

# Parent Orientation for Kindergarteners 2024-2025

January 23, 6:00 pm



- Welcome to Newcastle Elementary      Dr. Tod Wood, Principal
- Family Liaison      Ina Ghangurde
- Newcastle PTSA      Mary Vickers
- Registration Materials\Timeline      Pam Stucky, Registrar
- Immunizations\Health Forms      Jamie Heintz, Nurse
- Q & A



## Family Partnership Liaisons

- Supports families new to the Issaquah School District
- Helps families navigate the school system
- Helps new families with registration process or enrollment verification process (interpretation to complete forms or to answer questions)
- Helps families find out about academic and financial resources available to students and families
- Helps facilitate events such as parent information night for culturally and linguistically diverse families.

**Please contact a Family Partnership Liaison or the school office if you need help completing any of the registration forms or if you have questions about the school.**

For more information: <https://www.issaquah.wednet.edu/family/cultural-and-family-partnerships>

**Liliana Medina (Español)**

Family Partnership Liaison

425-837-7141

[Medinal@issaquah.wednet.edu](mailto:Medinal@issaquah.wednet.edu)

**Wenli Mithal (中文)**

Family Partnership Liaison

425-837-7106

[MithalW@issaquah.wednet.edu](mailto:MithalW@issaquah.wednet.edu)

**Ina Ghangurde (Marathi, Hindi)**

Family Partnership Liaison

425-837-7008

[Ghangurdel@issaquah.wednet.edu](mailto:Ghangurdel@issaquah.wednet.edu)



## Ina Ghangurde

[ghangurdei@issaquah.wednet.edu](mailto:ghangurdei@issaquah.wednet.edu)

(425) 837-7008 (phone)

(252) 563-3498 (text)

*English, Marathi, Hindi*

*At Newcastle on Thursday morning but available any time*

### **The Family Liaison role:**

- Introduce, facilitate access and aid in navigation of appropriate school and District resources available to students and their families
- Work with registrar, school counselor, nurse and admin to connect and support families.
- Initiate and maintain verbal and written communication as appropriate with families, particularly our culturally and linguistically diverse families and traditionally marginalized groups.
- Support school in planning Family Partnership Events



# ♥ Welcome to Kindergarten



**When:** Wednesday, March 13, 2024 from 6:30 to 8:30 pm

**Where:** Zoom – Presentations in English, Español and 中文 [Register for the event](#)

**Who:** All parents and caregivers of incoming kindergarten students 2024-2025.

**What:** Information will include:

- Kindergarten preparedness
- general school day schedule (lunch and recess)
- classroom general information
- transportation
- immunization
- on-site before and after school care program
- differences between school systems in US vs some other countries



The event is designed for families **new to US public schools.**

If you need interpretation in another language (한국어, 日本語, русский or Tiếng Việt) or have any questions, please contact Ina Ghangurde at (425) 837-7008 [ghangurdei@issaquah.wednet.edu](mailto:ghangurdei@issaquah.wednet.edu) by Friday, March 1, 2024.





## We can help you in your language!

Please let us know if you need an interpreter or a document translated into your language—at no cost to you.

English

## ¡Podemos brindarle asistencia en español!

Por favor háganos saber si necesita un intérprete o un documento traducido a su idioma. Este servicio es gratuito.

Spanish

## Мы можем помочь вам с переводом на русский язык!

Сообщите нам, если вам нужен устный перевод или перевод документа на ваш язык—бесплатно для вас.

Russian

## Chúng tôi có thể giúp quý vị bằng tiếng Việt!

Xin cho chúng tôi biết nếu quý vị cần thông dịch viên hay cần phiên dịch tài liệu qua ngôn ngữ của quý vị—được miễn phí.

## 我們可以用中文向您提供幫助！

請告訴我們您是否需要我們向您提供免費口譯員服務或將文件翻譯成您使用的語言。

Chinese

## 한국어 지원 서비스가 제공됩니다!

통역사가 필요하시거나 귀하의 언어로 번역된 문서가 필요하시다면 저희에게 알려 주십시오. 부담하시는 비용은 없습니다.

Korean

## Ми можемо надати вам інформацію українською мовою!

Якщо вам потрібен перекладач або переклад того чи іншого документу українською мовою, просимо повідомити нам про це—послуга безкоштовна.

Ukrainian

## يمكننا مساعدتك باللغة العربية!

يرجى إعلامنا إذا ما كنت بحاجة إلى مترجم فوري أو إلى ترجمة مستند إلى لغتك، دون تكلفة عليك.

Arabic

# Completing forms and communicating with the school

Please let any school staff know if you need help completing forms or if you have questions.

# Newcastle Elementary PTSA



# What is PTSA?

What is PTSA? PTSA stands for Parent Teacher Student Association. PTSA is a volunteer association where parents, educators, students, and other citizens can be active in their schools and communities. The purpose of PTSA is to promote the welfare of children and youth at home, school and throughout the community.



# Some of the programs we fund & implement

**Teacher Grants**      **LionArt**      **Playground Equipment**      **Kinder Connect**

**Reflections**      **Science Enrichment Activities**      **Staff Appreciation**      **Book Fair**

**Spirit Wear**      **Yearbook**      **Angel Program**      **Fall Event**

**BE A PART OF OUR PTSA!**

# Why should you join?

## IT'S GOOD FOR YOU-- REALLY!

Volunteering is significantly related to well-being and self-reported health. (Wu, Tang et al., 2005; Piliavin and Siegl, 2007)

## BE IN THE KNOW

Access important school resources

## STRENGTH IN NUMBERS

Strengthen the village that helps raise your student



# Volunteer!

"We already have  
enough PTA  
volunteers" -said no  
one ever.



someecards  
user card





## Common Misconception



I DO NOT HAVE TIME TO JOIN THE  
PTSA

# FACT



YOU DO NOT NEED TO VOLUNTEER BY JOINING THE  
PTSA

JOINING THE PTSA SHOWS YOU ARE PLAYING AN ACTIVE  
ROLE IN YOUR STUDENT'S EDUCATIONAL EXPERIENCE.



[NEWCASTLEPTSA.ORG](http://NEWCASTLEPTSA.ORG)



SCAN ME



NEWCASTLE  
ELEMENTARY SCHOOL



JOIN THE  
PTSA



GET A PAW DECAL



[newcastleptsa.org](http://newcastleptsa.org)



SCAN ME

# Thank You!

[www.newcastleptsa.org](http://www.newcastleptsa.org)  
instagram: @newcastlelionsptsa  
facebook: Newcastle Elementary PTSA





## Qualifications for Kindergarten Registration

- Your child must be 5 by August 31, 2024.
- Live in Newcastle Attendance Area.
- Complete the online registration process.
- Provide required documents as requested following registration.





## Documents Required to Complete Online Registration

- Birth Certificate or Passport
- Record of Immunizations
- Purchase or Lease Agreement
- Utility Bill
- Parent/Guardian Picture ID



## Your Next Steps...

Once your online application is approved, Pam will contact you with a timeline to pick up your *Kindergarten Information Packet*.

This packet includes additional materials that are required and will need to be completed and returned to the office.

# Kindergarten Timeline 2024

## February

### Feb 1: Kindergarten Registration Opens

- All incoming 2024 Kindergarten student needs to complete the [ISD New Student Enrollment](#) website

### Feb 29: Kindergarten Registration due

### Kindergarten screener for your child in March or April

- Your school will contact you
- You go with your child to the screener
- The screener is reading and math (letters, sounds, numbers, counting and a few words)

## March

**Online Registration is required (ends Feb 29)**

### March 13: Informational Event - Kindergarten families new to US public school system

- Information shared: Differences between US and other countries school systems / General classroom / Transportation / Lunch / On-site before and after school care programs
- Each elementary school will host a specific event to welcome kindergarten families.
- Presented by ISD Family Partnership staff in English, Spanish, and Chinese. [Register for the event](#)

# August

**August 8: “Come, ride along” on the Yellow School Bus - Optional**

**9:00 am – 12:30 pm**

- Visit the ISD Kindergarten Transportation webpage to register

**Route Information:** New students registered in the ISD by August 1<sup>st</sup> will be able get route information by the end of August. Go to the ISD Transportation website for route information

**Online Enrollment Verification - Aug 2024**

- All Families with children registered in the ISD will need to complete this process via Skyward. Details to follow in E-News.

**“Tools4Schools” – Optional**

Issaquah Schools Foundation provides free backpacks and school supplies for families who need financial assistance. These are available at each school in August 2024. Use this link for information and to register: <https://issaquahfoodbank.org/tools4school>

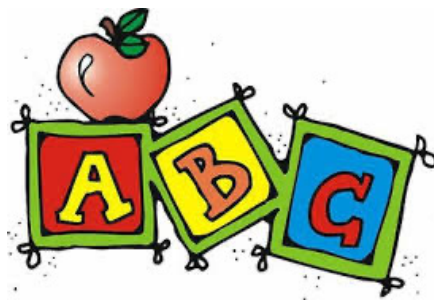
**August 29 – First Day of School for grades 1-12**

**September 4 – First Day of School for Kindergarteners\***

***\*August 29, 30 and September 3 – Kindergarten families are invited to a family connection meeting with your child’s Kindergarten teacher during the first three school calendar days. This meeting is required.***

# September

**Family Connection Meeting (Required)**



## Timeline of Events and Highlights

February 29 Deadline to complete online registration and provide additional documents

March/April Pre-Kinder Assessment Appointments

August 8 Kindergarten Bus Ride-Along (see packet to register)

Mid-Aug Online Enrollment Verification for All Students

August Kindergarten Family Connection Meetings (REQUIRED)  
29, 30, & September 3

Sept 4 First day of class for Kindergarten Students

**Any Questions? Please contact Pam Stucky at 425.837.5802 or email her at [stuckyp@issaquah.wednet.edu](mailto:stuckyp@issaquah.wednet.edu)**



## HEALTH CONDITIONS QUESTIONNAIRE

- If your child has any health condition that could be considered life-threatening such as asthma, food allergies, seizures, diabetes.....
- According to the law, your child must have an emergency health plan, which includes medication orders from your child's health care provider in place before he/she can attend school.
- Forms will be sent to family after review of questionnaire by Nurse.



# Immunizations & Life-Threatening Health Conditions

*Requirements for Incoming Students*

**2024-25 School Year**




# Proof of Immunization Required

- New students need to provide a **medically verified immunization record** at the time of registration.
- A medically verified record can come directly from:
  - The **Washington State Immunization Information System (WAIIS)**.
  - A medical clinic or office where immunizations were given
  - Pharmacy records of immunizations given
  - Another state's or country's formal immunization database
  - Immunizations verified by the State Dept.

# CIS or WAIS Documentation

- A Certificate of Immunization Status (CIS) printed from the (WAIS)
- A physical copy of the State CIS form **with a healthcare provider signature.**
- A CIS printed from MyIR.  
**Wa.myir.net or myirmobile.com**

 **Certificate of Immunization Status (CIS)** Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signed CIS on Form 10 Yes  No

Please print. See back for instructions on how to fill out this form or get it printed from the Washington State Immunization Information System.

Child's Last Name: _____		First Name: _____		Middle Initial: _____		Birthdate (MM/DD/YYYY): _____																																																																																																																																																																																			
I give permission for my child's school/child care to add immunization information into the Immunization Information System to help the school maintain my child's record.				Conditional Status: Only I acknowledge that my child is entering school/child care in conditional status. For my child to remain in school, I must provide request for documentation of immunization by established deadline. See back for guidance on conditional status.																																																																																																																																																																																					
<input checked="" type="checkbox"/> Parent/Guardian Signature: _____ Date: _____				<input checked="" type="checkbox"/> Parent/Guardian Signature Required if Starting in Conditional Status Date: _____																																																																																																																																																																																					
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I certify that the child entered on this CIS has: <input type="checkbox"/> A verified history of varicella (chickenpox) disease. <input type="checkbox"/> Laboratory evidence of immunity (titer) to disease(s) checked below. <input type="checkbox"/> Hepatitis A <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hib <input type="checkbox"/> Measles <input type="checkbox"/> Mumps <input type="checkbox"/> Rubella <input type="checkbox"/> Tetanus <input type="checkbox"/> Varicella <input type="checkbox"/> Polio (all 3 categories must show immunity)	
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I certify that the information provided on this form is correct and verifiable.				Health Care Provider or School Official Name: _____ Signature: _____ Date: _____																																																																																																																																																																																					
If verified by school or child care staff the medical immunization records must be attached to this document.																																																																																																																																																																																									

# Required Immunizations for K-6 Students

- 5 doses of DTaP (diphtheria, tetanus & pertussis) given in the appropriate time frames
  - 1 Tdap for students 7th grade and above
- 3 doses of Hepatitis B, given in the appropriate time frames
- 4 doses of polio (IPV) given in a specific time frames
- 2 doses of MMR (measles, mumps and rubella) given in the appropriate time frames
- 2 doses of varicella given in the appropriate time frames

# Missing Doses

- If students are missing doses, they will need to get **all the doses they are eligible** to receive **before** starting school.
- They can then attend school in a **Conditional Status** until the minimum valid date of the next vaccine is reached.
- They then have 30 calendar days to turn in documentation of having received the dose.
- This continues on until all vaccines have been administered and documented.

## Example

- If a child has all their immunizations except the 2-dose MMR series, and they get dose 1 of MMR the day before school starts (and it is documented with the school that day) the child can enter school because...
  - Dose 2 of the MMR cannot be given until 28 days after the first dose.
  - Beginning on day 29 after the first dose, the child has 30 days to get MMR dose #2.




# Exemptions

## Parent and Child's Provider signatures

- Medical Exemption
- Philosophical/Personal Exemption
- Religious Exemption

## Religion restricting care from medical professional

- Religious Membership Exemption


**Certificate of Exemption—Personal/Religious**  
 For School, Child Care, and Preschool Immunization Requirements

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Birthdate (MM/DD/YYYY): \_\_\_\_\_

**NOTICE:** A parent or guardian may exempt their child from the vaccinations listed below by submitting this completed form to the child's school and/or child care. A person who has been exempted from a vaccination is considered at risk for the disease or diseases for which the vaccination offers protection. An exempted child/student may be excluded from school or child care settings and activities during an outbreak of the disease that they have not been fully vaccinated against. Vaccine-preventable diseases still exist, and can spread quickly in school and child care settings. Immunization is one of the best ways to protect people from getting and spreading diseases that may result in serious illness, disability, or death.

**Personal/Philosophical or Religious Exemption**  
 I am exempting my child from the requirement my child be vaccinated against the following disease(s) to attend school or child care. (Select an exemption type and the vaccinations you wish to exempt your child from):

PERSONAL/PHILOSOPHICAL EXEMPTION*			
<input type="checkbox"/> Diphtheria	<input type="checkbox"/> Hepatitis B	<input type="checkbox"/> Hib	<input type="checkbox"/> Pneumococcal
<input type="checkbox"/> Polio	<input type="checkbox"/> Pertussis (whooping cough)	<input type="checkbox"/> Tetanus	<input type="checkbox"/> Varicella (chickenpox)
<i>*Measles, mumps, or rubella may not be exempted for personal/philosophical reasons per state law</i>			
RELIGIOUS EXEMPTION			
<input type="checkbox"/> Diphtheria	<input type="checkbox"/> Hepatitis B	<input type="checkbox"/> Hib	<input type="checkbox"/> Pneumococcal
<input type="checkbox"/> Polio	<input type="checkbox"/> Pertussis (whooping cough)	<input type="checkbox"/> Tetanus	<input type="checkbox"/> Varicella (chickenpox)
<input type="checkbox"/> Measles	<input type="checkbox"/> Mumps	<input type="checkbox"/> Rubella	

**Parent/Guardian Declaration**  
 One or more of the required vaccines are in conflict with my personal, philosophical, or religious beliefs. I have discussed the benefits and risks of immunizations with the health care practitioner (signed below). I have been told if an outbreak of vaccine-preventable disease occurs for which my child is exempted, my child may be excluded from their school or child care for the duration of the outbreak. The information on this form is complete and correct.

Parent/Guardian Name (print) \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Health Care Practitioner Declaration**  
 I have discussed the benefits and risks of immunizations with the parent/legal guardian as a condition for exempting their child. I certify I am a qualified MD, ND, DO, ARNP, or PA licensed in Washington State.

Licensed Health Care Practitioner Name (print) \_\_\_\_\_ Licensed Health Care Practitioner Signature \_\_\_\_\_ Date \_\_\_\_\_  
 MD  ND  DO  ARNP  PA Washington License # \_\_\_\_\_

**RELIGIOUS MEMBERSHIP EXEMPTION**  
 Complete this section ONLY if you belong to a church or religion that objects to the use of medical treatment. Use the section above if you have a religious objection to vaccinations but the beliefs or teachings of your church or religion allow for your child to be treated by medical professionals such as doctors and nurses.

**Parent/Guardian Declaration**  
 I am the parent or legal guardian of the above-named child. I affirm I am a member of a church or religion whose teaching does not allow health care practitioners to give medical treatment to my child. I have been told if an outbreak of vaccine-preventable disease occurs for which my child is exempted, my child may be excluded from their school or child care for the duration of the outbreak. The information on this form is complete and correct.

Parent/Guardian Name (print) \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

If you have a disability and need this form in a different format please call 1-800-525-0127 (TDD/TTY Call 711). DOH-348-106 October 2019

# Is My Kindergartener Too Young?

Children can receive their school immunizations at age 4. Contact your healthcare provider to schedule your appointment.



# Where Can I Get My Child Immunized?

- Your child's healthcare provider
- **WithinReach, Family Health Hotline:**  
**800-322-2588**  
<http://www.withinreachwa.org/>
- **Community Health Access Program:**  
**206-284-0331 or 800-756-5437**  
<https://kingcounty.gov/en/dept/dph/health-safety/health-centers-programs-services/access-outreach-program/community-health-access-program>
- Your school nurse is a resource for you if you need assistance

# SUMMARY of IMMUNIZATION INFORMATION

- Your student may register for school, **but MAY NOT attend school until provider-verified immunizations** have been received and validated by the school nurse.
- The child must have all immunizations they are eligible to receive prior to starting school.
- Or there is a **Certificate of Exemption** on file signed by the parent AND the licensed healthcare provider.

## Notify the School if your Child has a Life-Threatening Health Condition such as:

- Allergy requiring an Epipen™
- Insulin-dependent Diabetes
- Severe Asthma
- A Seizure disorder
- A Cardiac condition
- Adrenal Insufficiency
- Other conditions

# Why does the school need to know?

- If your child has a life-threatening condition, **WA state law** says there must be an **emergency care plan and any associated medication** in place in the school building **before the child can attend school**.
- This is to keep the student safe in the event they experience a medical emergency during the school day.
- If your child has a life-threatening condition, let the school nurse know:
  - School Care Plan signed by provider, parent and RN
  - Medication prescribed by provider with ISD paperwork

# Questions?

Nurse Contact Info:

Jamie Heintz, RN

Office: 425-837-5808

Email: [HeintzJ@issaquah.wednet.edu](mailto:HeintzJ@issaquah.wednet.edu)



ISSAQUAH  
SCHOOL DISTRICT 411



## DAYS OF OPERATION

MONDAY – FRIDAY

*School break services are available through a separate registration process*

## PROGRAM HOURS

6:30 AM – school start  
School end – 6:30 PM

*There is no care provided during the school day for ½ day kindergarten students.*

## LOCATIONS

All 16 Elementary Schools

# SCHOOL AGE CARE

## SERVING K-5 STUDENTS

The Before and After School Care Program (BASC) provides a positive environment for children to grow socially, emotionally, and intellectually under the guidance of our well-trained team. We offer diverse activities to meet the interests and skill levels of our participants, including STEM, cooperative games, community service learning, art, and cooking.

During out of school time, children will be able to access many areas of our schools, including the gym, playground, and multi-purpose room. In addition to our well stocked club rooms, we provide a designated homework time, morning and afternoon snacks, family nights, enrichment activities, school break care, and summer day camps.

## REGISTRATION INFORMATION

[www.isd411.org](http://www.isd411.org)

Programs and Services ->  
Before and After School Care ->  
Registration Information

## QUESTIONS?

Email Michelle Morrison  
[morrisonm@Issaquah.wednet.edu](mailto:morrisonm@Issaquah.wednet.edu)





# KINDERGARTEN TEACHERS

Ms. Afman

Mrs. Miller

# FIRST DAYS OF K

- **EVP (Enrollment Verification Process) - August**
- **Meet the Teacher**
- **Curriculum Night**
- **Family Connection Conferences & Assessment**
  - **WA Kids**
  - **Scheduling will happen over the summer**





# DAY TO DAY in K

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## Morning

- Morning Work
- Reading Block
- Morning Recess
- Snack
- Math Block
- Writing Block

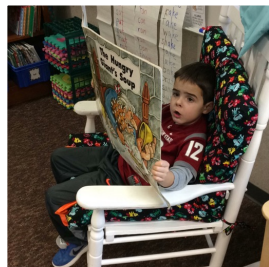


## Afternoon

- Lunch and Recess
- Handwriting
- Second Step/Social Emotional Learning
- Purposeful Play
- Specialists
- Afternoon Recess

# PURPOSEFUL PLAY

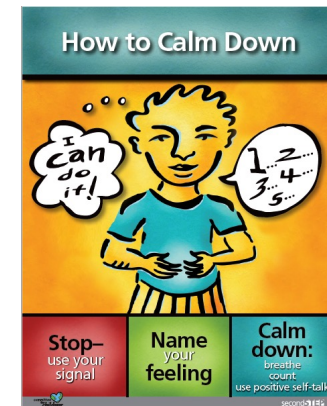
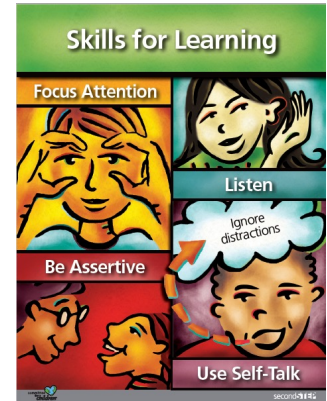
- Choice
- Social development
- Problem solving
- Building motor skills





# WHAT REALLY MATTERS

- Growth Mindset
- Social Skills
- Self-regulation
- Independence
- Following Classroom and School Expectations
- Playful Learning vs. Formal Teaching



# WHAT ARE KINDERGARTENERS LEARNING?

**Social Emotional**

**Academic**

**Learning Habits**

**Thinking Skills**

**Routines, Self-Regulation**

**Engagement**

**Q & A**

What else do you want to  
know?



# THANK YOU!

Please join us for a peek inside the K rooms and to meet some of our teachers!

