

Campbell County Schools

Publicity Release

In order to recognize students and their accomplishments, children's pictures or work are often displayed in the school, in classroom projects, in the school yearbook, and/or local news media. During the year, students may also be video or voice recorded for educational purposes. You must sign EITHER the permission grant OR the request to not record. Do not sign both. Regardless of whether you grant permission, this form must be turned in with a valid signature in the appropriate place.

This release gives Campbell County Schools, and the school staff permission to publish your child's picture, name, and work in the school, classroom projects, school newspaper, school yearbook, and the local media while a student in the Campbell County School System.

As the legal parent/guardian of (student name) _____, I give my permission to Campbell County Schools, and the school's staff permission to release my child's name, picture, and grade level in the school for classroom projects, the school newspaper, the school yearbook, local media releases, and any other printed announcements related to the classroom or school events that my child attends.

I grant permission to make video recordings, photographs, and sound recordings of my child for educational purposes only.

Parent's Name: _____

Parent's Signature: _____ Date: _____

I do not grant permission to make video recordings, photographs, and sound recordings of my child.

Parent's Name: _____

Parent's Signature: _____ Date: _____

Classroom Release Information

Children's names are sometimes distributed to each family in the classroom for special activities such as birthday party requests, Valentine's Day parties, etc.

I grant permission to release my child's name to families of students in their class for such purposes.

Parent's Signature: _____ Date: _____

I do not grant permission to release my child's name to families of students in their class.

Parent's Signature: _____ Date: _____

School/Student/Parent Compact

School Name: _____

The School will provide the following:

- A high quality curriculum and instruction in a positive learning environment by following state standards as well as district standards. Teachers will teach and test standards periodically.
- We will have a parent/teacher conference at the end of the first grading period and after the end of the first semester of school.
- Parents will be provided mid-term reports as well as end of grading period reports on child's progress.
- Parents may schedule conference with child's teacher thru the principal's office.
- Parents are encouraged to volunteer in their child's classroom after following district guidelines for volunteering.
- Parents will be given the opportunity to observe their child's classroom before the end of the first semester of school. Any other visit must be approved through the principal's office.

Principal's Signature: _____

Teacher's Signature: _____

Parent will provide the following:

- Parent will be sure their child will attend school every day possible and not be tardy.
- Parent will be sure child completes all homework.
- Parent will monitor amount of television that their child watches and be sure they receive an adequate amount of sleep.
- Parent will promote positive use of child's extracurricular time
- Parent will read all correspondence from the school and respond appropriately and promptly to all notices.
- Parent will serve on police advisory group, such as being the Title I Part A parent representative on the school's improvement team or any other committees needed to improve the school when possible.
- Parent will volunteer in the school when possible.

Parent Signature: _____

Student Responsibilities:

- Student will complete all class work and homework to the best of their ability.
- Student will attend when possible and not be tardy.
- Student will give parent all notices or newsletters from school.
- Student will respect all class rules and school policies.
- Student will read at least 30 minutes every day outside of school time.

Student's Signature: _____

Tennessee Department of Education (TDOE)
Title I, Part C of the Elementary and Secondary Education Act (ESEA)
Migrant Education Program
Occupational Survey

Student Information: _____ **DATE:** _____
Last Name First Name Gender Race

District: _____ **School:** _____ **Grade:** _____ **School Year:** _____

Migrant students may be eligible for additional services and assistance. Please answer the following questions and return the survey to the school so that we can determine if your child qualifies for migrant services.

1. Did you or someone in your family come to Tennessee looking for temporary or seasonal work in a factory processing foods or working in agriculture, fishing, or dairy (examples: working with tobacco, tomatoes, cotton, strawberries, nurseries, trees, pork, chickens, vegetables, etc.)?

YES _____ NO _____ If yes, please mark which member of the family does or did this kind of work:

Mother _____ Father _____ Children _____ Other _____

2. Do you or someone in your family currently work in a factory processing foods or in agriculture, fishing, or dairy? (examples: working with tobacco, tomatoes, cotton, strawberries, nurseries, trees, pork, chicken, vegetables, etc.)

YES _____ NO _____ If yes, please mark which member of the family does or did this kind of work:

Mother _____ Father _____ Children _____ Other _____

3. If your current job is not temporary work in agriculture or fishing, did you or someone in your family work in a temporary or seasonal agriculture or fishing in the last 3 years?

YES _____ NO _____

If yes, where? _____
City State Country

If you answered "yes" to any of the questions above, please answer questions 4, 5, and 6.

4. How long have you been in this county in Tennessee? _____
months years

5. What is your current address? _____
Street Address City State Zip Code

6. What is your current telephone number with the area code? (____) _____

NOTE TO THE SCHOOL: Please send all surveys with at least one "yes" response to your district migrant liaison. Please make sure the form is filled out completely.

NOTE TO DISTRICT MIGRANT LIAISON: All surveys with at least one "yes" answer should be uploaded to the TNMEP site upon receipt. Please email migrated@blomand.net to inform Jessica Castañeda that new surveys have been uploaded.

Tennessee Department of Education (TDOE)
Title I, Part C of the Elementary and Secondary Education Act (ESEA)
Programa de Educación para Estudiantes Migrantes
Encuesta Ocupacional

Nombre del Estudiante: _____ **FECHA:** _____
 Nombre Apellido Sexo Raza

Distrito: _____ Escuela: _____ Grado: _____ Año Escolar: _____

El programa de educación para los estudiantes migrantes [MEP] es parte del Departamento de Educación Pública del Estado de Tennessee [TDOE] provee servicios a los niños y familias que se han mudado a Tennessee en los últimos 3 años. Para calificar por el programa, las familias deben de haberse mudado de un lugar a otro buscando trabajo temporal en agricultura, ganadería, o pesca. El programa registra a niños y jóvenes entre las edades de 3 a 21 años. Agradecemos que nos ayuden a determinar si su niño o pariente califica para recibir servicios de este programa. Por favor, conteste las siguientes preguntas y entregue este documento a la escuela.

1. ¿Vino Usted o alguien en su familia en busca de trabajo temporal en agricultura, el campo, una finca (ejemplo: sembrando/cultivando/cosechando tabaco, papas, algodón, fresas, viveros, trabajo con árboles, etc.), o de pesca (empacadora de pescado o mariscos) o alguna fábrica que procesa alimentos como cerdos, pollos, vegetales, etc.?

SÍ _____ NO _____

Si su respuesta es "sí," por favor, indique que miembro de su familia hizo este tipo de trabajo.

Madre _____ Padre _____ Hijos _____ Otros _____

2. Trabaja ahora Ud. o alguien en su familia en agricultura (ejemplos: tabaco, papas, algodón, fresas, viveros, trabajo con árboles, etc.), en una lechería o en una fábrica procesando comida (puerco, pollo, vegetales, etc.)?

SÍ _____ NO _____

Si su respuesta es "sí," por favor, indique que miembro de su familia hace este tipo de trabajo.

Madre _____ Padre _____ Hijos _____ Otros _____

3. Si su trabajo actual no se relaciona a la agricultura ni pesca, ¿Ha trabajado Usted o algún miembro de su familia en este tipo de actividades en los últimos 3 años?

SÍ _____ NO _____

¿Dónde?

_____ **Ciudad** **Estado** **País**

Si usted contestó "sí" a alguna de las preguntas anteriores, por favor, conteste las preguntas abajo (#4, 5 y 6).

4. ¿Hace cuánto tiempo que se mudó a este condado? _____
 Mes Año

5. ¿Cuál es su dirección actual? _____
 Dirección Ciudad Estado Código Postal

6. ¿Cuál es su número de teléfono actual (con el código de área)? (____) _____

NOTE TO THE SCHOOL: Please send all surveys with at least one "yes" response to your district migrant liaison. Please make sure the form is filled out completely.

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Campbell County Board of Education
172 Valley Street Jacksboro, TN 37757
Phone:(423)562-8377 Fax:(423) 566-7562

Home Language Survey
Grades K-12

Name of Child: _____ Date of Birth: _____
Address: _____ Telephone Number: _____
School: _____ Grade: _____
Printed Name of Parent or Guardian: _____

Please answer the following questions and return to your school counselor.

- 1) What is the first language this child learned to speak?
- 2) What language does this child speak most often outside school?
- 3) What language do people usually speak in the child's home?

If you are entering the country as an immigrant or refugee answer the following questions.

- 1) Date you entered US _____
- 2) From which Country: _____

The Campbell County Board of Education does not discriminate on the basis of race, color, national origin, sex, or disability in its programs and activities.

*****Notice to Principal: This form is to be kept in a separate file for ESL students.
A copy of this form is to be kept in the student's permanent/cumulative file.**

**TENNESSEE DEPARTMENT OF EDUCATION
 CAMPBELL COUNTY BOARD OF EDUCATION
 FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)
 ANNUAL NOTICE FOR DISCLOSURE OF SCHOOL DIRECTORY INFORMATION**

Dear Parent/Guardian:

The Family Education Rights and Privacy Act (FERPA) is a federal law that requires the school district, with certain exceptions, to obtain written permission before releasing personal information from your child's educational or school records.

However, the school may release some student information without written permission when the information is termed "Directory Information", unless you have told the district otherwise in agreement with district procedures.

The common use for Directory Information by the district is to include this type of information in certain school publications. It is generally not considered harmful or an invasion of privacy if released. Some examples of these publications are:

- a playbill or program, showing your child's name in a school play or production
- an annual yearbook
- honor roll or other recognition lists in school or local newspapers
- graduation programs
- sports statistics listed in programs, such as athletic programs may include height and weight of team members
- school or district website

Directory information can also be given to outside organizations with parent's prior written permission. These organizations include, but are not limited to:

- other schools the student is seeking to attend
- class ring manufacturers
- state or federal authorities auditing, evaluating programs or enforcing state or federal laws
- a court by order of subpoena.

The school district has designated the following as Directory Information:

Student name	Degrees, honors and awards received	major field of study
Address	most recent educational agency or institution attended	dates of attendance
Telephone number	participation in school-sponsored activities and sports	photograph
email address	weight and height of members of athletic teams	grade level
date and place of birth		

Two (2) federal laws require school districts that receive assistance under the No Child Left Behind Act of 2001 to provide military recruiters, upon request, with three Directory Information categories - names, addresses, and telephone listings - unless parents have notified the district that they do not want their child's information disclosed without prior permission.

If you **DO NOT** want the district to disclose Directory Information about your child without your prior written permission you must notify the district in writing by _____. Please complete the lower portion of this form and return the entire form to your child's school only IF you **DO NOT** want child's directory information disclosed.

Parent/Guardian: **ONLY** complete and return this entire form **IF** you **DO NOT** give your permission for release of School Directory Information. **PLEASE USE A SEPARATE FORM FOR EACH CHILD AND RETURN IT TO THEIR SCHOOL.**

I **DO NOT** want my child's Directory Information disclosed and request one of the following:

- Do Not release my student's directory information at any time.
- Do Not release my student's directory information without prior written permission.

Name of Student: _____ School _____ Date _____
 Name of Parent/Guardian: _____ Signature of Parent/Guardian: _____
 Address _____ City _____ State _____ Zip _____
 Telephone Number _____ Email Address: _____