EGG HARBOR TOWNSHIP SCHOOL STUDENT REGISTRATION CHECKLIST

The child **MUST be 5 years of age on or before October 1st** even if coming from another school to be eligible for Kindergarten.

If not, you cannot register the child at this time. Only the Legal Parent/Guardian can register children in the school district.

PLEASE READ THE FOLLOWING PACKET AND JUST COMPLETE ONLY THE SECTION THAT PERTAINS TO YOUR SITUATION.

Are you the legal parent/guardian of the child being registered? _____ Yes _____ No

DID YOUR CHILD EVER ATTEND THE EHT SCHOOL DISTRICT? _____ Yes _____ No

Country the student was born in: _____ 10-digit NJ SID#: _____

Student's Name: _____

THE FOLLOWING ITEMS MUST BE BROUGHT TO REGISTER A STUDENT:

_____ Birth Certificate (the name on the Birth Certificate must be used) _____ Transfer Card

_____ Immunization Record _____ Report Card/Transcript

If you own the home please bring the following with you:

_____ Deed, Mortgage, or Tax Bill in parent/guardian's name

_____ Current utility bill

_____ Copy of your ID

If you **DO NOT** own the home and rent the home please bring the following with you:

_____ Lease in parent/guardian's name, which must be on the lease

_____ Current utility bill

_____ Copy of your ID

Please choose which of the following situations the student currently resides in (You can choose more than one):

_____ House or apartment with parent or guardian _____ Motel, Car, or Campsite

_____ Shelter or other Temporary housing _____ With friends or family members

If you are living in shared housing, please check all of the following reasons that apply:

_____ Loss of Housing _____ Loss of Employment _____ Parent/Guardian is Displaced

_____ Economic situation _____ Temporarily waiting for housing or apartment _____ Other (Please Explain):

_____

- Is your current address a temporary living arrangement? _____ Yes _____ No
- Is your temporary living arrangement due to loss of housing or economic hardship? _____ Yes _____ No

EGG HARBOR TOWNSHIP SCHOOLS
STUDENT ENROLLMENT FORM

Student Information - ***PLEASE PROVIDE NAME AS IT APPEARS ON BIRTH CERTIFICATE***

Student Last Name	Student First Name	Student MI	Date of Birth	Age	Gender ☐M ☐F

Student's Current Residence	Current City	Current Zip+4 Code	Primary Contact Number for Household ( )
Student's Previous Residence	Previous City	Previous Zip Code	Primary Language Spoken at Home

Is Student Hispanic or Latino? ☐Yes ☐No

Student's Race/Ethnicity (mark all that apply): ☐American Indian or Alaska Native ☐Black or African American ☐Native Hawaiian or Other Pacific Islander ☐Asian ☐Hispanic ☐White

Was student born in the USA or Puerto Rico?

☐Yes → _____ Student's Place of Birth: City *and* State

☐No → _____ Student's Place of Birth: **City *and* Country** of Birth

_____ Student's First Date of Entry into the US (MM/DD/YYYY)

_____ Student's Date First Attended US School (MM/DD/YYYY)

Student's Last School Attended Name/Address	Last School Attended Phone ( )	Last School Attended Fax ( )

Has this student ever previously attended an EHT school? ☐Yes ☐No

Does student have internet capability at home? ☐ Yes ☐ No

Please note if the student has a preferred nickname:

Has this student ever received any of the following services at their previous school(s)? (mark all that apply) ☐ No / None

☐ IEP (Individualized Education Program) Special Education ☐ Speech ☐ Basic Skills/Remedial/Title I Classes ☐Bilingual or English as a Second Language ☐504

Is this student's parent or guardian a Full-Time Active Duty member of the United States military services? (Army, Navy, Air Force, Marine Corps, Coast Guard, and National Guard)

☐ Not Active Military Connected - Student is not a dependent of a full-time, active member of the Armed Forces

☐ Active Military Connected - Student is a dependent of a **full-time**, active duty member of the Armed Forces

Does student reside with both parents? ☐Yes ☐No

If no, with whom does student reside? ☐ Mother ☐ Father ☐ Guardian(s): _____ Relationship(s) to Student

Parent/Guardian #1 Information - Please provide name as it appears on Photo ID

Last Name	First Name	Relationship to Student	Cell Phone Number ( )

Place of Employment	Place of Employment Address
Place of Employment Phone Number ( )	Personal Email Address

Parent/Guardian #2 Information - Please provide name as it appears on Photo ID

If student does not reside with both parents, is there a court order regarding the rights of Parent/Guardian #2? ☐ Yes ☐ No _____ Initials

Last Name	First Name	Relationship to Student	Cell Phone Number ( )

Street Address	City, State	Zip Code	Home Phone Number ( )

Place of Employment	Place of Employment Address
Place of Employment Phone Number ( )	Personal Email Address

Student's Doctor		
Doctor's Name / Practice	Address	Phone Number ( ) -

Emergency Contact(s) – ***NOT A PARENT OR GUARDIAN*** – Please provide name(s) according to their Photo ID		
Last Name	First Name	Relationship to Student
Personal Email Address	Home Phone Number ( ) -	Cell Phone Number ( ) -
Last Name	First Name	Relationship to Student
Personal Email Address	Home Phone Number ( ) -	Cell Phone Number ( ) -

Student's Siblings Living in the Home That Are Currently Attending Egg Harbor Township School(s)					
Last Name	First Name	Relationship to Student	Date of Birth	School Attending	Grade
Last Name	First Name	Relationship to Student	Date of Birth	School Attending	Grade
Last Name	First Name	Relationship to Student	Date of Birth	School Attending	Grade
Last Name	First Name	Relationship to Student	Date of Birth	School Attending	Grade
Last Name	First Name	Relationship to Student	Date of Birth	School Attending	Grade

Miscellaneous Information or Additional Emergency Contact(s) *and* their Relationship to the Student

_____

_____

_____

I hereby affirm that the information entered is true and correct to the best of my knowledge.

Parent/Guardian Signature: _____ Date: October 12, 2021

~ *FOR OFFICE USE ONLY* ~

Household Name	Grade Level	Enrollment Calendar / Home School	Bus # In	Bus # Out
		☐ AM ☐ PM		

10-digit NJ SID #	District/School Entry Date	Start Status / Entry Code	Registration Date	Registered By

6-digit Local Student ID #	AUP	Photo	Google	Homeless	DYFS	Custody Papers	Affidavit	Lease ☐ MTM
	☐ Yes ☐ No Date: _____/_____	☐ Yes ☐ No Date: _____/_____	☐ Yes ☐ No Date: _____/_____	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No Date: ____/____/____	☐ Yes ☐ No Date: ____/____/____	☐ Yes ☐ No Date: ____/____/____

To the Person Enrolling the Student: Please complete the appropriate section A, B, C or D below, according to the situation best matching the student's circumstances:

*Complete **SECTION A** (DOMICILE) if **the student is the child of a parent or guardian, or an adult student,** whose **permanent home** is the address given on page 1 of this application and is **located in the district.***

or

*Complete **SECTION B** ("AFFIDAVIT" STUDENT) if **the student is living with a person domiciled in the district, other than the parent or guardian**.*

or

*Complete **SECTION C** (TEMPORARY RESIDENT) if **the student is living with a parent or guardian temporarily residing within the district.***

or

*Complete **SECTION D** (SPECIAL CIRCUMSTANCES) if **the student's situation is not addressed by Section A, B or C** or if any of the circumstances in Section D apply.*

SECTION A (DOMICILE): *Complete this section if **the student is the child of a parent or guardian, or an adult student,** whose **permanent home** is the address given on page 1 of this application and is **located in the district**. If you are the student's guardian, or will be the guardian of a student from out of state following expiration of the required 6-month waiting period, you will be asked to provide official papers proving guardianship. You will not be asked to produce "affidavit student" proofs of the type requested in Section B below.*

How long have you lived in this home?_____

Do you have any present intention of moving from this home? If so, when and to where?

_____

Do you have residences(s) elsewhere, and, if so, where are they and when do you live there?____

_____

_____

Please list four forms of proof (see attached list) you will provide to demonstrate that the address given on page 1 of this application is your permanent home.

1._____

2._____

3._____

4._____

(Continued on Next Page)

SECTION A (DOMICILE) CONTINUED:

If the student's parents are domiciled in different districts, regardless of which parent has custody, please answer the following questions:

Is there a court order or written agreement between the parents designating the district for school attendance, and if so, where does it require the student to attend school? (You will be asked to provide a copy of this document.)_____

_____

_____

Does the student reside with one parent for the entire year? If so, with which parent and at what address?_____

_____

If not, for what portion of time does the student reside with each parent and at what addresses?___

_____

_____

If the student lives with both parents on an equal-time, alternating week/month or other similar basis, with which parent did the student reside on the last school day prior to October 16 preceding the date of this application?_____

Please note: *No district is required, as a result of being the district of domicile for school attendance purposes where a student lives with more than one parent, to provide transportation for a student residing outside the district for part of the school year, other than transportation based upon the home of the parent domiciled within the district to the extent required by law.*

If you are claiming to be an emancipated student, are you living independently in your own permanent home in the district? If yes, please describe the proofs you will provide, in addition to those demonstrating domicile, to demonstrate that you are not in the care and custody of a parent or guardian. _____

_____

_____

_____

Please note: Under New Jersey law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location within a municipality, the district of domicile for school attendance purposes is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.

END OF SECTION A

SECTION B ("AFFIDAVIT" STUDENT): *Complete this section if* ***the student is living with a person domiciled in the district, other than the parent or guardian.***

Is the person domiciled in the district, supporting the student without remuneration as if the student were his or her own child, keeping the student for a longer time than the school term and assuming all personal obligations for the student relative to school requirements? Please explain. (You will be asked to file a sworn statement, along with a copy of the person's lease if a tenant, or a sworn landlord's statement if a tenant without written lease.)_____

_____
_____
_____
_____
_____

Students are not eligible to attend school as "affidavit" students unless the student's parent or guardian is not capable of supporting or providing care for the student due to family or economic hardship, and unless it is clear that the student is not living in the district solely for purposes of receiving a public education there. Please explain the circumstances applicable in this case, with special attention to the parent/guardian's family and/or economic hardship. (The parent/guardian will be required to file a sworn statement with documentation to support the claims made.)_____

_____
_____
_____
_____
_____
_____
_____

Please note: A student will not be considered ineligible because required sworn statements(s) cannot be obtained, so long as evidence is presented that the underlying requirements of the law are being met.

A student will not be considered ineligible when evidence is presented that the student has no home or possibility of school attendance other than with a non-parent district resident who is acting as the sole caretaker and supporter of the student.

A student will not be considered ineligible solely because a parent or guardian provides gifts or limited contributions, financial or otherwise, toward the welfare of the student, provided that the resident keeping the student receives no payment or other remuneration from the parent or guardian for the student's actual housing and support. Receipt by the resident of social security or other similar benefits on behalf of the student do not render a student ineligible.

It is not necessary that guardianship or custody be obtained before a student will be considered for enrollment on an "affidavit" basis.

END OF SECTION B

SECTION C (TEMPORARY RESIDENT): *Complete this section if* ***the student is living with a parent or guardian temporarily residing within the district****, even if the parent has a domicile elsewhere.*

How long have you lived in this residence?_____

Do you have a domicile or residences(s) elsewhere, and, if so, where are they and when do you live there?_____

_____

_____

Please list four forms of proof (see attached list) you will provide to demonstrate that you are residing at the address given on page 1 of this application, and that such residence is not solely for the purpose of the student attending school in the district.

1._____

2._____

3._____

4._____

Please note: Under New Jersey law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location within a municipality, the district of domicile for school attendance purposes is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.

If the student's parents are domiciled in different districts, regardless of which parent has custody, please answer the following questions:

Is there a court order or written agreement between the parents designating the district for school attendance, and if so, where does it require the student to attend school? (You will be asked to provide a copy of this document.)_____

_____

_____

Does the student reside with one parent for the entire year? If so, with which parent and at what address?_____

_____

If not, for what portion of time does the student reside with each parent and at what addresses?___

_____

_____

_____

(Continued on Next Page)

SECTION C (TEMPORARY RESIDENT) CONTINUED:

If the student lives with both parents on an equal-time, alternating week/month or other similar basis, with which parent did the student reside on the last school day prior to October 16 preceding the date of this application?_____

Please note: *No district is required, as a result of being the district of temporary residence for school attendance purposes where a student lives with more than one parent, to provide transportation for a student residing outside the district for part of the school year, other than transportation based upon the home of the parent residing within the district to the extent required by law.*

END OF SECTION C

SECTION D (SPECIAL CIRCUMSTANCES): *Please indicate* ***if any of the following apply.***

_____The student is the child of a parent or guardian who has moved to another district as the result of being homeless.

_____The student has been placed in the home of a district resident other than the parent or guardian by court order. (You will be required to provide a copy of the order.)

_____The student has been placed in the district by the Department of Children and Families acting as the student's guardian.

_____The student is a child of a parent or guardian who previously resided in the district and is a member of the New Jersey National Guard or the United States reserves ordered to active service in time of war or national emergency, resulting in relocation of the student.

_____The student is kept in the home of a person domiciled in the district, other than the parent or guardian, and the parent/guardian a member of the New Jersey National Guard or the reserve component of the United States armed forces and has been ordered into active military service in the United States armed forces in time of war or national emergency. If this applies, when is the parent or guardian expected to return from active military duty?_____

_____The student resides on federal property? Where?_____
_____
_____

_____The student's circumstances do not appear to be addressed anywhere in this application. I understand that I will be contacted by Registrar for further information.

END OF SECTION D

If you experience difficulties with the enrollment process, please contact the Office of the Registrar at (609) 927-4141 x1234 or x1103 for assistance.

Egg Harbor Township Public Schools

REGISTRATION HEALTH RECORD

Student's Name: _____
Last First Middle

Gender: ☐M ☐F Date of Birth: _____ Place of Birth: _____

Home Address: _____

Home Telephone: ( ) _____

Guardian 1:

_____ ( ) _____
Last First Relationship to Student Cell Phone

Occupation: _____ Business Phone: ( ) _____

Guardian 2:

_____ ( ) _____
Last First Relationship to Student Cell Phone

Occupation: _____ Business Phone: ( ) _____

Student lives with (check one): ☐Both Parents ☐Mother ☐Father ☐Guardian(s)

Entering Grade: ○ Pre-K ○ K ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10 ○ 11 ○ 12

Name of Last School Attended: _____

School Address: _____ ( ) _____
Street Address City, State, Zip Phone

MEDICAL HISTORY:

Asthma: ☐Yes ☐ No Current Asthma Action Plan: ☐Yes ☐No

List Medications: _____

Allergies (food, etc.): ☐Yes ☐No List Allergies: _____

Food Allergy & Anaphylaxis Emergency Care Plan (Epi Pen): ☐Yes ☐No

Physician: _____ Telephone: ( ) - _____

Other health issues that may currently be affecting your child's health: _____

_____

Copy of Immunizations Attached: ☐Yes ☐No Today's Date: October 12, 2021

EGG HARBOR TOWNSHIP PUBLIC SCHOOLS
CENTRAL REGISTRATION
5 SWIFT DRIVE
EGG HARBOR TOWNSHIP, NJ 08234

PHONE# 609-927-4141 ext.1103 FAX# 609-927-3517

AUTHORIZATION TO RELEASE RECORDS TO THE EGG HARBOR TOWNSHIP PUBLIC SCHOOLS

DATE: October 12, 2021 NJ SID# _____
(10-digits)

Previous School _____

Previous School Address _____

Previous School Fax # _____

Previous School Phone # and Extension(s) _____

I hereby authorize the release of any and all records medical, social, psychological, and educational information to the Egg Harbor Township School District for:

_____
Student's Name

Student's Date of Birth (MM/DD/YYYY) _____ Student's Grade _____

_____	_____	_____
Parent/Guardian Name	Relationship	Parent/Guardian Signature

Please forward records to the address checked below:

☐ **EHT High School**
24 High School Drive
Egg Harbor Township, NJ 08234
Fax # 609-653-4336

☐ **Swift Elementary School**
5 Swift Drive
Egg Harbor Township, NJ 08234
Fax # 609-927-9099

☐ **Davenport Primary**
2499 Spruce Avenue
Egg Harbor Township, NJ 08234
Fax # 609-677-6908

☐ **Fernwood Middle School**
4034 Fernwood Avenue
Egg Harbor Township, NJ 08234
Fax # 609-383-0628

☐ **Davenport Elementary**
2501 Spruce Avenue
Egg Harbor Township, NJ 08234
Fax # 609-645-1116

☐ **Alder Middle School**
25 Alder Avenue
Egg Harbor Township, NJ 08234
Fax # 609-383-1492

☐ **Slaybaugh Primary**
13 Swift Drive
Egg H arbor Township, NJ 08234
Fax # 609-601-2869

☐ **Miller Elementary School**
2 Alder Avenue
Egg Harbor Township, NJ 08234
Fax # 609-383-3297

☐ **Slaybaugh Elementary**
11 Swift Drive
Egg Harbor Township, NJ 08234
Fax # 609-927-0038

Egg Harbor Township Public Schools
TRANSPORTATION FORM

Please DO NOT write in the box.

Starting Date: _____

Change of Address: _____

Transfer Out: _____

Race: _____ American Indian/Alaskan Native
_____ Asian
_____ Black/African American
_____ Pacific Islander
_____ White

Ethnicity: Hispanic or Latino? Yes or No

SID# _____

Bus Stop _____

Bus # _____

Time _____

Session _____

School _____

Student ID# _____

ACTIVITY BUS _____

DATE: October 12, 2021

FIRST NAME: _____ GENDER: ☐M ☐F GRADE: _____

LAST NAME: _____ HOME PHONE: ( ) _____

MIDDLE NAME: _____ EMERGENCY PHONE: ( ) _____

DATE OF BIRTH: _____

PARENT/GUARDIAN: _____

ADDRESS: _____
STREET CITY STATE ZIP+4

EXACT LOCATION OF YOUR HOME: _____

NAME OF NEAREST ROAD INTERSECTION AND APPROXIMATE DISTANCE FROM IT:

_____

DISTINGUISHING LANDMARKS OR ADDITIONAL INFORMATION, WHICH CAN HELP US BETTER LOCATE STUDENT'S RESIDENCE:

_____

DOES STUDENT HAVE A SIBLING OR SIBLINGS ATTENDING EHT SCHOOLS? _____

NAME OF BUS STOP THEY ARE NOW USING: _____

R2361 Acceptable Use of Computer Network/Computers and Resources

The Board directs the Superintendent to specify those behaviors which are permitted and those which are not permitted, as well as appropriate procedures to guide employee and student use. In general, users are expected to communicate in a professional manner consistent with state laws governing the behavior of students and school employees, as well as with federal laws governing copyrights.

The Board encourages staff to make use of telecommunications to explore educational topics, conduct research, and contact others in the educational world. The Board anticipates that the new systems will expedite the sharing of effective practices and lessons across the district and will help users stay on the leading edge by forming partnerships with others within our school district, across the nation and around the world.

The Network Supervisor will report inappropriate behaviors, violations, or complaints to the employee's supervisor or student's teacher who will take appropriate disciplinary action. Violations may result in a loss of access and/or disciplinary action. When applicable, law enforcement agencies may be involved.

Computer access is granted to individual staff and students for their sole use only. Violations may result in a loss of access as well as other disciplinary or legal action. Each user will be given copies of this regulation and procedures and will sign an acceptable use agreement before establishing an account or continuing use.

The following are not permitted:

-Sharing of accounts, IDs, or passwords-
-Sending or displaying offensive messages or pictures
-Using obscene language-Harassing, insulting or attacking others
-Damaging computers, computer systems or computer networks
-Violating copyright laws
-Trespassing in another's subdirectories, tiers, work, or files
-Intentionally wasting limited resources, such as Internet Radio
-Employing the network for commercial purposes

District Network, E-Mail, Online Global Communications and Internet Rules

Any and all individual users of the district computer networks, from within the school district or off site, are responsible for their behaviors and communications over those networks.

Students are responsible for good behavior on school computer networks just as they are in a classroom or a school hallway. Communications on the network are often public in nature. General school rules for behavior and communications apply.
The network is provided for students to conduct research and communicate with others for educational purposes. Access to network services is given to students who agree to act in a considerate and responsible manner. Access is a privilege-not a right. Access entails responsibility. Parent permission is required.

Individual users of the district computer networks are responsible for their behavior and

communications over those networks. It is presumed that users will comply with district standards and will honor the agreements they have signed. Beyond the clarification of such standards, the district is not responsible for restricting, monitoring or controlling the communications of individuals utilizing the network.

Violations

Violations of the Acceptable Use of Computer Network/Computers and Resources may result in a loss of access as well as other disciplinary or legal action. Disciplinary action shall be taken as indicated in Policies and Regulations No. 2361, Acceptable Use of Computer Network/Computers and Resources, No. 5600, Pupil Discipline, No. 5610, Suspension and No. 5620, Expulsion as well as possible legal action and reports to the legal authorities and entities.

Determination of Consequences for Violations

The particular consequences for violations of this policy shall be determined by the Principal in matters relating to the use of computer networks/computers and by the Principal in matters of school suspension. The Superintendent or designee and the Board shall determine when school expulsion and/or legal action or actions by the authorities are the appropriate course of action.

Individuals violating this policy shall be subject to the consequences as indicated in Regulation No. 2361 and other appropriate discipline which includes but are not limited to:

1. Use of Computer Network/Computers only under direct supervision;

2. Suspension of network privileges;

3. Revocation of network privileges;

4. Suspension of computer privileges;

5. Revocation of computer privileges;

6. Suspension from school;

7. Expulsion from school; and/or

8. Legal action and prosecution by the authorities.

Decisions of the Principal may be appealed in accordance with Policy No. 5710 Pupil Grievances.

Egg Harbor Township Schools
Acceptable Use Policy Student Permission Form

I understand that use of the Internet is an exceptional educational opportunity and privilege. Since Internet use represents both the individual and Egg Harbor Township Schools, a high standard of personal responsibility is required in order to maintain that privilege.

The use of my account, from within the buildings or off site will be in support of education and consistent with the educational objectives of the Egg Harbor Township School District. This includes but is not limited to copyrighted material, threatening, or obscene material.

I will not use the network in such a way that would disrupt the use of the network by others or waste resources. Attempts to log into the systems as any other user may result in cancellation of user privileges. Access to the network services is given to students who agree to act in a considerate and responsible manner.

I understand that misuse of any part of the computer network or communications system of Egg Harbor Township Schools, from within the buildings or off site will result in suspension or permanent loss of telecommunications privileges and possible additional disciplinary action.

The electronic equipment used is property of the Egg Harbor Township School District and as a result all software must be installed according to the license agreement and must adhere to the copyright laws. All data that is stored, composed, transmitted or received via Egg Harbor Township's system is considered to be property of Egg Harbor Township.

I agree that I have read the entire Acceptable Use Policy located in the student handbook or the district's web page at http://www.eht.k12.nj.us.

As a user of the Egg Harbor Township School's computer network, I hereby agree to comply with the above stated rules, communicating over the network in a reliable fashion while honoring all relevant laws and restrictions.

Student's Name _____

Student's Signature _____

School _____ Grade _____ Homeroom/Teacher _____

As the parent or legal guardian of the minor student signing above, I grant permission for my son or daughter to access networked computer services such as electronic mail and the Internet. I understand that individuals and families may be held liable for violations. I understand that some materials on the Internet may be objectionable, but I accept responsibility for guidance of Internet use-setting and conveying standards for my daughter or son to follow when selecting, sharing or exploring information and media.

Parent's Signature _____ Date October 12, 2021

Please sign and return within ten days.

Issued: 10/22/2002, 5/11/2010

Egg Harbor Township Schools

www.eht.k12.nj.us
Administration Offices
13 Swift Drive
Egg Harbor Township, NJ 08234

Dear Parents,

As you are aware, there are potential dangers associated with the posting of personally identifiable information on a web site since global access to the Internet does not allow us to control who may access such information. These dangers have always existed; however, we as schools do want to celebrate your child and his/her work. The law requires that we ask for your permission to use information about your child.

Throughout the school year there are times when your child's photograph/image may be taken or their name is used in print. Some of these times may include, but are not limited to, the following:

- Articles in a school or district newsletter.
- Photographs taken to accompany a newspaper article.
- Photographs taken for use in a slide presentation and/or an electronic slide show about our District that is shown to new staff members, various service organizations, and groups from other schools.
- Videos taken of participation in a special event or program.
- Videoconferencing activities with other educational institutions.
- Photographs taken to be used in pamphlets and/or brochures about our District.
- Student's photograph/image and personal identifiers on the district's public website.

The Board of Education policy requires that we have your permission to take pictures/images of your child. If you grant permission for these purposes, please **sign and return this form to school**. This permission will be in effect during the time your child attends any Egg Harbor Township School. If you wish to grant your permission at a further date, you may do so at any time by writing a note to your child's building principal.

If you have any questions, please call the office of Information Technology Services at 609-646-3268.

Sincerely,

Dr. Kimberly A. Gruccio

Superintendent

Child's Name: _____

I give permission for my child's picture, electronic image, and/or name to be used as stated above.

Date: October 12, 2021 _____

_____
Parent Signature (required)

Egg Harbor Township Schools

www.eht.k12.nj.us
Administration Offices
13 Swift Drive
Egg Harbor Township, NJ 08234

Dear Parents/Guardians,

Egg Harbor Township School District has implemented "Google Apps for Education" for students, teachers, and administrative staff. All students will have accounts allowing for their documents, presentations, and projects to be stored online and accessible from home, school, and anywhere there is an Internet connection.

Please note that students **will not** have a working email address even though their usernames may resemble an email address.

Responsible Use Guidelines

Teachers will make every reasonable effort to monitor student conduct related to class content in order to maintain a positive learning environment. All participants will respect the teacher's time and professionalism by supporting the same positive approach. All participants will be respectful in their postings and comments.

1. All rules, regulations, guidelines already covered by the district's Acceptable Use Policy (AUP) document, as well as all local, state, and federal laws may be entered into or displayed via the Google Apps system.

2. Google Apps is for school projects. Students or staff members using Google Apps for their own purposes are cautioned that the district offers no guarantees to the safety or permanence of ANY data in its Google Apps system. Google Apps files should not be created unless assigned by a teacher or after specific permission by a school employee.

3. When sharing a document, spreadsheet, presentation, sites, or other file with other users, one agrees that:
    a. All users are agreeable to receiving an invitation to collaborate,
    b. All users must report any violations of any school policies or government laws immediately,
    c. All users must be treated with respect, and
    d. All users are expected to contribute fairly, citing sources whenever necessary, and following all rules, laws, and guidelines.

4. Deliberate destruction or vandalism of other users' data or shared data is prohibited. Nothing should be deleted without the permission of the person who created it.

5. Google Apps will not be used to post any information for commercial activities, product advertisement, or political advocacy, nor will it be used to post any obscene, discriminatory, or offensive material.

6. District employees have the right to monitor all postings and activities in Google Apps.

In addition to the Terms and Conditions noted in the parent permission letter, students must comply with the Egg Harbor Township School District's Acceptable Use Policy (AUP). Access to and use of the student's Google account is considered a privilege. Egg Harbor Township School District maintains the right to terminate the access and use of their Google account when there is reason to believe that violations of law or district policies have occurred. The alleged violation will be directed to the building principal and addressed according to the procedures outlined in the student handbook.

Google and Egg Harbor Township School District take student privacy very seriously. If you would like more information on Google's Privacy policies and student privacy, please visit:

https://www.google.com/edu/trust/

Thank you.

I give consent for my child, listed below, to use Google for class activities.

Student Name: _____

Parent Printed Name: _____

Parent Signature: _____

Date: October 12, 2021

Home Language Survey

This survey is the first of three steps to identify whether or not a student is eligible to be an English language learner (ELL). Some questions may be skipped depending on the answer responses.

Student Information

Student Last Name: _____

Student First Name: _____

Student Middle Name: _____

Student Birth Date (MM/DD/YYYY): _____

Street Address: _____

Apt/Suite/Other: _____

City: _____ State: NJ Zip Code: _____-_____

Survey Questions

Question 1

List all languages used in the student's home and go to #2

Question 2
Was the first language used by the student a language other than English?

- ☐ Yes. Proceed to question 3
- ☐ No. Proceed to question 3

Question 3
Does the student speak or understand language other than English?

- ☐ Yes. Proceed to question 4.
- ☐ No. Survey is complete

Question 4

When interacting with others at home (example: parents, guardians, siblings), does the student understand or use a language other than English most of the time?

- ☐ Yes. Proceed to question 5
- ☐ No. Proceed to question 5.

Question 5

When interacting with others outside the home (example: friends, caregivers), does the student understand or use a language other than English most of the time?

- ☐ Yes. Survey is complete
- ☐ No. Survey is complete

INTERNAL USE ONLY

- Did they answer "No" to Question #3. Go to Result C.
- Did they answer “Yes” to either Question #4 or Question #5?
  - No (Go to Result C)
  - Yes (Go to Result B)
- Result B: The student is a possible ELL. Reviewer should proceed to Step 2 of Identification Process: Conduct Records Review Process.
- Result C: The student is not an ELL. Reviewer should not proceed to Step 2: Identification Process is complete