

# 2023-2024 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 you student have an IEP? N – Y 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 from school 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

2023-2024 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: \_\_\_\_\_

2023-2024 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 \_\_\_\_\_

2023-2024

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 Connt:** 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: \_\_\_\_\_

\_\_\_\_\_

2023 - 2024

HOME LANGUAGE SURVEY FOR PRE-K-12 SCHOOL DISTRICTS



STUDENT INFORMATION

Name of Student: \_\_\_\_\_ 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 \_\_\_\_\_

Select one or more of the following races:

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

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 so, what language? \_\_\_\_\_
5. Does the parent/guardian need **translated** materials? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, 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 / Guardian Signature

SCHOOL USE ONLY

*Please have test score documentation available for the Regional Accreditation Officer to review.*

- Other language than English indicated **TWO OR MORE** times on questions 1 – 3 above. The student is classified as "more often" and automatically qualifies as bilingual on the accreditation report.
- Other language than English indicated **ONLY ONCE** on questions 1 – 3 above. The student is classified as "less often" and only qualifies as bilingual on the accreditation report **if he or she meets one of the following** (any selection below REQUIRES appropriate documentation):
  - 1. Designated English Learner on one of the Oklahoma English language proficiency assessments: ACCESS for ELLs, Alternate ACCESS for ELLs, WIDA Screener, WIDA MODEL, K-WAPT, W-APT or Oklahoma Pre-K Language Screening Tool (PKST).
  - 2. Scored Basic or Below Basic in ELA on the Oklahoma State Testing Program (OSTP).
  - 3. Scored at or below the 35<sup>th</sup> percentile (or equivalent) composite reading score on the most recently administered state approved norm-referenced test (NRT). Qualifying score must not pre-date the start of the spring semester of the previous school year.

DOCUMENTATION OF A TEST RESULT FOR STUDENTS MARKED LESS OFTEN

Date(s) of Kindergarten ACCESS, ACCESS for ELLs, or Alternate ACCESS Test	Score(s) on Kindergarten ACCESS, ACCESS for ELLs, or Alternate ACCESS	Date of WIDA Screener or K-WAPT/WAPT or WIDA MODEL	Score(s) on WIDA Screener or K-WAPT/WAPT or WIDA MODEL
	Composite / Overall Score		Composite / Overall Score
	1.		1.
	1.		
	1.		

Date(s) of ELA OSTP	Score(s) on ELA OSTP			
	Below Basic	Basic	Proficient	Advanced
	Below Basic	Basic	Proficient	Advanced
	Below Basic	Basic	Proficient	Advanced

Date of the Oklahoma Pre-K Language Screening Tool	Score on Pre-K Language Screening Tool
	%

Date(s) Norm Reference Test (NRT)	Name of the NRT	Composite / Percentile Score(s)

Question 1: Reference WAVE code 1036  
 Question 2: Reference WAVE code 1037  
 Question 3: Reference WAVE code 1038

2023-2024

**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 Hodgen School District Hodgen

**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

2023-2024 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.						

## School Year 2023 - 2024 Economically Disadvantaged Form

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

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Student Number: \_\_\_\_\_

Student Name: \_\_\_\_\_

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

- |   |   |   |
|---|---|---|
| <input type="radio"/> Less than \$26,973            | <input type="radio"/> Between \$55,500 and \$65,009 | <input type="radio"/> Between \$93,536 and \$103,045  |
| <input type="radio"/> Between \$26,973 and \$36,482 | <input type="radio"/> Between \$65,009 and \$74,518 | <input type="radio"/> Between \$103,045 and \$112,554 |
| <input type="radio"/> Between \$36,482 and \$45,991 | <input type="radio"/> Between \$74,518 and \$84,027 | <input type="radio"/> Between \$112,554 and \$122,063 |
| <input type="radio"/> Between \$45,991 and \$55,500 | <input type="radio"/> Between \$84,027 and \$93,536 | <input type="radio"/> Between \$122,063 and \$131,572 |

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



2023-2024 School Year  
**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		

# 2023-2024 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 and 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 \_\_\_\_\_, 2023.

**INTERNET USAGE POLICY  
FOR  
HODGEN PUBLIC SCHOOL**

---

**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 you are about to require. In general, 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: \_\_\_\_\_

# Student Transfers Application Form



20 23 - 20 24

SCHOOL YEAR

## RECEIVING DISTRICT (TRANSFER TO)

LeFlore

COUNTY NAME

Hodgen Public School

DISTRICT NAME

Elementary

SITE REQUESTED - *This question is to assist the receiving school in referencing capacity at the site that would be your preference. This is not a guarantee that capacity is available there.*

## SENDING/RESIDENT DISTRICT (TRANSFER FROM)

COUNTY NAME

DISTRICT NAME

SITE NAME

## STUDENT INFORMATION

FIRST NAME

MIDDLE NAME

LAST NAME

BIRTH DATE (MM/DD/YYYY)

GRADE LEVEL IN TRANSFER YEAR

GENDER

Male  Female

IS THE STUDENT OF HISPANIC OR LATINO ORIGIN OR DESCENT?

Yes  No

STUDENT'S RACE (mark all that apply)  American Indian or Alaska Native  Asian

Black or African American  Native Hawaiian or Other Pacific Islander  White/Caucasian

10-DIGIT STATE ID STATE TESTING NUMBER (STN) OBTAINED FROM YOUR CHILD'S SCHOOL AND STARTS WITH 1-0-0.

Check here if the student is currently enrolled in Homeschool/Private School, the student is moving into Oklahoma from another state or country, or the student has never attended a public school in the State of Oklahoma.

Is this student being served on an Individual Education Program (IEP)?

Yes  No

DATE OF IEP MEETING

**Receiving District:** If above answer is "yes," a representative from both districts must be present for an IEP conference to discuss the student's IEP needs. Applicable records must be submitted from the student's last school to the receiving district and shall be maintained by both districts in accordance with federal and state laws.

**Sending District:** A request for education records of a student who was enrolled in the district shall be fulfilled within three business days of the request. The records should include the student's disciplinary records and attendance information.

# Student Transfers Application Form



**Please Note:** An "IEP Service Agreement" does not constitute a transfer under the Education Open Transfer Act and should not be formalized by using this form.

## PARENT/LEGAL GUARDIAN MUST COMPLETE AND SIGN

FIRST AND LAST NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ ALTERNATIVE PHONE \_\_\_\_\_

1. Is the parent/legal guardian requesting this open transfer a TEACHER\* employed by this receiving district?  Yes  No

\*A teacher is any person who is employed to serve as a district superintendent, principal, supervisor, counselor, librarian, school nurse, classroom teacher, or a school employee in any other instructional supervisory/administrative capacity.

2. Is the parent/legal guardian requesting this open transfer a member of the active uniformed military services of the United States and on full time active-duty status or active-duty orders?  
 Yes  No (If yes, provide active-duty documentation.)

3. Is the student currently in foster care?  Yes  No (If yes, provide foster care documentation.)

4. Is the student currently home schooled?  Yes  No

5. Did the student previously attend a dependent district (K-8)?  Yes  No

Pursuant to the provisions of the statutes of the State of Oklahoma, and the rules and regulations of the State Board of Education, this application is hereby made to permit the child listed on this form to transfer from their resident Sending District to the Receiving District as indicated on this form. The parent/guardian applicant verifies by their signature (below) that they are the custodial parent or legal guardian of the child listed above and hereby acknowledges that if this transfer is approved, the parent/guardian shall be bound by the Compulsory School Attendance Laws of Oklahoma rules and all regulations of the Receiving District named on this transfer application. Further, as the parent or guardian of the minor student named above, I acknowledge, agree, understand that pursuant to the Oklahoma Education Open Transfer Act 70 O.S. § 8-101.2 the Receiving District may deny the request for transfer based on a lack of capacity, an incident of student discipline as outlined in 70 O.S. § 24-101.3; and/or as a result of the student have a history of absences, which is defined as ten or more unexcused absences in one semester. 70 O.S. § 8-101(A-B). As such, I hereby authorize the Receiving District to access the education records of the student this transfer application is submitted on behalf of; provided, however, the authorization to access the education records is limited to those reasonably related and necessary to student discipline and attendance data.

\_\_\_\_\_  
SIGNATURE OF THE PARENT/GUARDIAN DATE

### DISTRICT USE ONLY

District has three business days to upload this request into the transfer system. If there is documentation from question 2 or 3 above, please retain this information to upload into the transfer system.

Received by \_\_\_\_\_ District \_\_\_\_\_  
DISTRICT EMPLOYEE RECEIVING NAME OF DISTRICT

at \_\_\_\_\_ on \_\_\_\_\_ Approved  Denied   
TIME DATE

HODGEN PUBLIC SCHOOL  
2023-2024 SCHOOL YEAR

First Semester

August 14	Professional Day #1
August 15	Professional Day #2
August 15	Welcome Back Night 5:30 PM - 7:00 PM
August 16	Professional Day #3
August 17	First Day of Class
September 4	Labor Day No School
September 6	Progress Reports
September 7	Parent /Teacher Conf. 4:00 - 7:00 PM
October 6	End of the First Nine Weeks
October 11	Report Cards
October 12, 13 & 16	Fall Break No School
November 15	Progress Reports
November 16	Parent /Teacher Conf. 4:00 - 7:00 PM
November 17	No School
November 20-24	Thanksgiving Break No School
December 15	End of the First Semester
Dec. 18 - Jan. 1	Christmas Break No School

Second Semester

January 2	First Day of Second Semester
January 3	Report Cards
January 15	Professional Day #4 No School
January 31	Progress Reports
February 6	Parent / Teacher Conf. 4:00 - 7:00 PM
February 9	No School
February 19	President's Day No School
March 1	End of the Third Nine Weeks
March 6	Report Cards
March 18-22	Spring Break No School
March 29	Snow Day #1 No School
Mandated State Testing Grades 3 thru 8 Month of April	
April 3	Progress Reports
April 4	Parent / Teacher Conf. 4:00 - 7:00 PM
April 5	Snow Day #2 No School
April 12	No School
April 19	No School
April 26	No School
May 3	No School
May 10	No School
May 13	Kindergarten & 8th Graduation
May 16	Last Day of School
May 17	Professional Day #5



# HODGEN SCHOOL SUPPLY LIST 2023-2024



## 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
- (1) 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
- Kleenex
- Clorox wipes



## Second Grade

- Pencil box
- (2) packages of No. 2 pencils (plain yellow)
- (2) 24 count boxes of crayons
- 1 package of washable markers
- 2 large erasers
- Blunt tipped scissors
- 4 glue sticks
- 2 pocket folders
- Backpack
- 1 wide ruled notebook
- Kleenex
- Clorox wipes



## Third Grade

- 2 packages of plain pencils
- Pencil pouch
- 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