

# Enrollment Application Glacier Valley high School

Date of Entry \_\_\_\_\_  
Grade Level \_\_\_\_\_  
Grade Level by Credits \_\_\_\_\_  
Chelan District Resident \_\_\_\_\_

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_\_ Phone \_\_\_\_\_

Place of Birth \_\_\_\_\_  
City State

Ethnic Category (Optional) American Indian \_\_\_\_\_ Asian \_\_\_\_\_ Black \_\_\_\_\_ Hispanic \_\_\_\_\_ White \_\_\_\_\_

Mailing Address \_\_\_\_\_  
P.O. Box Street City State Zip

Fathers Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Mothers Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Who is your legal guardian? Father \_\_\_\_\_ Mother \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_ Who? \_\_\_\_\_

Primary language spoken at home: \_\_\_\_\_ Email address: \_\_\_\_\_

In case of emergency notify: \_\_\_\_\_ Phone \_\_\_\_\_

Family Doctor \_\_\_\_\_

\*\*\*\*\*

Name of last school attended: \_\_\_\_\_

Address of last school attended: \_\_\_\_\_

Entry date: \_\_\_\_\_ Withdrawal Date: \_\_\_\_\_

### Education at Time of Enrollment

Chelan High School Student \_\_\_\_\_ High School Student From Outside the District \_\_\_\_\_

Not Currently enrolled \_\_\_\_\_ Who recommended that your enroll at GVHS? \_\_\_\_\_

Why do you want to attend Glacier Valley?  
\_\_\_\_\_  
\_\_\_\_\_

What is your goal after High School? \_\_\_\_\_

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

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

Complete additional paperwork before the 1<sup>st</sup> day of school in September.

## EMERGENCY INFORMATION

\*\*If there are changes to this information during the school year, please call the school to update.

STUDENT NAME \_\_\_\_\_

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

Phone-Home \_\_\_\_\_ Work \_\_\_\_\_

Emergency contact if parent not available:

1. \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_ Phone \_\_\_\_\_

In the case of a medical emergency, I give district staff my permission to seek medical attention for my child at the nearest medical emergency facility. I understand that I will be notified as soon as possible by District staff.

\*\*For the safety of the child, the health information on this form may be shared with staff that has a need to know.

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Does your child have any medical conditions which staff or medical personnel should be aware of?

YES \_\_\_\_\_ NO \_\_\_\_\_ If so, please indicate your child's medical conditions and list your child's usual symptoms, as well as the usual treatment.

None  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If your child currently takes medication, please indicate the name of the medication, as well as the dosage.

None  
\_\_\_\_\_  
\_\_\_\_\_

Please list any food or medication allergies which your child experiences, as well as your child's usual symptoms.

None  
\_\_\_\_\_  
\_\_\_\_\_

STUDENT'S DOCTOR:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

MEDICAL INSURANCE COMPANY:

Name \_\_\_\_\_

Policy Holder \_\_\_\_\_

Policy Number \_\_\_\_\_

Lake Chelan School District  
District Network and Internet  
Individual User Informed Consent Form

By signing below, the user (and parent if user is under the age of 18) indicates that he/she has read the terms and conditions on the reverse side of this page carefully, understands their significance and agrees to abide by them at all times.

In consideration for the privilege of using the network and in consideration for having access to that public networks, I hereby release the Lake Chelan School District, the Educational Service District #171, Washington School Information Processing Cooperative, and other intermediary providers, if any, and operators, and any institutions with which they are affiliated from any and all claims and damages of any nature arising from my, or my child's use, or inability to use, the WedNet including, without limitation, the type of damages identified in the Lake Chelan School District's Acceptable Use Guidelines. Further my child and I agree to abide by the District's policy and procedures for Electronic, Information systems, which we have reviewed and understand, and we acknowledge that failure to comply with the policy and procedures may result in revocation of network use privileges.

My child and I acknowledge and agree that Lake Chelan School District has the right to review, edit, or remove any materials installed, used, stored, or distributed on or through the network or District's system and we hereby waive any right of privacy which my child may otherwise have into such material.

Signature of User \_\_\_\_\_

Signature of Parent or Guardian if student is under 18 \_\_\_\_\_

Printed Name of User \_\_\_\_\_

Printed Name of Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Date Signed \_\_\_\_\_

Date Signed \_\_\_\_\_

This form must be filled out annually. Student must also list their current grade level and their advisory teacher.

Current Grade Level: \_\_\_\_\_

Advisor: \_\_\_\_\_

FOR OFFICIAL USE ONLY/DO NOT WRITE BELOW THIS LINE

Account Number/Student Number: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Each student will have their own login and password, which should not be shared with anyone else at school. Students will also have their own "storage space" on school equipment which is allowed only for school related projects. Improper use of the school's computer network, the internet, or damage to school equipment may result in loss of network privileges for one calendar year and/or other disciplinary actions. Students and all district users of our technology have the responsibility to use the computers and network properly in accordance with the rules of the district. Direct supervision of all students at all times who use the system is not possible. Therefore, all users must understand that the use of the Lake Chelan School District's computers or network is a privilege which may be revoked or suspended at any time for abusive conduct or violation of the conditions to be established by the technology team and building administrators. Abusive conduct includes, but is not limited to, the placing of unlawful information on the network, the improper access, misappropriation or misuse of information/files of other users, and the use of obscene, abusive, or other offensive or objectionable language in either public or private messages. Violations of tech

The following are acceptable use guidelines:

1. All use of the system must be in support of education and research and consistent with the mission of the District. The District reserves the right to prioritize use and access to the system. The District is not responsible for damage caused by inappropriate use of the system. The District is not responsible for loss of data. Users are expected to make frequent backups of critical data.
2. Any use of the system must be in conformity to state and federal law, network provider policies and licenses, and district policy. Use of the system for commercial solicitation is prohibited. Use of the system for charitable purposes must be approved in advance by the superintendent or designee.
3. The system constitutes public facilities and may not be used to support or oppose political candidates or ballot measures.
4. No use of the system shall serve to disrupt the operation of the system by others; system components including hardware or software shall not be destroyed, modified or abused in any way. Physical damage, as defined by RCW9A.48.070, is a crime and will be treated as such.
5. Malicious use of the system to develop programs that harass other users or gain unauthorized access to any computer or computing system and/or damage the components of a computer or computing system is prohibited.
6. Use of the system to access, store or distribute obscene or pornographic material is prohibited.
7. Use of the system to download music or picture files for personal use is prohibited. Direct copying of copyrighted material for use in research papers or reports must follow all established laws for use of such material. Users will not plagiarize material that they may find on the Internet.
8. Student subscriptions to mailing lists, bulletin boards, chat groups, commercial e-mail services, and commercial on-line services must be pre-approved by the superintendent or designee.
9. System accounts are to be used only by the authorized user of the account for the authorized purpose. Users may not share their account number, login name or password with another person or leave an open file or session unattended or unsupervised. Account owners are ultimately responsible for all activity under their account.
10. Users shall not seek information on, obtain copies of, or modify files or other data or passwords belonging to other users, or misrepresent other users on the system, or attempt to gain unauthorized access to the system or to parts of the system to which they have not specifically been granted access.
11. Personal information such as addresses and telephone numbers should remain confidential when communicating on the system. Students should never reveal such information without permission from their teacher or other adult. Students should never make appointments to meet people in person that they have contacted on the system without district and parent permission.
12. Students should notify their teacher or other adult whenever they come across information or messages that are dangerous, inappropriate, or make them feel uncomfortable.
13. The unauthorized installation, use, storage, or distribution of copyrighted software or materials on district computers is prohibited.
14. Under prescribed circumstances, non-student or staff use may be permitted, provided such individuals demonstrate that their use furthers the purpose and goals of the District. Permission must be obtained through the District office.
15. For security and administrative purposes, the District reserves the right for authorized personnel to review system use and file content, including e-mail messages if there is reasonable suspicion that unauthorized use has taken place.
16. Unauthorized use of the system for the purchase of products or services by students is prohibited.
17. Students will not be granted email accounts without authorization by the network administrator.
18. Building administrators will provide acceptable use information to all users of the system, including parents.
19. The posting of any material on the District's website must be approved by the network administrator.

Violation of any of the above rules may be reason for disciplinary action.

LAKE CHELAN SCHOOL DISTRICT

In accordance with the Alternative Learning Experience Implementation Standards, reference WAC 392-121-182 (3) (e), prior to enrollment parent (s) or guardian shall be provided with, and sign, documentation attesting to the understanding of the difference between home-based instruction and enrollment in an alternative learning experience (ALE).

Provided on the front and back of this form are summary and narrative descriptions of the difference between Home-based Instruction and an ALE. Please read these descriptions and sign below.

Summary Description

**Home-Based Instruction**

- Is provided by the parent or guardian as authorized under RCW 28A.200 and 28A. 225.010.
- Students are not enrolled in public education
- Students are not subject to the rules and regulations governing public schools, including course, graduation, and assessment requirements.
- The public school is under no obligation to provide instruction or instructional materials, or otherwise supervise the student's education.

**Alternative Learning Experience**

(Glacier Valley High School, Chelan Preparatory High School)

- Is authorized under WAC 391-121-182
- Students are enrolled in public education either full-time or part-time.
- Students are subject to the rules and regulations governing public school students including course, graduation, and assessment requirements for all portions of the ALE.
- Learning experiences are:
  - Supervised monitored, assessed, and evaluated by certificated staff
  - Provided via a written student learning plan
  - Provided in whole, or part outside the regular classroom

**Part-time Enrollment of Home-Based Instruction Students**

Home-based instruction students may enroll in public school programs, including ALE programs, on a part-time basis and retain their home-based instruction status. In the case of part-time enrollment in ALE, the student will need to comply with the requirements of the ALE written student learning plan, but not be required to participate in state assessments or meet state graduation requirements.

I have read the summary and detailed descriptions of home-based instruction and alternative learning experience provided and I understand the difference between home-based instruction and the alternative learning experience program in which my child is enrolling.

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

Name(s) of Student(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Narrative Description of the Differences between Home-Based Instruction and public school Alternative Learning Experiences*

Home-based instruction is authorized under Revised Code of Washington (RCW) 28A.225.010 and RCW 28A.200. When a parent or guardian has filed a 'declaration of intent to provide home-based instruction' with the district and is meeting the requirements for home-based instruction stated in RCW 28A.225, the student is eligible to receive home-based instruction. Students receiving only home-based instruction are not enrolled in public education, and they do not have to comply with the rules and regulations regarding public schools. Since the student is not registered or enrolled in the public school system, the school district is under no obligation to provide instruction or instructional materials for these students. Home-based instruction students are not required to participate in any district or state testing and/or assessments. Additionally, home-based instruction students are not eligible for graduation through a public high school unless they meet all of the graduation requirements established by the state, district, and the local high school. This includes earning the Certificate of Academic Achievement.

**Part-time enrollment**

Home-based instruction students may have access to ancillary services and may enroll in a public school course, such as an alternative learning experience program, on a part-time basis where space is available. Part-time enrollment is defined as being less than full-time enrollment. In these cases, the student is responsible for maintaining acceptable attendance and meeting all course and school requirements. For an alternative learning experience, this will mean meeting the requirements of the written student learning plan. The student continues to be considered a home-based instruction student when enrolled **part-time** in a public school setting. Therefore, except for the individual class requirements, school and district attendance rules, and school behavior policies, the limitations and restrictions noted in the paragraph above are in force.

**Full-time enrollment**

A student enrolling **full-time** in a public school alternative learning experience program is not receiving home-based instruction, even if the parent or guardian has filed a 'declaration of intent to provide home-based instruction' with the school district. The student is considered a public school student and is subject to all the rules and regulations governing the actions of all public school students. This includes, but is not limited to, attendance, meeting course requirements, graduation requirements, and assessment requirements. Full-time students are eligible to graduation from public high school upon meeting all of the school, district, and state requirements.



**Lake Chelan School District**

Chelan Preparatory Night School  
Glacier Valley High School  
PO Box 369  
324 E. Johnson Avenue  
Chelan, WA 98816

Phone 509-682-7744      Fax 509-682-8291

### RECORDS & TRANSCRIPT REQUEST

To Whom It May Concern:

|                      |        |                                 |
|----------------------|--------|---------------------------------|
| _____                | _____  | _____                           |
| FIRST NAME           | MIDDLE | LEGAL LAST NAME                 |
| _____                | _____  | _____                           |
| Student's Birth Date |        | Parent's Last Name if Different |

School Transferring From: \_\_\_\_\_

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

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

The above named student has applied for admission to our school. Please send all records to date including immunization records, and any test data or personal information that might assist us in the guidance and correct placement of the student.  
\*\*\*\*\*Any Special Services, Psychological, Counseling, and/or Speech records should be sent along with these records .

Thank you,

\_\_\_\_\_  
Parent/Guardian/Student Signature

\_\_\_\_\_  
Registrar/School Official

\_\_\_\_\_  
Date

