

GISD BASIC STUDENT INFORMATION

PLEASE PRINT

(Escribe en letra molde)

Last Name _____ First Name _____ Middle Name _____
(Apellido) (Primer Nombre) (Segundo Nombre)

Grade _____ Gender _____ Student ID _____ Family Id _____ Teacher _____ Rm _____
(Grado) (Sexo) (#de Matricula) (#de Matricular Familiar) (Maestro/a)

Birthdate _____ Ethnic _____ Bus-am _____ Bus-pm _____
(Fecha de Nacimiento) (Etnica) (Camion)

Birthplace _____ Social Security No _____ Nickname _____
(Lugar de Nacimiento) (#Seguro Social) (Sobre Nombre)

Primary Language _____ Home Language _____ Program _____
(Idioma Natal) (Idioma del Hogar) (Programa de estudio)

Permission to Photo Yes _____ No _____ Income Survey Yes _____ No _____
(Permiso de fotografiar) (Encuesta de Ingresos)

Enter Date _____ Enter Code _____ Previous School Attended _____

Residence Address _____ City _____ State _____ Zip Code _____
(Domicilio-Numero y Calle) (Ciudad) (Estado) (Codigo Postal)

Mailing Address _____ City _____ State _____ Zip Code _____
(Apartado Postal-Si diferente al Domicilio) (Ciudad) (Estado) (Codigo Postal)

Father/Guardian _____ Relationship _____
(Padre/Tutor-Apellido, Primer Nombre) (Parentesco)

Employer _____ Work Telephone _____
(Empleador) (Telefono en el lugar de empleo)

Address _____ City _____ State _____ Zip Code _____
(Domicilio) (Ciudad) (Estado) (Codigo Postal)

Mailing Address _____ City _____ State _____ Zip Code _____
(Apartado Postal-Si diferente al Domicilio) (Ciudad) (Estado) (Codigo Postal)

Home Telephone _____ Unlisted _____ Cellphone _____
(Telefono del Hogar) (No Publicado) (Celular)

Mother/Guardian _____ Relationship _____
(Padre/Tutor-Apellido, Primer Nombre) (Parentesco)

Employer _____ Work Telephone _____
(Empleador) (Telefono en el lugar de empleo)

Address _____ City _____ State _____ Zip Code _____
(Domicilio) (Ciudad) (Estado) (Codigo Postal)

Mailing Address _____ City _____ State _____ Zip Code _____
(Apartado Postal-Si diferente al Domicilio) (Ciudad) (Estado) (Codigo Postal)

Home Telephone _____ Unlisted _____ Cellphone _____
(Telefono del Hogar) (No Publicado) (Celular)

EMERGENCY CONTACTS/CONTACTOS DE EMERGENCIA

First Contact Name _____ Telephone _____ Relationship _____
(Primer Contacto) (Teléfono) (Parentesco)
Second Contact Name _____ Telephone _____ Relationship _____
(Segundo Contacto) (Teléfono) (Parentesco)
Third Contact Name _____ Telephone _____ Relationship _____
(Tercer Contacto) (Teléfono) (Parentesco)

EMERGENCY INFORMATION/INFORMACIÓN DE EMERGENCIA

Medical Alert 1 _____ Medical Alert 2 _____
(#1 Alerta Médica) (#2 Alerta Médica)
Physician _____ Telephone _____
(Médico) (Teléfono)

Sibling(s) enrolled at another GISD School
Hermano(a) matriculados en otra escuela en el distrito de Gadsden

Student
Name _____ School _____ Grade _____
(Nombre de Estudiante) (Escuela) (Grado)

Student
Name _____ School _____ Grade _____
(Nombre de Estudiante) (Escuela) (Grado)

Student
Name _____ School _____ Grade _____
(Nombre de Estudiante) (Escuela) (Grado)

Parent/Guardian Signature _____ Date _____
(Firma del Padre/Tutor) (Fecha)

For Office use Only
Preschool Enrollment Survey (Circle One)
Student without any Preschool Experience
Student from Private Preschool
Student from Public Preschool
Student from Head Start Programs
Student from Even Start
Student from Child Care Locations

FORM A

HOME LANGUAGE SURVEY

Gadsden Independent School District

Please help us determine your child's language background by answering the following questions. This information is needed in order for us to provide the best instructions possible for all students.

Name of Student: _____
Last First Middle

School: _____ Grade: _____

Please check any appropriate answers. If *Other* is selected, write the language on the line.

1. In what language(s) did your child learn to communicate at home, daycare, or with caregivers?

English _____ Spanish _____ Other _____

2. What language does your child use *most often*?

English _____ Spanish _____ Other _____

3. What language(s) is commonly used in communicating with your child?
(*By parents, relatives, or caregivers, etc.*)

English _____ Spanish _____ Other _____

Parent/Guardian's Signature

Date

PHLOTE _____ NON-PHLOTE _____

Student I.D. _____

**GADSDEN INDEPENDENT SCHOOL DISTRICT
PERMISSION TO PHOTOGRAPH TITLE I STUDENTS**

STUDENT NAME _____

I give permission for my child to be photographed in class activities in order to share program information with other districts and educators. I understand that there is no charge to me. This permission will be valid for the entire time my child is enrolled in the Gadsden School District. I understand that I may withdraw this permission by contacting the building principal.

Yes, I give permission

No, I do not give permission

DATE

PARENT SIGNATURE

**DISTRITO ESCOLAR DE GADSDEN
PERMISO PARA TOMAR UNA FOTOGRAFIA
DE LOS ESTUDIANTES DE TITULO I**

NOMBRE DE ESTUDIANTE _____

Doy permiso para que tomen fotografias de mi hijo/hija en las actividades de la clase con el propósito de compartir información del programa con otros distritos y otros educadores. Entiendo que es gratis. Este permiso es válido siempre que mi hijo/hija esté matriculado en el Distrito Escolar de Gadsden. Entiendo que puedo retirar este permiso comunicándome con el director de la escuela.

Sí, doy permiso

No, quiero dar permiso

FECHA

FIRMA DE PADRE

Dates Sent _____ Teacher Name _____

GADSDEN INDEPENDENT SCHOOL DISTRICT

RELEASE OF DIRECTORY INFORMATION 2016-2017

The following information shall be considered directory information by the Gadsden Independent School District and may be divulged to requesting persons without consent or notification of the student or parent as provided for in The Family Educational Rights and Privacy Act (FERPA). **Directory information includes, but is not limited to, the student's name; address; telephone listing; electronic mail address; photograph; date and place of birth; major field of study; grade level; enrollment status (e.g., undergraduate or graduate, full-time or part-time); dates of attendance; participation in officially recognized activities and sports; weight and height of members of athletic teams; degrees, honors, and awards received; and the most recent educational agency or institution attended.**

Within the first three (3) weeks of each school year the District will make available to all students the items listed above designated as directory information.

After the parents or eligible student have been notified, they will have two (2) weeks to advise the District in writing (a letter to the Superintendent's office) of any or all of the items they refuse to permit the District to designate as directory information about that student.

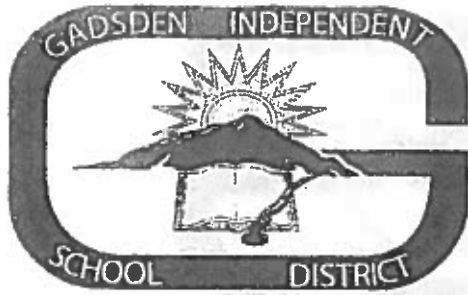
At the end of the two-week period, if the parent or eligible student has not returned the form indicating refusal to allow the release of directory information, the District will assume it has their permission to release the above-mentioned information.

- o The Gadsden Independent School District **MAY** release directory information as outlined above concerning my child(ren) listed below.

- o The Gadsden Independent School District **MAY NOT** release directory information as outlined above concerning my child(ren) listed below.

Parent signature: _____ Date: _____

Student name: _____



Gadsden Independent School District

Dear Parents or Guardians:

Our school district values your participation in the education of your children. To ensure that there is adequate communication when you meet with school personnel on school-related issues, we ask that you complete the following information:

School _____

Printed Parent Name _____

Telephone # _____

Address _____

City, State, Zip Code _____

Names of students and their grade:

Name	Grade
_____	_____
_____	_____
_____	_____
_____	_____

Please check the appropriate box:

We **need** translation/interpretive services when we meet with school personnel with school-related matters. Our language or native language is: _____

We **do not need** translation/interpretive services when we meet with school personnel with school-related matters.

Thank you for your cooperation.

I _____ agree to adhere to the following conditions and will discuss these stipulations with my child in depth:

- My child will abide by the school rules and wear a school uniform on a daily basis, except on free dress days.
- My child will be in school daily when school is in session and I further understand that I will call when my child is ill or has a doctor's appointment.
- My child will always be in school on time.
- My child will not become a discipline problem at Santa Teresa Middle School. In the event that the school has a major discipline referral from anyone associated with Santa Teresa Middle School, I will be notified immediately to discuss the consequences.
- My child will comply with all homework assignments and will be an active participant in the school classroom and or school setting.
- My child will not have any visible body piercing and will not wear any obscene or dangerous objects on earlobes, nose, eyes or tongue.
- My child will abide by the GISD board policies regarding the use of electronic devices to include cell phones and ipods.
- My child will adhere to the GISD and school policies regarding bullying, behavior and attendance.
- My child will bring the new address and telephone numbers if any change occurs throughout the school year.
- My child will not have his/her hair dyed/bleached in unnatural colors.
- My child will not have his/her hair shaved or with any kind of design on it.

I fully understand the conditions of this contract and both my child and I will abide by the conditions set forth in this contract.

Parent

Student

Rosa E. Lovelace, Principal

Signed this _____



4950 McNutt Road
Sunland Park, New Mexico

P.O. Drawer 70
Anthony, N.M. 88021
Phone: (575) 882-6200

RE: Military Family codes

Dear Parents,

Please be advised that the New Mexico Public Education Department is requesting our schools to collect "Military Family Codes".

This information will become part of the Student Record in our Powerschool database, and must be reported to the New Mexico Public Education Department.

Please check mark the Military status that is appropriate.

- Active
- National Guard
- Reserve
- Civilian (Working for the military as a contractor)
- N/A (not applicable)

Your assistance in obtaining this information will be greatly appreciated.

Thank you,

(Signature of Principal)

Grade _____

School _____

Student's complete name (Print) _____

Parent's signature _____ Date _____

Electronic Information Services (EIS) User Agreement

Terms and Conditions

Acceptable use. Each user of Gadsden Independent School District Electronic Information Services (EIS) must:

- Use the EIS to support personal educational objectives consistent with the educational goals and objectives of the School District.
- Agree not to submit, publish, display, or retrieve any defamatory, inaccurate, abusive, obscene, profane, sexually oriented, threatening, racially offensive, or illegal material.
- Abide by all copyright and trademark laws and regulations.
- Not reveal home addresses, personal phone numbers or personally identifiable data unless authorized to do so by designated school authorities.
- Understand that electronic mail or direct electronic communication is not private and may be read and monitored by school employed persons.
- Not use the network in any way that would disrupt the use of the network by others.
- Not use the EIS for commercial purposes.
- Follow the District's code of conduct.
- Not attempt to harm, modify, add/or destroy software or hardware nor interfere with system security.
- Understand that inappropriate use may result in cancellation of permission to use the educational information services (EIS) and appropriate disciplinary action up to and including expulsion for students. In addition, acceptable use for District employees is extended to include requirements to:
- Maintain supervision of students using the EIS.
- Agree to directly log on and supervise the account activity when allowing others to use District accounts.
- Take responsibility for assigned personal and District accounts, including password protection.
- Take all responsible precautions, including password maintenance and file and directory protection measures, to prevent the use of personal and District accounts and files by unauthorized persons.

Personal responsibility. I will report any misuse of the EIS to the administration or system administrator, as is appropriate. I understand that many services and products are available for a fee and acknowledge my personal responsibility for any expenses incurred without District authorization.

Network etiquette. I am expected to abide by the generally acceptable rules of network etiquette. Therefore, I will:

- Be polite and use appropriate language. I will not send, or encourage others to send, abusive messages.
- Respect privacy. I will not reveal any home addresses or personal phone numbers or personally identifiable information.
- Avoid disruptions. I will not use the network in any way that would disrupt use of the systems by others.
- Observe the following considerations:
 - Be brief.
 - Strive to use correct spelling and make messages easy to understand.
 - Use short and descriptive titles for articles.
 - Post only to known groups or persons.

The School District specifically denies any responsibility for the accuracy of information. While the District will make an effort to ensure access to proper materials, the user has the ultimate responsibility for how the electronic information service (EIS) is used and bears the risk of reliance on the information obtained.

* * * *

EIS User Agreement (Signature Page)

I have read and agree to abide by the Gadsden Independent School District policy and regulations on appropriate use of the electronic information system, as incorporated herein by reference.

I understand and will abide by the provisions and conditions indicated. I understand that any violations of the above terms and conditions may result in disciplinary action and the revocation of my use of information services.

Name: (Print) _____

Signature: _____ Date _____
(Student or employee)

School _____ Grade (if a student) _____

Note that this agreement applies to both students and employees.

The User Agreement of a student who is a minor must also have the signature of a parent or guardian who has read and will uphold this agreement.

Parent or Guardian Co-signer

As the parent or guardian of the above named student, I have read this agreement and understand it. I understand that it is impossible for the School District to restrict access to all controversial materials, and I will not hold the District responsible for materials acquired by use of the electronic information services (EIS). I also agree to report any misuse of the EIS to a School District administrator. (Misuse may come in many forms but can be viewed as any messages sent or received that indicate or suggest pornography, unethical or illegal solicitation, racism, sexism, inappropriate language, or other issues described in the agreement.)

I accept full responsibility for supervision if, and when, my child's use of the EIS is not in a school setting. I hereby give my permission to have my child use the electronic information services.

Parent or Guardian Name (print) _____

Signature _____ Date _____

Efren Yturralde
Superintendent



4950 McNutt Road
Sunland Park, New Mexico
P.O. Drawer 70
Anthony, N.M. 88021
Phone: (575) 882-6200

Dear Parent:

As part of our effort to provide a school which is effective in meeting the academic, emotional and social needs of your son/daughter, we have published the Student Handbook that can be found on the District website, www.gisd.k12.nm.us. We are requesting that you read and discuss it with your son/daughter. As educators, we feel strongly that the success of students is dependent upon the cooperation of the school and family in establishing positive educational and behavioral goals for your children.

After you have read the handbook, please sign this letter below and return it to your child's teacher. We will keep it on file as documentation that you and your son/daughter understand what is expected of students when they are in attendance. If you do not have access to a computer you can come by the school and use one of our computers or request a copy of the Student Handbook from your son/daughter's school.

If you have questions, please call your child's school principal's office.

Respectfully,

Efren Yturralde
Superintendent

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I have read and discussed the student handbook with my son/ daughter.

I have read and understand my child's rights under (FERPA) Family Educational Rights and Privacy Act

I have read and understand my child's rights under (PPRA) Protection of Pupil Rights Act

Grade _____

Student's Name (print) _____

Student's Signature _____ Date _____

Parent Signature _____ Date _____

Agricultural Questionnaire

Gadsden Independent School District

Your child may be eligible for supplemental services if he/she qualifies as a migratory student. To help us, please answer the following questions. If you answer "yes" to any of these questions, we will contact you for further information.

School: _____ Student Name: _____

Address: _____ Telephone: _____ Grade: _____

Have you or your family moved **within the last three (3) years**?

Yes

No

Have you or your family worked or are looking for work in the following occupations **in the last 3 years**?

Agricultural Field Work Yes No

Working on a Farm/Ranch
Cotton Farming/Ginning
Growing Trees

Harvesting
Picking Fruits, Nuts, or Vegetables

Other: _____

Agricultural Factory Work Yes No

Working in a Cannery
Working in a Fishery
Working on a Dairy

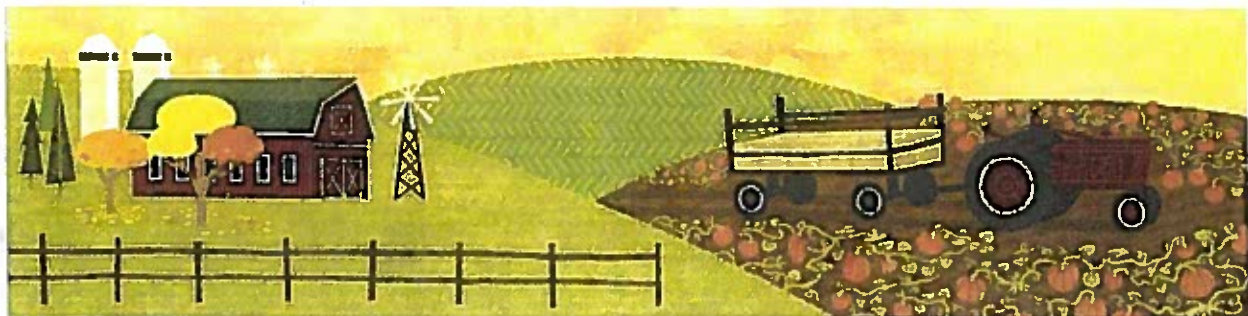
Working in a Slaughterhouse
Working in a Plant Nursery
Working in a Poultry Farm

Other: _____

Did the family **cross a state line or school district boundary** looking for temporary or seasonal agricultural work?

Yes

No



GADSDEN INDEPENDENT SCHOOL DISTRICT

Parent authorization for release of school records

In accordance with the Privacy Rights of Parents and Students, and the Gadsden School Board Policy I hereby authorize the release to the school named below of all records regarding the following pupil (s), including grades, health records, and psychological, social, educational or developmental information:

Date: _____

Please send records to:

**SANTA TERESA MIDDLE SCHOOL
4800 MC NUTT
SANTA TERESA, NEW MEXICO 88008
TELEPHONE: (575) 874-7200
FAX #: (575) 589-2780
tgriego@gisd.k12.nm.us
Attn: Ms. Teresa Griego, Registrar**

_____ Birthdate _____ Grade _____

_____ Birthdate _____ Grade _____

Parent/Guardian Signature: _____

SCHOOL LAST ATTENDED:

Name of school: _____

Address: _____

Phone #: _____ Fax #: _____

Comments: _____

**Santa Teresa Middle School
Uniform**

Shirt-
BLACK Polo style shirt only.
Tucked In.



Camisa-
Negro solamente estilo Polo.
Camisas Fajadas

Sweaters/Sweatshirts-
Solid Black Pullover Sweaters
Black long sleeve shirts under
polo shirts

Sueteres /Sudaderas-
Negra (sin logotipos)
Negra manga larga abajo.

Belts-
Plain black or brown leather
type belt is required.



Cintos
Requisito un cinto negro o
café simple de material tipo
baqueta.

Pants-
Uniform or Docker type pant
Khaki in color only. Shorts
khaki color only to the knee.



NO- Dickies, cargo, carpenter,
skirts/shorts

Pantalones-
Estilo uniforme o Docker
solamente en color Khaki.
Shorts en color Khaki
solamente, deben llegar hasta
la rodilla.
NO- Dickies, Cargo,
carpenter, o faldas

Shoes-
Tennis Shoes: /matching
lace.
Dress shoes: Black or
brown only



Calzado-
Tennis: con sinta igual.
Zapatos: Negros o cafés
solamente.

P.E. Optional
Gray T-Shirt
Gray Shorts

Educacion Fisica Optional:

- Camiseta Gris
- Shorts - Gris