	Evening Telephone #	Cell Telephone #	Accept Text on Cell Phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	---------------------	------------------	--

Father or Guardian Name	E-mail Address
-------------------------	----------------

Day Telephone #	Evening Telephone #	Cell Telephone #	Accept text on cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	---------------------	------------------	--

**Contacts in Case of Emergency if Parent/Guardian Cannot be Reached: LIST THREE CONTACTS**

Emergency Contact #1	Local Address (house number, street name, apartment number, city, state, zip code)	Daytime Phone #
Emergency Contact #2	Local Address (house number, street name, apartment number, city, state, zip code)	Daytime Phone #
Emergency Contact #3	Local Address (house number, street name, apartment number, city, state, zip code)	Daytime Phone #

Student's Physician's Name	Physician's Office Location (City, State)	Physician's Phone #
----------------------------	---	---------------------

Student's Dentist's Name	Dentist's Office Location (City State)	Dentist's Phone #
--------------------------	--	-------------------

Student's Chronic Health Problems (major illnesses, allergies, etc., if applicable)

List Student's Daily Medications (if applicable)

Federal Impact Survey	Type of Service
A. The student resides on federal property. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Air Force
B. The student resides in low rent housing. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Army
C. The parent is employed on federal property located in Walton County. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Coast Guard
D. The parent is employed on low rent housing located in Walton County. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Marines
E. The parent died while on active duty or as a result of injuries while on active duty. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> National Guard
F. The parent is in the uniformed services of the United States. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Navy
If "F" is YES, is the parent on active duty? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, check type of service to the right.)	

No person shall, on the basis of race, color, religion, gender, age, ethnicity, national origin, marital status, disability, political or religious beliefs be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity, or in any employment conditions or practices conducted by this School District, except as provided by law.

# WCSD EMERGENCY CARD: SIDE 2

## Medicaid Certified School Match Program

Consent to bill for services through the Medicaid Certified School Match Program allows the Walton County School District to exchange personally identifiable information such as student records and services provided to your student with Florida's Medicaid Office (Agency for Health Care Administration). WCSD may seek reimbursement from Medicaid for eligible services identified on your student's Individual Education Plan (IEP). WCSD may **not** require parents to do the following: sign up for or enroll in public benefits; incur an out-of-pocket expense; use the student's benefits if it would decrease available lifetime coverage; and increase premiums or risk loss of eligibility.

Parents have the right to withdraw their consent to disclosure of their child's personally identifiable information to Medicaid at any time. Withdrawal of consent or refusal to provide consent does not relieve the WCSD to ensure that all IEP required services are provided at no cost to parents.

*If you have questions or concerns, please contact the Exceptional Student Education Office at 850.892.1100.*

## Parental/Guardian Consent

In case of an accident or serious illness, I request the school to contact me. If the school is unable to reach me, I hereby authorize the school to contact the physician or dentist indicated on this form and to follow his/her instructions. If it is impossible to contact this physician or dentist, the school may make whatever arrangements are necessary to provide care and treatment of my child.

In case of an accident or illness where immediate treatment of my child is not indicated, but where he/she is unable to remain at school, I request the school contact my spouse or me to arrange transportation for my child. If the school is unable to contact either my spouse or me, I request one of the other emergency contact persons listed on this form be contacted and requested to care for my child until my spouse or I can be reached.

I give my permission to obtain medical treatment for my child in an emergency.

### **NOTICE TO PARENTS WHO ARE DIVORCED OR LEGALLY SEPARATED**

*In addition, I understand that if I am not available, in the event my child is injured or becomes ill, or for other good and sufficient reason, if the parent who has physical custody cannot be located or cannot timely respond to the call, the school will contact the other parent and release the student to him or her, unless legal documentation is on file.*

Signature of Parent/Legal Guardian	Relationship	Date
------------------------------------	--------------	------

No person shall, on the basis of race, color, religion, gender, age, ethnicity, national origin, marital status, disability, political or religious beliefs be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity, or in any employment conditions or practices conducted by this School District, except as provided by law.

# New Student Registration Form

Complete ALL AREAS of the form. Please note: Social Security number and email address are optional.

## Office Use Only

Entry Date/Code: / /	FL Student #:
School:	
Teacher/Section/Grade: / /	
Transportation: Bus # / Driver /	
Lunch: <input type="checkbox"/> Regular <input type="checkbox"/> Reduced <input type="checkbox"/> Free	School Year Entered 9th Grade:
Date First Entered a U.S. School:	Birth Verification:
Data Entry Date:                      Initials:	Immigrant Status:

## Student Information

<b>Student</b> Legal name (Last, First, Middle)	<b>Student</b> Former Name or AKA (if applicable)
---	---

<b>Student</b> Social Security # (Optional) _____ - _____ - _____ *See Walton County Notice of Social Security Number Disclosure	~
--	---

<b>Student</b> Place of Birth (city, state, county, country)	<b>Student</b> DOB (mm/dd/yyyy)	<b>Student</b> Age	<b>Student</b> Grade	<b>Student</b> Gender <input type="checkbox"/> M <input type="checkbox"/> F
--	---------------------------------	--------------------	----------------------	--

<b>Student</b> Home Phone Number	<b>Preferred Parent/Guardian</b> Contact Telephone Numbers Day or Cell: _____ Evening or Cell: _____
----------------------------------	---

<b>Student</b> Local Address (house number, street name, apartment number, city, state, zip code)
---

<b>Brief Directions to Home</b>
---------------------------------

<b>Student</b> Race (must check at least one box – check all that apply) <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
--

<b>Student</b> Ethnic Origin (Must check Yes or No) <input type="checkbox"/> Yes, Hispanic or Latino <input type="checkbox"/> No, Not Hispanic or Latino
--

<b>Immigrant</b> (check all that apply) <input type="checkbox"/> Age 3 – 21 <input type="checkbox"/> Not born in U.S., Puerto Rico, or District of Columbia <input type="checkbox"/> Not attended U.S. school more than 3 full academic years Date First Entered U.S. School: _____
--

Is a language other than English spoken in the home? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Student</b> Primary Language?
Does the student have a first language other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Parent</b> Primary Language?
Does the student most frequently speak a language other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Student</b> Residence Information Indicate who the student lives with (check only one) Legal Guardians and custody restraints require legal documentation. <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Group Home
--

## Parent/Guardian Information

<b>Mother or Guardian</b>	Home Telephone
---------------------------	----------------

Day Telephone #	Evening Telephone #	Cell Telephone #	Accept text on cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	---------------------	------------------	--

Address if not the same as student (house number, street name, apartment #, city, state, zip code)	Email Address (optional)
--	--------------------------

<b>Father or Guardian</b>	Home Telephone
---------------------------	----------------

Day Telephone #	Evening Telephone #	Cell Telephone #	Accept text on cell phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	---------------------	------------------	--

Address if not the same as student (house number, street name, apartment #, city, state, zip code)	Email Address (optional)
--	--------------------------

## Previous Education Information

If registering for Kindergarten, in which of the following programs did the student participate during the year prior to Kindergarten entry, if any? <input type="checkbox"/> Pre-Kindergarten Early Intervention <input type="checkbox"/> Pre-Kindergarten Disabilities (ESE) <input type="checkbox"/> Subsidized Child Care <input type="checkbox"/> Non-Subsidized Child Care <input type="checkbox"/> Head Start
---

Has student ever been retained? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what grade(s)?	Has student previously attended a Florida public school? <input type="checkbox"/> Yes <input type="checkbox"/> No Florida School Name/City/County / /
--	--

Name of Last School Attended: _____
School Type (check one only): <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Charter <input type="checkbox"/> Virtual <input type="checkbox"/> Home Education

<b>Educational Plan</b> (If applicable, check all that apply) <input type="checkbox"/> 504 Plan <input type="checkbox"/> Other _____ <input type="checkbox"/> Individual Education Plan (i.e., Speech, Language, Specific Learning Disability, Emotional/Behavior Disability, Autism Spectrum Disorder, Intellectual Disability, Other Health Impaired, Gifted)
--

All information on this form is confidential and will not be shared with other agencies without your permission.

## Student Residency Questionnaire Form

**Student's Name:** \_\_\_\_\_

**Student's Date of Birth:** \_\_\_\_\_ **School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent or Guardian Name (Print):** \_\_\_\_\_

**Street Address (Location of House):** \_\_\_\_\_  
Street

\_\_\_\_\_

City State Zip

**Telephone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

Your child may be eligible for additional educational services through Title I, Part C Migrant and/or Title X, Part C Federal McKinney-Vento Assistance Act. Eligibility can be determined by completing this questionnaire.

**1. Where are you and your family currently staying? Check one box.**

**Section A**

In a home that we rent/own

**Section B**

- Temporarily in a home with family or friends because we do not have a place of our own
- In a shelter
- In a car, campground, or park
- In a motel or hotel
- With a guardian while awaiting foster care placement
- Somewhere other than in the care or custody of a parent or guardian
- In a place that is not meant for people, like an abandoned building or shed

**2. Has your family moved to a new town to find work in the last 3 years AND was the work in agriculture or fishing?**

Yes  No

**3. If you checked a box in Section B or answered Yes to question 2, your child(ren) may be eligible for additional services through Title I, Part C Migrant and/or Title X, Part C-Federal McKinney-Vento Assistance Act. Please list your child(ren)'s information below:**

First Name	Last Name	M/F	Date of Birth	Grade	School

# Walton

145 Park Street  
DeFuniak Springs  
850

A. Russell Hughes  
Superintendent of Schools

## COUNTY SCHOOL DISTRICT

### SCHOOL MEALS

**MUST BE FILLED OUT YEARLY EVEN  
IF YOUR CHILD CURRENTLY RECEIVES  
FREE OR REDUCED LUNCH.**

Dear Parent / Guardian:

The Walton County School District offers healthy meals every school day. A well-balanced breakfast and a healthy lunch are essential for students to learn in a curriculum-rich environment. Our menu consistently change based on valuable input from students and parents. We are excited to provide great meal options for the 2019-20 School Year!

Your children may qualify for **free or reduced-price** meals. The cost of the meals are as follows:

		Cost	Reduced
Breakfast:	All Schools	\$1.85	\$0.30
Lunch:	Elementary	\$2.60	\$0.40
	Middle/High	\$2.85	\$0.40

You may apply for free or reduced meals by:

1. Applying online per household with ease at [www.ezmealapp.com](http://www.ezmealapp.com)  
*This method is the quickest and parents that include email information will receive an email response and letter of benefit type the same day processed.*
2. Submitting **ONE** paper application per household

Below are some frequently asked questions and answers to help in the process of determining your child's eligibility.

**#1. WHO CAN GET FREE MEALS?** All children in households receiving benefits from the following programs can get free meals regardless of income:

- Supplemental Nutrition Assistance Program (SNAP),
- Food Distribution Program on Indian Reservations (FDPIR),
- Medicaid or Temporary Assistance to Needy Families (TANF),

Also, your children can get free meals if your household's gross income is within the free limits on the Federal Income Eligibility Guidelines.

#### **Very IMPORTANT:**

**If you have received a NOTICE OF DIRECT CERTIFICATION for free meals: DO NOT complete the application. DO let the school site know if any children in your household are not listed on the Notice of Direct Certification.**

**#2. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** **No.** Use one Free and Reduced Price School Meal Application for all students in your household. All students on the application will receive the same benefit even if they attend different schools. We cannot approve an application that is not complete, so be sure to **FILL OUT ALL REQUIRED INFORMATION.** Return the application to the school or complete online at the District website.

**#3. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE?** **YES!** Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.

**#4. CAN FOSTER CHILDREN GET FREE MEALS?** Yes. Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals. Parents are required to contact the designated District **Foster Liaison** Dr. Randy Stafford for assistance.

**#5. CAN HOMELESS, RUNAWAY, HEAD START, AND MIGRANT CHILDREN GET FREE MEALS?** Yes. Children who meet the definition of homeless, runaway, or migrant are eligible for free meals. Parents are required to contact the designated **District Homeless Liaison Janet Brack** or **District Migrant Liaison Jaime Mitchell** for assistance.

**#6. WHO CAN GET REDUCED PRICE MEALS?** Children can get reduced-price meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on the application.

**#7. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE APPROVED FOR FREE MEALS?** No. Please read the letter carefully and follow the instructions. Only those who have children in state-funded Head Start, and those who have been defined by the Elementary and Secondary Education Act of 1965 as homeless, runaway, migrant, or foster should have received a letter. Call your school if you have questions.

**#8. I RECEIVE BENEFITS FROM WOMEN, INFANTS, AND CHILDREN (WIC). CAN MY CHILDREN RECEIVE FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced-price meals. Please send in an application.

**#9. WILL THE INFORMATION I GIVE BE CHECKED?** Yes, and we may also ask you to send written proof.

**#10. IF I DON'T QUALIFY NOW, MAY I APPLY LATER?** Yes. You may apply at any time during the school year. For example, children with a parent or guardian who become unemployed may become eligible for free and reduced-price meals if the household income drops below the income limit.

**#11. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION?** You should talk to school officials. You also may ask for a hearing by calling or writing to your school.

**#12. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN?** Yes. You or your children do not have to be U.S. citizens to qualify for free or reduced-price meals.

**#13. WHO SHOULD I INCLUDE AS MEMBERS OF MY HOUSEHOLD?** You must include all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rate share of expenses), do not include them.

**#14. WHAT IF MY INCOME IS NOT ALWAYS THE SAME?** List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.

**#15. WE ARE IN THE MILITARY. DO WE INCLUDE OUR HOUSING ALLOWANCE AS INCOME?** If you get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.

**16. MY SPOUSE IS DEPLOYED TO A COMBAT ZONE. IS HER COMBAT PAY COUNTED AS INCOME?** No, if the combat pay is received in addition to her basic pay because of her deployment and it wasn't received before she was deployed, combat pay is not counted as income. Contact your child's school for more information.

If you have other questions or need help, please call (850) 892-1100 ext. 1361 and we will be happy to assist you.

Sincerely,

Food & Nutrition Services Department



# INSTRUCTIONS FOR APPLYING

**PARENTS ONLY NEED TO FILL OUT ONE APPLICATION PER HOUSEHOLD, NOT PER CHILD. ALL STUDENTS LISTED ON APPLICATION WILL RECEIVE THE SAME BENEFIT EVEN IF THEY ATTEND DIFFERENT SCHOOLS**

*A HOUSEHOLD MEMBER IS ANY CHILD OR ADULT LIVING WITH YOU.*

**IF YOUR HOUSEHOLD RECEIVES BENEFITS FROM [State SNAP], [State TANF], OR [THE FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDPIR)], FOLLOW THESE INSTRUCTIONS:**

- Part 1:** List only household members and the name of each child's school (if known). **Please be sure to check box for currently enrolled students.**
- Part 2:** List the case number for any household member (including adults) receiving [State SNAP], [State TANF], or [FDPIR] benefits.
- Part 3:** Skip this part.
- Part 4:** Sign the form. The last four digits of a Social Security Number are **not** necessary.
- Part 5:** Answer this question if you choose.

Return the form to the **Cafeteria Manager** at your school.

**IF NO ONE IN YOUR HOUSEHOLD GETS [State SNAP], [State TANF], OR [FDPIR] BENEFITS AND IF ANY CHILD IN YOUR HOUSEHOLD IS HOMELESS, A MIGRANT OR RUNAWAY, OR IN HEAD START FOLLOW THESE INSTRUCTIONS:**

- Part 1:** List all household members and the name of each child's school (if known). If any child you are applying for is homeless, migrant, in Head Start or a runaway check the appropriate box and call **the District homeless liaison, runaway, head start or migrant coordinator.**
- District Homeless Liaison: Janet Brack**  
**District Migrant Liaison: Jaime Mitchell**
- Part 2:** Skip this part.
- Part 3:** Complete only if a child in your household isn't eligible under Part 1. See instructions for All Other Households.
- Part 4:** Sign the form. The last four digits of a Social Security Number are not necessary if you didn't need to fill in Part 3.
- Part 5:** Answer this question if you choose.

Return the form to the **Cafeteria Manager** at your school.

**IF YOU ARE APPLYING FOR A FOSTER CHILD, FOLLOW THESE INSTRUCTIONS:**

**If all children in the household are foster children:**

- Part 1:** List all foster children and the school name for each child. Check the box indicating the child is a foster child. All Foster Children must contact the **District Foster Liaison: Dr. Randy Stafford**
- Part 2:** Skip this part.
- Part 3:** Skip this part.
- Part 4:** Sign the form. The last four digits of a Social Security Number are **not** necessary.
- Part 5:** Answer this question if you choose.

Return the form to the **Cafeteria Manager** at your school.

**If some of the children in the household are foster children:**

- Part 1:** List all household members and the name of each child's school (if known). For any person, including children, with no income, you must check the "No Income" box. Check the box for each foster child. If any child you are applying for is homeless, migrant, in Head Start or a runaway, check the appropriate box, and if you have questions, call **your school**.
- Part 2:** Skip this part.
- Part 3:** Complete only if a child in your household isn't eligible under Part 1. See instructions for All Other Households.
- Part 4:** Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn't have one).
- Part 5:** Answer this question if you choose.

Return the form to the **Cafeteria Manager** at your school.

**ALL OTHER HOUSEHOLDS, INCLUDING WIC HOUSEHOLDS, FOLLOW THESE INSTRUCTIONS:**

**Part 1:** List all household members and the name of each child's school (if known). For any person, including children, with no income, you must check the "No Income" box. If any child you are applying for is homeless, migrant, Head Start, a foster child or a runaway check the appropriate box and call the designated District Liaisons.

**Foster Liaison: Dr. Randy Stafford**

**Migrant Liaison: Jaime Mitchell**

**Homeless Liaison: Janet Brack**

**Part 2:** Skip this part.

**Part 3:** Follow these instructions to report total household income from this month or last month.

- **Section 1–Name:** List all household members with income.
- **Section 2 –**
  - **Gross Income and How Often It Was Received:** For each household member listed in section 1, list each type of income received for the month. You must tell us how often the money is received—weekly, every other week, twice a month or monthly.
  - **Earnings:** Be sure to list the **gross income**, not the take-home pay. Gross income is the amount earned *before* taxes and other deductions. You should be able to find it on your pay stub, or your boss can tell you.
  - **Income received from welfare, child support, and alimony:** List the amount each person received.
  - **Income received from retirement benefits, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits:** List the amount each person received.
  - **All Other Income:** List Worker's Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income. Do not include benefits from WIC, Federal education, and foster payments received by the family from the placing agency. For **ONLY** the self-employed, under *Earnings from Work*, report income after expenses. This is for your business, farm, or rental property. If you are in the Military Privatized Housing Initiative or get combat pay, do not include these allowances as income.

Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart:

FEDERAL ELIGIBILITY INCOME CHART For School Year 2019-2020				
Household size	Yearly	Monthly	Weekly	
1	23,107	1,926	445	
2	31,284	2,607	602	
3	39,461	3,289	759	
4	47,638	3,970	917	
5	55,815	4,652	1,074	
6	63,992	5,333	1,231	
7	72,169	6,015	1,388	
8	80,346	6,696	1,546	
Each additional person:	+8,177	+682	+158	

**Part 4:** Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn't have one).

The information contained within this application may be shared with other Federal/Local health programs for which your child(ren) may qualify; however, your permission is required. This will not affect your eligibility for school meals. May school officials share the information within this application with other programs? Check the appropriate box.

**Part 5:** Answer this question if you choose.

Return the form to the **Cafeteria Manager** at your school.

## FREE AND REDUCED-PRICE SCHOOL MEALS FAMILY APPLICATION

**PART 1. ALL HOUSEHOLD MEMBERS** **\*\* RETURN THIS APPLICATION TO YOUR CHILD'S SCHOOL \*\***

Names of <u>all</u> household members (First, Middle Initial, Last)	Please check this box for students enrolled in school	<i>Place a check in the box below if child is a foster, homeless, migrant, runaway, or Head Start child. If each child attending school is a foster, homeless, runaway, migrant or in Head Start, skip to part 4 to sign this form.</i>					<i>Place a check in the box if NO income</i>
		Foster	Homeless	Migrant	Runaway	Head Start	

**PART 2. BENEFITS**  
 IF ANY MEMBER OF YOUR HOUSEHOLD RECEIVES [State SNAP], [FDPIR] OR [State TANF Assistance], PROVIDE THE NAME AND CASE NUMBER FOR THE PERSON WHO RECEIVES BENEFITS AND SKIP TO PART 4. IF NO ONE RECEIVES THESE BENEFITS, SKIP TO PART 3.

NAME: \_\_\_\_\_ PROGRAM NAME \_\_\_\_\_ CASE NUMBER: (NOT EBT CARD NUMBER) \_\_\_\_\_

**PART 3. TOTAL HOUSEHOLD GROSS INCOME (BEFORE DEDUCTIONS).** List all income on the same line as the person who receives it. Check the box for how often it is received. RECORD EACH INCOME ONLY ONCE.

1. NAME (LIST ONLY HOUSEHOLD MEMBERS WITH INCOME)	2. GROSS INCOME AND HOW OFTEN IT WAS RECEIVED																				
	Earnings from work before deductions.	Weekly	Every 2 Weeks	Twice Monthly	Monthly	Welfare, child support, alimony	Weekly	Every 2 Weeks	Twice Monthly	Monthly	Social Security, SSI, VA, retirement benefits	Weekly	Every 2 Weeks	Twice Monthly	Monthly	All other income (such as Unemployment) benefits	Weekly	Every 2 Weeks	Twice Monthly	Monthly	
<i>(Example) Jane Smith</i>	\$200	X				\$150		X			\$0					\$0					
	\$					\$					\$					\$					
	\$					\$					\$					\$					
	\$					\$					\$					\$					
	\$					\$					\$					\$					

**PART 4. SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN)**

An adult household member must sign the application. If Part 3 is completed, the adult signing the form also must list the last four digits of his or her Social Security Number or mark the "I do not have a Social Security Number" box. (See Statement on the back of this page.)

*I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted. I understand my child's eligibility status may be shared as allowed by law.*

Signature: \_\_\_\_\_ Printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Last four digits of Social Security Number: \*\*\* - \* \* - \_\_\_\_\_  I do not have a Social Security Number

The information contained within this application may be shared with other Federal/Local health programs for which your child(ren) may qualify, however your permission is required. This will not affect your eligibility for school meals. May school officials share the information within this application with other programs  No  Yes Child(ren) may also qualify for free or low-cost health and dental insurance with Florida KidCare. Apply at [floridakidcare.org](http://floridakidcare.org) or call 1-888-540-5437.

**PART 5. CHILDREN'S ETHNIC AND RACIAL IDENTITIES (OPTIONAL)**

Choose one ethnicity:

Hispanic/Latino  Not Hispanic/Latino

Choose one or more (regardless of ethnicity):

Asian  American Indian or Alaska Native  Black or African American

White  Native Hawaiian or other Pacific Islander

**\*\*\*\*DO NOT FILL OUT THIS PART. THIS IS FOR SCHOOL USE ONLY\*\*\*\***

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice A Month x 24 Monthly x 12

Total Income: \_\_\_\_\_ Per:  Week,  Every 2 Weeks,  Twice A Month,  Month,  Year Household size: \_\_\_\_\_

Categorical Eligibility: \_\_\_\_\_ Eligibility: Free \_\_\_\_\_ Reduced \_\_\_\_\_ Denied \_\_\_\_\_ Date Withdrawn: \_\_\_\_\_

Reason for denial or withdrawal: \_\_\_\_\_  **Check if Error Prone Application**

Determining Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Confirming Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Verifying Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.*

*In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.*

*Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.*

*To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:*

mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue,  
SW  
Washington, D.C. 20250-9410

fax: (202) 690-7442; or

email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

*This institution is an equal opportunity provider.*

Date of Contact	Staff Initials	Name of Household Member Contacted	Detailed Information Received

# WALTON ACADEMY 2020-2021

## ENROLLMENT ACKNOWLEDGEMENT FORM

By signing below, I certify the Walton Academy Enrollment Packet for the SY 2020-2021 has been given to me and I (parent/guardian and student) fully understand its contents.

My signature certifies I (parent/guardian and student) fully understand the contents of the Walton Academy Discipline Plan & Student Handbook.

My signature certifies I (parent/guardian and student) have read and fully understand the rules of Walton Academy as outlined in the Student Handbook.

My signature certifies I (parent/guardian and student) have been given the Covid Guidelines for Students and fully understand as outlined in the WACS Enrollment Packet.

My signature certifies as a student I agree to accept and comply with the rules and the direction of staff at all times.

STUDENT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

DATE: \_\_\_\_\_

# WALTON ACADEMY TRANSPORTATION ACKNOWLEDGEMENT FORM

STUDENT'S NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

STUDENT'S ADDRESS: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

PROVIDE A BRIEF DESCRIPTION OF HOW TO GET TO YOUR HOME: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Administration and Staff of Walton Academy realize we are entrusted with the safety and welfare of your child, and that is a most sacred trust. With that understanding, and by this agreement we make every effort to insure your child is transported according to the terms herein.

**NOTE: ANY PERSON WHO ATTEMPTS TO SIGN YOUR CHILD OUT FROM SCHOOL MUST BE ON THE WALTON ACADEMY EMERGENCY CARD AND WILL BE ASKED TO PROVIDE IDENTIFICATION.**

I understand my child is entrusted by me and by the Administration of Walton Academy to utilize only the transportation specified in this agreement, and any violation of this trust will result in disciplinary action.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **TO BE COMPLETED BY THE TRANSPORTATION COORDINATOR OF WACS**

BUS#: \_\_\_\_\_

BUS DRIVER: \_\_\_\_\_

PICK UP LOCATION: \_\_\_\_\_

PICK UP TIME: \_\_\_\_\_

DROP-OFF LOCATION: \_\_\_\_\_

DROP OFF TIME: \_\_\_\_\_

CC: WACS TRANSPORTATION COORDINATOR

WCSD TRANSPORTATION OFFICE

# WALTON ACADEMY CHARTER SCHOOL

## TITLE 1 PARENT/STUDENT/TEACHER COMPACT

Walton Academy Charter School and parents of students participating in activities, services and programs funded by Title 1, Part A, of the Elementary and Secondary Education Act (ESEA), agrees that this compact outlines how parents, Entire school staff, and students will share the responsibility for improved student academic achievement and the means by which the school and parents will build and develop a partnership that will help children achieve Florida's high standards. The school's Title 1 Parent Involvement Plan outlines/describes specific activities and services required to fulfill the school's responsibilities.

**Walton Academy Charter School will:**

Purchase and provide high quality curriculum, materials, and technology.

Employ highly-qualified staff that enables students to meet Florida's student academic achievement standards.

Hold parent-teacher conferences (at least annually) for this compact to be discussed as it relates to the individual student's achievement.

Provide parents with frequent reports on their children's progress.

Provide parents reasonable access to school staff during non-instructional time.

Provide parents opportunities to volunteer in the school and participate in their child's class, and receive further information on how to help their children succeed.

**This compact is a voluntary agreement and a promise of commitment to help your child's progress in school, promoting his/her achievement.**

**As a student I agree to: attend school regularly, arrive on time and be prepared, to do my best in all that I do - work and behavior, to respect and cooperate with other students and adults, to not be afraid to ask for help when I need it, and to complete all my assignments on time - classwork and homework.**

**As a parent I agree to: see that my child attends school regularly and arrives on time, to encourage good study habits at home and school, to keep the lines of communication open to my child and the school, to help my child resolve conflicts in a positive way, to limit and monitor my child's TV viewing/uses of electronic media, and to show support for my child and the school staff and respect cultural differences.**

**As a teacher I agree to: provide an environment that encourages learning, to use methods and techniques that work best for my class, to communicate effectively with my students and their parents, to provide information to the parent and the student on the student's progress, and to help each student grow to his/her fullest potential.**

**As a team we can work together to carry out this agreement. Walton Academy Charter School endeavors to develop a unique educational plan for each student, where effort is supported and success is celebrated.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lead Teacher Signature

\_\_\_\_\_  
Date

# PARENT ADVISORY COUNCIL

# DISTRICT ADVISORY COUNCIL

Parents/Guardians & Students,

As you know, parent/guardian and family involvement have a great influence on student achievement. The faculty and staff of Walton Academy encourage students and their families to be involved in as many aspects of their education as possible.

We are currently looking for individuals (both students and parents/guardians) to participate in our Parent Advisory Council and to represent Walton Academy Charter School at the District Advisory Council Meetings.

As members of the committees you will have the opportunity to make your voice heard regarding policies, procedures, and spending (just to name a few) at both the school and district levels.

If you are interested in learning more about these committees or would like to participate, please fill out the slip below and return it to the school office. You will be contacted as soon as possible.

Thank you for your time and consideration. We look forward to working with you.

\*\*\*\*\*

(cut and return bottom portion)

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

- ( ) I am interested in finding out more about the Parent Advisory Council.
- ( ) I am interested in finding out more about the District Advisory Council.
- ( ) I am interested in serving on the Parent Advisory Council.
- ( ) I am interested in serving on the District Advisory Council.



# Walton Academy School Calendar - SY 2020-2021

August 3-7, 2020	Pre-Planning Days (Professional Development - 15 hours and Teacher Work Days - 22.5 hours)
August 6, 2020	Instructional, Clinic, and Bilingual Aides Return
August 10, 2020	Classes Begin for Students
September 7, 2020	Labor Day (all students/school personnel out)
October 9, 2020	End of 1st Nine Weeks (44 days)
October 12, 2020	Teacher Work Day (students out)
November 11, 2020	Veteran's Day (all students/school personnel out)
November 23 - 27, 2020	Thanksgiving Holidays (all students/school personnel out)
December 18, 2020	End of 2nd Nine Weeks (43 days) End of 1st Semester (87 days)
December 21 - January 1, 2021	Christmas & New Year's Holidays (all students/school personnel out)
January 4, 2021	Teacher Work Day (students out)
January 5, 2021	Professional Dev. Day for Teachers (students out)
January 6, 2021	Students Return
January 18, 2021	Martin Luther King, Jr. Day (all students & school personnel out)
February 15, 2021	Presidents' Day (all students & school personnel out)
March 11, 2021	Early Release Day for Students/ Professional Dev. for Staff End of 3rd Nine Weeks (45 days)
March 12, 2021	Teacher Work Day (students out)
March 15-19 2021	Spring Break (all students/school personnel out)
April 2, 2021	Early Release Day for Students
May 26, 2021	Last Day for Students End of 4th Nine Weeks (48 days) End of 2nd Semester (93 days)
May 27, 2021	Teacher Work Day
May 25, 2021	Walton Academy Graduation (6 pm) - Location TBA

# Covid 19 Guidelines for Students

If a child runs a fever and **has or thinks they have** been exposed to someone with Covid 19, the below ***must*** happen.

- The child must be quarantined for 14 days and fever free 24 hours prior to returning to school and fever free when checked by school staff at the entry on campus.
- Must get cleared by a medical physician to return to school.
- Must provide school with the medical physician's clearance before the child returns to campus.

If a child runs a fever and the child **has not been** exposed to someone with Covid 19, the below ***must*** happen.

- The child must be self isolated until the child is feeling better to return to school.
- The child must be fever free 24 hours prior to returning to school and fever free when checked by school staff at the entry on campus.
- Note from the parent their child is fever free and in their opinion are able to return to school.

***Walton Academy will take every necessary step to meet and exceed the Covid 19 guidelines to ensure your child's safety while on our campus. The health and well-being of our students, teachers and staff are our top priority.***

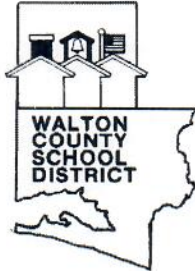
**SPARTAN STRONG!**

# WALTON COUNTY SCHOOL DISTRICT

## Title I Office

---

145 Park Street, Suite 4  
DeFuniak Springs, Florida 32435  
Telephone: (850) 892-1154  
FAX: (850) 892-1188



August 12, 2019

Dear

Parent,

As

part of the *Elementary and Secondary Education Act (ESEA) of 2015*, please be advised that you have a right to request the following information relating to the qualifications of your child's classroom teacher(s) who work(s) with your child:

- 1) Whether the teacher meets the state requirements for certification for the appropriate grade level and subject for the teaching assignment(s),
- 2) Whether the teacher is teaching under an emergency or provisional status or has had certification requirements waived,
- 3) The baccalaureate degree major and any other graduate certification or degree held, and the field of discipline of the certification or degree, and
- 4) Whether the student is provided services by paraprofessionals and, if so, their qualifications.

Also, if your child participated in the 2018-2019 Florida Standards Assessment (FSA), you should have received information regarding his/her performance on that assessment. If you need additional information on your child's level of performance, please contact your child's teacher.

To request other ESEA information, please contact my office at 892-1154 or e-mail [myca.chandler@walton.k12.fl.us](mailto:myca.chandler@walton.k12.fl.us).

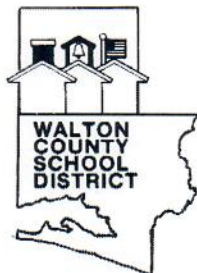
Sincerely,

Myca Chandler  
Coordinator of Instructional Support

# WALTON COUNTY SCHOOL DISTRICT

## Title I Office

145 Park Street, Suite 4  
DeFuniak Springs, Florida 32435  
Telephone: (850) 892-1154  
FAX: (850) 892-1188



12

de agosto, 2019

Estimados padres,

Como parte del programa *Elementary and Secondary Education Act (ESEA) de 2015*, que sean avisados que tienen el derecho a pedir la siguiente información referente a las capacidades del profesor o los profesores que trabajan con su hijo/a.

- 1) Si el profesor tiene los requisitos estatales para la certificación apropiada para el nivel de grado y la(s) materia(s) que enseña,
- 2) Si el profesor está enseñando bajo estatus provisional o de emergencia o si él tiene los requisitos de certificación descartados,
- 3) La licenciatura u otra certificación postgraduada y/u otro título, y el campo de disciplina de la certificación o título, y
- 4) Si el estudiante recibe servicios de un ayudante o auxiliar y si éste es el caso, las capacidades de él.

Si su hijo participó en el Florida Standards Assessment (FSA) 2018-2019, usted debería haber recibido información acerca de su rendimiento en esa evaluación. Si necesita más información sobre el nivel de rendimiento de su hijo, haga el favor de contactar con el maestro de su hijo.

Para recibir más información acerca del ESEA, haga el favor de contactar con mi oficina al 892-1154 o mandar un mensaje de correo electrónico a [myca.chandler@walton.k12.fl.us](mailto:myca.chandler@walton.k12.fl.us).

Atentamente,

Myca Chandler  
Coordinadora de Programas Federales

---

# Walton Academy

389 Dorsey Avenue  
DeFuniak Springs, Florida 32435  
Phone: 850-892-3999 / Fax: 850-892-7854

## Behavior Plan & Student Handbook



### ADMINISTRATIVE TEAM

David Schmidt, Principal/Director  
Jerry Stephens, Dean  
Marie Laurino, Guidance Counselor  
Charlotte Rodgers, Office Manager  
Rick Rodgers, Transportation/Food Services  
Coordinator

**The mission of Walton Academy is to develop and sustain positive relationships, creating a respectful and responsible learning environment and community.**

---

---

## Table of Contents

Behavior Plan/Special Note Regarding Suspensions	Page 2-3
Attendance and Supervision	Page 3-4
Tardy Policy, Personal Electronic Devices and Cell Phone Policy, Parking	Page 4-5
Level One- Minor Offenses	Page 6-7
Level Two- Intermediate Offenses	Page 7-10
Level Three- Major Offenses	Page 10-14
Bus Rules of Conduct for Students	Page 14-15
Rules and Regulations: Visitors, Passes, and Telephone Use	Page 16
Student Dress and Grooming	Page 16-17
Backpacks, Purses, Athletic Equipment, Lunch Containers, and Medication	Page 18
Personal Property, Sexual Harassment, Searches, and Illegal Contraband	Page 18-19
Release News/media, Off Campus activities, Internet Access	Page 19-20

**\*Please sign Student Acknowledgement Form (last page)\***

**Disclaimer:** *The contents of this behavior plan may be revised at any time as necessary and appropriate, based on changes to local, state, and federal statutes and policies.*

# Walton Academy Behavior Plan

This proactive plan provides guidance to implement safe, productive, and straightforward strategies that can be administered immediately. It also ensures due process for the students.

Students who violate the attendance or behavioral expectations shall receive correction according to the guidelines and procedures outlined in the Walton Academy Attendance/Behavior Plan. Actions that will be taken may include, but are not limited to:

Warning/ Verbal Reprimand

Parent Conference

Assignment to the In-School Suspension Room

Attendance Conference

Teacher/Student Behavior Conference

Attendance Contract

Behavior Contract

Recommendation for Dismissal

Conflict Mediation

Counseling

Penalty Box

Out-of-School Suspension

Referral to Law Enforcement

Pre-Expulsion Conference

Withdrawal

In addition to any disciplinary action imposed for violation of these policies, the student will receive appropriate counseling from the school guidance counselor and/or intervention specialist and may request the opportunity to reconcile the existing conflict.

## **Special Note Regarding Suspensions**

**Any Walton Academy student who is suspended or dismissed from school and school functions shall be prohibited from entering upon the premises or grounds of Walton Academy and all Walton County School District functions during the school day or when a school activity is being held.**

The components of this plan are in compliance with current statute and policy. Nothing in the plan shall prohibit school staff in consultation with the principal to modify the contents. All infractions, regardless of how minor, will be documented. All components of the behavior plan are applicable to Exceptional Education Students and 504 students based on accommodations and or modifications made to individual IEPs.

Students should be removed from the school environment immediately following an out-of-school and/or bus suspension. Under extenuating circumstances, students may be allowed to remain at school through the end of the day with the following understanding:

- Students will not be sent back to the class where the referral originated.
- Students will be sent to the Redirection (Also known as ISS) room for the remainder of the day.
- Students are expected to comply with the Code of Student Conduct for the remainder of the day.
- Any further disruptive actions will result in an increase in the number of days suspended.

## **Attendance and Supervision**

### **School Hours:**

School begins at 7:55 AM and ends at 2:55 PM. Students are expected to attend classes each day that school is in session unless they have a *documented* excused absence for one of the following reasons:

- illness or medical care
- death in the family
- legal requirements
- religious holiday
- absences pre-approved by a school administrator
- insurmountable conditions

The accumulation of three (3) unexcused absences within a 30 calendar day period will result in a phone call from the 6th period teacher to the parent/guardian.

The accumulation of five (5) unexcused absences will result in a mandatory attendance conference with the parent/guardian and student. The 6th period teacher will inform administration to set up a conference. During this conference, the student will be placed on an attendance contract.

The accumulation of eight (8) unexcused absences will result in a phone call from the 6th period teacher to the parent/guardian.

The accumulation of ten (10) or more unexcused absences will result in a mandatory attendance conference with the parent/guardian and student. This meeting may result in the student being sent to truancy court.

The accumulation of fifteen (15) consecutive unexcused absences will result in withdrawal from the Walton Academy .

Unexcused absences will result in the student receiving a grade of "0" in that class for that day.

**While telephone notification of an absence is appreciated, written documentation MUST still be submitted to office staff within 3 days from the absence.**

**Excused Absences: Students may only submit a "parent/guardian signed note" for up to ten (10) excused absences each semester. After the 10th note has been sent, a medical note is mandatory**



**unless pre-approved by administration.**

Florida law requires each parent of a child from ages 5 to 16 to be responsible for the child's school attendance. The continued absence of a child from school will be considered a violation of this law. If a student is under a court order only a doctor's note or pre-approved note will be accepted (any pre-approved notes must be approved by administration). Any student placed with the Department of Juvenile Justice, then his or her probation officer or agency contact person(s) will be notified of the absences.

**Tardy Policy:**

The accumulation of three (3) tardies during the nine week quarter will result in a phone conference by the Attendance Officer to the parent/guardian.

The accumulation of five (5) tardies will result in a parent/guardian/student conference

The accumulation of eight (8) tardies will result in a standard discipline referral submitted to the Dean of Students.

Students who are tardy 10 or more minutes after the tardy bell has rung, will be assessed an unexcused absence.

**The parent/guardian of the student will call by 8:30 am if the student is going to be absent/late.**

When a student arrives on campus after 8:30 without an appropriate excused documentation and the parent/guardian is not able to be reached, the student is sent to re-direction room until parent contact is made to update the parent or until the end of the current class period.

**Personal Electronic Devices and Cell Phone Policy:**

Bringing personal electronic devices and cell phones to school is strongly discouraged due to the high risk of theft and loss. **The school will not be responsible for loss or theft of such devices.** Students may bring these devices to school; however, these items must be turned into their L.E.A.D. teacher's electronic box at the beginning of the day during security check-in procedures. Students will receive their electronic device upon leaving campus at the end of the day. The use and/or possession of any electronic device in the class will result in a disciplinary consequence. Upon the first confiscation, the electronic device may be returned as the student departs campus for the day. Subsequent confiscations will result in a parent/guardian picking up the device.

## Minor Offenses

Minor offenses, whenever possible, should be dealt with by the classroom or supervising teacher, consistently utilizing appropriate interventions. If repetition of these offenses occurs, a formal discipline referral will be necessary. These offenses include, but are not limited to, the following:

Offenses	Explanations
Not on Task	Not participating in classroom assignments or projects.
Inappropriate Comments/ Profane Language	Comments that disrupt the learning environment.
Sleeping in Class	Head down on desk and not participating in classroom activities.
Eating and/or Drinking in Class	All food should be consumed in the lunchroom.
Minor Classroom Disruptions	Causing a minor disturbance and stopping immediately when asked.
Minor Defiance/ Disrespect/Noncompliance	Not following verbal commands initially. Expressing remorse or apologizing for his or her actions.
Dress Code Violation	Any violation of the dress code policy.
Tardiness	<u>To Campus:</u> Walkers, riders, and drivers are considered tardy to school if arriving after 7:30 a.m. <u>To Class:</u> Students are considered tardy when arriving after the first bell has sounded.
Inappropriate Public Display of Affection	Kissing, hugging, handholding, or touching others.
Offensive and/or Inappropriate Touching of Another Person/ Horseplay	Touching of another person in an inappropriate and intimate manner.

## Minor Offense Consequences Discipline Guidelines and Procedures

**Parking:**

Students must park in the designated parking area. Vehicles can be searched by school personnel at any time. Students will be required to submit a completed vehicle registration form, valid driver's license, proof of insurance, and a \$5 fee for a parking permit. Students are not permitted to return to their vehicle during the school day and cannot leave campus during lunch. Administration reserves the right to revoke student parking privileges at any time.

*Lack of cooperation in the Redirection (In-School Suspension) Room will elevate the discipline consequence.*

*Prior to getting to this point in the discipline process, students have received a warning (Step 1), utilized the Step 2 desk and had a conference with the teacher.*

Offenses	Consequences
1 <sup>st</sup>	Upon receiving the first Minor Offence referral: <ul style="list-style-type: none"> <li>• The student will be referred to the discipline office for a review of the Walton Academy’s Discipline Plan. This may also include time spent in the Redirections (In- School Suspension) Room. The referring teacher will make parent contact.</li> </ul>
2 <sup>nd</sup>	Upon receiving the second Minor Offence referral: <ul style="list-style-type: none"> <li>• The student will complete prescribed classroom assignment(s) in the Redirection (In-School Suspension) Room.</li> <li>• The referring teacher will make parent contact.</li> </ul>
3 <sup>rd</sup> & 4 <sup>th</sup>	Upon receiving the third & fourth Minor Offence referrals: <ul style="list-style-type: none"> <li>• The discipline staff will make parent contact and report the student’s behavior and outline probable future actions if misbehaving continues.</li> <li>• The student will complete prescribed classroom assignments in the Redirections (In-school Suspension) Room for a prescribed length of time.</li> </ul>
5 <sup>th</sup> – 8 <sup>th</sup>	Upon receiving the fifth – eighth Minor Offence referrals, the student will remain in the Redirections (In-School Suspension) Room until seen by the Dean to be given the following consequences: <ul style="list-style-type: none"> <li>• The student will be referred to the guidance counselor who will schedule a mandatory parent/teacher conference, to be held within 2-5 days. Internal staff will be invited as appropriate.</li> <li>• The student’s name will be sent to the MTSS team for further assessments.</li> </ul>

- ❖ The writer, or the referral originator, is expected to call the parent/guardian by the end of the work day and to maintain a telephone log.

### **Intermediate Offenses**

Offenses involving intermediate consequences are those that may result in suspension or possible dismissal from school. These offenses include, but are not limited to the following:

Offenses	Explanations
Gross or Repeated Classroom Disruptions	Blatant disruption or obstruction of the orderly educational process including one created by an electronic device or by having to be physically removed from the classroom by the SRO or multiple requests from a school administrator before leaving.
Insubordination, Defiance of School Officials, and Continued Violation of School Rules	Defiance or disrespect shown toward school officials, which results in the disruption of the learning process. The defiance/insubordination requires the administrator to give multiple requests before the student cooperates or the SRO had to physically remove the student from the area.
Skipping	Unauthorized absence from class.
Leaving Class Without Permission	Leaving class without the teacher's authorization.
Threats, Bullying, Hazing, Harassment or Intimidation of Students	The intentional or unlawful threat by word or act to do violence to another student, coupled with an apparent ability to do so, which creates a well-founded fear in the person that such violence is imminent.
Written or Verbal Proposition	Written or verbal propositions to engage in sexual acts.
Possession or Control of Tobacco Products	Having tobacco products in your possession and/or bringing them on campus and/or school bus.
Stealing, Larceny, Petty Theft	The intentional, unlawful taking and/or carrying away of property valued at less than \$100 belonging to or in the lawful possession or custody of another.
Leaving School Without Permission	Leaving campus without formal administrative permission.
FIGHTING (FIT) (mutual combat, mutual altercation)	When two or more persons mutually participate in use of force or physical violence that requires either a) physical restraint or b) results in injury requiring first aid or medical attention. Lower level fights such as pushing, shoving, or altercations that stop upon verbal command may result in other actions.
Group Disruptions	Inciting or participating in group incidents that disrupt but do not result in destruction or damage.
Illegal Organizations	Participation in gangs and other unlawfully motivated
Forgery	Unlawfully falsifying documents or signatures.
Intervention Room Infraction	Defiance toward the policy and procedures set forth in the Intervention Room.

Miscellaneous Violations	Any other violation that administration will reasonably deem to fall within this category.
Use of Obscene or Profane Language to an Employee	Gross and excessive profane language directed at a staff member following verbal commands to a student.
Property Misuse/Technology Violation	Viewing inappropriate websites or destroying consumable or non-consumable supplies.
Cheating or Plagiarism	To commit literary theft; to steal, or pass off the ideas or words of another as if they were your own.
Using Cell Phones or Electronic Devices in Class	Cell phones and electronic devices should be used outside the buildings before and after school.
Possession of Contraband	Possession of lighter(s), electronic device(s), sharpie maker(s), disruptive material(s), gang related material(s)

*The appropriate school authority will suspend and/or recommend the dismissal of a student when his/her presence has or tends to substantially disrupt or interfere with the orderly educational process.*

### **Intermediate Offense Consequences Discipline Guidelines and Procedures**

<b>Offenses</b>	<b>Consequences</b>
<b>1<sup>st</sup></b>	Student may receive up to a 5-day out-of-school suspension or other consequences as deemed appropriate

<b>2nd and 3rd</b>	Student may receive up to a 10-day out-of-school suspension.
<b>4th</b>	Student may be recommended for dismissal.

- ❖ Final authority to modify the number of days of suspension and number of suspensions shall rest with the Principal, in consultation with the Dean of Students.
- ❖ Suspended students returning to school prior to the completion of their suspension are subject to further suspension or arrest for trespassing.

### **Major Offenses**

Offenses that occur on school property, school sponsored transportation, to include infractions at the bus stops, or during a school sponsored activity shall receive the most severe consequences provided for by Walton Academy and referred to the appropriate law enforcement agency. These offenses include, but are not limited to, the following:

<b>Offenses</b>	<b>Explanations</b>
ALCOHOL (ALC)-(possession, use, or sale)	Possession, sale, purchase, or use of alcoholic beverages. Use should be reported only when the person is caught in the act of using or is discovered to have used in the course of an investigation.
ARSON (ARS) (intentionally setting a fire on/with school property)	To damage or cause to be damaged by fire or explosion, any dwelling, structure, or conveyance, whether occupied or not, or its contents.

BATTERY (BAT) (physical attack/harm)	The physical use of force or violence by an individual against another. (To distinguish from Fighting, report an incident as Battery only when the force or violence is carried out against a person who is not fighting back.)
BREAKING AND ENTERING/BURGLARY (BRK) (illegal entry into a facility)	Unlawful entry with force, or unauthorized presence in a building or other structure or conveyance with evidence of the intent to damage or remove property or harm a person(s).
DISRUPTION ON CAMPUS—MAJOR (DOC)- ( <u>major disruption</u> of all or a significant portion of campus activities, school sponsored events, and school bus transportation )	Disruptive behavior that poses a serious threat to the learning environment, health, safety, or welfare of others. <b>Example:</b> Bomb threat, inciting a riot, initiating a false fire alarm. (Do not use this code for students defying authority, disobeying or showing disrespect to others, using inappropriate language or gestures, or classroom disruption.)
DRUG SALE/DISTRIBUTION EXCLUDING ALCOHOL (DRD) (illegal sale or distribution of drugs)	The manufacture, cultivation, sale, or distribution of any drug, narcotic, controlled substance or substance represented to be a drug, narcotic, or controlled substance.
DRUG USE/POSSESSION EXCLUDING ALCOHOL (DRU) (illegal drug possession or use)	The use or possession of any drug, narcotic, controlled substance, or any substance when used for hallucinogenic purposes.
HOMICIDE (HOM) (murder, manslaughter)	The unjustified killing of one human being by another.
KIDNAPPING (KID) (abduction of an individual)	Forcibly, or by threat, confining, abducting, or imprisoning another person against his/her will and without lawful authority.
ROBBERY (ROB) (using force to take something from another)	The taking or attempted taking of anything of value that is owned by another person or organization, under the confrontational circumstances of force, or threat of force or violence, and/or by putting the victim in fear.
LARCENY/THEFT (STL)- (taking of property from a person, building, or a vehicle)	The unauthorized taking, carrying, riding away with, or concealing the property of another person, including motor vehicles, without threat, violence, or bodily harm. (The item must be \$300 or more to report in SESIR.)
SEXUAL BATTERY (SXB)- (attempted or actual)	Forced or attempted oral, anal, or vaginal penetration by using a sexual organ or an object simulating a sexual organ, or the anal or vaginal penetration of another by any body part or object.
SEXUAL OFFENSES (OTHER) (SXO)	Other sexual contact, including intercourse, without force or threat of force. Subjecting an individual to lewd sexual gestures, sexual activity, or exposing private body parts in a lewd manner. (Law enforcement must be notified to investigate.)



<p>THREAT/INTIMIDATION (TRE) (instilling fear in others)</p>	<p>A threat to cause physical harm to another person with or without the use of a weapon that includes all of the following elements: (1) <u>intent</u> – an intention that the threat is heard or seen by the person who is the object of the threat; (2) <u>fear</u> – a reasonable fear or apprehension by the person who is the object of the threat that the threat could be carried out; and (3) <u>capability</u> – the ability of the offender to actually carry out the threat directly or by a weapon or other instrument that can easily be obtained.</p>
<p>TRESPASSING (TRS) (illegal entry onto campus)</p>	<p>To enter or remain on school grounds/campus, school transportation, or at a school-sponsored event/off campus, without authorization or invitation and with no lawful purpose for entry.</p>
<p>VANDALISM (VAN) (destruction, damage, or defacement of school or personal property)</p>	<p>The intentional destruction, damage, or defacement of public or private property without consent of the owner or the person having custody or control of it. (Damage must be \$1000 or more to report in SESIR.)</p>

<p>WEAPONS POSSESSION (WPO)(possession of firearms and other instruments which can cause harm)</p>	<p>Possession of any instrument or object, as defined by Section 790.001, Florida Statutes, or district code of conduct that can inflict serious harm on another person or that can place a person in reasonable fear of serious harm. (Possession of common a pocket knife is exempted from state zero tolerance expulsion requirement 1006.07(2) F.S.; however, law enforcement should be notified of any weapon or knife, including pocket knives, for investigation.)</p>
<p>OTHER MAJOR (OMC) (major incidents that do not fit within the other definitions)</p>	<p>Any serious, harmful incident resulting in the need for law enforcement intervention not previously classified. Example: Student producing or knowingly using counterfeit money; participating in gambling activities, possessing child pornography, or possessing drug paraphernalia.</p>
<p>BULLYING / HARASSMENT (BHA) (intimidating or hostile behaviors)</p>	<p>Unwanted and repeated written, verbal, or physical behavior, including any threatening, insulting, or dehumanizing acts, by an adult or student that are severe or pervasive enough to create an intimidating, hostile or offensive educational environment, to cause discomfort or humiliation, or unreasonably interfere with the individual's school performance or participation.</p>
<p>FIGHTING (FIT) (mutual combat, mutual altercation)</p>	<p>When two or more persons mutually participate in use of force or physical violence that requires either a) physical restraint or b) results in injury requiring first aid or medical attention. (Do not report to SESIR lower level fights such as pushing, shoving, or altercations that stop upon verbal command. Use local codes.)</p>

SEXUAL HARASSMENT (SXH) (undesired sexual behavior)	Unwanted and repeated verbal or physical behavior with sexual connotations by an adult or student that is severe or pervasive enough to create an intimidating, hostile or offensive educational environment, cause discomfort or humiliation or unreasonably interfere with the individual's school performance or participation (6A-19.008(1) SBE Rule). An incident when one person demands a sexual favor from another under the threat of physical harm or adverse consequence.
Battery upon an employee	The actual, unlawful, and intentional touching or striking of an employee against his or her will, or the intentional causing of bodily harm to an employee.
Simple Assault on a School Board Employee	The intentional, unlawful threat or act to do violence to the person of another coupled with an apparent ability to do so and the doing of some act which creates a well-informed fear in such other person that such violence is imminent.
Possession, Use or Sale of Any Firearm	Any firearm (including a starter gun) which will, or is designed to, or will readily be concerted to expel a projectile by the action of an explosive; the frame or receiver of any such weapon; any firearm muffler or silencer; any similar destructive device.
Discharging of a Firearm	Discharging of any pistol, rifle, shotgun, air-gun, or any other device.
Bomb Threat	Any such communication directed at a School Board employee that has the effect of interrupting the educational environment.
Explosives	Preparing, possessing, using, or selling of an explosive device.
Possession of a Sharp Weapon	Possession of a knife or similar instrument without the intent of doing harm.
Aggravated Battery	Intentionally causing great bodily harm, disability, or permanent disfigurement, use of a deadly weapon.
Unjustified Activation of a Fire Alarm System	Unauthorized pulling of fire alarm station.
Intentionally Making False Accusations	Intentionally making a false accusation or statement that jeopardizes the professional reputation, employment or professional certification of a teacher or other member of the school staff.
Armed Robbery	A crime of seizing property through violence or intimidation, involving the use of a weapon.
Miscellaneous Violations	Any other offense which the administration will reasonably deem to fall within this category.

## Major Offense Consequences Discipline Guidelines and Procedures

Offense	Consequence
1 <sup>st</sup>	Student may receive a 10-day suspension. Student will also be recommended for expulsion to serve the terms of the original expulsion. Parents and appropriate authorities will be contacted.

- ❖ Off-campus felony crimes, including, but not limited to, weapons, personal injury to others, or possession of drugs with intent to sell may also result in a recommendation of expulsion.
- ❖ Student who has been identified as a potential threat will be evaluated by the Threat Assessment Team. Where a safety and academic plan will be developed that includes any necessary consequences.

### Bus Rules of Conduct for Students

The bus rules of conduct for Walton Academy students are absolutely essential. They are set in place with students' safety as priority. Students shall obey the following rules at all times:

1.	Stand off the roadway while waiting for the bus.
2.	When crossing the roadway, be sure that the road is clear of traffic in both directions. Do not depend entirely on the bus arm to control traffic; careless drivers occasionally run through the stop area.
3.	Students must obey the driver at all times.
4.	Students will remain in their seats at all times.
5.	Quiet conversation or classroom conduct is to be observed at all times while on the bus. Use of foul language or racial slurs is not permitted. Do not talk to or distract the driver; the driver must focus attention on the road at all times.
6.	Keep hands, feet, arms, and head to yourself and inside windows at all times.
7.	Passengers must not throw waste paper or other rubbish on the floor or otherwise litter, mark, deface, or damage any part of the bus. Do not throw any objects from the bus. Parents will be charged for any damages caused by their child. Students may also be suspended from riding the bus.
8.	No eating, drinking, or smoking is permitted on the bus at any time.
9.	Students must report to the bus stop in a timely manner. The bus cannot wait for those who are tardy.
10.	The emergency exit must not be tampered with and must not be used for ordinary boarding and exiting.
11.	No animals will be allowed on the bus.
12.	Small objects such as bottles that could get underfoot and cause the passengers to trip or fall will not be permitted on the bus.

#### Bus Notes:

Students who wish to ride an alternate bus, must provide written documentation from parent/guardian. This note must contain the parent/guardian's name and phone number, name of student, name of student that he/she will be riding the bus with and the reason for the change. An administrator will contact the parent/guardian to confirm this authorization prior to the student leaving school. If we are unable to contact the parent/guardian to authorize transportation changes, the student must continue with initial documented transportation arrangements. Notes should be submitted to the main office prior to 10:00 a.m.

**Walton Academy**  
**Bus Discipline Guidelines and Procedures**

Students are expected to obey the driver at all times.

The driver has the authority to assign students to certain seats.

The driver shall issue verbal warnings, contact parent or guardian, and issue written bus referrals for violations of bus rules.

The principal or designee shall consider the bus driver's recommendation for discipline when making a decision regarding the consequences of a bus referral.

The principal or designee shall suspend a student from riding the bus for constant rule violations and defiant bus behavior.

If the student is suspended from the bus while still allowed to attend school, it is the parent/guardian's responsibility to provide transportation for their student. Failure to provide transportation to school because of the student being suspended from the bus will result in an unexcused absence(s).

# **Walton Academy**

## **Rules and Regulations**

Students are expected to act responsibly and are held accountable for their decisions. They are to follow the instructions of all instructional and support staff of Walton Academy at all times. Failure to do so will result in disciplinary action.

### **Visitors**

Walton Academy is a restricted access facility.

1. All visitors must sign and receive a visitor badge upon arrival.
2. No one enters classrooms without the prior consent of the principal or designee.
3. Friends from other schools are prohibited from visiting.
4. Parents, legal guardians, or those indicated on the parental consent form are the only visitors permitted to have contact with students. The parental consent form may be updated as needed but must be done in writing.
5. Parents wishing to observe their student within the educational setting must get prior consent from administration.

### **Passes**

Any time a student is out of the assigned classroom and not under the direct supervision of his/her teacher, he/she must have an official pass. Before a pass is issued, confirmation from the receiving team member must be approved by communicating directly over the phone, email, in person or radio.

### **Telephone Use**

Office telephones are for official business. Telephones in the classrooms are for teacher use only. After-school plans and transportation arrangements should be made prior to arrival at school. At the teacher's discretion, all student phone calls will be made inside the Redirection room in the presence of a team member.

## **Student Dress and Grooming**

### *Section I*

### **The Walton Academy Dress Code:**

- All pants, shorts and skirts must have belt loops ***made by the manufacturer.***
- All students are required to wear a belt while on school property.
- All pants, shorts and skirts must be worn around the student's waistline (no sagging)
- No holes in any clothing worn, including pants, skirts and shorts.
- No leggings or jeggings
- Shorts and skirts must be no more than three inches above the knee
- No decorations, advertisements, or other insignia
- **School polo shirts must be worn at all times**
  - School polo shirts must be tucked in at all times.
  - School shirts must be the outermost garment worn.
  - ***No hooded garments.*** Long sleeve garments, including sweaters, are permitted under the school polo shirt.
  - Students are not permitted to draw on and/or vandalize their school uniform shirt.
- Hats on are not permitted on campus. Hats must remain in the security room during the school day. Students are permitted to collect hats when exiting through security room at the end of the day.
- Clothing may not be worn inside out
- Clothes must be appropriate for the student's size
- No oversized or under-sized clothing will be permitted
- No head coverings permitted on campus (bandanas, scarves, hoodies, headbands etc.)

Administration has final determination of what is considered appropriate dress.

### ***Section II***

If at any time a law enforcement officer or district administrator verbally, or in writing, indicates that any particular article of clothing, clothing accessory, or cosmetic application, including hair style is documented to demonstrate gang affiliation, students will be instructed to immediately stop wearing the item.

### ***Section III***

If a student comes to school with inappropriate clothing, the parent/guardian will be called to bring appropriate clothing to the student. If a parent/guardian cannot be reached or unable to bring appropriate clothing, a Walton Academy team member will attempt to find proper clothing. If unable to get appropriate clothing for the student, then student will remain in the redirection room until the end of the day or until appropriate clothing has been received.

Violation of the dress code will be treated as insubordination and will result in disciplinary action.

### **Backpacks • Purses • Athletic Equipment**

Backpacks and purses are permitted. These items and all personal athletic equipment (basketballs, footballs, soccer balls, etc.) must remain in the security shed and will be locked during the school day. Students will be able to collect these items as they exit through the security shed at the end of the day. **The school will not be responsible for loss or theft of student items.**

### **Lunch Containers**

Students who bring their lunches must place them in the container labeled “student lunches” during morning security check-in procedures. Once the security procedures have been completed, the student lunches will be taken to the lunchroom to be stored in the refrigerator. During their lunch time, the student will be given their lunch container by a Walton Academy team member only. Students will not be permitted to get any item out of the lunchroom refrigerator themselves.

### **Medication**

Medication will be dispensed by a trained team member. Permission forms to administer medication are provided in the application packet and are available upon request. No medication will be received by the school without first the appropriate documentation and medication being received and verified by the school’s assigned administrator. Students who have a need to carry inhalers for asthma must have a medication administration form on file in the school office.

Any child self-medicating will be subject to disciplinary action.

### **Personal Property**

On occasion, there has been confusion related to the giving, loaning, sharing, or trading of personal property items. Students are solely responsible for all personal property. This practice is prohibited and the school will assume no responsibility for the loss of these items.

### **Sexual Harassment**

*Sexual harassment will not be tolerated on the school campus or at any school function.*

Examples of sexual harassment include unwanted advances; flirtations or propositions; demands for sexual favors in exchange for favorable treatment; unwanted sexually oriented remarks; verbal abuse of a sexual nature; graphic verbal commentary about an individual's body or sexual prowess; coercion of sexual acts or assault; physical contact such as grabbing, pinching, or patting unnecessarily; leering; whistling; or gestures of a sexual nature.

*Students accused of sexual harassment will be referred for administrative and/or law enforcement investigations and consequences, if appropriate.*

## **Searches**

As part of the daily routine, all students are subject to safety and security measures. When suspicion of contraband is present, a gender-appropriate staff member will intervene. Students refusing to be searched will be subject to possible law enforcement intervention and/or disciplinary action. In addition, all items brought on campus are subject to a random search. Searches may be conducted in the presence of the school resource officer. *Walton Academy assumes no responsibility for any lost, stolen, or damaged items.*

*Items confiscated by staff may be returned to parents/guardians in person, only.  
All confiscated items are subject to disposal after 10 working days.*

## **Illegal Contraband**

Smoking paraphernalia, including vapes, vaping products and other illegal contraband shall be destroyed or turned over to law enforcement for appropriate legal action. Possession of these items may also result in disciplinary action.

## **Release for News/Media**

AS a student of this school, your child may have the opportunity to participate in media coverage. These opportunities would involve activities such as quotes attributed to your child, pictures of your child, or video of your child in the newspaper, on television, or in productions for the school. By reading this parent/guardian and student, each of you fully understand this information and agree for participation in these activities.

## **Permission form to travel & participate in off campus activities**

I, hereby grant permission for my child to participate in off-campus educational activities (including volunteer work) pertaining to instruction and vocational preparation during the school year. I understand that the trips will be properly chaperoned and all school policies and safety precautions will be followed. I will not hold the above names school or its employees liable for an accident,



which might occur. I also hereby consent for my son/daughter to be transported by the school by WCSD bus or by WACS van to the aforementioned activities.

## **Internet Access Agreement**

I, hereby grant permission for my child to participate in the usage of the internet for the sole purpose of the educational assignment. I fully understand my child can only visit websites approved by the school. Any deviation from the approved websites will result in my child being unable to complete any assignment linked to internet usage. Failure to adhere to the aforementioned guidelines may result in the suspension or revocation of the offenders privilege of access to the internet.