



Texline ISD • P.O. Box 60, Texline, TX 79087 • (806) 362-4284
Superintendent – Terrell Jones • Principal – Megan Pierson

Returning Student Registration Form

Please fill out ALL of the information below so that we may reach you in case of emergency, instant alert messaging, and mail outs.

Student Name —

Grade —

Physical Address —

(street, city, state, zip code)

Mailing Address —

(street, city, state, zip code)

1st Parent/Guardian —

Primary Phone Number —

Place of Employment —

Work Phone Number —

Other Phone Number (if applicable) —

Email Address (if applicable) —

2nd Parent/Guardian —

Primary Phone Number —

Place of Employment —

Work Phone Number —

Other Phone Number (if applicable) —

Email Address (if applicable) —

Emergency Contact (other than parents listed above) —

Emergency Contact's Phone Number —

Parent Signature —

Date —



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Emergency Medical Authorization Form

Please fill out student's complete medical information and circle yes or no where applicable.

Student's Name –

Date of Birth –

Grade Level –

Emergency Contact –

Emergency Contact's Phone Number –

Is the student taking any medications? YES / NO

If yes, please list all medications being taken –

Does the student have any allergies? YES / NO

If yes, please list all allergies –

Does the student have an Epi-Pen? YES / NO

Date of last tetanus shot –

Does the student have any medical conditions? YES / NO

If yes, please explain –

Is it okay for the school office or nurse to give your student Tylenol when necessary without a phone call home? YES / NO

Name of Health Insurance –

Policy Number –

Group Number –

Address (street, city, state, zip code) –

Phone Number –

If no insurance, will you be purchasing insurance offered by Texline ISD? YES / NO

I have read and understand all of the information above. I verify that all of the information is correct and I will notify the school if any information changes during the school year.

Parent Signature –

Date –



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Release to Seek Medical Treatment

I further agree and give my consent to any medical staff, physician, and school sponsors to seek and administer medical aid to the above named student should the need for any medical treatment become necessary due to illness or injury while the student is participating in school sponsored activities.

Allergies –

Medications being taken –

Medical conditions or past illnesses –

Emergency Contact #1 –

Emergency Contact's Phone Number –

Emergency Contact #2 –

Emergency Contact's Phone Number –

Preferred Physician –

Physician's Phone Number –

Parent Signature –

Date –



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Parental Release & Indemnification Agreement & Emergency

Contact Information

Student Name –

Date of Birth –

Grade Level –

I, _____, the parent or legal guardian of the minor-child, do hereby consent to my minor child's participation in the education program offered by TISD and do grant permission for my student to go to the school-sponsored event.

In exchange for the educational and recreational advantages of the program for my child at TISD, I voluntarily sign this release agreement on behalf of my child. I understand that my child will be riding on transportation provided by the district, and, that even though precautions are taken (vehicles meet state and federal standards; driver is state certified to operate the vehicle), there are intrinsic hazards connected with being transported in any type of vehicle. I understand that as a consequence of risks associated with any type of transportation, my child may suffer serious injuries and/or death.

Release of Liability and Indemnification

Understanding all of the above-listed injury and that those and others are the ordinary risk associated with public transportation, I do here by RELEASE, DISCHARGE, AGREE TO HOLD HARMLESS, and INDEMNIFY the Texline Independent School District, TISD Board of Trustees, its agents, employees, officers, and volunteers from and against all liability, claims, demands, and judgements which my child may have or I may have on his/her behalf, or which his/her heirs, executors, administrators, or assigns may have or claim to have against the district, its successors, employees, officers, or volunteers for all personal injuries including the possibility of death, known or unknown, arising out of this educational and recreational program or the transportation therein.



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Release of Student Pictures and Information Form

Texline ISD assumes the responsibility of promoting our school with pictures of our students on social media, the school website, yearbook, newspaper, and other public forms of acknowledgement. We also supply students' information upon request to college and military recruiters. If you do not want your student's pictures displayed publicly, or information provided to college and/or military recruiters, please indicate your refusal below. Otherwise, we will assume your permission to publish pictures and information.

I do **NOT** give permission to publish pictures of my child

I do **NOT** give permission to share my student's information or allow a visit with a college recruiter.

I do **NOT** give permission to share my student's information or allow a visit with a military recruiter.

Student Name –

Grade Level –

Parent Signature –

Date –

Authorization for Tylenol

☐

I authorize the school and/or school nurse to administer Tylenol to my child without a phone call home.



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Acknowledgement of Student Code of Conduct and Student Handbook via Electronic Distribution

As required by state law, the board of trustees has officially adopted the Student Code of Conduct in order to promote a safe and orderly learning environment for every student.

Texline ISD urges you to read this publication thoroughly and to discuss it with your family. If you have any questions about the required conduct and consequences for misconduct, students and parents are encouraged to ask for an explanation from the student's teacher or appropriate campus administrator.

We acknowledge that we have been offered the option to receive a paper copy of the Texline ISD Student Code of Conduct and Student Handbook and notified that it is also electronically accessible through the district's website at www.texlineisd.net. We understand that students will be held accountable for their behavior and will be subject to disciplinary consequences outlined in the student Code of Conduct and Student Handbook.

We have chosen to:

☐

Receive a paper copy of the Student Code of Conduct and the Student Handbook.

☐

Accept responsibility for accessing the Student Code of Conduct and the Student Handbook on the district's website.

Student Name –

Grade Level –

Student Signature –

Date –

Parent's Name –

Parent Signature –

Date –



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Prohibiting the Use of Corporal Punishment

Corporal punishment—spanking or paddling the student—may be used as a discipline management technique in accordance with the Student Code of Conduct and policy FO (LOCAL) in the district’s policy manual.

If you do not want corporal punishment to be administered to your child as a method of student discipline, please note by selecting the appropriate choice below or providing a written statement to the campus principal stating your decision. A signed statement must be provided each year if you do **NOT** want corporal punishment to be administered to your child.

You may choose to revoke this prohibition at any time during the year by providing a signed statement to the campus principal. However, district personnel may choose to use discipline methods other than corporal punishment even if the parent requests that this method be used on the student.

I, _____, have read the regulation and understand that I have the right to choose whether or not corporal punishment may be used in disciplining my child(ren).

☐

I do NOT wish for corporal punishment to be administered to my child.

☐

I hereby authorize the use of corporal punishment to be administered to my child.

Student’s Name –

Grade Level –

Parent Signature –

Date –



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McKinney-Vento Residency

Student Name –

Date of Birth –

Grade Level –

The McKinney-Vento Homeless Assistance Act (Title X, Part C, of the No Child Left Behind Act) defines “homeless” as “individuals who lack a fixed, regular, and adequate nighttime residence.” This includes children who “are **temporarily** sharing the housing of other persons due to the loss of housing or economic hardship.”

☐ Does not apply; student is not homeless.

Please check one of the following statements if your family is experiencing homelessness:

☐ Living in a shelter, including transitional housing shelters (i.e. The Rise, Stepping Stones); awaiting foster care, etc. Please provide name of shelter and shelter’s address (if applicable) —

☐ Living on the streets, abandoned buildings, in cars, trailers, campgrounds, public places, housing not fit for habitation. Please provide information regarding area in which student is living –

☐ Living in hotels/motels for lack of other suitable housing. Please list name and address of hotel/motel –

☐ Doubled up; Temporarily living with family or friends due to lack of adequate housing or financial conditions. Please provide address of where student is living –

Please answer the following if you selected one of the four temporarily homeless statements –

How long do you expect to be at this address?

Are you seeking permanent housing? YES / NO

Date student moved to this address —

Is a parent living in the home with the student? YES / NO

If no, with whom is the student living?

Relationship —



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The school counselor or homelessness liaison may be in contact with you if clarification or transportation to school is needed.

We have read the information provided and indicated our living circumstances above with regard to the McKinney-Vento Act.

Parent Signature – _____

Date – _____

Information Regarding McKinney –Vento Residency and Educational Rights

TEHCY Texas Education for
Homeless Children and Youth



Texas Education for Homeless Children and Youth

If you live in any of the following situations:



A homeless shelter



Doubled-up
with other people



Car, park, empty building,
bus or train station



Motel or
campground

Eligible students have the right to:

- ☒ Receive a free, appropriate public education.
- ☒ Enroll in school immediately, even if lacking documents normally required for enrollment.
- ☒ Enroll in school and attend classes while the school gathers needed documents.
- ☒ Enroll in the local school; or continue attending their school of origin if that is your preference.
- ☒ Receive transportation to and from the school of origin, if requested.
- ☒ Receive educational services comparable to those provided to other students, according to the student's needs.

Identified Students Experiencing Homelessness by Living Situation

	2017-18	2018-19	2019-20
Doubled-up	135,392 58%	89,121 78%	85,571 77%
Hotel/Motel	19,942 9%	8,159 7%	7,954 7%
Shelter	19,797 9%	10,952 10%	10,325 9%
Unsheltered	56,174 24%	5,823 5%	7,551 7%



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Hotline: 1-800-446-3142 | Hotline Hours: 8:00 AM to 8:00 PM CST | tehcy.tea.texas.gov



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Migrant Family Survey

The information provided below is used to identify students who may qualify to receive additional educational services. A migrant program staff member may contact you for further information if needed. All information is kept confidential.

Student Name –





District –

Date of Birth –

Grade Level –

Date –

1. In the past three years, has your family lived in another school district? This includes other school districts Texas, or another state or country. YES / NO
 - a. If **YES**, continue to number 2.
 - b. If **NO**, stop here.
2. In the past three years, has anyone in your household had a job working with any of these products or activities below, not including on your own property? YES / NO
 - a. If **YES**, continue to number 3.
 - b. If **NO**, stop here.
3. Please check all that apply.

	<input type="radio"/> Any Crops Examples – corn, potatoes, beans, wheat, sugar beets, fruits, sorghum, alfalfa, etc. or field preparations		<input type="radio"/> Any Livestock Examples – cattle, pigs, sheep, chickens, dairy, etc.
	<input type="radio"/> Processing agricultural products Examples – sorting, packing, cutting, etc. of onions, potatoes, meat, fruit, etc.		<input type="radio"/> Other agriculture Examples – forestry, nursery, plant care, fishing, etc.

Parents' Names –

Phone Number –

Address (*street, city, state, zip code*) –

Please list all other children less than 22 years of age below.

Child's Name	Date of Birth	School (<i>if applicable</i>)	Grade (<i>if applicable</i>)