Note:

A District may accept a parent or guardian request for a student to enroll in prekindergarten or kindergarten that is submitted to the District on a form provided by TEA or on the form provided by the District at FD(EXHIBIT)—I.

See FFC regarding support services for students in foster care. See FDC regarding students experiencing homelessness.

An <u>Affidavit of Student Admission Information (For Participants in Address</u> Confidentiality Program)¹ can be found on TEA's website.

A Request for Food Allergy Information can be found in the <u>Guidelines for the Care</u> of Students With Food Allergies at Risk for Anaphylaxis.²

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¹ Affidavit of Student Admission Information (For Participants in Address Confidentiality Program): https://tea.texas.gov/about-tea/government-relations-and-legal/address-confidentiality-program
² Guidelines for the Care of Students With Food Allergies at Risk for Anaphylaxis:

https://www.dshs.texas.gov/sites/default/files/schoolhealth/pdf/FINAL%20Guidelines%20for%20Food%20Allergies%203.2023.pdf

Exhibit A—Affidavit of Student Admission Information (for Student Living Separate and Apart from Parent or Guardian)

Notice to person enrolling the student: A person who knowingly falsifies information on a form required for a student's enrollment in a school district is liable to the district for tuition or other costs, as provided in Texas Education Code 25.001(h), if the student is not eligible for enrollment but is enrolled on the basis of the false information. In addition, presenting false information or false records is a criminal offense under Texas Penal Code 37.10.

Students meeting the definition of an unschooled asylee or refugee [see EKBA] are eligible for certain exemptions from state testing. If you are enrolling a student who meets the definition of an unschooled asylee or refugee, please provide information about that status to the administration.

My name is I am over 18 years of age and am legally					
competent to testify. I have per true and correct.	rsonal knowledge of the facts set forth herein, and they are				
	(name of student) seeks admission as a student to School District.				
The student is (number of	of) years of age on September 1 of this scholastic year.				
The student currently resides a	at:				
The name and address of the	parent or legal guardian of the student are:				
My relationship to the student	is:				
purpose of participation in extr	School District is not for the primary acurricular activities. The student has established a residence udent's parent, guardian, or other person having lawful control court.				

The student:

- 1. Has not engaged in conduct or misbehavior that has resulted in removal to a disciplinary alternative education program or expulsion within the preceding year;
- 2. Has not engaged in delinquent conduct or conduct in need of supervision and is not on probation or other conditional release for such conduct; and
- Has not been convicted of a criminal offense and is not on probation or other conditional release.

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Name of	affiant (print or type):
Affiant's	signature:
STATE C	OF TEXAS
the oath <i>of identit</i> going ins	EME, (insert the name and character of the officer), on this onally appeared (name), known to me (or proved to me on of or through (description y card or other document)) to be the person whose name is subscribed to the forestrument and acknowledged to me that he/she executed the same for the purposes sideration therein expressed.
	nder my hand and seal of office on this the (date) day of (year).
Notary P	ublic, State of Texas
Note:	Separate copies of this form should be completed and signed by the student's parent and by the adult with whom the student is residing in the District.

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FD(EXHIBIT)-RRM

FD

Exhibit B—Affidavit of Student Admission Information (for Student Residing with Parent, Guardian, or Other Person Having Lawful Control of the Student Under Order of a Court)

Notice to person enrolling the student: A person who knowingly falsifies information on a form required for a student's enrollment in a school district is liable to the district for tuition or other costs, as provided in Texas Education Code 25.001(h), if the student is not eligible for enrollment but is enrolled on the basis of the false information. In addition, presenting false information or false records is a criminal offense under Texas Penal Code 37.10.

Students meeting the definition of an unschooled asylee or refugee [see EKBA] are eligible for certain exemptions from state testing. If you are enrolling a student who meets the definition of an unschooled asylee or refugee, please provide information about that status to the administration.

(To be completed by the parent or guardian or other person having lawful control of

the student.)	
My name iscompetent to testify. I have per true and correct.	. I am over 18 years of age and am legally sonal knowledge of the facts set forth herein, and they are
	(name of student) seeks admission as a student to School District.
The student is (number o	of) years of age on September 1 of this scholastic year.
The student currently resides a	at:
The name and address in the I having lawful control of the stu	District of the student's parent, legal guardian, or other person dent under order of a court:
` , ` ,	tly under an order for placement in an alternative education n order. If the child is under any such order, please provide ander.

Name of affiant (print or type):	
Affiant's signature:	
STATE OF TEXAS COUNTY OF	
the oath ofidentity card or other document)) to	(insert the name and character of the officer), on this (name), known to me (or proved to me on or through (description of o be the person whose name is subscribed to the foregoto me that he/she executed the same for the purposes and
GIVEN under my hand and seal of (month), (year).	f office on this the (date) day of
Notary Public, State of Texas	

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Exhibit C—Resolution of the Board Regarding Substantial Care by a Resident Grandparent

WHEREAS. Texas Education Code 25.001(b)(9) requires the District to admit a nonresident student into the District if the grandparent resides in the District and provides a substantial amount of after-school care for the student as determined by the Board, NOW, THEREFORE, BE IT RESOLVED that for the purposes of admitting a student under this provision, the Board of _____ School District defines a substantial amount of after-school care as at least ____ (number of) hours per school day for ____ (number of) days during the regular school week; BE IT FURTHER RESOLVED that the Board authorizes the Superintendent to waive the Board-adopted substantial care definition on the basis of a student's extenuating circumstances. For a student who does not meet the Board-adopted substantial-care definition above, the Superintendent will consider the following criteria, including but not limited to: 1. The number of hours in a typical school day the grandparent provides after-school care; 2. The number of days in a typical school week the grandparent provides after-school The scheduling and commuting needs of the student's parent; 3. Any unique medical and/or developmental needs of the student; and 4. 5. Any other relevant issues. Adopted this ____ (date) day of ____ (month), ____ (year), by the Board.

Board President's signature:

Board Secretary's signature:

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Exhibit D—Affidavit of Student Admission Information (for Nonresident Student in a Grandparent's After-School Care)

Notice to person enrolling the student: A person who knowingly falsifies information on a form required for a student's enrollment in a school district is liable to the district for tuition or other costs, as provided in Texas Education Code 25.001(h), if the student is not eligible for enrollment but is enrolled on the basis of the false information. In addition, presenting false information or false records is a criminal offense under Texas Penal Code 37.10.

Students meeting the definition of an unschooled asylee or refugee [see EKBA] are eligible for certain exemptions from state testing. If you are enrolling a student who meets the definition of an unschooled asylee or refugee, please provide information about that status to the administration.

I am over 18 years of age and am legally competent to testify. I have personal knowledge of

(To be completed by the parent or guardian.)

the facts se	forth herein, and they are true and correct.	Ü
My name is	(name). I am the parent or legal guardian of the control of	of
This studen	and I reside at i School District. My phone number is	in
This studen	is (number of) years of age on September 1 of this scholastic year a ends (name of campus) in that district.	and
This studen after-school	care as follows:	child
1. Actual	hours per day: a.m./p.m. to a.m./p.m.	
2. Numbe	er of school days per week:	
3. Month	s that the student's grandparent will provide this care:	
•	otify the Superintendent within three school days of any changes to the after described above.	er-
the student'	authorize the employees of School District to easily authorize the employees of	ner-
Name of aff	ant (parent/guardian) (print or type):	
Affiant's sig	nature:	

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ADMISSIONS

STA	STATE OF TEXAS	
СО	COUNTY OF	
day the <i>ide</i> ing	day personally appeared or throug the oath of or throug identity card or other document)) to be the per	t the name and character of the officer), on this (name), known to me (or proved to me on h (description of son whose name is subscribed to the forego- e/she executed the same for the purposes and
	GIVEN under my hand and seal of office on the (month), (year).	s the <i>(date)</i> day of
Not	Notary Public, State of Texas	
(To	(To be completed by the grandparent who v	will provide after-school care.)
	l am over 18 years of age and am legally comp the facts set forth herein, and they are true and	
1.	1. My name is	I am the grandparent of this child.
2.	2. I reside at	School District. My telephone num-
3.		ision of this child for the purpose of providing gree to notify the Superintendent within three chool care described above.
Naı	Name of affiant (grandparent) (print or type): _	
Affi	Affiant's signature:	
STA	STATE OF TEXAS	
СО	COUNTY OF	

BEFORE ME,	(insert t	the name and ch		, .
this day personally appeared		<i>(name),</i> know	n to me (or prov	/ed to me or
the oath of	or through		(des	cription of
identity card or other document)) to be the persor	n whose name is	subscribed to t	he forego-
ing instrument and acknowledge consideration therein expressed	. GIVEN under m	y hand and sea	•	•
(date) day of	(month),	_ (year).		
Notary Public, State of Texas				

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Exhibit E—Letter Requesting Power of Attorney or Authorization Agreement

Date:
Dear parent/guardian:
I understand that you wish to have your child reside with an adult other than his or her parent, legal guardian, or managing conservator and attend school in School District. The District requires that a Power of Attorney or an Authorization Agreement for a nonparent caregiver be provided, clarifying which adult will be responsible for your child
For this purpose, two forms are referenced below:
 A sample Power of Attorney. [See Exhibit F] Please note that you are not required to use this particular sample, although it does contain those items the District requires to be included in a Power of Attorney. This Power of Attorney is revocable at any time, and the District should be notified within five days of such revocation. Also note that the du- ration of this Power of Attorney is for the current school year only.
 An <u>authorization agreement</u>¹ may be found on the Texas Department of Family and Protective Services website. An authorization agreement is revocable at any time. The District should be notified within five days of revocation, expiration, or any changes made to the authorization agreement.
If you have any questions, please do not hesitate to call the office of the Superintendent at (phone number).
Sincerely,
District Representative
¹ Authorization Agreement for Voluntary Adult Caregiver form and instructions (under State of Texas forms): https://www.dfps.state.tx.us/site_map/forms.asp

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Exhibit F—Power of Attorney

STATE OF TEXAS	
COUNTY OF	
KNOW ALL BY THESE PRESENTS:	
That I, (parent) of (city, state, zip), point (name of attorney-in-fact) as my true	do hereby ap-
torney-in-fact for me and in my name, place, and stead to take any and all accise any and all powers that I could take or exercise for the purpose of my chame), in attendance in (name), in attendance in School District as set forth below.	tions and exer-
School District as set forth below.	
The following acts and powers are granted by this Power of Attorney:	
1. To receive and discuss the student's class work with appropriate District	employees.
To examine and receive copies of the student's School District records and report cards.	
3. To give permission for the student's participation in various activities suclimited to, field trips and other student travel.	ch as, but not
4. To be notified concerning medical problems and to give consent for the ment of the student.	care and treat-
5. To be notified and consulted concerning the student's attendance and ta	ardiness.
6. To give permission for any disciplinary actions involving the student by I ees.	District employ-
7. To perform any other duties, responsibilities, and privileges normally afferents of students in the District.	orded to the par-
I hereby ratify and confirm whatever such attorney-in-fact will and may do on student by virtue of this Power of Attorney. This Power of Attorney may be vo in writing. A copy of any written revocation will be delivered to School District within five calendar days of revocation. I declare that all powe attorney-in-fact will be exercisable by my attorney-in-fact only for the school year, unless sooner revoked in writing.	luntarily revoked
IN WITNESS WHEREOF, I have hereunto set my hand this (date) day of (month), (year).	of
Parent's signature:	

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COUNTY OF	
this day personally appeared the oath of identity card or other document)) to b	(insert the name and character of the officer), on (name), known to me (or proved to me or or through (description of e the person whose name is subscribed to the foregome that he/she executed the same for the purposes and
GIVEN under my hand and seal of of (month), (year).	fice on this the <i>(date)</i> day of
Notary Public, State of Texas	

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Exhibit G—Notice of Revocation of Power of Attorney or Authorization Agreement

Note:	A copy of your original Power of Attorney or Au mitted with this notice.	thorization Agreement must be sub-
Attorney of	re is to inform or Authorization Agreement, attached, for s been revoked, effective <i>(date)</i> .	_ School District that the Power of (student's
Parent's r	name (print):	
Parent's s	signature:	

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Exhibit H—Request for Information on Military-Connected Students

Education Code 25.006 requires the District to collect data related to students with connections to the military to submit to the Texas Education Agency. Please complete the following form, sign at the bottom, and return to your child's school.

Stud	ent's name (print):			
Stud	ent ID number:			
-	ck all that apply) sudents in kindergarten–grade 12:			
	Student is a dependent of an active duty member of the U.S. military.			
	Student is a dependent of a current member of the Texas National Guard.			
	Student is a dependent of a current member of a reserve force in the U.S. military.			
	Student is a dependent of a former member of one of the following:			
	□ U.S. military;			
	□ Texas National Guard (Army, Air Guard, or State Guard); or			
	☐ A reserve force in the U.S. military.			
	Student was a dependent of a member of the military or reserve force in the U.S. military who was killed in the line of duty.			
	Student is not a military-connected student as defined above.			
-	ide this section if your District has a prekindergarten program to follow Educa- Code 29.153.]			
For	rekindergarten students:			
	A dependent of an active duty member of the armed forces of the United States including the state military forces or a reserve component of the armed forces who is ordered to active duty by proper authority.			
	The child is a member of the armed forces of the United States including the state military forces or a reserve component of the armed forces who is injured or killed while serving on active duty.			
Note	A student remains eligible for enrollment if the child's parent or guardian leaves the armed forces or is no longer on active duty after the child begins a prekindergarten class.			
Pare	nt's or guardian's signature: Date:			

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Exhibit I—Parent Election Form for Student to Enroll in Prekindergarten or Kindergarten

Note to administrator: Subject to certain legal requirements, the parent or guardian of a child may make an election in writing to the District to request for the child to be enrolled in prekindergarten or kindergarten under certain circumstances. [See FD and EIE] The parent or guardian may submit a request form provided by TEA or this form provided by the District. If the District disagrees with the parent's or guardian's election, the District must take certain action required by law.

Note:

As authorized by law, a parent or guardian may choose to enroll a child in prekindergarten or kindergarten if the child was eligible for enrollment the previous school year but did not enroll and has not yet enrolled, respectively, in kindergarten or first grade for the upcoming school year. The parent or guardian must make the election in writing. If the District does not agree with a parent's or guardian's election, then the District will convene a retention committee to meet with the parent or guardian either in person or through an alternative means agreeable to the parent or guardian.

The District retention committee will discuss the merits of and/or concerns with the parent's or guardian's enrollment election, and review and consider any available academic information.

If the parent or guardian does not meet with the committee, the student will be enrolled in accordance with the student's eligibility under law and local policy for regular admissions. After participating in the committee meeting, the parent or guardian may decide whether to keep or change the original selection of enrollment for the student. The District will abide by the parent's or guardian's final decision. Please contact the campus principal with any questions.

As authorized by state law, I,quest that my child		, (print parent or guardian name) hereby re- (print name of child):
Plea	se check one of the following.	
		se my child was eligible to enroll in prekindergar- Code 29.153(b) and has not yet been enrolled in
	Be enrolled in kindergarten because school year and has not yet been enr	my child was eligible to enroll in kindergarten last olled in first grade.

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Current campus, if applicable:	
Parent's or guardian's printed name:	
Parent's or guardian's relationship to the child:	
Parent or guardian signature:	
Date:	
For District's Internal Use Only	
District granted request without	☐ Yes (If District grants the request, no further action is necessary.)
disagreement:	☐ No (If District disagrees with the request, refer to campus retention committee.)
Date and method of parent/guardian notification about retention committee meeting:	
Date of the meeting:	
Parent/guardian attended meeting:	□ Yes □ No
Grade level placement recommended by retention committee:	
Parent/guardian agreement with retention	□ Yes
committee recommendation:	□ No
Final enrollment action by the District after retention committee meeting:	

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Exhibit J—District Response Form to Parent Request to Enroll Student in Prekindergarten and Kindergarten

Note to Administrator: This sample form is not required by law but may be modified for use by a campus administrator whenever a retention committee has been convened as required by law because the District is concerned about a parent's or guardian's election [see FD(EXHIBIT)—I] to enroll a child in prekindergarten or kindergarten instead of, respectively, kindergarten or first grade. After participating in the committee meeting and discussion, the parent or guardian is authorized by law to decide whether to enroll the student in the grade level originally elected on the selection form and the District must abide by the parent's or guardian's final decision. If the parent or guardian does not meet with the retention committee as requested, the District will enroll the child in accordance with the student's eligibility under law and local policy for regular admissions. If the District has no objections to the parent's or guardian's election for enrollment, a retention committee is not required, and this form will not be necessary.

Dat	e:		
Dea	ar parent or guar	dian of	(insert child's name):
We	received your re	equest to enroll your child in: <i>(che</i>	eck one)
	Prekindergarte	n	
	Kindergarten		
Ins	tead of: (check o	one)	
	Kindergarten		
	First grade		
tent	ion committee to	review your request. We would	required by law, we are convening a relike to meet with you on (date) (time).
	is does not work meeting arrange		chedule this meeting or make alterna-
The	retention comm	ittee will be composed of the follo	owing individuals as required by law:
•	You, the studer	nt's parent or guardian, or other p	parent or guardian;
•	The principal o	r the principal's designee:	; and
•	The teacher wh (check one)	າo taught the grade in which the ເ	parent wants the student enrolled:
	□ Prekinder	garten	
	□ Kindergar	ten	

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The	reter	ntion committee will address the following topics as required by law:
•	Disc	cuss the merits of and concerns with retention in: (check one)
		Prekindergarten
		Kindergarten
•		iew and consider any available academic information to determine the student's ac- mic readiness for the next grade of: <i>(check one)</i>
		Kindergarten
		First grade
you abid trict	wish e by will e	have the opportunity after you have participated in this meeting to decide whether to enroll your child in the grade you have selected for your child. The District must your decision at that time. If you do not meet with the District as requested, the Disnroll the child in accordance with the student's eligibility under law and local policy or admissions.
Plea	ise d	o not hesitate to contact the campus principal with any questions.
Sinc	erely	,
Prin	cipal	

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