

<u>Required Documentation</u>: The school must receive the following documents for enrollment to be valid, or to be added to the waiting list. If any document is missing, your application will be incomplete and you will not be enrolled or added to the waiting list.



Copy of Birth
Certificate (Full
page, not an
abstract of
birth)



<u>Proof of Residency:</u> Current utility bill with current address



Immunization Records: Must include current records of all required shots, including Tdap



<u>Transcripts or</u> <u>grades from</u> <u>previous school</u>

bi	rth)					incl	luding Tdd	ар				
Section 1: St	udent Demog	raphic Inforn	nation									
Last Name		•		First	: Name				Mid	ldle		
Gender	Legal Gender	Age	Birthdate (MM/D	DD/YYYY)	Year	r Entered Kir	ndergarten (YY	YY)		Grade for '1	8/'19
Name of Student	's Previous School (Most Recent)				Pho	ne Number					
	(,										
School Mailing Ac	Idracc			Ι.	City			State		Zip		
School Maning Ac	idi (33				city			State		Δip		
Section 2: M	ailing Address	5			Do you res	ide withir	n the boundar Beaumont		□ Ye	es		No
Mailing Address								I .			1.	
City				State	e				Zip			
Section 3: Ph	nysical Addres	S (if same as Mail	ing Address. le	eave S	ection 3 blank)							
Physical Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(() () () () ()			,							
City				State	e				Zip			
Section 4: Pa	rent Informa	tion										
Parent/Guardian							Cell Phon	e Number				
Employer		C	Occupation			Work	Phone Numl	ber				
Email Address (re	quired)	I.					Other Ph	one Number (i	f any)			
Parent/Guardian	Name						Cell Phon	e Number				
Employer		C	Occupation			Work	Phone Numl	ber				
Email Address (re	quired)	I				1	Other Ph	one Number (i	f any)			
Section 5: Er	nergency Con	tact Informat	ion									
Name					Relationship					F	Phone Num	ber
Name					Relationship					-	Phone Num	ber
Name					Relationship					-	Phone Num	ber



Section 6: Educat		Programs any that apply)						
SST	(000.	tany mat appryy						
504 Plan			504 Date	L	District. BUSD does not Academy and the BUSD	t deny en Special		ed on a disability. Highland together and will hold an IEP
*IEP			*IEP Date	I <u>I</u>	f BUSD is unable to me will provide Free Appro	et the ne priate Pu	t with an IEP to review the st eds of the student at Highlan Iblic Education (FAPE) for the her district campus based on	nd Academy, then the district student in the Least
ELD (English Learner)			EL Level					
Speech and/or hearing								
Section 7: Ethnic	Info	rmation						
Hispanic / Latino (Circle One)	0?	Yes			No			
What is your child ethnicity?	d's	☐ Chii ☐ Japa ☐ Viet ☐ Asia ☐ Can ☐ Hm ☐ Lao	erican Ind nese anese tnamese an Indian nbodian ong tian er Asian	ian/Alasi	kan Native		Guamanian Samoan Tahitian Other Pacific Isla Filipino African Americar White/Non-Hispa	n
Country of Birt (Circle One)	h	USA	A	:	*Other	*If "oth	er", year entered the US	
Section 8: Langua	age I	nformation		1				
What language d first began to talk What language d	id th k?	is student lea						
speak?	ues i	iiis studeiit ii	iost ireque	entry				
What language d speaking to this s	•	•	ently use w	hen				
What language is home?			-					
Is your child fluer writing, reading)	nt in	the English la	nguage? (s	peaking,	Circle	One:	Yes	No
Has your child be Development Pro			English Lan	iguage	Circle	One:	Yes	No
	If so,	have they be	en reclassi	fied?	Circle	Ono:	Vac	No



Section 9: Expulsion Status							
Has your student ever been suspend		Circle (One:	Y	es		No
Is this student currently under an Expu		a		.,			
been recommended for expulsion by a Has he or she been reinstated from	•	Circle (One:	Y	es		No
expulsion?	a previous	Circle (One:	Y	es		No
скраізіон.		Date	oric.		District		110
If so,	when and where?						
Section 10: Legal Guardianship							
							Legal
Who does the child currently live wi	th?	Both parents	1	ad Only	Mom O		Guardian
	Circle One:	Foster Parents		Vard of Court	Group Home		Other
Are there any court orders involved		Parents		Court	ПОПТЕ		Other
this student?	in the custody of	Yes		No			
Who has legal custody of the studen	t?						
Does the child currently live with you		Yes		No	,		
Notice: By law, if parents are legally	•	•				-	-
child/children UNLESS a parent has a school MUST HAVE A CURRENT COP		•	urent	nas custoa	iy oj trie cri	iu/cri	naren. The
Section 11: Parent Educational Histo		NDEN ON JIIC.					
Please check the highest lev	•	ieved by the par	ent w	ith the mo	st complet	e edu	cation.
Completed Some High School		Two Year C	College	e/Associate	e Degree		
Graduated High School		General Ed	lucation	on Diploma	a (GED)		
Vocational or Tech College		Four Year I	Degre	e (BA or BS	5)		
Attended Some College Classes		Graduate [Degre	e (MA, MS,	, PhD)		
Section 12: Residence Status							
W	nere does your fam	ily currently live	? (Che	eck one)			
Single Family Residence (home,		In a foster	care p	olacement	or group		
apartment)		home					
Motel, Car, or Campsite		Shelter or	transi	tional hous	sing		
With more than one family in a hous	se	Other (Plea	ase ex	plain)			
or apartment							
Falsification of information on thi	s form may be gr	ounds for rem	oval 4	of student	from the	nrog	ram
						אייט	
Parent Signature:				D	ate:		
Drivet Nove o							
Print Name:							



Section 13: Medical Authorization					
Primary Care Doctor				Phone Numl	<u> </u>
Insurance Company				Policy Numb	er
In the event of an illness or injury,					
 I hereby authorize school office 	ials from Hig	hland Aca	demy Charter	School on	my behalf to obtain medical
and/or emergency transportat	tion and tred	itment.			
 I understand that Highland Ac 	ademy Char	ter School	does not assu	me any fin	ancial responsibility for medical
care or ambulance transporta	tion in the ev	vent of an	emergency.		
 To help ensure the health and 	safety of my	child, I ag	ree that healt	th informat	tion may be shared with
appropriate school personnel.					
 My signature acknowledges th 	nat I underst	and and ag	gree with the	consent inj	formation above and that the
information provided is both c	omplete and	l correct.			
Parent Signature					Date
Section 14: Medical Emergency Inform	nation				
Student Name				Birthdate (N	1M/DD/YYYY)
Allergies – Is your child allergic to					
Medicine?	Yes	No	Details:		
Insect Bites?	Yes	No	Details:		
Food?	Yes	No	Details:		
Other?	Yes	No	Details:		
Birth Defects/Learning Disabilities					
Birth Defect	Yes	No	Details:		
Learning Disability	Yes	No	Details:		
Blood					
Hemophilia	Yes	No	Details:		
Hepatitis	Yes	No	Details:		
Other	Yes	No	Details:		
<u>Head</u>					
Headaches	Yes	No	Details:		
Concussion/LOC	Yes	No	Details:		
Dizziness/Fainting	Yes	No	Details:		
Other	Yes	No	Details:		
<u>Diabetes</u>					
Diabetes	Yes	No	Details:		
Issues with Organs					
Heart	Yes	No	Details:		
Lungs	Yes	No	Details:		
Kidneys	Yes	No	Details:		
Stomach	Yes	No	Details:		



<u>Hearing</u>			
Difficulty	Yes	No	Details:
Hearing Aids	Yes	No	Details:
Amplifiers	Yes	No	Details:
Other	Yes	No	Details:
Extremities			
Bones/Joints	Yes	No	Details:
Muscles	Yes	No	Details:
Missing Limbs	Yes	No	Details:
Other	Yes	No	Details:
Nervous System		•	
Seizures	Yes	No	Details:
Epilepsy	Yes	No	Details:
Spasms	Yes	No	Details:
Other	Yes	No	Details:
Vision			
Nearsighted	Yes	No	Details:
Farsighted	Yes	No	Details:
Glasses	Yes	No	Details:
Contacts	Yes	No	Details:
Other			
Surgery	Yes	No	Details:
Regular Meds	Yes	No	Details:
Sleep Issues	Yes	No	Details:
Anxiety/Depression	Yes	No	Details:
<u>Assurances</u>			
Any conditions that require			
attention or medication during the		Explain:	
school day?			
			*Note: School personnel cannot administer any medication without doctor's
			orders. Please pick up an "Order For Administration of Medication During the School Day" form from the front office.
Any conditions that prevent			
participation in Physical Education?		Explain:	
			Note: Highland Academy must have <u>current</u> doctor's orders on file for a
			student to be limited or excused from Physical Education activities.

Falsification of information on this form may be grounds for removal of student from the program.

Parent Signature:	Date:
Print Name:	



Student:	(Last name)	(First name)

Dear Parent/Guardian,

For the purpose of state reporting, please take a moment to review the tables below and check the category that applies to your household.

Example: A household of 3 (Dad, Mom, and child) - Dad receives 2 paychecks in a month, and each is \$1,000; Mom receives \$400 every two weeks. Since Dad's and Mom's pay schedules aren't the same, it's easier to convert both to a yearly basis.

In this case, Dad makes $1,000 \times 2 \times 12 = 24,000$; Mom makes $400 \times 26 = 10,400$

Based on what you have determined above, check one of the following boxes:

Our Total Household Income falls within:

Total household income is \$34,400. Therefore, this household would fall under Category 2, at the \$37,777 mark on the table to the right below.

Income Eligibility Guidelines

July 1, 2017 - June 30, 2018

			Category 1 sehold Inco	ome					Category 2 sehold Inco	ome	
Household size	Year	Month	Twice Per Month	Every Two Weeks	Week	Household size	Year	Month	Twice Per Month	Every Two Weeks	Week
1	\$ 15,678	\$ 1,307	\$ 654	\$ 603	\$ 302	1	\$ 22,311	\$ 1,860	\$ 930	\$ 859	\$ 430
2	21,112	1,760	880	812	406	2	30,044	2,504	1,252	1,156	578
3	26,546	2,213	1,107	1,021	511	3	37,777	3,149	1,575	1,453	727
4	31,980	2,665	1,333	1,230	615	4	45,510	3,793	1,897	1,751	876
5	37,414	3,118	1,559	1,439	720	5	53,243	4,437	2,219	2,048	1,024
6	42,848	3,571	1,786	1,648	824	6	60,976	5,082	2,541	2,346	1,173
7	48,282	4,024	2,012	1,857	929	7	68,709	5,726	2,863	2,643	1,322
8	53,716	4,477	2,239	2,066	1,033	8	76,442	6,371	3,186	2,941	1,471

 \square Category 1 \square Category 2 \square Neither Category

,		
Signature of adult household member	Date	Printed name of adult household member



Enrollment Information

Highland Academy is nonsectarian in its programs, admissions policies, employment practices, and all other operations, does not charge tuition, and does not discriminate against any student based on any of the characteristics listed in Education Code Section 220.

The Charter School admits all pupils who wish to attend the Charter School who reside in California. No test or assessment is administered to students prior to acceptance and enrollment into the Charter School.

The Charter School complies with all laws establishing minimum and maximum age for public school attendance in charter schools. Admission, except in the case of a public random drawing, is not determined by the place of residence of the pupil or his or her parent or legal guardian within the state. Highland Academy expects families to understand and support the Charter School's mission, vision, and educational philosophy.

Application Process

Families must fill out the Highland Academy Application Form, which conforms to the law regarding nondiscrimination, to be considered for enrollment in Highland Academy.

Parents must commit to participate in Highland Academy's educational community as outlined in the handbook. Before admission, students are required to submit an enrollment packet, which includes the following:

- Student enrollment form
- Proof of minimum age requirements, e.g. birth certificate
- Proof of immunization
- Proof of emergency medical information form
- Home language survey

504 Plan or IEP (if applicable)

• Proof of address and other required legal enrollment documents (e.g. utility bill, car registration)

Lottery

Applications are accepted during a publicly advertised open enrollment period each year for enrollment in the following school year. Following the open enrollment period each year, applications are counted to determine whether any grade level has received more applications than availability. If the amount of students who wish to attend Highland Academy exceed the enrollment limit, a public random drawing ("lottery") takes place to determine admission for the impacted grade level, with the exception of existing students, who are guaranteed admission in the following year. Highland Academy's Directors and other representatives draw the pupil names and verify the fair execution of lottery procedures. Highland Academy keeps a file documenting the fair execution of lottery procedures. Highland Academy conducts a separate lottery drawing for each grade level. Admission preferences in the case of a public random drawing are given to the following students in the following order:

- 1. Siblings of currently enrolled students
- 2. Children of employees
- 3. Residents of Beaumont USD
- 4. Residents of California outside Beaumont USD

Lottery Process Communication

Highland Academy has designated an application deadline of March 29th, and only applications received prior to the deadline are considered for the public random drawing. Public random drawing rules, deadlines, dates and times are communicated in the application form and on the Charter School's website. Public notice is posted in a public location and the Highland Academy school website regarding the date and time of the public drawing once the deadline date has passed. The Charter School also informs parents of all applicants and all interested parties of the rules to be followed during the public random drawing process via mail or email at least two weeks prior to the lottery date.

The lottery is conducted at a time when as many interested parties as possible can attend. A parent/guardian or an authorized representative is not required to be present at the time of the Lottery.

Waiting List Development, Communication, Record Keeping

In reference to the development of the waiting list, the lottery is conducted so that all names have an equal opportunity to be pulled. Any applications received after the lottery is placed at the bottom of the waiting list.

Each year, maintenance of the waiting list is conducted. Each family on the waiting list is contacted via phone or email and asked to confirm that they wish to remain on the waiting list. Each family has 2-3 business days to respond. At the end of the 2-3 business days, those families not responding are removed from the waiting list.