

2024-2025 HODGEN ENROLLMENT

Grade _____ Date: _____

Name(AS ON BIRTH CERTIFICATE) _____ Sex: M F
First Middle Last

Birth Date _____ () _____ Social Security No. _____
Month/Day/Year AGE City of Birth State

Race-Circle one Hispanic - Black - Asian or Pacific Islander -White or Other - Native American(if NA, what tribe) _____

All siblings that attend Hodgen and grade: _____

School district in which student resides _____ Does the student have an IEP? Y or N If yes, explain: _____

Mailing Address _____
Address City Zip

Physical Address _____
Address City Zip

Last School Attended _____
School Address City State & Zip

Circle one: Mother, Stepmother, Grandparent, Guardian Employer Work Telephone

Home Telephone Cell No. Email address – for access to online student grades
Legal Guardian is a member of: the United States Armed Forces Y or N
The United States Reserves Y or N
The National Guard Y or N

Circle one: Father, Stepfather, Grandparent, Guardian Employer Work Telephone

Home Telephone Cell No. Email address – for access to online student grades
Legal Guardian is a member of: the United States Armed Forces Y or N
The United States Reserves Y or N
The National Guard Y or N

EMERGENCY CONTACTS (SOMEONE WHO WILL TAKE RESPONSIBILITY FOR STUDENT & LIVES LOCALLY)

Emergency Contact _____
Adult NOT living in your home Relationship Telephone No.

Emergency Contact _____
Adult NOT living in your home Relationship Telephone No.

Is student in Foster care? YES NO Does this student and/or family receive Indian Commodities? YES NO

Does this student and/or family have a SNAP (access) card? YES NO Sooner Care? YES NO
Medicaid Number _____

Transportation: Bus driver _____ Parent _____ Daycare _____ phone number _____

Oklahoma Educational Indicators Program: The social security number will be used to determine student enrollment, attendance, and for the allocation of State Aid. I approve the above enrollment to be true and accurate to the best of my knowledge.

Name of Person Completing the Enrollment Form Date

2024-2025 HODGEN STUDENT ENROLLMENT INFORMATION Date: _____

STUDENT'S NAME _____

GRADE _____

PLEASE LIST ANY PERSON(S) **NOT** ALLOWED TO PICK UP YOUR CHILD:

PLEASE NOTE: THIS WILL BE STRICTLY ENFORCED AS WELL AS ANY LEGAL COURT PAPERS UNTIL THE COURT DATE EXPIRES OR A NEW ORDER IS BROUGHT TO THE SCHOOL.

IS THERE GUARDIANSHIP OR DIVORCED CUSTODY PAPERS THAT NEED TO BE ON FILE:

YES _____

NO _____

SIGNATURE _____

DATE: _____

2024-2025 HODGEN STUDENT ENROLLMENT INFORMATION

Date: _____

STUDENT'S NAME _____ DATE OF BIRTH _____ GRADE _____

MY CHILD HAS THE FOLLOWING MEDICAL ISSUES _____

MY CHILD IS ALLERGIC TO THE FOLLOWING _____

MY CHILD HAS LIFE THREATENING ALLERGIES (DETAILS) _____

MY CHILD TAKES THE FOLLOWING MEDICATION DAILY _____

MY CHILD HAS HAD CHICKEN POX? YES _____ NO _____ IF YES AGE/DATE _____

PARENT/GUARDIAN SIGNATURE

DATE

HODGEN SCHOOL ----DOES NOT --- PROVIDE ANY OVER THE
COUNTER MEDICATIONS

PHONE NUMBERS FOR MEDICAL AND/OR EMERGENCY CONTACTS
THAT IS ALLOWED TO PICK UP YOUR CHILD.

PARENTS DAYTIME PHONE _____

NAME _____ NUMBER _____ RELATION TO CHILD _____

NAME _____ NUMBER _____ RELATION TO CHILD _____

2024-2025

Hodgen Student Enrollment Information
Authorization Form

Student Name: _____ Date: _____

Photo Release: I give my consent for Hodgen Public School to use my child's photograph for public relations and promotional purposes. This may be done through the school's website, schools facebook page, newsletters, media coverage (such as: the Heavener Ledger and /or other local papers) and other publications, including the Hodgen Yearbook.

Educational Screening Consent: I give my consent to have my child screened for hearing and vision for academic purposes, when deemed necessary, and I will be informed of the results and recommendations from the screener

Off-Campus Trip Consent: I authorize Hodgen Public School to take my child on all off-campus trips sponsored by the school, which include: picnics, field trips, and any other trips scheduled throughout the school year.

Hodgen School will be monitoring student attendance very closely this year and students who are in violation of state statute and school district policy will be subject to prosecution in District Court in accordance with Oklahoma State 21 Chapter 31A, Sec. 858.1. Oklahoma Statute 70-10-105 defines trancy as "Four (4) absences, without valid excuse, in 30 days, or ten (10) absences, without valid excuse, in a semester. The local school board is charged with defining what is acceptable as a "valid excuse." As a parent, it is extremely important that you know and follow the policy as stated in your schools' student handbook. Patrons and parents who fail to adhere to district policy put themselves at certain risk of prosecution before the District Judge of LeFlore County. Patrons or parents appearing before the Judge will be charged under Oklahoma Statute 21 chapter 31A "Causing a child to be deprived or in need of supervision" or "contributing to the delinquency of a minor," punishable by fines of not more that \$1,000.00 or imprisonment in the county jail for one year, or both. Sign below if you understand the truancy program in which Hodgen School is participating.

Checking In/Out students during the school day will be conducted in the Superintendent's office with Mrs. Cox. In order to provide and insure student security, the school doors will be locked and access will be coordinated by the Superintendent's office. Please enter and exit through the brown doors located in front of Mrs. Cox's office. It is very important to make sure that your child is checked in through the office. It ensures that his/her attendance is accurate.

My signature indicates that I agree to support and abide with the aforementioned consents, releases, and procedures.

Parent Signature: _____

Conflicting issues that require an exception to the above consents, releases, or procedures:

Issue: _____

Requested action to resolve the issue: _____

SCHOOL YEAR: 2024-2025

Hodgen School
HOME LANGUAGE SURVEY



STUDENT INFORMATION

Student Name: _____ Grade: _____
Last Name First Name Middle Name

Date of Birth: _____ School: _____ Student ID#: _____ Gender: Male Female
MM/DD/YYYY

Is the student of Hispanic or Latino culture or origin? YES NO

Please select one or more of the following races:

- African American/Black
- American Indian/Alaskan Native
- Asian
- Native Hawaiian/Pacific Islander
- Caucasian/White

The purpose of the following questions is to help determine if a student's exposure to a language other than English may make them eligible to receive additional English Learner (EL) supports.

1. What is the dominant language most often spoken by the student? _____
2. What is the language routinely spoken in the home, regardless of the language spoken by the student? _____
3. What language was first learned by the student? _____
4. Does the parent/guardian need interpretation services? YES NO If YES, in what language? _____
5. Does the parent/guardian need translated materials? YES NO If YES, in what language? _____
6. What was the date the student first enrolled in a school in the United States? _____
MM/YYYY

_____ Date (MM/DD/YYYY)

_____ Parent or Guardian Signature

SCHOOL USE ONLY

The response of a language other than English to any or all of questions #1, #2, and #3 above should prompt local review of the student's potential EL identification and assessment history in the state Accountability Reporting application. If no previous EL history is present, the student must be administered a state-approved screening tool to determine their EL status.

If this HLS will be used for the purposes of Non-EL Bilingual qualification, please indicate one of the following:

A language other than English is indicated **TWO OR MORE TIMES** in questions #1, #2, and #3 above. The student is considered "more often" and has previously demonstrated English language proficiency on the PKST* or WIDA assessment :

Assessment Name:	Year Assessed:	Score:
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A language other than English is indicated **ONE TIME** in questions #1, #2, and #3 above. The student is considered "less often" and has demonstrated English language proficiency on the PKST* or WIDA assessment. The student's PKST* or WIDA assessment score and additional qualifying score is noted on the attached "Less Often" Non-EL Bilingual Qualification Form.

*A PKST score is valid only for a student's pre-K year(s). Regardless of the PKST score earned, a student administered the PKST must be administered the WIDA K Screener at the outset of kindergarten. To qualify a student as Non-EL Bilingual beyond their pre-K year, a student must either demonstrate initial proficiency on the WIDA K Screener or subsequently on the K ACCESS or ACCESS assessment.

Hodgen School
2024-2025

OMB Control No. 1810-0021 (Exp. 06/30/2026)

ED 506 Form
Indian Student Eligibility Certification Form for Title VI Indian Education Formula Grant Program

Parent/Guardian: This form serves as the official record of the eligibility determination for each individual child included in the student count for the Title VI Indian Education Formula Grant Program. If you choose to submit a form, your child could be counted for funding under the program. The grantee receives the grant funds based on the number of eligible forms counted during the established count period. You are not required to complete or submit this form unless you wish for your child(ren) to be included in the Indian student count. This form should be kept on file with the grant applicant and will not need to be completed every year. Where applicable, the information contained in this form may be released with your prior written consent or the prior written consent of an eligible student (aged 18 or over), or if otherwise authorized by law, if doing so would be permissible under the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and any applicable state or local confidentiality requirements.

Student Information

Name of the Child _____ Date of Birth _____ Grade level _____

Name of School _____ School District _____

Tribal Membership

The individual with Tribal membership is the (select only one): child child's parent child's grandparent

If the individual with Tribal membership is not the child listed above, name the individual (parent/grandparent) with tribal membership: _____

Name and address of Tribe or Band that maintains updated and accurate membership data for the individual listed above:

Name _____ Address _____

City _____ State _____ Zip Code _____

The Tribe or Band is (select only one):

- Federally Recognized Tribe
- State Recognized Tribe
- Terminated Tribe
- Alaska Native
- Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

Proof of membership in Tribe or Band listed above, as defined by Tribe or Band is:

- Membership or enrollment number establishing membership (if readily available) or
- Other evidence establishing membership in the Tribe listed above (describe and attach)

Membership or enrollment number establishing membership (if readily available) or other evidence establishing membership in the Tribe listed above (describe and attach). _____

Attestation Statement

I verify that the information provided above is true and correct to the best of my knowledge and belief.

Printed Name of Parent/Guardian _____ Signature _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Email _____ Date _____



CHOCTAW NATION OF OKLAHOMA
Johnson O'Malley Program

2024-2025 School Year

******FILL OUT ONLY IF YOUR FAMILY HAS A CDIB CARD******

SCHOOL DISTRICT: HODGEN

County: LeFlore

Head of Household Name: _____

1. Tribe, Band or Group is: (check one)

State Recognized? Yes No

Federally Recognized? Yes No

2. Who is the CDIB card holder, if NOT the child(ren):

Name on Card:(Print) _____

CDIB card holder: Child's Parent Child's Grandparent

	Name of Student	CDIB holder? Y / N	Date of Birth	Gender	Grade	Tribe
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

Is either parent/guardian employed on Tribal/Federal property and/or Tribal Business? Yes No

If YES, who: _____

Employer: _____

Does this student and/or family receive Indian Commodities? Yes No

Hodgen School
School Year 2024 - 2025
Economically Disadvantaged Form

This application should be completed even if your student attends a Community Eligibility Provision or Provision School.

School: Hodgen Grade: _____

Student Name: _____

Please select the income range that represents the total annual gross income:

- | | | |
|---|---|---|
| <input type="radio"/> Less than \$27,861 | <input type="radio"/> Between \$57,720 and \$67,673 | <input type="radio"/> Between \$97,532 and \$107,485 |
| <input type="radio"/> Between \$27,861 and \$37,814 | <input type="radio"/> Between \$67,673 and \$77,626 | <input type="radio"/> Between \$107,485 and \$117,438 |
| <input type="radio"/> Between \$37,814 and \$47,767 | <input type="radio"/> Between \$77,626 and \$87,579 | <input type="radio"/> Between \$117,438 and \$127,391 |
| <input type="radio"/> Between \$47,767 and \$57,720 | <input type="radio"/> Between \$87,579 and \$97,532 | <input type="radio"/> Between \$127,391 and \$137,344 |

Please select the total number of people in your household:

- | | | |
|---------------------------------|---------------------------------|-----------------------------------|
| <input type="radio"/> One (1) | <input type="radio"/> Five (5) | <input type="radio"/> Nine (9) |
| <input type="radio"/> Two (2) | <input type="radio"/> Six (6) | <input type="radio"/> Ten (10) |
| <input type="radio"/> Three (3) | <input type="radio"/> Seven (7) | <input type="radio"/> Eleven (11) |
| <input type="radio"/> Four (4) | <input type="radio"/> Eight (8) | <input type="radio"/> Twelve (12) |

Signature: I certify that all information provided on this form is true to the best of my knowledge and that all household income is reported. I understand that this information will impact federal and state funding to the school.

Sign Here: _____ Date: _____

Print Name: _____

For Office use only:

- Qualified Not Qualified



2024-2025 STUDENT RESIDENCY QUESTIONNAIRE

PLEASE READ CAREFULLY AND COMPLETE FULLY

No student or family will be discriminated against based upon any of the information provided in this form. The information you provide is confidential. The answers you give will help us determine the services your student may be eligible to receive under the McKinney-Vento Act.

Student Name:		Date of Birth:	
School:		Grade:	
Person Completing This Form:	Relation to Student:	Phone:	
Current Address:		How Long?	

	Yes	No
1. Is this current address a temporary living arrangement?		
2. Is this temporary living arrangement due to loss of housing, economic hardship, or domestic violence?		
3. Is the student being enrolled by someone other than parent or legal guardian?		
4. Is the student an unaccompanied youth (not living with a parent or legal guardian)?		
5. Is the student a Foster Child or waiting for Foster Placement?		

If you answered NO to ALL questions, please sign and date below. Submit form to school personnel.

➡ Parent/Guardian Signature: _____ Date: _____

If you answered YES to ANY question above, please complete the remainder of this form.

- Please select the option that best describes your current living situation:
- With more than one family in a house or apartment. # Bedrooms: _____ # People: _____
 - In a motel/hotel due to lack of alternative, adequate accommodations. Name of motel: _____
 - In a shelter/transitional housing. Name of agency: _____
 - In a house, building, or trailer WITHOUT running water, electricity, or gas.
 - Living with family or friends because you are an unaccompanied youth (not living with parent or legal guardian).
 - In a car, campground, abandoned building, or other public place not intended for regular habitation.
 - Wherever I can find a place to stay at night.

Please list all children (under 21 y/o) currently living with you, including those not yet old enough for school enrollment.

First and Last Name of Child	Relationship to Student	Date of Birth	Grade	School Name

I certify that the information provided above is correct and accurate.

➡ Signature of Person Completing this form: _____ Date: _____

Hodgen School
2024-2025

Initial Enrollment Prior Participation Form
Student Information

The following information should be completed by the parent or guardian of the student. This information is collected on a student's initial enrollment into a school district. Please print legibly.

Student Legal Name: _____
First Last

Student Date of Birth: _____
Month Day Year

Student Gender - Please check one: Male Female

Did the student participate in any of the following programs? Please indicate by checking YES or NO for each statement.

PROGRAM	YES	NO
A childcare program that is licensed pursuant to the tiered licensing system established by the Department of Human Services (a DHS licensed childcare program)		
The Sooner Start program operated by the State Department of Education		
The Oklahoma Parents as Teachers (OPAT) program operated by the State Department of Education		
The Children First program operated by the State Department of Health		
Any child abuse prevention program operated by the State Department of Health		
Any federally funded Head Start program		

2024-2025 School Year
Hodgen Parent-School Compact

Student: _____ Grade Entered: _____

It is important that families and schools work together to help students achieve high academic standards. Through a process that included teachers, families, students, and community representatives, the following are agreed upon roles and responsibilities that we as partners will carry out to support student success in school and life.

As a STAFF MEMBER, I will provide your child with every opportunity to learn and grow by

- Maintaining a quiet and organized workplace;
- Having a high expectation of myself and my students;
- Giving instruction and assignments appropriate for the skill and development required by state and district standards;
- Monitoring student work on a daily basis to ensure success and progress; and
- Reporting regularly to parents with returned work, written notices, and conferences.

As a STUDENT, I will keep my focus on what is important in meeting my goal of learning by

- Being in class on time, every day, with my homework in hand and prepared to work;
- Allowing the teacher to teach and everyone in class to learn;
- Completing my work on time and accurately;
- Keeping my hands, feet, objects, and comments to myself; and
- Respecting others and their property.

As a PARENT/GUARDIAN, I will support Hodgen Elementary programs and activities that give my child the optimum opportunity for learning by

- Expecting my child to complete daily homework assignments independently and discuss his/her results for improved learning, and check for a timely return to school;
- Accentuating the positive events at school and help my child resolve issues of concern and conflict;
- Supporting the discipline policy and reinforcing the highest expectations of the school staff;
- Reading and listening to my child read daily as a way of building a lifelong interest and joy of reading;
- Seeing that my child gets adequate rest and arrives to school on time with a positive outlook;
- Attending conferences to discuss my child's progress and attending events which showcase my child's work and learning experiences; and
- Providing and maintaining accurate information on my child's records for contact.

Parent/Guardian _____ Student _____

Principal _____ Teacher _____

Returned and filed at school this _____ day of _____, 2024

INTERNET USAGE POLICY
FOR
HODGEN PUBLIC SCHOOL
2024-2025

TERMS AND CONDITIONS FOR USE OF INTERNET:

Please read the following carefully before signing this document. This is a legally binding document.

The Internet offers vast, diverse and unique resources to both students and teachers. Our goal in providing this service to teachers and students is to promote educational excellence in the Hodgen Public School by facilitating resource sharing, innovation and communication.

The Internet is an electronic highway connecting thousands of computers all over the world and millions of individual subscribers. Students and teachers have access to:

1. Information and news
2. Public domain and shareware of all types
3. Discussion groups on a plethora of topics ranging from diverse cultures to the environment to music to politics
4. Access to many university catalogs

With access to computers and people all over the world also comes the availability of material that may not be considered of educational value in the context of the school setting. The Local Education Agency (LEA) and the State Department of Education have taken available precautions to restrict access to inappropriate materials. However, on a global network it is impossible to control all materials and industrious users may discover inappropriate information.

Internet access is coordinated through complex association of government agencies, and regional and state networks. In addition, the smooth operation of the network relies upon the proper conduct of the end user who must adhere to strict guidelines. These guidelines are provided here so that you are aware of the responsibilities that are required and expected. Overall this requires efficient, ethical and legal utilization of the network resources. If a LEA user violates any of these provisions, their access will be terminated and future access could be denied. The signature(s) at the end of this document is(are) legally binding and indicates the party(parties) who signed has(have) read the terms and conditions carefully and understand(s) their significance.

INTERNET – TERMS AND CONDITIONS:

1. **Acceptable Use** – The purpose of NSFNET, which is the backbone network to the Internet, is to support research and education among academic institutions in the U.S. by providing access to unique resources and the opportunity for collaborative work. School use must be in support of education and research and consistent with educational objectives. Transmission of any material in violation of any U.S. or state regulation is prohibited. This includes, but is not limited to; copyrighted material, threatening or obscene material or political lobbying is also prohibited. Use for commercial activities is generally not acceptable.
2. **Privileges** – The use of the Internet is a privilege, not a right, and inappropriate use will result in a cancellation of those privileges. Each student who receives access will participate in a discussion with LEA faculty member pertaining to the proper use of the network. The system administrators and teachers will deem what is inappropriate use and their decision is final. The district may deny, revoke, or suspend specific use access.

3. Netiquette – You are expected to abide by the generally accepted rules of network etiquette. These include, but are not limited to the following:
 - a. Be polite. Your messages should not be abusive to others.
 - b. Use appropriate language. Do not swear, use vulgarities or any other inappropriate language.
 - c. Do not reveal your personal address or phone number or the addresses and/or phone numbers of other students or colleagues.
 - d. Illegal activities are strictly forbidden.
 - e. Do not use the network in such a way that you would disrupt the use of the network by other users.
 - f. All communications and information accessible via the network should be assumed to be private property.
4. Security – Security on any computer system is a high priority, especially when the system involves many users. If you feel you can identify a security problem on the Internet, you must notify a teacher who will in turn notify a system administrator. Do not demonstrate any problems to other users. Do not use another individual's account without written permission from that individual. Attempts to access the Internet as a system administrator will result in cancellation of user privileges. Any user identified as a security risk or having a history of problems with other computer systems may be denied access to Internet.
5. Vandalism – Vandalism will result in cancellation of privileges. Vandalism is defined as any malicious attempt to harm or destroy hardware, data of another user, Internet, or any agencies or other networks that are connected to NSFNET Internet backbone. This includes, but is not limited to, the uploading or creation of computer viruses.
6. Exceptions of Terms and Conditions – All terms and conditions as stated in this document are applicable to the LEA, the Oklahoma State Department of Education, in addition to NSFNET. These terms and conditions reflect the entire agreement of the parties. These terms and conditions shall be governed and interpreted in accordance with the laws of the State of Oklahoma, and the United States of America.

USER NAME (please print): _____ GRADE: _____

The student will abide by the Terms and Conditions for Internet access. Any violation of the regulations is unethical and may constitute a criminal offense. If the student should commit any violation, access privileges may be revoked, school disciplinary and/or appropriate legal action may be taken.

PARENT OR GUARDIAN

(If user is under the age of 18, a parent or guardian must also read and sign this agreement)

As the parent or guardian of this student, I have read the Terms and Conditions for Internet access. I understand that this access is designed for educational purposes and that the LEA and the Oklahoma State Department of Education have taken available precautions to eliminate controversial material. However, I recognize it is impossible for the LEA and the State Department of Education to restrict access to all controversial materials and will not hold the LEA or the Oklahoma State Department of Education responsible for material acquired on the network. Further, 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 grant access for my child and certify that the information contained on this form is correct.

PARENT/GUARDIAN (please print): _____

PARENT/GUARDIAN SIGNATURE: _____

Hodgen Public School School 2024 – 2025 Calendar

AUGUST

August 5 – 6 – 7 Teacher Professional Days (#1, #2, #3)
 August 6 Open House 5:00 – 7:00 PM
 August 8 First Day of School

SEPTEMBER

September 2 Labor Day (No School)
 September 19 Parent / Teacher Conference (#1) 4:00 – 7:00 PM
 September 20 No School

OCTOBER

October 17 – 18 – 21 Fall Break (No School)

NOVEMBER

November 21 Parent / Teacher Conference (#2) 4:00 – 7:00 PM
 November 22 No School
 November 25 – 29 Thanksgiving Break

DECEMBER

December 23 – January 3 Christmas Break

JANUARY

January 6 First Day of Second Semester
 January 20 Teacher Professional Day (#4) (No School for Students)
 January 30 Parent / Teacher Conference (#3) 4:00 – 7:00 PM
 January 31 No School

FEBRUARY

February 13 – 14 No School

MARCH

March 17 – 21 Spring Break

APRIL

April 3 Parent / Teacher Conference (#4) 4:00 – 7:00 PM
 April 4 No School
 April 18 Good Friday – No School
 April 25 No School

MAY

May 2 No School
 May 6 Kindergarten Graduation at 6:00 PM
 May 6 8th Grade Graduation at 7:00 PM
 May 8 Last day of School
 May 9 Teacher Professional Day (#5)



HODGEN SCHOOL SUPPLY LIST 2024-2025



Preschool 3 year olds

- (1) 24 count box of crayons
- Plastic folder w/child's name on front
- Backpack
- Nap mat
- Baby wipes
- Kleenex
- Optional - small blanket and/or pillow for rest time

Pre-Kindergarten

- Pencil box
- Package of pencils
- (3) 24 count boxes of crayons
- 4 glue sticks
- Small blanket
- Backpack
- Sleep mat
- 2 pocket folders
- 1 inch binder
- Girls: Kleenex
- Boys: Wet wipes

Kindergarten

- Pencil box
- (2) 24 count boxes of crayons
- 1 package of washable markers
- 1 package of pencils
- 1 package of glue sticks
- 2 large erasers
- 3 inch binder
- 1 plastic pocket folder
- Backpack
- Sleep mat
- Baby wipes

First Grade

- Pencil box
- (2) 24 count boxes of crayons
- 2 packages of pencils (wood, no plastic coverings)
- 1 package of markers
- 2 large erasers
- 8 glue sticks
- Blunt tip scissors
- Backpack
- Clorox wipes

Second Grade

- Pencil box
- (2) packages of No. 2 pencils (wood, no coverings)
- (2) 24 count boxes of crayons
- 1 package of washable markers
- 2 large erasers
- Blunt tipped scissors
- glue sticks
- 1 plastic pocket folder
- Backpack
- Kleenex
- Clorox wipes

Third Grade

- 2 packages of plain pencils
- Pencil box
- 2 large erasers
- Pkg wide rule loose notebook paper
- 2 packs of colored pencils
- 2 packs of fine tip markers
- 2 Kleenex
- 2 Disinfectant wipes

Fourth Grade

- Pencil box
- Wide ruled notebooks
- No. 2 plain pencils
- Package of erasers
- 2 pocket folders
- 1 package of colored pencils

Fifth-Eighth Grade

- No. 2 pencils
- Notebooks
- Erasers

HODGEN PUBLIC SCHOOL

PO BOX 69 • 20520 SCHOOLHOUSE RD.
HODGEN, OK 74939
PHONE: (918) 653-4476
FAX: (918) 653-2525

DENNIS SHOUP, SUPERINTENDENT

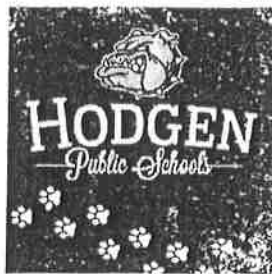
COURTNEY ALTSTATT, PRINCIPAL



2024-2025 School Year Communication



Many of our teachers use the Remind app as a way of communicating with parents electronically. Paper notes don't always make it home and sometimes it is an efficient way to update parents to a change in the daily schedule. If you receive a text message regarding Remind, all you have to do is accept and follow the instructions for the app. Messages sent from the teacher will be a mass text, but a parent reply or question is ONLY seen by the teacher so it is a safe and private messaging platform. Coaches may use the app so if your child(ren) plays sports or other activities, you may receive an invite for each activity/sports group. Also, don't forget to follow our Facebook page, Hodgen Public School and our website is located at hodgen.k12.ok.us!



Hodgen Public Schools Facebook



Hodgen Public Schools website
hodgen.k12.ok.us

"HOME OF THE BULLDOGS"