

MOJAVE RIVER ACADEMY

2020-2021 ENROLLMENT PACKET/PAQUETE DE INSCRIPCION

Please use blue or black ink

Required documents / Documentos requeridos:

- Birth Certificate / Acta de Nacimiento** Birth certificate, hospital certificate, baptismal certificate, birth announcement, abstract, or passport.
- Immunization Record / Documentos de Inmunizaciones**
Immunizations must be up to date prior to starting school.
Las inmunizaciones deben estar al corriente antes de comenzar la escuela.
2-MMR, 4-Polio, 5-DPT, 3-HEPB, 2 Varicella, TDAP (ALL 7th Grade Students)
- Verification of California Address / Verificacion de domicilio de California**
A current utility bill (gas, water, electricity, home internet or landline phone), rental contract or escrow documents.
Una factura actual (por ejemplo, una factura de gas, electricidad, internet o telefono de casa), contrato de renta o documentos de escrow.
- Withdrawal Form / Unofficial Transcript/ Proof of Promotion**
Forma de Remocion / Expediente no Oficial / Prueba de Promocion
A withdrawal form from the previous school showing transfer grades, an unofficial transcript or proof of promotion is necessary or enrollment will be delayed.
Presentar formulario con prueba de retiro de la escuela preia y papeleo de calificaciones transferibles. Tambien es necesario presentar un expediente no oficial o prueba de promocion. Si no, su inscripcion sera retrasado.
- Parent ID / Identificacion de pariente**
If Student is 18+, he/she can enroll as an Adult Student but MUST present a valid photo ID.
Si el Estudiante es mayor de edad (18+ anos) puede inscribirse como Estudiante Adulto pero TIENE que mostrar idetificacion valida.

Additional Requirements (if applicable) / Requisitos Adicionales (si es applicable):

- Proof of Guardianship / Prueba de Tutela**
 - A student can live with a blood relative with a custody form; signatures must be verified by a school official or notarized.
Un estudiante puede vivir con un pariente de sangre si se tiene una forma de custodia. Estas firmas deben ser verificadas por un oficial de escuela o notariadas.
 - A student can live in a foster home with proof of placement.
O, el estudiante puede vivir en un hogar adoptivo con prueba de colocacion.
 - Or submit Care Giver Affidavit if living with someone other than legal guardian.
O, someta la declaracion del tutor, si el estudiante vive con alguien a parte del guardian legal.
- SPECIAL EDUCATION STUDENTS – Current IEP and TID Application**
Estudiantes en Programa Especiales – Copia del IEP actual y Aplicacion de TID
If your child is in Special Education, you must provide a copy of their current IEP PRIOR to completing the enrollment application and a TID application.
Si su hijo esta en Educacion Especial, usted debe proporcionar una copia de su IEP ANTES de completer la aplicacion de inscripcion.
- 504 plan** – If the student has an active 504 plan, a copy must be provided / *Si el estudiante tiene un plan 504, debe presentarse con una copia.*
- Expulsion Documents Required for Expelled Students / Documentos de expulsion son requeridos para Estudiantes Expulsados**
If your child is currently under an expulsion order, has been recommended for expulsion from a previous district, or has been reinstated after an expulsion, you are required to provide documentation on the expulsion before enrollment.
So su estudiante esta bajo orden o recomendacion de expulsion, o sido restablecido despues de una expulsion, usted necesita entregar documentos sobre la expulsion antes de inscribir el estudiante.
- Existing AB216** – If the student is a foster care youth. / *Si el estudiante es un joven de cuidado de crianza.*

INCOMPLETE/FALSIFIED REGISTRATION PACKETS WILL NOT BE CONSIDERED OR ACCEPTED
PAQUETES DE INSCRIPCION INCOMPLETOS/FALSIFICADOS SERAN RECHASADOS

Returning

(CHECK ONLY IF STUDENT WAS PREVIOUSLY ENROLLED AT MRA)

Office Use Only

Bakersfield Barstow Beaumont Colton Desert Hot Springs Fontana Hesperia Oro Grande
 Palm Springs Phelan Tehachapi West Victorville Victorville

EL SPED Foster Returning Student Expulsion STU #: _____ TCHR: _____ ED: _____

STUDENT INFORMATION / Informacion del Estudiante

LAST / Apellido		FIRST / Nombre		MIDDLE / Segundo Nombre		Gender / Género M / F	Current Grade / Grado Actual
Date of Birth / Fecha de Nacimiento		Age / Edad	Birth City / Ciudad de Nacimiento		State / Estado	Country / Pais	
Mailing Address / PO Box / Direccion de Correo / Apartado de Postal			City / Ciudad	State / Estado	Zip / Código Postal	Home Telephone / Teléfono de Casa	
Residential Address / Direccion Residencial			City / Ciudad		Zip / Código Postal	Automated Dialer Contact #/No. de Marcador Automatico	
Father / Stepfather / Legal Guardian (circle one) Padre / Padrastro / Guardian Legal (escoje uno)			Primary No./Numero Primario		Email Address / Correo Electrónico		
Work on a Military Installation / Trabaja en una instalacion Militar: <input type="checkbox"/> Yes/Si <input type="checkbox"/> NO Work in Federal Facility / Trabaja en Planta Federal: <input type="checkbox"/> Yes/Si <input type="checkbox"/> NO			For Military Personnel Only / Para el Personal Militar solamente: Unit/Unidad: _____ Branch/Sucursal: _____ Rank/Rango: _____				
Mother / Stepmother / Legal Guardian (circle one) Madre / Madrastra / Guardian Legal (escoje uno)			Primary No./Numero Primario		Email Address / Correo Electrónico		
Work on a Military Installation / Trabaja en una instalacion Militar: <input type="checkbox"/> Yes/Si <input type="checkbox"/> NO Work in Federal Facility / Trabaja en Planta Federal: <input type="checkbox"/> Yes/Si <input type="checkbox"/> NO			For Military Personnel Only / Para el Personal Militar solamente: Unit/Unidad: _____ Branch/Sucursal: _____ Rank/Rango: _____				

EDUCATION PROGRAMS / Programas Educativos

1. Does your child have/had an Individualized Education Plan (IEP), Speech Services, 504 Plan or SST? **YES/Si** **NO**
 ¿ Su hijo/hija a tenido plan de educacion individual (IEP)?

2. Please indicate when, or date of last IEP if applicable: Speech IEP 504 SST
 Por favor indique cuando ó la fecha del último IEP aplicable:

EXPULSION STATUS / Expulsión (Everyone must answer this section / Todo deben completar esta seccion)

1. Is the student currently under an Expulsion Order, or been recommended for expulsion from any previous school district(s) **Approved?**
 ¿Esta el estudiante bajo orden ó recomendación de expulsion de algun escuela previa? **YES/Si** **NO** Yes No

PREVIOUS SCHOOLS / Escuela Previa

Name of Current School/Nombre de la escuela	City / Ciudad	State / Estado	Grade / Grado	Withdrawal Date / Fecha de Retirar
Previous School Attended/La escuela anterior	City / Ciudad	State / Estado	Grade / Grado	Withdrawal Date / Fecha de Retirar

Sibling Information / Informacion de Hermanos

Name / Nombre:	Date of Birth / Fecha de Nacimiento	Grade / Grado	School Attending / Escuela Actual:
Name / Nombre:	Date of Birth / Fecha de Nacimiento	Grade / Grado	School Attending / Escuela Actual:
Name / Nombre:	Date of Birth / Fecha de Nacimiento	Grade / Grado	School Attending / Escuela Actual:

How did you hear about us / Como se enteró de nosotros

- Current/Former Student. Who? _____
- Social Media- which one: _____
- Advertisement
- Previous/Current school recommendation
- Community Event

WHAT IS YOUR CHILD'S ETHNICITY? (PLEASE CHECK ONE): HISPANIC OR LATINO NOT HISPANIC OR LATINO
Que el origen étnico de su niño/niña? (Por favor marque uno): *Hispano o Latino* *No Hispano o Latino*

WHAT IS YOUR CHILD'S RACE? (PLEASE CHECK UP TO FIVE RACIAL CATEGORIES):
Que raza es su niño/niña? (Por favor marque asta cinco categorías racial):

- | | | |
|--|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Am. Indian / AlaskanNtv (Persons having origins in any of the original people of North, Central or South America) <input type="checkbox"/> Black / African American <input type="checkbox"/> White or Caucasian | <p>Hawaiian / Pacific Islander (please specify):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Samoan <input type="checkbox"/> Tahitian <input type="checkbox"/> Other Pacific Islander | <p>Asian (please specify):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Asian Indian <input type="checkbox"/> Japanese <input type="checkbox"/> Cambodian <input type="checkbox"/> Korean <input type="checkbox"/> Chinese <input type="checkbox"/> Hmong <input type="checkbox"/> Filipino <input type="checkbox"/> Other Asian <input type="checkbox"/> Guamanian |
|--|---|--|

PARENT HISTORY (List highest education level completed. Use parent with the most education) / **Historia del Padre** (Lista el mas alto grado cumplido. Usa el padre con mayor educación)

- | | | |
|---|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Not a High School Graduate
<i>Asistió escuela secundaria sin graduar</i> <input type="checkbox"/> Graduated High School
<i>Graduó de secundaria</i> | <ul style="list-style-type: none"> <input type="checkbox"/> Some College/Associate Degree
<i>Asistió algunas clases en colegio, o licencia asociado</i> <input type="checkbox"/> College Graduate
<i>Graduado de la universidad</i> | <ul style="list-style-type: none"> <input type="checkbox"/> Graduate School/Post Graduate Training
<i>Escuela de posgrado</i> <input type="checkbox"/> Decline to State/Unknown
<i>Renunciar a exponer</i> |
|---|---|--|

LEGAL PHYSICAL CUSTODY / Custodia Fisica Legal

- | | | |
|---|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Living with both parents <input type="checkbox"/> Living with Natural Father Only <input type="checkbox"/> Living with Natural Mother Only | <ul style="list-style-type: none"> <input type="checkbox"/> Living with Legal Guardian <input type="checkbox"/> Living with Natural Father and Stepmother <input type="checkbox"/> Living with Natural Mother and Stepfather | <ul style="list-style-type: none"> <input type="checkbox"/> Living with Foster Parents <input type="checkbox"/> Ward of Court <input type="checkbox"/> Other: |
|---|---|--|

WHERE IS YOUR CHILD/FAMILY CURRENTLY LIVING? (Check one box only) / **¿Dónde están viviendo su hijo/familia?** (Elija sólo uno)

Living in a single-home residence that is permanent. / *Viviendo en una residencia permanente para una familia.*

Living in a car, park, campground, abandoned building, or other inadequate accommodations (i.e. lack of water, electricity, or heat) / *Viviendo en un automóvil, parque, campamento, edificio abandonado u otro alojamiento inadecuado (p. Ej. falta de agua, electricidad o calentador)*

Staying in a shelter (family shelter, domestic violence shelter, youth shelter) or Federal Emergency Management Agency (FEMA) trailer / *Viviendo en un refugio (refugio familiar, refugio de violencia doméstica, refugio juvenil) o Federal*

Sharing housing with other(s) due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason / *Compartiendo vivienda con otro (s) debido a la pérdida de vivienda, dificultades económicas, desastres naturales, falta de vivienda adecuada o razón similar*

Temporarily living in a motel or hotel due to loss of housing, economic hardship, natural disaster, or similar reason. / *Vivir temporalmente en un motel u hotel debido a la pérdida de la vivienda, dificultades económicas, desastres naturales, o una razón similar*

In a foster care placement / *Bajo ubicación de crianza temporal*

I am a student under the age of 18 and living apart from parent(s) or guardian. / *Soy un estudiante menor de 18 años y vivo separado de mis padres o tutores.*

Your child or children may have the right to: / *Su hijo o hijos pueden tener derecho a:*

Immediate enrollment in the school they last attended (school of origin) or the local school where you are currently staying, even if you do not have all the documents normally required at the time of enrollment. / ****Inscripción inmediata en la escuela a la que asistieron por última vez (escuela de origen) o en la escuela local donde actualmente se queda, incluso si no tiene todos los documentos que normalmente se requieren en ese momento de matriculación.**

Continue to attend their school of origin, if requested by you and it is in the best interest. / ****Continuar asistiendo a su escuela de origen, si así lo solicita y le conviene.**

Receive transportation to and from their school of origin, the same special programs and services, if needed, as provided to all other children, including free meals and Title I. / ****Recibir transporte hacia y desde su escuela de origen, los mismos programas y servicios especiales, si es necesario, que se proporcionan a todos los demás niños, incluyendo las comidas gratuitas y el Título I.**

Receive the full protections and services provided under all federal and state laws, as it relates to homeless children, youth, and their families. / ****Recibir todas las protecciones y servicios provistos bajo todas las leyes federales y estatales, en lo que se refiere a niños sin hogar, jóvenes y sus familias.**

If you have any questions about these rights, please contact the local homeless liaison, Ms. JoAnn Baeten, by phone at 760-243-5884 x-460 or by email at jbaeten@orogrande.org / *Si tiene alguna pregunta sobre estos derechos, comuníquese con el enlace local para personas sin hogar, Ms. JoAnn Baeten, por teléfono al 760-243-5884 x-460 o por correo electrónico a jbaeten@orogrande.org*

Falsification of information on this form may be grounds for dropping student from school, or re-designation of program.

Falsificación de la información en esta forma puede ser asunto para retirar el estudiante de la escuela o cambio de su programa

Parent/Legal Guardian Signature:
Firma de Padre ó Guardian Legal:

DATE/Fecha

Mojave River Academy
Health Information

Student Name:

Medications taken by student at home (written authorization from doctor required for school to administer) / *Medicamentos que toma en casa (Autorizacion escrita del medico es necesaria para que la escuela administre):*

Other Health Condition / *Otra Condicion de Salud:*

What action is to be taken if student has a complication due to his/her allergic condition or other health condition / *Que medidas se deben tomar si el (la) estudiante tiene una complicacion debido a su alergia o estado de salud:*

Known Conditions / Condiciones Conocidas

- Asthma / El asma Heart condition / *Condiciones del corazon* Wears hearing aid / *Usa audifonos* Wears glasses / *Usa lentes*
 Bee sting allergy / *Alergia a las abejas* Seizures / *Convulsiones* Epilepsy / *Epilepsia*
 Wears contact lenses / *Usa lentes de contacto* Glasses to be worn at all times / *Usar lentes a todas horas* Diabetes / *La diabetes*
 Known hearing problem / *Problema de audicion conodido* Known eye condition/defect in vision / *Condicion o defectos en la vision* Preferential seating / *Asiento preferible*

The Oro Grande School District **does not provide medical, accident or dental insurance** for pupils injured on school premises or through school activities. In accordance with Education Code 49472, the District has made available a low cost medical/dental accident insurance program. For more information please contact Student Services. / *El Distrito Escolar de Oro Grande no provee **aseguranza medica, dental o de accidente** para estudiantes que se lecionan en las escuela o mediante actividades escolares. De acuerdo al Codigo de Educacion 49472, el Distrito ha puesto a disposicion un programa de aseguranza medica/dental o de accidente a bajo costo. Para obtener mas informacion póngase al contacto con los Servicios para Estudiantes.*

ADDITIONAL EMERGENCY CONTACTS / Contactos Adicionales en caso de Emergencia

In the event of illness, medical emergency, disaster or the parent/legal guardian can not be reached, a school official may call the following friends, relatives or adult siblings (**18 and over**) who are authorized to take responsibility for the student:
En el caso de enfermedad, emergencia medica o desastre y, si no se puede localizar a los padres o tutores, un funcionario de la escuela podra llamar a los siguientes amigos or parientes adultos (de 18 años o mayores) los cuales estan autorizados a tomar responsabilidad por el cuidado del alumno:

Name / <i>Nombre</i>	Relationship to Student / <i>Relacion con el estudiante</i>	Contact Telephone / <i>Teléfono de Contacto</i>
Name / <i>Nombre</i>	Relationship to Student / <i>Relacion con el estudiante</i>	Contact Telephone / <i>Teléfono de Contacto</i>
Name / <i>Nombre</i>	Relationship to Student / <i>Relacion con el estudiante</i>	Contact Telephone / <i>Teléfono de Contacto</i>
Name / <i>Nombre</i>	Relationship to Student / <i>Relacion con el estudiante</i>	Contact Telephone / <i>Teléfono de Contacto</i>

PARENT/LEGAL GUARDIAN CONSENT - APROBACION DEL PADRE O GUARDIAN LEGAL:

- ▶ In the event of an illness or injury, I hereby authorize school officials on my behalf to obtain emergency transportation and treatment. *En caso de enfermedad o lastimadura, doy mi autorización para que el personal de la escuela obtenga el tratamiento de emergencia y transporte.*
- ▶ I understand the school does not assume any financial responsibility for medical care or ambulance transportation in case of emergency. A student Accident Policy is available to all students for a nominal fee. *Comprendo que la escuela no asume responsabilidad financiera por cuidados medicos o transporte en ambulancia en caso de emergencia. Existe una póliza estudiantil de accidentes para todos los alumnos, por una tarifa minima.*
- ▶ To help ensure the health and safety of my child, I agree that health information may be shared with appropriate school personnel. *Acepto que esta informacion de salud puede compartirse con el personal apropiado de la escuela para ayudar a garantizar la salud y seguridad de mi niño o niña.*

My signature acknowledges that I understand and agree with the consent information above and that the information provided is complete and accurate. *My firma indica que comprendo y acuerdo con el consetimiento anterior, ademas de que la informacion incluida es complete y correcta.*

Parent/Legal Guardian Signature:

Firma de Padre ó Guardian Legal:

DATE/Fecha

Mojave River Academy

Must Be Filled Out by All Parents/Guardians

Dear Parent/Guardian:

By law, if parents are legally separated or divorced, each parent has equal right to the custody of the child/children and/or educational rights **UNLESS** a parent has a court order that indicates which parent has custody of the child/children. (Family Code ss, 3004).

The school MUST HAVE A COPY OF THE COURT ORDER on file, otherwise, either parent may check the child out of the school with proper identification, and have parental rights regarding educational decisions for the child/children.

I have read the above statement of the law.

Student's Name

Grade

Parent/Legal Guardian Signature

Date

Note: The courts must handle custody disputes. The school has no legal jurisdiction to refuse a biological parent access to their child and/or school records. The only exception is when signed restraining orders or proper divorce/custody papers, specifically stating visitation limitations, are on file in the school office. Any student release situation, which leaves the student's welfare in question, will be handled at the discretion of the site administrator or designee. Should any such situation become a disruption to the school, the Sheriff's Office will be contacted and a Deputy will be requested to intervene.

Parents are asked to make every attempt not to involve the school in custody matters.

Mojave River Academy

Debe ser Completado por todo los Padres/Tutores

Queridos Padres/Tutores:

Por ley, si los padres estan separados, divorciados legalmente, cada uno de los padres tienen el mismo derecho a la custodia de los hijos y/o derecho a la educacion **A MENOS QUE** el padre o la madre tenga una orden de la corte que indique que el padre tiene la custodia del niño/niños. (Family Code ss, 3004).

La escuela **DEBE TENER UNA COPIA DE LA ORDEN DE LA CORTE** en el archivo, de lo contrario, cualquiera de los padres puede sacar al niño/niños de la escuela con la debida identificacion y tener la patria potestad sobre decisiones en material de la educacion para el/los niño/niños.

He leído la declaracion anterior de la ley.

Nombre del Estudiante

Grado

Firma del Padre/Guardian Legal

Fecha

Nota: Los tribunales deben manejar las controversias por la custodia. La escuela no tiene jurisdiccion legal para negar a un padre biologico el acceso a su hijo y/o registros escolares. La única excepcion es cuando ordenes firmadas de restriccion o documentos adecuados de divorcio o custodia, en particular las limitaciones de visitas esten en el archivo de la escuela. Cualquier otra situacion que deje el bienestar del estudiante en cuestion, se tratara a la discrecion del administrador del sitio o su designado. Si cualquier situacion de estas se convierte en una interrupcion a la escuela, la oficina del Sheriff se contactara para intervenir.

Se les pide a todos los padres de haver todo lo posible por no involucrar a la escuela en asuntos de custodia.

Mojave River Academy

Consent to Photo, Videotape & Record

Date: _____

I hereby give my consent to Mojave River Academy to take, or authorize others to take, still pictures, motion pictures, or videotapes of, and to record the voice of, _____ (student's name).

I understand that these pictures may be used for educational, public interest, or informational purposes through media of radio, television, newspaper, film, social media or internet.

Parent/Legal Guardian Signature

Print Parent/Legal Guardian Name

I do not give my consent

Consentimiento para Fotografia, Video y Grabar

Date: _____

Por medio de la presente doy mi consentimiento a Mojave River Academy o autorizar a otros a tomar fotografias, imagines en movimiento, o tomar Cintas de Video y grabar la voz, de _____ (nombre del estudiante).

Entiendo que estas imagines pueden ser utilizadas para fines educativos, interes publico, o fines informativos a traves de los medios de radio, television, prensa, pelicula o internet.

Firma del Padre/Legal Guardian

Nombre del Padre/Guardian Legal

No doy mi consentimiento

Household Income Data Collection – Oro Grande School District 2020/2021

See additional information on the back of this form for assistance in determining your household size and annual household income.

1. Check the total number of adults and children living in your household (if more than 10 please enter number):

Check one: 1 2 3 4 5 6 7 8 9 10 Other _____

2. Total Annual Household Income: \$

I certify (promise) that the information provided on this form is true and that I included all income. I understand that the school may receive state and federal funds based on the information I provide and that the information could be subject to review.

Signature of adult household member
completing this form

Printed name of adult household member
completing this form

Date

HOME PHONE NUMBER

CELL PHONE NUMBER

E-MAIL ADDRESS

The information submitted on this form is a confidential educational record and is therefore protected by all relevant federal and state privacy laws that pertain to educational records including, without limitation, the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended (20 U.S.C. § 1232g; 34 CFR Part 99); Title 2, Division 4, Part 27, Chapter 6.5 of the California Education Code, beginning at Section 49060 et seq.; the California Information Practices Act (California Civil Code Section 1798 et seq.) and Article 1, Section 1 of the California Constitution.

Who should I include in “Household Size”?

You must include yourself and all people living in your household, related or not (for example, children, grandparents, other relatives, or friends) who share income and expenses. If you live with other people who are economically independent (for example, who do not share income with your children, and who pay a pro-rated share of expenses), do *not* include them.

What is included in “Total Household Income”? Total Household Income includes all of the following:

- **Gross earnings from work:** Use your gross income, not your take-home pay. Gross income is the amount earned before taxes and other deductions. This information can be found on your pay stub or if you are unsure, your supervisor can provide this information. Net income should only be reported for self-owned business, farm, or rental income.
- **Welfare, Child Support, Alimony:** Include the amount each person living in your household receives from these sources, including any amount received from CalWORKs.
- **Pensions, Retirement, Social Security, Supplemental Security Income (SSI), Veteran’s benefits (VA benefits), and disability benefits:** Include the amount each person living in your household receives from these sources.
- **All Other Income:** Include worker’s compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income received. Do not include income from CalFresh, WIC, federal education benefits and foster payments received by your household.
- **Military Housing Allowances and Combat Pay:** Include off-base housing allowances. Do not include Military Privatized Housing Initiative or combat pay.
- **Overtime Pay:** Include overtime pay **ONLY** if you receive it on a regular basis.

How do I report household income for pay received on a monthly, twice per month, bi-weekly, and weekly basis?

- Determine each source of household income based on above definitions. Households that receive income at different time intervals must annualize their income as follows:
 - If paid monthly, multiply total pay by 12
 - If paid twice per month, multiply total pay by 24
 - If paid bi-weekly (every two weeks), multiply total pay by 26
 - If paid weekly, multiply total pay by 52
- Add all annualized pay together to determine the total annual household income entered in Part II, 2.

If your income changes, include the wages/salary that you regularly receive. For example, if you normally make \$1,000 each month, but you missed some work last month and made \$900, put down that you made \$1,000 per month. Only include overtime pay if you receive it on a regular basis. If you have lost your job or had your hours or wages reduced, enter zero or your current reduced income.

For additional information on Household Size and Gross Household Income, please see the Eligibility Manual for School Meals on the U.S. Department of Agriculture Guidance and Resource Web page at <http://www.fns.usda.gov/cnd/guidance/default.htm>.

Recopilación de datos de ingresos del hogar - Distrito escolar de Oro Grande 2020/2021

1. Número todas las personas que viven en su hogar, (relacionadas o no) marque la casilla de verificación junto al número (si es otro, ingrese el número):

1 2 3 4 5 6 7 8 9 10 Otro _____

2. Ingresos anuales totales del hogar: \$

Certifico (prometo) que la información proporcionada en este formulario es verdadera y que incluí todos los ingresos. Entiendo que la escuela puede recibir fondos estatales y federales basados en la información que proporcionó y que la información podría estar sujeta a revisión

Firma del miembro adulto del hogar que completa este formulario

Nombre impreso del miembro adulto del hogar que completa este formulario

Fecha

Número de teléfono de casa

Número de Celular

Dirección de correo electrónico

Cómo determinar el tamaño del hogar y el ingreso

¿A quién debo incluir en "Tamaño del hogar"?

Debe incluirse a sí mismo y a todas las personas que viven en su hogar, relacionadas o no (por ejemplo, niños, abuelos, otros parientes o amigos) que comparten ingresos y gastos. Si vive con otras personas que son económicamente independientes (por ejemplo, que no comparten ingresos con sus hijos y que pagan una parte prorrateada de los gastos), no los incluya.

¿Qué se incluye en el "Ingreso total del hogar"? El ingreso total del hogar incluye todo lo siguiente:

Ingresos brutos del trabajo: use sus ingresos brutos, no su salario neto. El ingreso bruto es la cantidad ganada antes de impuestos y otras deducciones. Esta información se puede encontrar en su recibo de sueldo o, si no está seguro, su supervisor puede proporcionarle esta información. Los ingresos netos solo se deben informar para negocios propios, granjas o ingresos por alquiler.

Bienestar, manutención de los hijos, pensión alimenticia: incluya la cantidad que cada persona que vive en su hogar recibe de estas fuentes, incluida cualquier cantidad recibida de CalWORKs.

Pensiones, Jubilación, Seguridad Social, Seguridad de Ingreso Suplementario (SSI), beneficios para veteranos (beneficios de VA) y beneficios por discapacidad: incluya la cantidad que cada persona que vive en su hogar recibe de estas fuentes.

Todos los demás ingresos: Incluya la compensación del trabajador, los beneficios de desempleo o huelga, las contribuciones regulares de personas que no viven en su hogar y cualquier otro ingreso recibido. No incluya ingresos de CalFresh, WIC, beneficios federales de educación y pagos de acogida recibidos por su hogar.

Asignaciones de vivienda militar y pago de combate: incluye asignaciones de vivienda fuera de la base. No incluye la Iniciativa militar de viviendas privatizadas ni el pago por combate.

Pago de horas extras: incluye el pago de horas extras SOLO si lo recibe de manera regular.

¿Cómo informar los ingresos del hogar por el pago recibido mensualmente, dos veces al mes, cada dos semanas y semanalmente?

Determine cada fuente de ingresos del hogar con base en las definiciones anteriores. Los hogares que reciben ingresos en diferentes intervalos de tiempo deben analizar sus ingresos de la siguiente manera:

Si se paga mensualmente, multiplique el pago total por 12

Si se paga dos veces al mes, multiplique el pago total por 24

Si se paga cada dos semanas (cada dos semanas), multiplique el pago total por 26

Si se paga semanalmente, multiplique el pago total por 52

Sume todos los pagos anuales para determinar el ingreso anual total del hogar ingresado en la Parte II, 2. Si sus ingresos cambian, incluya el salario / salario que recibe regularmente. Por ejemplo, si normalmente gana \$1,000 cada mes, pero perdió el trabajo el mes pasado y ganó \$900, anote que ganó \$1,000 por mes. Incluya sólo el pago de horas extras si lo recibe de manera regular. Si ha perdido su trabajo o ha reducido sus horas o salarios, ingrese cero o su ingreso actual reducido.

Información Adicional

Para obtener información adicional sobre el tamaño del hogar y el ingreso bruto del hogar, consulte el Manual de elegibilidad para comidas escolares en la página web de recursos y orientación del Departamento de Agricultura de los EE. UU. En

<http://www.fns.usda.gov/cnd/guidance/default.htm>

Departamento de Educación de California

Opinión escrita el 25 de marzo de 2015

Mojave River Academy Internet Acceptable Use Policy School Year 2020-2021

Student Name: _____

Mojave River Academy (“MRA”) recognizes the value of various electronic resources to improve student learning and enhance the administration and operation of its schools. To this end, All uses of MRA computers; computer networks, including the Internet; and other electronic resources must be consistent with all state and district policies and must be in support of the mission and goals of MRA. This document outlines the Acceptable Use Policy (“AUP”) for student use of MRA networks, computers and electronic resources.

USER ACCOUNTABILITY

By accessing the MRA network using MRA-owned or personally-owned equipment, you have consented to MRA’s exercise of its authority and rights as set out in this policy with respect to any such equipment, as well as with respect to any information or communication stored or transmitted over such equipment. MRA network resources, including all voice and data lines, are the property of MRA. MRA reserves the right to access, view or monitor any information or communication stored on or transmitted over the network, or on or over equipment that has been used to access the MRA network, and it may be required by law to allow third parties to do so. Electronic data may become evidence in legal proceedings. In addition, others may inadvertently view messages or data as a result of routine system maintenance and monitoring.

PRIVACY AND RESTRICTED FREE SPEECH

Users must recognize that there is no guarantee of privacy associated with their use of MRA technology resources. Users should not expect that email, voicemail or other information created or maintained in the system (even when marked “personal” or “confidential”) are private or confidential. Each user is responsible for the security and integrity of information stored on his or her computer, tablet, phone or other devices. Computer accounts, passwords, security codes and other types of authorization are assigned to individual users and must not be shared with or used by others. MRA, at its sole discretion, reserves the right to bypass such passwords and to access, view or monitor its systems and all of their contents. By accessing the MRA system, you have consented to the school’s right to monitor its system and all of their contents. The MRA network is not a public access service or a public forum. MRA has the right and responsibility to restrict the material including text, graphics and all other forms of expression accessed, posted or stored through the system

INTERNET SAFETY

In compliance with the Children’s Internet Protection Act (“CIPA”), MRA implements firewall filtering/blocking software and hardware to restrict access to internet sites containing child pornography, obscene depictions or other materials harmful to minors under 18 years of age. Although MRA takes every precaution to ensure that such materials are not accessed through the computer network, there is still a risk an internet User may be exposed to a site containing such materials. A User who connects to such a site must immediately disconnect from the site and notify a teacher or administrator. If a User sees another User accessing inappropriate sites, he or she should notify a teacher or administrator immediately.

In compliance with CIPA, MRA and its representatives monitor all minors’ online activities while on the MRA network or MRA devices, including website browsing, email use, video and text chat, instant messaging, social media, blog participation and other forms of electronic communication. Such monitoring may lead to a discovery that a User has violated or may be violating this Policy, the appropriate disciplinary policy or the law. Monitoring is aimed to protect minors from accessing inappropriate material, as well as to help enforce this Policy as determined necessary by the MRA Governing Board or other related authority. MRA also monitors other Users’ (e.g. employees, students 18 years or older) online activities while on the MRA network or MRA devices and may access, review, copy, store or delete any electronic communication or files and disclose them to others as it deems necessary.

If a student under the age of 18 accesses his/her MRA Account or the internet outside of school, a parent or legal guardian must supervise the student’s use of the account or internet at all times and is completely responsible for monitoring the student’s use thereof.

UNACCEPTABLE USES OF MRA NETWORKS, THE INTERNET AND/OR ELECTRONIC RESOURCES

- Uses that violate any state or federal law, municipal ordinance or MRA policy, are unacceptable. Unacceptable uses include, but are not limited to the following:
 - Selling or purchasing any illegal substance;
 - Accessing, transmitting, or downloading child pornography, obscene depictions, harmful materials, or materials that encourage others to violate the law; or
 - Transmitting or downloading confidential information or copyrighted materials.
- Accessing, transmitting or downloading inappropriate materials on the internet, as determined by MRA.
- Obtaining and/or using anonymous email sites.
- Circumventing the MRA network, filtering and/or firewall
- Uses that cause harm to others or damage to their property are unacceptable.
- Engaging in an act of bullying, including, but not limited to, bullying committed by means of an electronic act.

- Deleting, copying, modifying, or forging other User's emails, files, or data.
- Installing or using encryption software on any MRA device or the MRA network.
- Accessing another User's account for any purpose, even with consent.
- Damaging computer equipment, files, data or the network.
- Using profane, abusive, or impolite language.
- Disguising one's identity, impersonating other Users, or sending anonymous messages.
- Threatening, harassing, or making defamatory or false statements about others.
- Accessing, transmitting, or downloading offensive, harassing, or disparaging materials.
- Accessing, transmitting, or downloading computer viruses or other harmful files or programs, or in any way degrading or disrupting any computer system performance including, but not limited to "email bombs."
- Accessing, transmitting, or downloading large files, including "chain letters" or any type of "pyramid schemes."
- Using any MRA computer to undertake "hacking," "phishing" or "spamming" internal or external to MRA, or attempting to access information that is protected by privacy laws.
- Using any robot, spider, other automatic device, or manual process to monitor or copy MRA web pages or the content contained thereon or for any other unauthorized purpose; or, using any device, software or routine to interfere or attempt to interfere with the proper working of the MRA website and/or network.
- Abusing MRA network resources such as emailing mass mailings and chain letters, engaging in spam, subscribing to a non-school related listserv or group, spending excessive time on the internet for personal reasons, playing games, streaming music or videos, engaging in non-MRA related online chat groups, printing multiple copies of documents or otherwise creating unnecessary network traffic (intentionally or unintentionally).
- Disclosing one's Account password to other Users or allowing other Users to use one's Account.
- Gaining unauthorized access into others' User Accounts or other computer networks.
- Interfering with other Users' ability to access their Accounts.
- Selling or buying anything over the internet for non-MRA related personal or financial gain.
- Using the internet for non-MRA related advertising, promotion, or financial gain.
- Conducting for-profit business activities and engaging in non-governmental related fundraising or public relations activities such as solicitation for religious purposes, lobbying for political purposes, or soliciting votes.
- Sending any email that is deceptive, misleading, or violates any state or federal statute or regulation including, but not limited to, the CAN-SPAM Act of 2003, or any state email or deceptive practice statute.

PLAGIARISM POLICY

Researching information on the internet and incorporating that information into a student's work is an acceptable educational use, but students have an obligation to credit and acknowledge the source of information. Accordingly, the student acknowledges that plagiarism is inappropriate and unacceptable.

LIMITATION OF LIABILITY

MRA makes no guarantee that the computer/internet functions or the services provided will be error-free or without defect. MRA will not be responsible for any damage you may suffer, including but not limited to, loss of data or interruptions of service. MRA is not responsible for the accuracy or quality of the information obtained through or stored on the system. MRA will not be responsible for financial obligations arising through the unauthorized use of the system.

REQUIRED SIGNATURES

Student

I understand and will abide by the provisions and conditions of this contract. I understand that any violations of the above provisions may result in disciplinary action, the revoking of my user account, and appropriate legal action. I also agree to report any misuse of the information system to the Mojave River Academy system administrator.

Student Name (Please print) _____

Student Signature _____

Date _____

Parent or Guardian

Students under the age of 18 must also have the signature of a parent or guardian who read this contract. As the parent or guardian of this student, I have read this contract and understand that it is designed for educational purposes. I understand that it is impossible for Mojave River Academy to restrict access to all controversial materials, and I will not hold the SCHOOL responsible for materials acquired on the network. I accept full responsibility for supervision if and when my child's use is not in a school setting. I hereby give my permission to issue an account for my child.

Parent/Legal Guardian Name (Please print) _____

Signature _____

Date _____