

Back to School Forms

for the 2022-23 School Year



Complete your Back to School forms by September 15, 2022 to:

- Update your contact information to receive emergency notifications
- Update or confirm your emergency contacts
- Update your child's health information
- Choose your opt-out preferences
- ...and more.

ALL Back to School forms must be completed for EACH CHILD, even if there are no changes from the previous year.

It is essential to complete these forms. The information you provide will be used to contact you with emergency notifications.



INSTRUCTIONS:

Complete the forms online in PowerSchool Parent Access
(see instructions inside)

OR

Complete the enclosed paper forms and return to your child's school.



Save time by completing Back to School Forms online in PowerSchool Parent Access!

Instead of completing Back to School Forms on paper, you can save time by completing them online!* **PowerSchool Parent Access** is the online portal where you can access your child's academic record and more. You will need just one login and password to access all this information.

On PowerSchool Parent Access, you can:

- Complete all back-to-school forms and update your contact information
- Find classroom information and see your child's schedule
- Access your child's lunch PIN
- See your child's attendance record
- See current grades and real-time gradebook (for grades 6-12 only)
- See quarterly progress reports and report cards
- Find teacher email addresses
- View standardized assessments

See the back for instructions on how to create your PowerSchool Parent Access account and complete your Back to School Forms.

For more information on PowerSchool Parent Access, visit www.acps.k12.va.us/parentaccess.

***NOTE:** Back to School Forms are available to complete online in English and Spanish only. If preferred, paper forms can be completed instead, and submitted to your school's front office.

How to Create Your PowerSchool Parent Access Account

1. Visit www.acps.k12.va.us/parentaccess
2. Click the **'Create Your PowerSchool Parent Access Account'** button.
3. Create a username and password (this is your own personal username and password).
4. Link your child(ren) using the 'Access ID' and 'Access Password' listed on the letter you received in the mail. You will need the 'Access ID' and 'Access Password' for each child you want to add to your account. **Don't have this information? Complete the Parent Access Help Form at www.acps.k12.va.us/ps-help.**
5. Click 'Enter.' You can now access each child's academic information by clicking on their name at the top-left corner of the screen.



Watch a video of these instructions at:
acps.cc/PowerSchoolVideo

How to Complete Your Back to School Forms in PowerSchool

1. Visit www.acps.k12.va.us/parentaccess
2. Click the **'Log in to PowerSchool Parent Access'** button and enter your username and password.
3. At the top-left corner of the screen in PowerSchool, click the name of the child you want to complete the forms for. You will need to complete the forms separately for each child.
4. Click on **'Back to School Forms'** on the lefthand menu.
5. Click the globe icon in the top right to choose your language.
6. Follow the steps to complete and submit the forms.
7. Repeat steps 3-6 for each ACPS student in your family.

Adding Additional Children to Your Account

1. Visit www.acps.k12.va.us/parentaccess
2. Click the **'Log in to PowerSchool Parent Access'** button and enter your username and password.
3. Once logged in, click on **'Account Preferences'** then the **'Student'** tab and the **'Add'** button.
4. Enter your child's 'Access ID' and 'Access Password' listed on the letter you received in the mail. **Don't have this information? Complete the Parent Access Help Form at www.acps.k12.va.us/ps-help.**
5. You can now access each child's academic information by clicking on their name at the top-left corner of the screen.

Forgot Your Username or Password?

1. Visit www.acps.k12.va.us/parentaccess
2. Click the **'Forgot Your Password or Username?'** button.
3. You will be prompted to input some information and the system will send a recovery code to your email.

STUDENT INFORMATION

Student's Last Name: _____ First Name: _____ Middle Name: _____

Student and Primary Parent/Guardian Address: Street: _____ Apt: _____

City: _____ State: _____ Zip: _____

PARENT/GUARDIAN INFORMATION**Guardian/Primary Contact:***This is the parent/legal guardian with whom the student lives most of the week, and the main contact regarding the student.*

Last Name: _____ First Name: _____ Relationship to student: _____

Address Street: _____ Apt: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Is your home phone a cell phone? Yes No

Cell Phone: _____ Day Phone: _____ Email Address: _____

Additional Email Used for Communication: _____

Parent/Guardian's preferred language of communication? _____

Mother:

Last Name: _____ First Name: _____

Home Phone: _____ Is your home phone a cell phone? Yes No

Cell Phone: _____ Day Phone: _____

Father:

Last Name: _____ First Name: _____

Home Phone: _____ Is your home phone a cell phone? Yes No

Cell Phone: _____ Day Phone: _____

EMERGENCY CONTACTS

Please list three people we may call to make emergency decisions and/or pick up your child from school if the parent(s)/guardian(s) cannot be reached in the event of an emergency:

Emergency Contact #1 (Other than Parent/Guardian):

Name: _____

Relationship to student: _____ Phone: _____

Emergency Contact #2 (Other than Parent/Guardian):

Name: _____

Relationship to student: _____ Phone: _____

Emergency Contact #3 (Other than Parent/Guardian):

Name: _____

Relationship to student: _____ Phone: _____

By signing this form I am verifying that the information contained herein is correct.

Parent/Guardian Signature: _____ Date: _____



2022-23 ACPS Signature Form

Please review all sides of this form.

Student Name: _____ Grade: _____

School: _____

Parent/Guardian Name: _____ Date Form Completed: _____

Each section below refers to materials cited on this form, in the ACPS Family Handbook (www.acps.k12.va.us/familyhandbook), or in the ACPS Student Code of Conduct (www.acps.k12.va.us/codeofconduct). **After signing, please return to the student's school upon registration or within two weeks of the student's first day of school in ACPS. This form must be completed each school year.**

Section A: Student Code of Conduct

The Student Code of Conduct is made available to every family each school year. By signing this section and returning this form, parent(s)/guardian(s) shall not be deemed to waive, but do expressly reserve, their rights to protect by the Constitution or laws of the United States and/or the Commonwealth of Virginia, and shall have the right to express disagreement with the school division's policies and or decisions. The Student Code of Conduct, required by law, contains guidelines and rules for Responsible Computer System Use Policy for Students; Compulsory School Attendance; Standards of Student Conduct; Equity and Excellence Policy; Bullying Reporting Form; and Honor Code. Parents/guardians have a duty to assist ACPS schools in enforcing the standards of student conduct and compulsory school attendance. Parents/guardians have a responsibility to understand the Code of Conduct, promote proper student conduct, assist the school with the discipline of the student, and meet with school officials if requested to discuss matters related to discipline and school attendance. The law also requires that parents/guardians sign a statement showing that they know their responsibilities.

Parent/Guardian Signature: _____

Student Signature: _____

Section B1: Student Directory Information (Family Educational Rights and Privacy Act / FERPA)

Directory information includes a student's name, address, school, photograph, awards and honors, etc. (It does not include the student's social security number.) The primary use of directory information is to publish student information in school-affiliated publications. A full list of directory information is available in the ACPS Family Handbook. ACPS may disclose directory information without written consent, unless the parent/guardian indicates below that the student's information may not be released.

_____ **Do NOT** release the student's directory information, except as required by state or federal law, from the date this form is signed until September 15, 2023. **I understand this means that information about and photographs featuring the student will be excluded from school publications such as yearbooks, honor roll listings, and printed graduation/sports/theatrical programs.**

Section B2: PTA Directories and School-Related Organizations

Many school PTAs and School and Community Education organizations produce an annual directory for families. However, according to Virginia law, no school may disclose the address, telephone number, or email address of a student (unless required by law or as described in the ACPS Family Handbook), unless the parent/guardian affirmatively consents in writing.

_____ **YES, ACPS may** release the student/family **telephone number** and **email address** to PTAs, booster organizations, and other school-related organizations from the date this form is signed until September 15, 2023.

Section C: Media Participation

Throughout the school year, the student's school or ACPS may want to share photographs or videos of the student, pictures of their art or classwork, passages from their writings or quotations from class discussions or educational presentations. This includes images on the ACPS website, in ACPS videos, in social media, in school division newsletters, presentations or publications, in school publications (including yearbooks and programs), or shared with third parties including but not limited to local or national media (television, online and print publications).

_____ Do NOT use the student's photograph, image, voice, writings, classwork or artwork in any of the ways described above from the date this form is signed until September 15, 2023.

Section D: Responsible Use for Technology and Social Media

The responsible use policies for technology and social media are available in the Student Code of Conduct. Please review these policies and sign below.

Parent/Guardian Signature: _____

As a student, I agree to comply with the guidelines on technology and the internet as written in the Student Code of Conduct.

Student Signature: _____

Section E: Student Record Information

(For High School Parents – 11th and 12th Graders ONLY)

Section 9528 of the No Child Left Behind Act of 2001 requires school systems to provide military recruiters and institutions of higher education with secondary students' names addresses, and telephone listings upon request. However, parents/guardians (or a student if they are 18 or a legally emancipated minor) may request that the student's name, address and telephone listings not be released without prior written consent. ACPS is, by this form, notifying you of your right to request that your child's information not be released. If you do **NOT** check any of the options below, the student's information will be released when requested by a military recruiter, prospective employer or an institution of higher education for school year 2022-23.

Please check any of these groups if you **do NOT** want them to receive the student's information:

_____ Do NOT release the student's information to **Military Recruiters**

_____ Do NOT release the student's information to **Colleges/Other Educational Institutions**

_____ Do NOT release the student's information to **Prospective Employers**

Section F: Book Contract

I hereby agree to replace or pay for any or all textbooks or library books that may be retained, destroyed, lost, or misused, as well as pay all damages caused by the extraordinary wear or use, as assessed by the school.

Parent/Guardian Signature: _____

Section G: School Bus Regulations

School bus regulations are provided in the ACPS Family Handbook. I have read and understand the regulations for students riding a school bus and agree to assume full responsibility for the student's conduct on the school bus.

Parent/Guardian Signature: _____

I have read and understand the regulations for students riding a school bus and agree, as a passenger, to abide by these regulations.

Student Signature: _____

Section H: Family Life Education

For Family Life Education (FLE) opt out information, please visit the following URL or scan the QR code:

<https://acps.cc/FLE>



Section I: School Counseling

ACPS commits to providing each student with a comprehensive and developmentally appropriate school guidance and counseling program that is aligned with state and American School Counselor Association (ASCA) standards. Through **individual, small group, and classroom guidance**, ACPS counselors assist students in their academic, personal-social, and career development:

- **Academic Counseling (Academic Advising):** Academic guidance which assists students and their parents/guardians to acquire knowledge of the curricula choices available to students, to plan a program of studies, to arrange and interpret academic testing, and to seek post-secondary academic opportunities.
- **Career Counseling (Career Advising):** Career guidance which helps students to acquire information and plan action about work, jobs, apprenticeships, and post-secondary educational and career opportunities.
- **Personal/Social Counseling:** Counseling which assists a student to develop an understanding of themselves, the rights and needs of others, how to resolve conflict and to define individual goals, reflecting their interests, abilities and aptitudes.

Parents/guardians may opt their child out of academic, career, and/or personal/social counseling. An opt-out choice will be provided annually and will remain in effect for the entirety of this school year unless the opt-out request is rescinded by the parents/guardians in writing prior to the end of the school year. Parents/guardians who previously submitted an opt-out choice for counseling and would like to opt-out for the 2022-23 school year will need to re-submit their requests:

- A parent/guardian who opts to have their child excused from academic or career counseling **shall have sole responsibility to ensure that all academic and graduation requirements are fulfilled.**
- Parents/guardians may review materials to be used in school counseling programs by contacting their child's school counselor.
- In no event shall parent/guardian consent be required for short duration personal/social counseling which is needed to maintain order, discipline or a productive learning environment.

Please check any of these domains if you do NOT want your child to receive any or all school counseling services. **No action is required if you wish for your child to receive counseling services:**

_____ **Do NOT allow my child to participate in Academic Counseling**

_____ **Do NOT allow my child to participate in Career Counseling**

_____ **Do NOT allow my child to participate in Personal/Social Counseling**

Parent/Guardian Signature: _____

Student's Last Name: _____ First Name: _____

Date of Birth: _____ Grade: _____ School Year: _____

STUDENT HEALTH CONDITIONS

Check all boxes that apply to the student.

ALLERGIES Yes No

Allergy Type:

- Food List food(s): _____
- Medication List medication(s): _____
- Bee stings or insect bites
- Other: _____

Date of last severe reaction: _____

Date of last hospital or emergency room visit due to allergies: _____

Currently prescribed medications and treatments for allergies:

- Oral antihistamine (Benadryl, etc.)
- Epinephrine Has Epinephrine Injector
- Other: _____

FOOD RESTRICTIONS Yes No

- Due to Gastrointestinal (Digestive) distress List food(s): _____
- Due to religious or other preferences List food(s): _____

ASTHMA Yes No

Currently prescribed medications and treatments for asthma:

- Daily control (prevention) medication
- As needed (rescue) medication

Date of last hospital or emergency room visit due to asthma: _____

DIABETES Yes No

Date of last hospital or emergency room visit due to diabetes: _____

Does the student's diabetes require medication and/or blood testing IN SCHOOL?

- No
- Yes List medication(s): _____

SEIZURE DISORDER Yes No

Does the student's seizure disorder require medication IN SCHOOL?

- No
- Yes List medication(s): _____

Date of last seizure: _____

Date of last hospital or emergency room visit due to seizure: _____

OTHER HEALTH CONDITIONS Yes No

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> ADHD | <input type="checkbox"/> Congenital Heart Defect | <input type="checkbox"/> Obstructive Sleep Apnea | <input type="checkbox"/> Cancer |
| <input type="checkbox"/> Autism | <input type="checkbox"/> Hemophilia | <input type="checkbox"/> Nutritional Disorder | <input type="checkbox"/> Chronic Infection (Hepatitis C, HIV) |
| <input type="checkbox"/> Cerebral Palsy | <input type="checkbox"/> Sickle Cell Disease | <input type="checkbox"/> Physical Disability | <input type="checkbox"/> Congenital/Chromosomal Disorders |
| <input type="checkbox"/> Developmental Delay | <input type="checkbox"/> Cystic Fibrosis | <input type="checkbox"/> Eczema | <input type="checkbox"/> Depression |

Other physical or mental health conditions: _____

Does the student's condition require IN SCHOOL USE of the following?

Medications: No Yes List medication(s): _____

Special procedures: No Yes List procedure(s): _____

Special equipment: No Yes List equipment: _____

VISION CONDITIONS Yes No

- Glasses
- Contacts
- Non correctable
- Other: _____

HEARING CONDITIONS Yes No

- Hearing aid(s)
- Non correctable
- Other: _____

STUDENT HEALTH CARE AND HEALTH COVERAGE

Does the student have health insurance? No Yes Name of health insurance company: _____

Name of student's primary care doctor: _____ Phone: _____

Does the student have dental insurance? No Yes Name of dental insurance company: _____

Name of student's dentist: _____ Phone: _____

PARENT/GUARDIAN AUTHORIZATION

In the case of an emergency, school staff will call 911. Every attempt will be made to contact a parent, legal guardian or emergency contact. Students will be transported to the nearest Emergency Room unless the parent is on the school premises to assume responsibility for the child.

The parent/guardian is responsible for providing the school with any medication, special food, supplies, or equipment that the student requires during the school day. Check with the school nurse or registrar to obtain correct medication and procedural forms. If an individual school health care plan is indicated, the parent/guardian is responsible for providing the school nurse with necessary medical information, appropriate authorization forms and written consent to exchange information with the child's physician.

I, _____ (do___) (do not___) authorize my child's health care provider and designated provider of health care in the school setting to discuss my child's health concerns and/or exchange information pertaining to this form. *This authorization will be in place until or unless you withdraw it. You may withdraw your authorization at any time by contacting your child's school. When information is released from your child's record, documentation of the disclosure is maintained in your child's health or scholastic record.*

Parent/Guardian Signature: _____ Date: _____

Help Us Get the Resources We Need at:

Cora Kelly

Ferdinand T. Day

Francis C. Hammond

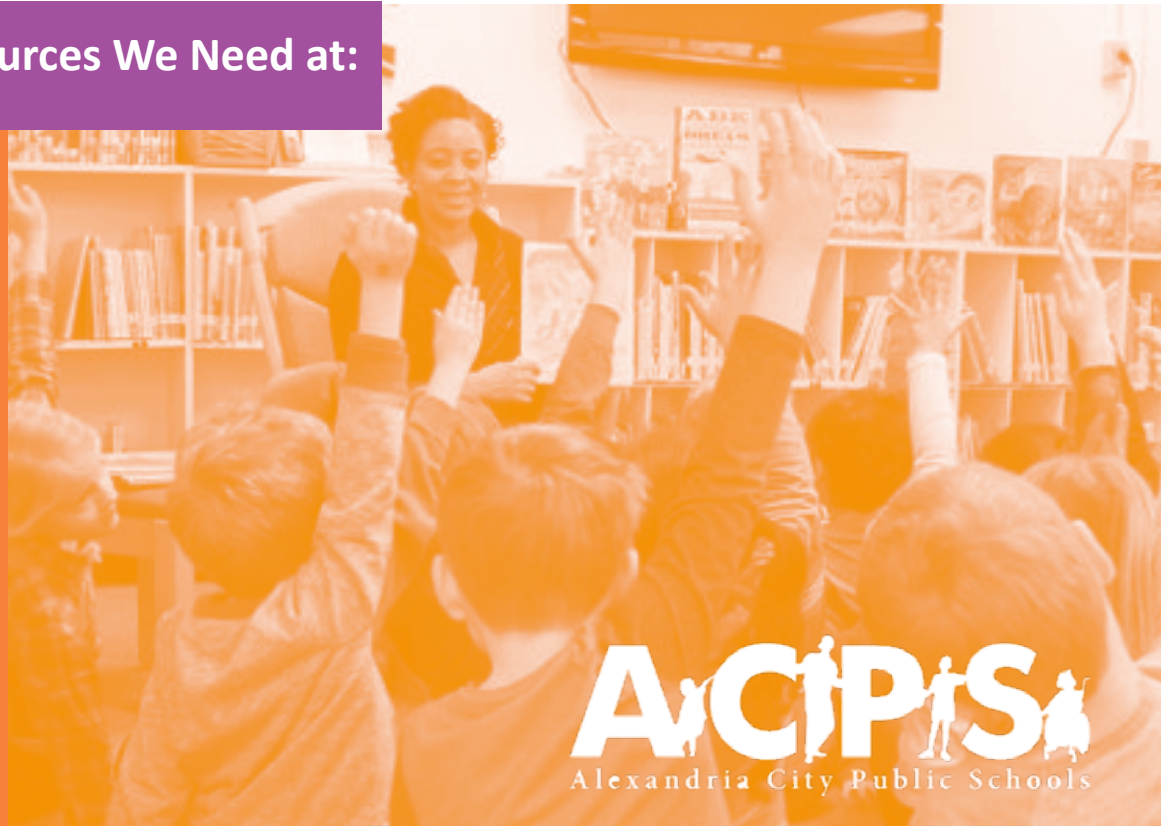
James K. Polk

Jefferson-Houston

John Adams

Patrick Henry

William Ramsay



MORE

Healthy &
Nutritious Meals



MORE

Classroom &
Teacher Resources



MORE

Health &
Wellness Services



MORE

Enrichment
Programs

**Complete the ACPS
Family Income Form.
It will mean MORE
for your school!**

When you answer three short questions on the 2022-23 Family Income Form, you are helping make sure your school gets the resources needed to support all students. Please complete your form at www.acps.cc/cep2022.

Questions? Please contact ask@acps.k12.va.us or your school's front office.



Scan the QR Code to complete your ACPS Family Income Form.



STUDENT-PARENT SURVEY

Survey Date 10/30/2022

Each Section **MUST** be Completely Filled in Where Applicable

ACPS may receive federal grant funds for enrolling students who are federally connected. If no parent or guardian in your household lives or works on federal property, please complete Section 1 and sign and date at the bottom of the form.

Section 1: STUDENT INFORMATION

Student Name: Last	First	Middle	Student ID
Address: Number & Street	City	State	Zip Code
Name of School	Grade	Birth Date	Home Phone

If the above property is federal property, please enter the name of the property

Section 2 – EMPLOYMENT INFORMATION: CIVILIANS ONLY working on federal property

Parent/Guardian Name: Last	First	MI	Employer Name
Employer Address (Physical Location)	Building Number & Street	City	State Zip Code
Federal Property Name (see back side for list of eligible federal properties)			
Federal Property Address	Number & Street	City	State Zip Code

Section 3 – PARENT/GUARDIAN EMPLOYMENT INFORMATION: UNIFORMED SERVICES PARENT/GUARDIAN

Enter information in this section if either parent/guardian was on active duty in the Uniformed Services of the United States on the survey date. (If both parents in the household are in the military at the time of the survey date, please fill out a second form).

Student is not military connected – (Do not complete any further in Section 3)

Branch of Active Service:

- Air Force Army Coast Guard Marine Corps Navy
- The Commissioned Corps of the National Oceanic and Atmospheric Administration – NOAA
- The Commissioned Corps of the of the U.S. Public Health Services – USPHS
- National Guard or Reserves mobilized by Presidential Executive Order 13223 of 9/14/2001 and Title 10 USC (Attach Copy of Activation Orders)
- National Guard; Reserve
- Reserve; Student is a dependent of a member of the Reserve Forces (Army, Navy, Air Force, Marine Corps or Coast Guard).

Parent/Guardian Name (Last, First and MI)
Military Rank/Grade

Section 4 – PARENT/GUARDIAN EMPLOYMENT INFORMATION: FOREIGN MILITARY

Enter information in this section if either parent/guardian was on **active duty** on the survey date. If not, skip this section.

Parent/Guardian Name (Last, First and MI)	Foreign Government Name
Military Rank/Grade	Branch of Service

This information is used to support our request for federal funds under the Impact Aid Program (Title VIII of the Elementary and Secondary Act). This information may be provided to the U.S. Department of Education if our application for federal funds is audited. This form must be signed and dated for ACPS to receive it fair share of federal funds.

By signing this form, I am certifying that all typed and written information on his form is accurate and complete as of the survey date.

Signature of Parent/Guardian

Date [mm/dd/yyyy]

Eligible Federal Properties

- Albert V Bryan Federal Courthouse, 401 Courthouse Sq., Alexandria, VA 22314
- Mt. Weather EOC, 19844 or 19850 Blue Ridge Mountain Rd, Bluemont, VA 20135
- Arlington National Cemetery, Arlington, VA 22211
- MVB Bostetter, Courthouse, 200 S Washington St, Alexandria, VA 22314
- CIA Langley Campus, 1000 Colonial Farm Rd, McLean, VA22101
- Naval Surface Warfare Center, 17320 Dahlgren Rd, Dahlgren, VA 22448
- CIA NRO, 14675 Lee Rd, Chantilly, VA 20151
- NOAA NWS, 43858 or 43872 Weather Service Rd, Sterling, VA 20166
- Dulles International Airport, 1 Saarinen Ci, Sterling, VA 20166
- Pentagon [include bldg location in street address], Arlington, VA 22202
- FAA Air Route Traffic Control Center, 825 E Market St, Leesburg, VA20176
- Ronald Reagan National Airport, 1 Aviation Ci, Arlington, VA 22202
- FAA Potomac TRACON, 3699 Macintosh Dr, Warrenton, VA 20187
- Ronald Reagan National Airport, 2401 Smith Bv, Arlington, VA 22202
- FBI Academy & Laboratory, 2501 Investigation PW, Quantico, VA22135
- Steven F Udvar Hazy Ctr, 14390 Air and Space Museum Pw, Chantilly, VA 20151
- Fort Belvoir 9910 Tracy Loop, Fort Belvoir, VA 22060
- Turner-Fairbank HRC, 6300 Georgetown Pike, McLean, VA 22101
- Fort Belvoir North (NGA), 7500 Geoint Dr, Springfield, VA 22150
- US Army National Guard, 111 S George Mason Dr, Arlington, VA 22204
- Franconia GSA LOC 6808, 6810, 6999, or 7000 Loisdale Rd, Springfield, VA 22150
- US Army Reserve Center, 6901, or 6978 Telegraph Rd, Alexandria, VA 22310
- George P Schulz NFATC, 4000 Arlington Bv, Arlington, VA 22204
- US Attorney's Office (USDOJ), 2100 Jamieson Ave, Alexandria, VA 22314
- George Washington Memorial Parkway, 700 GW Pw, VA 22101
- US Coast Guard Radio Station, 7323 Telegraph Rd, Alexandria, VA 22315
- Henderson Hall, 1555 Southgate Rd, Arlington, VA 22214
- US Geological Survey, 12201 Sunrise Valley Dr, Reston, VA 20192
- Humphreys Engineer Center, 7701 Telegraph Rd, Alexandria, VA 22315
- Warrenton Training Center – Site A, 8094 Shipmadilly Ln, Warrenton, VA 20186
- Hybla Valley Office Bldg, 6801 Telegraph Rd, Alexandria, VA 22306
- Warrenton Training Center – Site B, 7471 Bear Wallow Rd, Warrenton, VA 20186
- Joint Base Myer-Henderson Hall, Fort Myer, VA 22211
- Warrenton Training Center – Site C, 7248 Sumerduck Rd, Remington, VA 22734
- Marine Corps Base Quantico, 3250 Catlin Ave, Quantico, VA 22134
- Warrenton Training Center – Site D, 22129 Confederate Rd, Elkwood, VA 22718
- Mark Center Federal Office Bldg, 1897 N Beauregard St, Alexandria, VA 22350
- Wolf Trap Farm Park, 1551 Trap Rd, Vienna, VA 22182