. H. WILLIAMS MIDDLE SCHOOL

1105 Prairie Ave., Abbeville, LA 70510 Tel. # 337-893-3943 / Fax # 337-893-5190

NEW STUDENT ENROLLMENT PACKET

- TO ENROLL YOUR CHILD QUICKLY AND IN A TIMELY MANNER, PLEASE HAVE ALL THE DOCUMENTS REQUIRED AVAILABLE UPON REGISTRATION. J.H. WILLIAMS MIDDLE SCHOOL THANKS YOU FOR YOUR COOPERATION CONCERNING THIS MATTER. WE ARE HERE TO SERVE YOU AND TO EDUCATE YOUR CHILD.
- IF YOU ARE REGISTERING A CHILD WITH AN "IEP"/SPECIAL NEEDS FROM OUT OF STATE OR PARISH, YOU MUST CONTACT THE VPSB AT 337-893-3973 AND ASK FOR THE SPECIAL EDU. DEPARTMENT. "PLEASE CALL FIRST" ANY TIME AFTER PICKING UP THE ENROLLMENT PACKET.
- IF THE CHILD HAS TO TAKE MEDICATION AT SCHOOL, PLEASE ASK FOR A MEDICATION ORDER or THE DIET PRESCRIPTION FORM FOR MEALS AT SCHOOL.
 - > THE FOLLOWING DOCUMENTS ARE REQUIRED UPON REGISTRATION:
- *** BIRTH CERTIFICATE SOCIAL SECURITY CARD UPDATED IMMUNIZATION** (SHOT RECORD) PARENT/LEGAL GURADIAN'S ID
- TWO PROOFS OF DOMICILE
- > A CURRENT UTILITY BILL & (VOTER REGISTRATION CARD, RENT/LEASE, DEED/TITLE/PROOF OF **OWNERSHIP or HOMEEOWNER'S INSURANCE)**
- *** AFFIDAVIT FORM**
- > IF THE BILLS ARE NOT IN THE CUSTODIAL PARENT(S)/LEGAL GUARDIAN'S NAME, AN AFFIDAVIT FORM WILL BE REQUIRED WITH A CURRENT UTILITY BILL & (RENT/LEASE, DEED/TITLE/PROOF OF OWNERSHIP OF HOMEEOWNER'S INSURANCE IN THE NAME OF THE PERSON WHOM YOU ARE **RESIDING WITH.**
- CUSTODY/COURT OR DCFS PAPERWORK IS REQUIRED
- > IF YOU ARE <u>SEPARATED</u>, <u>DIVORCED</u> OR <u>NOT THE BIOLOGICAL PARENT</u> OF THE CHILD WHO IS CURRENTLY IN YOUR CARE, YOU MUST HAVE A COPY OF THE CUSTODY/COURT ORDER OR DCFS PAPERWORK FOR THE CHILD YOU ARE ENROLLING. IF YOU DO NOT HAVE THE NECESSARY DOCUMENTS, YOU MAY MAKE AN APPOINTMENT WITH THE STUDENT SERVICES/CHILD WELFARE & <u>ATTENDANCE DEPARTMENT</u> AT THE VPSB LOCATED ON 220 S. JEFFERSON ST., <u>PLEASE, CALL FIRST</u> FOR AN APPOINTMENT @ 337-898-5712.
- *** WITHDRAWAL PAPERWORK**
- > WITH CURRENT GRADES, TEST SCORES, ATTENDANCE, DISCIPLINE AND ANY OTHER INFORMATION SUCH AS IEP, IAP, RESOURCE, SPEECH, GIFTED OR SELF-CONTAINED FROM THE PRIOR SCHOOL.

NOTE: IF YOU SEND SOMEONE TO SPEAK WITH, GIVE MEDICINE OR CHECK THE STUDENT OUT THAT PERSON'S NAME MUST BE ON THE EMERGENCY CARD. PLEASE HAVE THAT PERSON COME WITH THEIR ID.

ENROLLMENT PACKET DOCUMENTS CHECK-OFF LIST

$_$ 01. NEW STUDENT ENROLLMENT PACKET FORM / DOCUMENTS REQUIRD CHECK-OFF LIST
√ 02. CHECK-OFF LIST OF DOCUMENTS IN THE PACKET & UNPAID FEES & OTHER DEBT FORM
√ 03. AUTHORIZATION TO RELEASE SCHOOL RECORDS FORM
√ 04. MARITAL STATUS OF BIOLOGICAL PARENT(S) FORM
√ 05. NEW STUDENT ENROLLMENT/REGISTRATION FORM
$\sqrt{}$ 06. VPSB DOMICILE FORM & (06.1) BACK OF FORM
√ 07. HOME LANGUAGE SURVEY FORM
√ 08. STUDENT ETHNICITY/RACE FORM
√ 09. IEP, IAP, RESOURCE FORM FOR THE VPSB SPECIAL EDU. DEPT.
$\sqrt{}$ 10. AFFIDAVIT FOR PROOF OF DOMICILE & (10.1) BACK OF FORM
√ 11. LA RESIDENCY QUESTIONNAIRE
12. COMPLIANCE FORM
13. SCHOOL POLICIES & REGULATIONS FORMS
√ 14. EMERGENCY CARD
$\sqrt{}$ 15. SCHOOL SUPPLY LIST & (15.1) ORIENTATION LETTER FOR BEGINNING OF SCHOOL YEAR
16. CRISIS MANAGEMENT FORM
17. INTEGRATED PEST MANAGEMENT FORM
18. SECLUSION AND RESTRAINT PROCEDURES
√ 19. LOUISIANA MIGRANT PROGRAM FORM
20. STUDENT HANDBOOK
21. BOOKLET OF ACKNOWLEDGEMENTS

J. H. WILLIAMS MIDDLE SCHOOL UNPAID FEES AND OTHER DEBT

Every student shall be accountable for unpaid fees or debts owed to the school (J. H. Williams Middle) for such things as, but not limited to: lost textbooks, library books, unpaid lunch money, school pictures, locker fees, student identification, club/lab fees, fundraiser money/products not returned, or any school fees, etc. by denying participation in non-academic activities, including graduation ceremonies.

Principals/sponsors/school personnel are encouraged to contact parent(s) for cooperation in clearing debts. Should attempts to clear any debt through parental contact not be successful, the school (J. H. Williams Middle) may take the above-mentioned steps or combination thereof to insure payment of unpaid debts, as well as appropriate legal action against an adult student or the parent/guardian of a minor student.

X	Date:	
Student Signature		
X	Date:	
Parent/Guardian Signature		No. of the last of

J.H. Williams Middle School

1105 Prairie Avenue Abbeville, Louisiana 70510-4901 Tel # (337)893-3943 Fax # (337)893-5190

EMAIL: yennis.pacheco@vpsb.net



AUTHORIZATION TO RELEASE SCHOOL RECORDS

Attn.: Registrar/	Secretary/Counselor/Pri	ncipal:	was a programment of the control of	
Name of school transferring from:				
Address:				
City:	State	a a	Zip Code:	
Phone#		Fax#		
Email:				
Student Name:				
DOB:				
Grade:				
AT THIS TIM	IE, WE ARE REQUEST	or the2023-	ams Middle School as of: -2024 , school year. MENTS THAT ARE :	
LAST REPORT CUMULATIVE (LEAP/ILEAF OTHER PER (IEP, IAP, SE		ANCE RECORD RMATION SUCH ANDARDIZED TO INFORMATION , GIFTED)	ESTING RESULTS) IF APPLICABLE, AS:	
x	Sacheco . WILLIAMS M.S.	XParent/G	uardian's Signature	

MARITAL STATUS OF THE CHILD'S BIOLOGICAL PARENT(S) STUDENT NAME: _ GRADE: ____ ____ DATE: __ **MOTHER - NEVER MARRIED TO THE BIOLOGICAL FATHER** hereby acknowledge and affirm that the following statement is true and correct. I was never married to my (son's / daughter's) biological father and my (son / daughter) mentioned above resides with me. The biological father's name (is / is not) on the birth certificate. Signature Date FATHER - NEVER MARRIED TO THE BIOLOGICAL MOTHER hereby acknowledge and affirm that the following statement is true and correct. I am the biological father of the student mentioned above and my name (is / is not) on the birth certificate. I was never married to my (son's / daughter's) biological mother and my (son / daughter) resides with me. Signature Date MARRIED hereby acknowledge and affirm that the following statement is true and correct. My (son / daughter) mentioned above resides with both biological parents. Signature Date WIFE or HUSBAND - SEPARATED NOT DIVORCED hereby acknowledge and affirm that the following statement is true and correct. I am separated and not divorced from my (wife / husband) and my (son / daughter) mentioned above resides with me. The biological father's name (is / is not) on the birth certificate. Signature Date DIVORCED hereby acknowledge and affirm that the following statement is true and correct to the best of my knowledge. I am divorced and I will provide JHW with a copy of the custody/court paperwork or divorce decree which states who is the domiciliary parent. "If you do not have custody/court paperwork or any documents pertaining to your divorce decree you must meet with a personnel from the Student Services/Child Welfare & Attendance Dept. at the VPSB located on 220 S. Jefferson Street, 2nd floor, please call for an appointment first @ (337) 898-5712 or (337) 898-5760".

WIDOWED

hereby acknowledge and affirm that the following statement is true and correct. I am a (widow / widower) and the biological (mother / father) of the student mentioned above, and my (son / daughter) resides with me. The father's name (is / is not) on the birth certificate.

Signature

Signature

Date

Date

MARITAL STATUS OF BIOLOGICAL PARENTS FORM

NEW STUDENT ENROLLMENT/REGISTRATION FORM

J. H. WILLIAMS MIDDLE SCHOOL (CHILD'S FULL NAME AS IT APPEARS ON BIRTH CERTIFICATE)

STUDENT INFORMATION

First Name:	Middl	e Name:		Last Name:	
Gender:	Birth Date:		Age:	SSN:	
Birth Country:		Birth City:			Birth State:
Ethnicity:		Race:	Other	if Applicable:	Birth State:
	_				
	<u>N</u>	MOTHER'S IN	URMAI	ION	
(*:	*What is/was the	marital statu	ıs with t	the biological fat	ther**)
(Never Married) (Married) (Separate	ed) (Divorced) (Widowed)
Name:					
Address:			City:	State:	Zip:
Cell #:		Email:			
Employer:				Work #:	
		TATHER'S INF	ORMAT	ION	
(**	What is/was the	marital statu	s with t	he biological mo	ther**)
(Married	_) (Divorced)	(Separated) (W	idowed) (N	ever Married)
Name:					
Address:			City:	State:	Zip:
Cell #:		Email:			
GUAR	DIAN'S INFORMAT	ION with COU	RT/CUS	TODY or DCFS PA	PERWORK
Name:				Relationship:	
Address:			City:	State:	Zip:
Employer:				Work #:	
The STUDENT RES	SIDES WITH			, if the st	tudent is NOT residing
			and the second s		, if you do not have the
	make an appoint wit				
	ffirm that all the info derstand that providi				to the best of my belief der the law.
Parent/Guardian's S	Signature:			Date:	-

VERMILION PARISH SCHOOL BOARD 2023-2024 DOMICILE FORM

J. H. WILLIAMS MIDDI NAME OF SCHOOL	No. of the last of	NAME OF CHILD		
Dear Parent or Legal Guardian: In order for your child to attend school in this parish, your domicile must be established. Your domicile is the place where you actually reside. The address listed for enrolling in school must be the physical location of you home or the address used to receive mail at your home and NOT a post office box. List the address where you currently reside:				
Phone Numbers: Cell #				
Cell#	Work #	Home #		
Name on electric bill:				
Relation to student:				
List the address of your previou	s residence:			
Previous Physical Address (S	Street, City, State, Zip Co	Code)		
******W	ho is the child	residing with: "******		
BIOLOGICAL MOTHER and STEPFATH COURT-APPOINTED GUARDIAN	HER BIOLOG	OTHER BIOLOGICAL FATHER GICAL FATHER and STEPMOTHER E LEGAL DOCUMENTS)		
(BIOLOGICAL PARENTS WERE		d's biological parent(s):		
Was court custody ever establish	hed and signed by a jud	ORCED or NEVER MARRIED:"******** idge? (YES) (NO) OF THE COURT ORDER)		
**** If you are NOT th	ne biological parer	ent of the child mentioned above ****		
Do you have <u>CUSTODY</u> of the o	child mentioned above l	by virtue of a court order ?		
NO (give the name & ad				
Name of Biological Parent(s)		Biological Parent(s) Phone Number(s)		
Biological Parent(s) Physical Add	ress	(Street, City, State, Zip Code)		
I attest that the information provide	d by me, in reference to the	he questions contained above in this form, are true and		
correct. Parent/Guardian Signat	ture: x			

VPSB DOMICILE FORM

§133. Filing or maintaining false public records

- Filing false public records is the filing or depositing for record in any public office or with any public official, or the maintaining as required by law, regulation, or rule, with knowledge of its falsity, of any of the following:
 - (1) Any forged document
 - (2) Any wrongfully altered document
 - (3) Any document containing a false statement or false representation of a material fact
- B. The good faith inclusion of any item of cost on a Medical Assistance Program cost report which is later determined by an audit to be non-reimbursable under state and federal regulations shall be an affirmative defense to a violation of this Section.
- C. Whoever commits the crime of filing false public records shall be imprisoned for not more than five years with or without hard labor or shall be fined not more than five thousand dollars, or both. Amended by Acts 1980, No. 454, §1; Acts 1982, No. 676, §1; Acts 1992, No. 539, §1; Acts 1995, No. 787, §1.

I HEREBY VERIFY THAT MY CHILD RESIDES WITH ME IN VERMILION PARISH AT THE ADDRESS MENTIONED ABOVE.

	W, I AM TO NOTIFY THE SCHOOL OFFICIALS WHERE MY		
CHILD ATTENDS SCHOOL, WITHIN 30 DAYS IF THERE IS A CHANGE OF RESIDENCE/ADDRESS, EITHER FROM WITHIN THE PARISH OR OUT OF PARISH.			
xSignature of Parent/Legal Guardian	Date		
FOR SO	CHOOL OFFICIALS ONLY:		
	cuments are required to verify the residence above. The documents ad address of the parent/legal guardian. Please checkoff the nitted below.		
Filed Homester Apartment/Ho Water or Gas I	t by parent/legal guardian verifying student's residence, notarized OCS		
VERIFICATION ACCEPTED - p	ermission to register granted		
	ED – student provisionally admitted pending completion of the the child's first date of attendance.		
VERIFICATION NOT ACCEPTE	ED .		
x Signature of Principal	Date		

VERMILION PARISH SCHOOL BOARD HOME LANGUAGE SURVEY 2023-2024

Dear Parent/Guardian:

The Vermilion Parish School Board is requesting the following information. We are required to know the language(s) spoken and heard in each child's home. This information shall be; used, to provide the student with the best instructions possible. Please answer the following questions and return to the school.

Even though your child may speak only English, it is absolutely, necessary to complete this form. Your cooperation regarding this survey is greatly appreciated.

SCHOOL:	J. H. Williams Middle School	
STUDENT'S NA	ME:	
GRADE:	DATE OF ENROLLMENT:	
Only if ap	plicable (LEGAL GUARDIAN):	
		HOME#
(WHITE)	ER (CHECK ONE): MALE ETHNICITY OF CHILD (COMMON COMMON CO	CHECK ONE): ANIC) (ASIAN)
		8):
CHILD'S COUN	TRY OF BIRTH:	
LANGUAGE OT	THER THAN ENGLISH USED AT HO	ME:
FIRST LANGUA	GE (NATIVE) LEARNED BY STUDE	NT:
LANGUAGE ST	UDENT USES MOST OFTEN:	

(RETAIN ORIGINAL IN CHILD'S CUMULATIVE FOLDER)

VPSB HOME LANGUAGE SURVEY

(7) 2023-2024

VERMILION PARISH SCHOOL BOARD Student Form for Ethnicity/Race

Student's Name:	Birthdate:
School:J. H. Williams Middle School	
School systems are required to re-survey students and format. This is necessary in order to give respondents Asian or Pacific islander, to distinguish between these	
	answering both questions below. If the student/parent the method for collecting this information for reporting to
Question 1: Ethnicity: Is this student Hispanic/Latin	no? (Choose only one):
NO, not Hispanic/Latino	
YES, Hispanic/Latino	
The above question is about ethnicity, not race. No answer the following by checking off one or more boto be.	matter what you selected above, please continue to oxes to indicate what you consider your student's race
Question 2: Race: Select one or more of the follow Choice(s):	ring racial groups by placing an X in the blank next to your
American Indian or Alaskan Native	
Asian	
Black or African American	
Native Hawaiian or Other Pacific Island	der
White	
If you checked more than one race in question 2, aborace:	ve, please indicate what you consider to be your primary
PARENT'S PRINTED NAME:	
PARENT'S SIGNATURE:	DATE:
OBESERVER IDENTIF	ICATION METHOD USED:
OBSERVER'S PRINTED NAME:	
OBSERVER'S SIGNATURE:	DATE:

(RETAIN ORIGINAL IN CHILD'S CUMULATIVE FOLDER)

VPSB STUDENT ETHNICITY/RACE FORM

J.H. Williams Middle School

DOES YOUR CHILD RECEIVE ANY OF THE FOLLOWING SERVICES? YES, my child DID AND DOES RECEIVE
NO, my child DID NOT AND DOES NOT RECEIVE
IEP504speechresource teacherin an inclusion classroom,in a self-contained classroomin the gifted program,in any special education service at his/her last school or any prior schools
PLEASE FOLLOW THIS PROCEDURE FOR ALL TRANSFERS.
IF THE CHILD IS A SPED STUDENT AND <u>REGISTERING FROM OUT OF STATE OR PARISH</u> , YOU MUST MEET WITH A PERSONNEL FROM THE SPECIAL ED. DEPT. @ THE VPSB OFFICE, LOCATED ON 220 S. JEFFERSON ST., <u>PLEASE CONTACT THE VPSB FIRST @ 337-893-3973 AND ASK FOR THE SPECIAL EDU. DEPARTMENT</u> . (Your cooperation regarding this matter would be greatly appreciated)
If you have checked off any of the services mentioned above, please continue with the following information. This information will be faxed to Mrs. Lisa Fouquier, at the VPSB Special Edu. Dept. (337-898-5816), as soon as possible. If you provide the school with any special education records, a copy will be forwarded to the VPSB Special Edu. Dept.
Student name:
Student DOB:
Parent name:
Current address:
Current Phone #:
S.S. #:
PREVIOUS SCHOOL NAME & INFORMATION BELOW:
Name:
City: State: Parish:
Phone #: Fax #:
PARENT SIGNATURE: DATE:

FAX TO THE <u>ATTENTION</u> OF:

<u>Mrs. LISA FOUQUIER</u> @ THE VPSB-SPED

(337-898-5816)

VERMILION PARISH SCHOOL BOARD AFFIDAVIT BY PARENT/GUARDIAN VERIFYING STUDENT RESIDENCE

2023-2024

A parent/guardian who is residing with a friend or relative on a temporary or permanent basis must complete the official Vermilion Parish School Board Affidavit by Parent/Guardian Verifying Student Residence document.

If the school has reason to believe that information in this affidavit is incorrect, and the parent/legal guardian is in fact residing outside of the school district, the student will be required to return to the school in the district where he/she resides. Out of parish students will be withdrawn immediately from the school district.

PARENT/LEGAL GUAR	RDIAN:				
Physical Address (Street,	City, State,	Zip)			
Name of student:			Date	e of Birth:	
School of attendance: J.H.					
Parent/legal guardian's p Other children of parent/			City, State, Zip Code)		
Name	Age	School	Name	Age	School

Parent/legal guardian and	d student are	residing with:			
List the name of the person	on that the u	tility bill is under	or, (Owner/Landlord/Perso	n Residing With) d	own below;
Person on Utility Bill/Owner/L As the enrolling parent/le		Addres	s	Phor	ne Number
I,		, attest that my chi	ld/children and I are livi	ng and physicall	y residing with the
homeowner/resident at the home or residence outside	homeowner/i	resident's address l	isted above. I also attest	that I do not res	ide in any other
I'm a registered voter: ye	esn	o If y	es, where do you vote:_		
The parent/legal guardial Affidavit may expose him 14:133 or other laws of the	her and the	residence owner	to prosecution for filing	•	
I have carefully read and si	igned this Aff	idavit and attest to	the truth of all the inform	nation provided.	
THUS SWORN AND SU penalties that may attach					civil and criminal
X Signature of Parent/Guar	udio n		X Signature of person	mhom wan was	lo with
Signature of Parent/Guai	ruian		Signature of person	wnom you resid	ie with
SIGNATURE of Notary	Public	PRINTED Na	me of Notary Public	NOTARY S	eal/Number

VPSB AFFIDAVIT VERIFYING STUDENT RESIDENCE

(10)

§133.	Filing or	maintaining	false	public	records
X100.	I IIIIII OI	THE PROPERTY OF THE PARTY OF TH	THIDS	Public	IVVUIU

- A. Filing false public records is the filing or depositing for record in any public office or with any public official, or the maintaining as required by law, regulation, or rule, with knowledge of its falsity, of any of the following:
 - (1) Any forged document
 - (2) Any wrongfully altered document
 - (3) Any document containing a false statement or false representation of a material fact
- B. The good faith inclusion of any item of cost on a Medical Assistance Program cost report which is later determined by audit to be non-reimbursable under state and federal regulations shall be an affirmative defense to a violation of this Section.
- C. Whoever commits the crime of filing false public records shall be imprisoned for not more than five years with or without hard labor or shall be fined not more than five thousand dollars, or both. Amended by Acts 1980, No. 454, §1; Acts 1982, No. 676, §1; Acts 1992, No. 539, §1; Acts 1995, No. 787, §1.

I HEREBY VERIFY THAT MY CHILD RESIDES WITH ME IN VERMILION PARISH AT THE ADDRESS MENTIONED ABOVE.

I UNDERSTAND THAT UNDER THE LAW, I AM TO NOTIFY THE SCHOOL OFFICIALS WHERE MY CHILD ATTENDS SCHOOL, WITHIN 30 DAYS IF THERE IS A CHANGE OF RESIDENCE OR ADDRESS, EITHER FROM WITHIN OR OUT OF THE PARISH.

EITHER FROM WITHIN OR OUT OF THE PAI	RISH.
Signature of Parent/Legal Guardian	Date
FOR SCHOOL	OL OFFICIALS ONLY:
The following two or more acceptable documents current and include the name and address.	s are required to verify residence. The documents should be
Filed Homestead Exer Apartment/House leas Water or Gas bill	se agreement or documentation providing ownership rent/legal guardian verifying student residence, notarized
	udent is provisionally admitted, pending completion of the of child's first date of attendance.



Louisiana Student Residency Questionnaire Form

(Form Must Be Included in School Enrollment Packet) LEA: School Name: J. H. WILLIAMS MIDDLE SCHOOL Student Name: ID#: Gender: Male / Female Address: ______Telephone Number: _____ Current Grade: _____ Date of Birth: _____ Last School Attended: Parent / Guardian / Adult Caring for Student: ____ Relationship: ____ Disclaimer: This questionnaire is intended to address the McKinney-Vento Act. Your child may be eligible for additional educational services through Title I Part A, Title I Part C Migrant, Individuals with Disabilities Education Act (IDEA) and/or Title IX, Part A, Federal McKinney-Vento Assistance Act, 42 U.S.C.11435. Eligibility can be determined by completing this questionnaire. It is illegal to knowingly make false statements on this form. If eligible, students are to be immediately enrolled in accordance with Bulletin 741, section 341. □YES □ NO Did the student receive McKinney Vento (Homeless) Services in a previous school district? 2.

□YES □ NO Is the student's address a temporary living arrangement? (Note: If this is a permanent living arrangement or the family owns or rents their home, sign under item 9 and submit form to school personnel.) 3. DYES DI NO is the temporary living arrangement due to loss of housing or economic hardship? □YES □ NO Does the student have a disability or receive any special education-related services? (Check one) Where is the student currently living? (Check all that apply.) Oln an emergency/transitional shelter. ETemporarily with another family because we cannot afford or find affordable housing. □With an adult that is not a parent or legal guardian, or alone without an adult. In a vehicle of any kind, trailer park or campground without running water/electricity, abandoned building or substandard housing. □Emergency Housing (i.e. FEMA Trailer or FEMA Rental Assistance) □In a hotel/motel. □ Other specific information:_ ☐ YES ☐ NO Does the student exhibit any behaviors that may interfere with his or her academic performance? 7. Would you like assistance with uniforms, student records, school supplies, transportation, other? 8.

NO Migrant — Have you moved at any time during the past three (3) years to seek temporary or seasonal work in agriculture (including Poultry processing, dairy, nursery, and timber) or fishing? ☐ YES ☐ NO Does the student have siblings (brothers or sisters)? Note: Use back of page if more space is needed. _____ School ____ Name_ __School _____ Grade ____ DOB ____ Name____ _Grade _____DOB ___ School _____ 10. The undersigned certifies that the information provided above is accurate. Print Parent/Guardian/Adult Caring for Student's Name Signature Date State Zip Code (Area Code) Phone Number Street Address City Print School Contact Name Title Signature Date

Unaccompanied Youth:

YES

NO

☐ Copy Placed in Student's Cumulative Record

Homeless Liaison Use Only - Check All that Apply:

☐ Sheltered ☐ Doubled-Up ☐ Unsheltered/FEMA/Substandard ☐ Hotel/Motel

School Use Only: Free or Reduced Price Meals Form submitted/signed



Louisiana Migrant Education Program

Migrant Family Search Form

School District: Vermilion School Year: 2023-2024	Parish	School Name	: J. H. Williams	Middle School	
Dear Parents, In order to better serve your children's academic needs, our program wants to identify students who may qualify to receive additional educational services. The information you provide will be kept confidential . Please answer the following questions and return this form to your child's school.					
Have you moved/traveled in the past three years in order to do agricultural/fishing work?					
□ NO □ YES (Please check all that apply below & complete contact information)					
Picking cotton, vegetables, fruit, pecans, hay, soybeans, sugarcane, etc.	Working in a poultry farm	Working in a dairy farm	Working with timber or lumber	Working in a plant nursery, orchard, tree growing or harvesting	
Working with livestock such as cattle, goats, sheep, horses, rabbits, hogs, or turtle farming.	Working in a commercial fishing, shrimping, crabbing or crawfish ponds	Other similar work?	Please explain:		
Parent (Guardian) Name:		Bes	t time to contact you	I:	
For School Use Only:					
Please return completed surveys to: Vermilion Parish School Board / Central Office					

Primary/Home Language Survey for All New Incoming Students

Parents or guardians of ALL new incoming students K-12 should complete this survey. This form is only for determining whether the student needs English Learner services and will not be used for immigration matters or reported to immigration authorities.

Student Information:	
First Name:	Date of Birth:
Last Name:	Date Entered US School:
Questions for Parents or Guardians	Response
What is the most common language(s) spoken in your home?	
Which language did your child learn first?	
Which language does your child use most often at home?	
In what language do you most often speak to your child?	
What language does your child use with friends?	
The answers to the above questions will tell us if a student and help us to ensure that important opportunities to restudents who need them.	
Has your child received ESL/EL services previous	ly? Yes No
In what language would you prefer to receive infor	mation from the school?
Parent's or Guardian's Signature	Date

J. H. Williams Middle School

2023-2024

6th, 7th & 8th Grade Supply List

6TH GRADE SUPPLIES

- 1-set wired earbuds or earphones
- 1-(3) ring 1½-inch binder with clear inserts on cover
- 1-(3) subject spiral notebook
- 1-plastic prong folder with pockets
- 1-pack of wide ruled loose-leaf paper
- 1-pack of dividers with tabs
- 1-pack of pencils (REPLENISH AS NEEDED)
- 1-pack of highlighters
- 1-pack of glue sticks
- 1-pack of colored pencils
- 1-hand sanitizer
- 1-composition book
- 2-boxes of tissues (For Homeroom)

7TH GRADE SUPPLIES

- 1-set wired earbuds or earphones
- 1-11/2-inch binder for ELA
- 2-packs of (5) subject dividers
- 2-packs loose-leaf paper (REPLENISH AS NEEDED)
- 2-single subject notebooks
- 6-pocket folders
- 1-pack of highlighters
- 1-pack blue/black pens (REPLENISH AS NEEDED)
- 1-pack of red ink pens
- 1-pack of pencils (REPLENISH AS NEEDED)
- 1-pack of crayons
- 1-pack dry erase markers
- 2-bottles of glue and 1-glue stick
- 1-protractor and 1-ruler
- 3-manila folders
- 1-basic four-function calculator
- 1-pack of graph paper
- 2-boxes of tissues (For Homeroom)

8TH GRADE SUPPLIES

- 1-set wired earbuds or earphones
- 2-packs of wide ruled loose-leaf paper (REPLENISH AS NEEDED)
- 3-packs of pens 2 black or blue, 1red
- 1-pack of pencils #2 (REPLENISH AS NEEDED)
- 1-pack pencil-top erasers
- 1-pack color pencils or markers
- 1-pack multi-colored highlighters
- 2-(2) inch binders
- 4-manila folders
- 2-pocket folders with prongs
- 1-(3) subject notebook
- 1-(3) subject college ruled notebook
- 1-composition notebook
- 1-pack thin point dry erase markers
- 1-pack of plastic page protectors
- 1-pack of graph paper
- 1-pack of dividers
- 2-boxes of tissues (For Homeroom)

<u>FEES</u> <u>SCHOOL I.D.</u>→→ \$15.00

REPLACEMENT/LOST: (I.D. $\rightarrow \rightarrow \$7.00 / I.D. CASE \rightarrow \rightarrow \$4.00 / LANYARD \rightarrow \rightarrow \2.00)

CHORUS $\rightarrow \rightarrow \30.00 THIS INCLUDES THE T-SHIRT

BAND $\rightarrow \rightarrow \40.00 & INSTRUMENT RENTAL IF NEEDED $\rightarrow \rightarrow \40.00 AR Fee $\rightarrow \rightarrow \$5.00 / STEM FEE \rightarrow \rightarrow \$5.00 / SCIENCE FEE \rightarrow \rightarrow \2.00 JHW P.E. UNIFORM $\rightarrow \rightarrow \$20.00 - (SHIRTS \rightarrow \rightarrow \$10.00)$ & (SHORTS $\rightarrow \rightarrow \10.00)

P.E. LOCKER RENTAL $\rightarrow \rightarrow \$3.00 - (P.E. LOCK REPLACEMENT/LOST \rightarrow \rightarrow \$5.00)$

ATTENTION TO NOTES & REMINDERS

- > PLEASE NOTIFY THE FRONT OFFICE IN PERSON AS TO ANY CHANGES OR MODIFICATIONS TO YOUR ADDRESS OR PHONE NUMBER(S), AS SOON AS POSSIBLE, ESPECIALLY THE INCOMING 6TH GRADERS
- > IF YOUR ADDRESS HAS CHANGED OR NEEDS TO BE UPDATED, 2 RECENT UTILITY BILLS are REQUIRED
- > IF THE BILLS ARE NOT IN THE CUSTODIAL PARENT/GUARDIAN'S NAME, YOU'LL NEED AN AFFIDAVIT ALONG WITH 2 CURRENT UTILITY BILLS IN THE NAME OF THE PERSON WHOM YOU ARE RESIDING WITH
- KEEPING AN ACCURATE RECORD OF THE CHILD'S CONTACT INFORMATION IS IMPORTANT
- SPECIAL DIETARY NEEDS OR MEDICATION ORDER FORMS NEED TO BE UPDATED EVERY SCHOOL YEAR
- PLEASE REVIEW THE ATTENDANCE/DRESS CODE IN THE J.H. WILLIAMS PARENT/STUDENT HANDBOOK
- > EVERY STUDENT IS REQUIRED TO HAVE AND WEAR THEIR ID WHILE ON CAMPUS
- > THIS IS A BASIC SUPPLY LIST; EACH TEACHER MAY HAVE A SPECIFIC ITEM(S) NEEDED FOR THEIR CLASS
- > THE SCHOOL SUPPLIES SHOULD BE REPLENISHED THROUGHOUT THE SCHOOL YEAR AS NEEDED
- > SPIRIT SHIRTS OR J.H. WILLIAMS CLUB SHIRTS CAN ONLY BE WORN ON FRIDAYS "WHEN ANNOUNCED"
- > REGULAR BLUE JEANS ON FRIDAYS FOR \$1.00, "WHEN ANNOUNCED"
- > FOR TRANSPORTATION CALL (337-898-5709) OR (337-898-5710)
- > PLEASE SEND THE STUDENT WITH THE <u>EXACT CHANGE FOR EACH ITEM</u> BEING <u>PURCHASED</u>: <u>ID</u>, <u>PE</u>, <u>BAND</u>, CHORUS & ANY OTHER CLASS FEES
- > IF PAYING WITH A MONEY ORDER PLEASE MAKE SURE TO WRITE THE STUDENT'S NAME ON THE MONEY ORDER
- > IF YOU SEND SOMEONE TO SPEAK WITH, GIVE MEDICINE OR CHECK THE STUDENT OUT, THE PERSON'S NAME MUST BE ON THE EMERGENCY CARD. PLEASE HAVE THAT PERSON COME WITH THEIR ID. IF THEY ARE NOT ABLE TO PROVIDE THE SCHOOL WITH A PICTURE ID, THEY WILL HAVE TO SPEAK WITH AN ADMINISTRATOR. YOUR COOPERATION REGARDING THIS MATTER IS GREATLY APPRECIATED.

J.H. Williams Middle School

1105 Prairie Avenue Abbeville, Louisiana 70510-4901 Ph.: (337)893-3943 Fax: (337)893-5190

Ryan Abshire Assistant Principal Diane Comeaux Principal Lisa Broussard Assistant Principal

2023-2024 ORIENTATION LETTER

May 2023

Dear Parents and Students,

We are looking forward to another outstanding school year. Student's first day will be **Thursday**, **August 10**th. Please take time to review this important information.

- New student registration will be held on Thursday, July 27th, from 8:00 a.m. to 1:00 p.m.
- **Student Orientations are Mandatory and they will be held in the Commons Area.** Parents do not need to attend with 7th and 8th grade students. Parents of 6th grade students must attend the Parent Meeting, which begins at 10:00 a.m.

GRADE	DATE	TIME
6th GRADE Students Only	Wednesday, August 2nd	8:00 a.m. – 10:00 a.m.
6th GRADE Parent Meeting	Wednesday, August 2nd	10:00 a.m.
7th GRADE Students Only	Wednesday, August 2nd	1:00 p.m.
8th GRADE Students Only	Wednesday, August 2nd	2:00 p.m.

The following items of business will be taken care of at orientation:

- Students will pick up their 2023-2024 academic schedules, Book of Acknowledgments, and Emergency Cards. Handbooks are digital and can be found online. Completed forms need to be returned the 1st day of school.
- JHW PBIS Uniform T-shirts & sweatshirts will be ready for pick up if they were ordered by June 8th, 2023.
 - Additional orders will be taken at orientation.
- The school ID <u>should</u> be paid at orientation. Once school begins <u>All</u> students are required to wear their 2023-2024 JHW ID on the school lanyard around their neck.
 - o ID Fee \$15.00
 - JHW P.E. Uniforms are mandatory. Each student must purchase a P.E. uniform; <u>check schedule</u>. P.E. Shirt \$10.00 & P.E. Shorts \$10.00
 - o Locker Rental \$3.00
- <u>NO checks</u>; you must have the exact amount due in cash or money order for each fee that is being paid during the 2023-2024 school year, your cooperation regarding this matter is greatly appreciated.