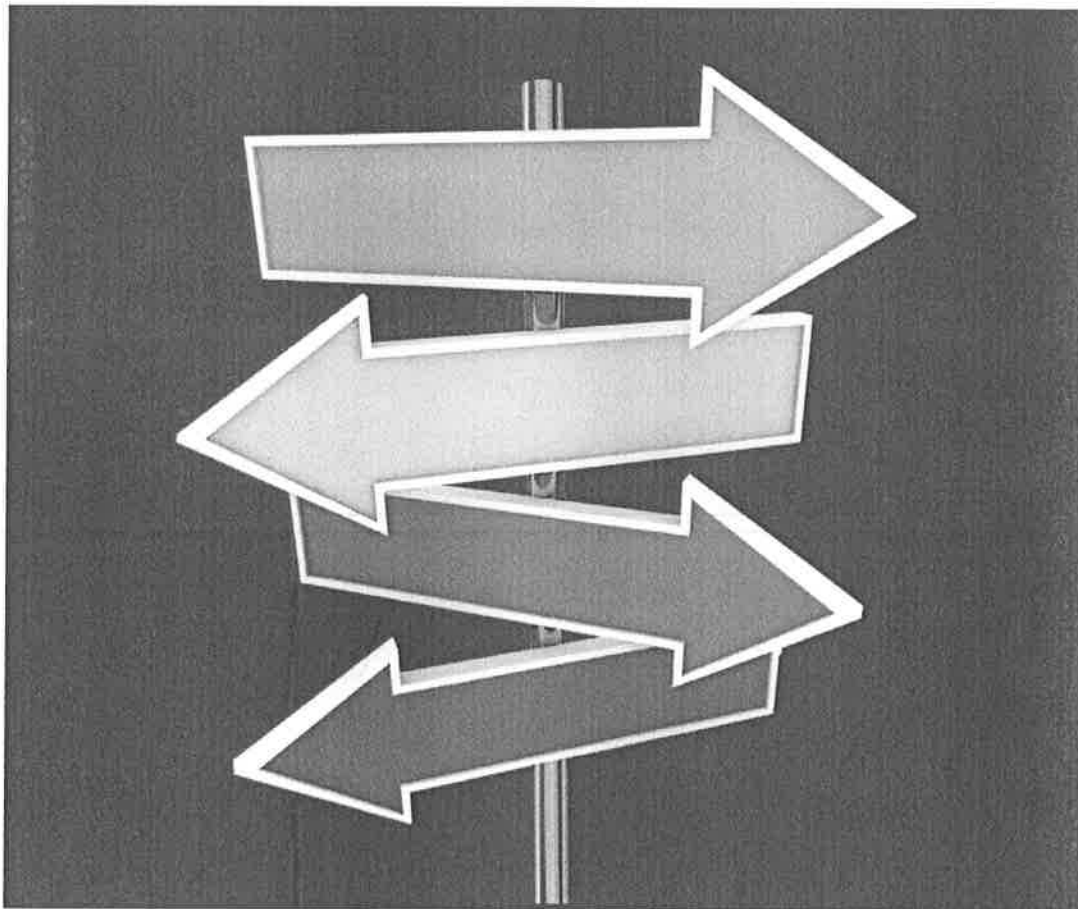


**2023-2024**  
**Tyler County DAEP**  
**Admission Forms**



# Tyler County Disciplinary Alternative Education Program

Confidential Student Status Sheet  
Cover Sheet

110 Pine Hwy 287  
Woodville, Texas 75979  
409-331-3437

Jason H. Hicks - Director  
Kenyata Williams- Teacher

Student's Name: \_\_\_\_\_ ID# \_\_\_\_\_

Special Education/ 504 - Y/ N    DOB \_\_\_\_\_    Grade Level \_\_\_\_\_

Student's Home District: \_\_\_\_\_

Students School Contact Person: \_\_\_\_\_

SS number: \_\_\_\_\_ Lunch status: Reg/ Free/ Reduce

Probation - Y / N    Probation Officer \_\_\_\_\_

Number of days assigned: \_\_\_\_\_ Entry date: \_\_\_\_\_ Exit Date: \_\_\_\_\_

Reason for Placement

\_\_\_\_\_  
\_\_\_\_\_

If MDR is Required ; Provide explanation as to why students disability/behavior is not  
the cause for current Disciplinary Infraction/DAEP Placement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Placement: \_\_\_\_\_ Mandatory                      \_\_\_\_\_ Discretionary

Guardian(s) name : \_\_\_\_\_

Phone Number: \_\_\_\_\_

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**505 North Charlton**  
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Jason Hicks----Director

Kenyata Williams---Teacher

**TCDAEP/WISD Acknowledgment Form**

**Parent/Guardian and Student Acknowledgment Form**

1. We understand that DAEP student will not be allowed to use the telephone unless it is an emergency.
2. We have received a copy of the Tyler County DAEP Handbook and understand the Rules and Guidelines set forth in this document. We understand that all students attending the DAEP will be accountable for their own behavior and will be subject to the disciplinary consequences outlined in this handbook.
3. We understand that assignment to the DAEP is the last option for this student to receive a public education prior to expulsion. Success will be completely dependent upon the behavior, attitude, and actions of the student. In order to take advantage of this opportunity, this student must participate in and successfully complete the classroom course work assigned.
4. Rest is very important for good classroom performance, but we understand that this student will not be allowed to sleep in class at any time.
5. We understand that drug testing may become necessary and we consent to drug testing if it is necessary.
6. We are aware and understand that one of the provisions in the TCDAEP Handbook discipline Code indicates that Corporal Punishment may be an option exercised by the TCDAEP Administrator. Corporal Punishment ( is / is not ) permissible for this student.
7. We understand the Trespass restrictions for students assigned to the DAEP as stated in the Handbook.
8. We grant permission to the Tyler County Disciplinary Alternative Education Program (TCDAEP) and Woodville Independent School District (WISD), to make video tapes, photographs, and/or sound recordings separately or in combination, of our child, for the safety and protection of our child in the classroom. We also understand that these video tapes, photographs, and/or sound recordings may be used in the determination of our child being a victim, our child being in violation of the student code of conduct, or our child being in violation of the TCDAEP Handbook. We also understand that it may be necessary for these recordings to be viewed by school personnel, law enforcement, and other parent/guardians in the determination of the school or state laws being violated.
9. We understand that any questions or concerns are to be directed to the DAEP Director or to the WISD ISD Superintendent of School.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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Kenyata Williams---Teacher

**Health Services**

Dear parent or Guardian,

Any medication which is to be given at school must be furnished by the parent or guardian. The medication must be in the original container and must be properly labeled. A written request which includes the information below must be sent with the medication.

STUDENT NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

MEDICATION: \_\_\_\_\_

INSTRUCTIONS: \_\_\_\_\_

REASON FOR MEDICATION: \_\_\_\_\_

PARENT OR GUARDIAN SIGNATURE: \_\_\_\_\_

CONTACT INFO FOR PARENT/GUARDIAN: \_\_\_\_\_

ANY KNOWN ALLERGIES: \_\_\_\_\_

MEDICAL HISTORY: \_\_\_\_\_

In case of serious accident or illness, and attempts made to reach persons on contact sheet including you a representative of the school district will take your child to:

Students Doctor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Or the nearest hospital for treatment by any licensed physician. \_\_\_\_\_ (initials)

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Jason Hicks----Director

Kenyata Williams---Teacher

Date: \_\_\_\_\_

**Permission for Use of Video and/or Photographs in the TCDAEP Classroom**

I grant permission to the Tyler County Disciplinary Alternative Education Program (TCDAEP) and Woodville Independent School District (WISD), to make video tapes, photographs, and/or sound recordings, separately or in combination, of my child,  
(Student Name) \_\_\_\_\_, for the safety and protection of my child in the classroom. I also understand that these videotapes, photographs, and/or sound recordings may be used in the determination of my child being a victim, my child being in violation of the student code of conduct, or my child being in violation of the TCDAEP Handbook guidelines. I understand that my child may be videotaped, and or photographed participating in the TCDAEP classroom setting. Photos and/or video footage will remain the property of the TCDAEP to be used as necessary to support the contention that my child is/was a victim, my child was in violation of the student code of conduct, or my child was in violation of the TCDAEP handbook. This videotape, sound and/or photographic information may be viewed by school officials, law enforcement personnel or other parent/guardians as needed in the process. When i sign my name on this page, I am indicating that this page was read by me and that I am agreeing to the use of photographs, videotapes, and/or sound recordings of my child for the situations listed above.

Parent/Guardian Signature:: \_\_\_\_\_ Date: \_\_\_\_\_

Director/Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Jason Hicks----Director

Kenyata Williams---Teacher

**Consent of Information**

I give my consent to the Tyler County DAEP employees to give and receive any information that will help my student \_\_\_\_\_, in any way, from the Juvenile Probation Officers, any other administrator, teacher or teaching assistant or any counselor involved with my child.

---

Signature of Parent/Guardian

---

Date

**Tyler County Disciplinary Alternative Education Program**  
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---

Jason Hicks----Director

Kenyata Williams---Teacher

**Parents/Guardians of the Students at the Tyler County DAEP**  
**Re: Alcohol and Drug Counselor**

Dear Parents/Guardians of \_\_\_\_\_, we  
are provided an Alcohol and Drug Counselor by the Tyler County Juvenile Probation  
Department for the students attending classes at the TCDAEP. If you have **no**  
**objections** to your student seeing this counselor please sign and date below.

Thank You,

Kenyata Williams  
TCDAEP Director

---

Parent Signature

---

Date

505 North Charlton  
Woodville, Texas 75979  
409-331-3437

---

Jason Hicks----Director

Kenyata Williams---Teacher

## Handbook Acknowledgement Form

I have read the TCDAEP handbook, and by the signing of this document I state that I am aware of and understand all the rules of the TCDAEP.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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**Jason Hicks----Director**

**Kenyata Williams---Teacher**

Dear Parents/Guardians,

School Districts now require a Parent or Guardian to show a photo ID when picking up a student early from a school campus. Please be prepared to show a photo ID when picking up a student early from the TCDAEP campus. This measure is in place to protect the students as well as the Parents/Guardians.

Thank you for your attention and cooperation in this matter.

Kenyata Williams  
TCDAEP Director

## **Tyler County DAEP Community Service Program**

1. The Community service program is designed to help students who have long term sentences but have near perfect behavior on our campus return to school earlier.
2. This process is student by student basis, Offenses type and behavior risk level will determine eligibility for community service. No student is entitled to community service, it is earned with good behavior, good attendance and a positive attitude. Anyone can be denied the opportunity for community service at the discretion of the DAEP Director.
3. The program is limited to students who have a term of over 30 days, or Students with 30 day terms. Students with 30 plus days of DAEP placement will become eligible for community service after the first successful 30 day have been completed. Students with only a 30 day placement will be eligible for service on the 24th day of service.
4. Any student who comes to DAEP with a term of over 30 days will become eligible after 30 days of service with a clean service record while here, thus making them eligible to gain two days of placement for one day of community service while at the DAEP. Any Student with a 30 day term will become eligible on the 24th day of placement. The student will complete 3 days of community service to earn one day credit for each day they perform community service. Thus this reduces a 30 day placement to 27 day placement. Their behavior and attitudes will determine eligibility for community service. Effectively saving them three days of placement time.
5. Who is not eligible for community service - Students with an extreme behavior placement, students who display negative behavior while here on campus and students who are repeat offenders. ( note : a student can be removed from or added to community service at any point for any reason the Staff a DAEP deems necessary). Chronic absenteeism will result in community service program removal.
6. Community service will be limited to the Transportation facility for now. Students will have jobs such as sweeping and cleaning the buses, Sweeping floors, raking leaves or picking up trash, even washing off bus windshields. They will be supervised by Coach Williams or myself at all times. and there will never be more than 3 together.
7. Students will work for 45minutes to an hour and for every day they do this they will receive 2 days for 1 day of DAEP services.
8. My hopes are that Mr. Holligsworth can begin to come by and get a student or two, maybe a couple of days a week and take them to clean up trash after a game, scrape gum off bleachers, work in flower beds and whatever we need. DeWayne and I have discussed this some already.

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**PERMISSION TO BE PICKED UP**

**\*\*\*Please remember that this can not be another student enrolled at a public or private school or under the age of 18.**

Permission is granted by (Name & Relation to student) \_\_\_\_\_

To allow the following persons to pick up my child \_\_\_\_\_

| Name  | Relation to Student | Phone #'s |
|-------|---------------------|-----------|
| _____ | _____               | _____     |
| _____ | _____               | _____     |
| _____ | _____               | _____     |
| _____ | _____               | _____     |
| _____ | _____               | _____     |
| _____ | _____               | _____     |

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Phone numbers where I can be reached \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email Address: \_\_\_\_\_

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**Criminal Trespass Warning Notice**

**NAME:** \_\_\_\_\_

**RACE:** \_\_\_\_\_ **SEX:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**LOCATION OF WARNING: Disciplinary Alternative Building  
110 Pine Street  
Woodville, TX 75979**

**DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_

***SECTION 37.107 OF THE TEXAS EDUCATION CODE STATES THAT A PERSON COMMITS AN OFFENSE IF HE/SHE TRESPASSES ON THE GROUNDS OF ANY SCHOOL DISTRICT OF THIS STATE AND HE/SHE HAS NOTICE THAT THE ENTRY WAS FORBIDDEN OR RECEIVED NOTICE TO DEPART BUT FAILED TO DO SO. AN OFFENSE UNDER THIS SECTION IS A CLASS C MISDEMEANOR.***

***I HEREBY ACKNOWLEDGE HAVING BEEN WARNED/GIVEN NOTICE THAT IF I TRESPASS ON THE ABOVE MENTIONED PROPERTY I WILL BE SUBJECT TO PROSECUTION FOR CRIMINAL TRESPASS.***

\_\_\_\_\_  
**DATE:** \_\_\_\_\_

**PERSON WARNED**

\_\_\_\_\_  
**DATE:** \_\_\_\_\_

**SCHOOL OFFICER**