

Circle One Option:

Traditional  
Blended  
Virtual

**Agra Schools Enrollment Form**  
112 South Main Agra, OK 74824  
Ph. 1.918.375.2261 Fax 1.918.375.2263

Date \_\_\_\_\_ Grade Level: \_\_\_\_\_ Social Security #--optional \_\_\_\_\_

Student's Birth Date \_\_\_\_\_ Birth Place \_\_\_\_\_  
(Month) (Day) (Year) (City) (State)

Student: \_\_\_\_\_ Gender: M F Race: \_\_\_\_\_  
(First) (Middle) (Last)

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

\_\_\_\_ Legal Guardian \_\_\_\_ Has Custody \_\_\_\_ Access to Records \_\_\_\_ Pickup Rights \_\_\_\_ Emergency Contact \_\_\_\_ Lives with  
Father's Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_  
\_\_\_\_ Legal Guardian \_\_\_\_ Has Custody \_\_\_\_ Access to Records \_\_\_\_ Pickup Rights \_\_\_\_ Emergency Contact \_\_\_\_ Lives with  
Guardian' name (if other than parent) \_\_\_\_\_ Contact number \_\_\_\_\_

Tribe Name: \_\_\_\_\_ CDIB#: \_\_\_\_\_

List of allergies/major health problems: \_\_\_\_\_

If this child has a medical condition that affects their day to day activity at school we must have a statement from your doctor with an official diagnosis.

Does this student wear eyeglasses? No Yes Wear contacts? No Yes Wear hearing aide? No Yes

In case of emergency, please contact : (List in order of preferred contact). Be sure and give names and phone numbers that can be reached during school hours.

1 \_\_\_\_\_ (relationship) \_\_\_\_\_ Phone # (include area code) \_\_\_\_\_

2 \_\_\_\_\_ (relationship) \_\_\_\_\_ Phone # (include area code) \_\_\_\_\_

3 \_\_\_\_\_ (relationship) \_\_\_\_\_ Phone # (include area code) \_\_\_\_\_

If there are court orders, custody orders etc... please provide us with a copy.

Agra Schools requires the following to be on file:

- Copy of Social Security Card\_\_ optional \_\_\_\_\_
- Birth Certificate \_\_\_\_\_
- Current Immunization Record or exemption form \_\_\_\_\_

**New Students Only**, Name of previous school \_\_\_\_\_

- Is your child currently under discipline from a previous school? No Yes



Corporal Punishment

Student's Name \_\_\_\_\_

Dear Parent/Guardian,

Corporal punishment (paddling) is a discipline option at Agra Public School. Please read the statements below, indicate your choice, and return this form to school.

\_\_\_\_\_ Yes you may use corporal punishment\*\*\*

\_\_\_\_\_ Yes you may use corporal punishment upon notification\*\*\*

\_\_\_\_\_ No you may not use corporal punishment\*\*\*

Parent/guardian signature \_\_\_\_\_

Thank you.

\*\*\* It is the responsibility of the parent/guardian to notify the school *in writing* of any changes to the above release.

Field Trip Permission

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

School related field trips are designed to enrich the taught curriculum and are considered to be a privilege for Agra Public School students. I understand that District Student Code of Conduct rules apply to my child while he/she is attending school related field trips. I further understand that my child's failure to follow the Code of Conduct rules throughout the school year could result in the loss of school related field trip privileges, at the discretion of the principal, for my child.

\_\_\_\_\_ I give permission for my child to attend school related field trips during the school year.

\_\_\_\_\_ I do not give permission for my child to attend school related field trips during the school year. I understand in not giving permission that I must contact the principal to make other arrangements for my child's supervision on the day(s) his/her class is taking part in a school related field trip.

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

\_\_\_\_\_  
Date

Photographic/Video/Recording

Dear Parent/Guardian: We are asking for your permission to showcase your child's/children's picture and accomplishments in publications such as our school paper, yearbook, as well as, the local newspapers. Please read the detailed information below and sign this form.

As part of the instructional process, your child may be involved in activities that include Photographing, filming, recording, and videotaping. These activities include but may not be limited to the following:

1. Creation, publication and dissemination of a portfolio that includes photographs, videos, recordings, compositions, and copies of schoolwork documenting your child's academic process;
2. Inclusion of your child's photograph, video, recordings, and copies of schoolwork in the school newspaper, school yearbook, student identification cards, internet pages, as well as other school publications;
3. Inclusion of your child's photograph, video, recordings, etc. and copies of schoolwork in publications in state and local newspapers, school newsletters, radio and television stations, and via the internet and other distance learning opportunities.

I understand that any photographs, videos, recordings, etc. and copies of school work that are published in any form will be without monetary compensation to Agra Public School, to the student, or the parents of the student, and are for educational or promotional purposes only. This release will remain in effect until revoked in writing by the person granting permission.

Please check yes or no.....Then sign and date below. Please call any building principal if you have any questions.

I give permission for \_\_\_\_\_.

\_\_\_\_\_ YES, I give my permission.

\_\_\_\_\_ NO, I do not give permission.

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Signature of Parent/Guardian

Date

## Internet And Other Computer Networks Acceptable Use And Internet Safety Policy

### Acceptable Uses

- i. **Educational Purposes Only.** The school district is providing access to its computer networks and the Internet for educational purposes *only*. If the user has any doubt about whether a contemplated activity is educational, the user may consult with the person(s) designated by the school to help decide if a use is appropriate.

### Unacceptable Uses of Network.

1. Among the uses that are considered unacceptable and which constitute a violation of this policy are the following:
  - A. Uses that violate the law or encourage others to violate the law. Do not transmit offensive or harassing messages; offer for sale or use any substance the possession or use of which is prohibited by the school district's student discipline policy; view, transmit or download pornographic materials or materials that encourage others to violate the law; intrude into the networks or computers of others; and download or transmit confidential, trade secret information, or copyrighted materials. Even if materials on the networks are not marked with the copyright symbol, the user should assume that all materials are protected unless there is explicit permission on the materials to use them.
  - B. Uses that cause harm to others or damage to their property. For example, do not engage in defamation (harming another's reputation by lies); employ another's password or some other user identifier that misleads message recipients into believing that someone other than the user is communicating or otherwise using his/her access to the network or the Internet; upload a worm, virus, "Trojan horse," "time bomb," or other harmful form of programming or vandalism; participate in "hacking" activities or any form of unauthorized access to other computers, networks, or information systems.
  - c. Uses that jeopardize the security of student and staff access and of the computer network or other networks on the Internet. For example, do not disclose or share your password with others; do not impersonate another user.
  - D. Uses that are commercial transactions. Students, staff, and other users may not sell or buy anything over the Internet. The user should not give others private information about the user or others, including credit card numbers and social security numbers.

### Netiquette.

1. All users must abide by rules of network etiquette, which include the following:
  - A. Be polite. Use appropriate language. No swearing, Vulgarities, suggestive, obscene, belligerent, or threatening language.
  - B. Avoid language and uses that may be offensive to other users. Do not use access to make, distribute, or redistribute jokes, stories, or other material that is based upon slurs or stereotypes relating to race, gender, ethnicity, nationality, religion, or sexual orientation.
  - C. Do not assume that a sender of e-mail is giving his or her permission for the user to forward or redistribute the message to third parties or to give his/her e-mail address to third parties. This should be done only with permission or when the user knows that the individual would have no objection.
  - D. Be considerate when sending attachments with e-mail (where this is permitted). Be sure that the file is not too large to be accommodated by the recipient's system and is in a format that the recipient can open.
  - E. Agra Public School is educating minors about appropriate online behavior, including interacting with other individuals on social networking and chat rooms and cyber bullying awareness and response.

### Internet Safety

1. **General Warning: Individual Responsibility of Parents and Users.**

All student users and their parents/guardians are advised that access to the electronic network may include the potential for access to materials inappropriate for school-aged students. Every user must take responsibility for his or her use of the computer network and Internet and stay away from these sites. Parents of minors are the best guides to materials to shun. If a student or staff member finds that other users are visiting offensive or harmful sites; he or she should report such use to the appropriate school designee.
2. **Personal Safety.**

Be safe. In using the computer network and Internet, the user should not reveal personal information such as the user's home address or telephone number. The user should not use his/her real last name or any other information which might allow a person to locate the user without first obtaining the permission of a supervising teacher. Do not arrange a face-to-face meeting with someone "met" on the computer network or Internet without a parent's permission (if the user is under 18). Regardless of the user's age, the user should never agree to meet a person the user has only communicated with on the Internet in a secluded place or in a private setting.

3. "Hacking" and Other Illegal Activities.

It is a violation of this policy to use the school's computer network or the Internet to gain unauthorized access to other computers or computer systems, or to attempt to gain such unauthorized access. Any use which violates state or federal law relating to copyright, trade secrets, the distribution of obscene or pornographic materials, or which violates any other applicable law or municipal ordinance, is strictly prohibited.

4. Confidentiality of Student Information.

Personally identifiable information concerning students may not be disclosed or used in any way on the Internet without the permission of a parent or guardian or, if the student is 18 or over, the permission of the student. Users should never give out private or confidential information about themselves or others on the Internet, particularly credit card numbers and Social Security numbers. A supervising teacher or administrator may authorize the release of directory information, as defined by law, for internal administrative purposes or approved educational projects and activities.

5. Active Restriction Measures.

The school, either by itself or in combination with the Data Acquisition Site providing Internet access, will utilize filtering software or other technologies to prevent users from accessing visual depictions that are (1) obscene, (2) pornographic, or (3) harmful to minors. The school will also monitor the online activities of users, through direct observation and/or technological means, to ensure that users are not accessing such depictions or any other material that is inappropriate for minors.

Internet filtering software or other technology-based protection systems may be disabled by a supervising teacher or school administrator, as necessary, for purposes of bona fide research or other educational projects being conducted by students age 17 and older.

Privacy

Network and Internet access is provided as a tool for the user's education. The school district reserves the right to monitor, inspect, copy, review, and store at any time and without prior notice any and all usage of the computer network and Internet access and any and all information transmitted or received in connection with such usage. All such information files shall be and remain the property of the school district and no user shall have any expectation of privacy regarding such materials.

Failure To Follow Policy

The user's use of the computer network and Internet is a privilege, not a right. A user who violates this policy, shall at a minimum, have his or her access to the computer network and Internet terminated, which the school district may refuse to reinstate for the remainder of the student's enrollment or the staff member's employment in the school district. A user violates this policy by his or her own action or by failing to report any violations by other users that come to the attention of the user. Further, a user violates this policy if he or she permits another to use his or her account or password to access the computer network and Internet, including any user whose access has been denied or terminated. The school district may also take other disciplinary action in such circumstances.

Parent or Guardian: (If applicant is less than 18 years of age, a parent or guardian must also read and sign this agreement.)  
As the parent or guardian of this student, I have read the terms and conditions for Internet Access. I understand that the school district is providing this access for educational purposes only and hereby give my permission to grant access for my child and will accept responsibility for supervision when my child is not in a school setting.

\_\_\_\_\_ YES, my child has permission to use the computer/internet following the guidelines listed above.

\_\_\_\_\_ NO, my child does not have my permission to use the computer lab/internet.

\_\_\_\_\_  
PARENT SIGNATURE DATE

I understand and will abide by the district's terms and conditions for Internet access. I further understand that any violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked and school disciplinary and/or appropriate legal action may be taken.

I have read the Computer/Internet Access Agreement and Board of Education policy regarding computer/internet access and understand and agree to follow the procedures listed above.

\_\_\_\_\_  
STUDENT SIGNATURE DATE

Emergency Permission Form  
(To be Completed and Signed by Parent/Guardian)

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_

Please list any significant health problems that might be significant to a physician evaluating your child in case of emergency \_\_\_\_\_  
\_\_\_\_\_

Please list any allergies to medications, etc \_\_\_\_\_

Has student been prescribed an inhaler or epipen? \_\_\_\_\_

Is the student presently taking medication? \_\_\_\_\_ If so, what type? \_\_\_\_\_

EMERGENCY AUTHORIZATION: In the even I cannot be reached in an emergency. I hereby give permission to physicians selected by the coaches and staff of AGRA HIGH SCHOOL to hospitalize, secure proper treatment for and to order injection and/or anesthesia and/or surgery for the person named above.

Daytime Phone Number (where to reach you in case of emergency) \_\_\_\_\_

Evening Phone Number (where to reach you in case of emergency) \_\_\_\_\_

**\*EMERGENCY PERMISSION FORM MAY BE REPRODUCED TO TRAVEL WITH RESPECTIVE TEAMS AND IS ACCEPTABLE FOR EMERGENCY TREATMENT IF NEEDED.**

# STUDENT PICK UP

STUDENT \_\_\_\_\_ GRADE \_\_\_\_\_

PARENT/GUARDIAN \_\_\_\_\_

PHONE # \_\_\_\_\_

TEACHER \_\_\_\_\_

## PEOPLE ALLOWED TO PICK-UP OR SIGN OUT YOUR CHILD:

NAMES:

PHONE NUMBERS:

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## PEOPLE NOT ALLOWED TO PICK-UP OR SIGN OUT YOUR CHILD:

NAMES:

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PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ALL INFORMATION AND PHONE NUMBERS NEED TO BE ACCURATE AND UP TO DATE!!!!!!!!!!!!

YOUR CHILD WILL ONLY BE RELEASED TO PARENTS OR PERSONS LISTED ABOVE!!!



U.S. DEPARTMENT OF EDUCATION  
OFFICE OF INDIAN EDUCATION  
WASHINGTON, DC 20202  
TITLE VII STUDENT ELIGIBILITY CERTIFICATION  
Elementary and Secondary Education Act, Title VII, Part A, Subpart 1

Parents: Please return this completed form to your child's school. In order to apply for a formula grant under the Indian Education Program, your child's school must determine the number of Indian children enrolled. Any child who meets the following definition may be counted for this purpose. You are not required to complete or submit this form to the school. However, if you choose not to submit a form, the school cannot count your child for funding under the program. This form will become part of your child's school record and will not need to be completed every year. This form will be maintained at the school and information on the form will not be released without your written approval.

*Definition: Indian means any individual who is (1) a member (as defined by the Indian tribe or band) of an Indian tribe or band, including those Indian tribe or bands terminated since 1940, and those recognized by the State in which the tribe or band reside; or (2) a descendent in the first or second degree (parent or grandparent) as described in (1); or (3) considered by the Secretary of the Interior to be an Indian for any purpose; or (4) an Eskimo or Aleut or other Alaska Native; or (5) a member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.*

NAME OF CHILD \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(As shown on school enrollment records)

School Name \_\_\_\_\_ Grade \_\_\_\_\_

NAME OF TRIBE, BAND OR GROUP \_\_\_\_\_

Tribe, Band or Group is: (check one)

Federally Recognized,  State  Organized Indian Group  
 Including Alaska Native  Recognized  Terminated  Meeting #5 of the  
Definition Above

Name of individual with tribal membership: \_\_\_\_\_

Individual named is (check one):  Child  Child's Parent  Child's Grandparent

Proof of membership, as defined by tribe, band, or group is:

A. Membership or enrollment number (if readily available) \_\_\_\_\_ OR

Other (explain) \_\_\_\_\_

Name and address of organization maintaining membership data for the tribe, band or group:  
\_\_\_\_\_

I verify that the information provided above is accurate:

PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Mailing Address \_\_\_\_\_ Telephone \_\_\_\_\_

Notice: Public Reporting Burden Notice on Reverse Side

**STUDENT INFORMATION**

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_  
Last Name First Name Middle Name

Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_ Student ID # \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_  
MM/DD/YYYY

Is the student of Hispanic or Latino culture or origin? Yes \_\_\_\_\_ No \_\_\_\_\_

Select one or more of the following races:

- \_\_\_\_\_ African American/Black      \_\_\_\_\_ American Indian/Alaskan Native      \_\_\_\_\_ Asian  
 \_\_\_\_\_ Native Hawaiian/Pacific Islander      \_\_\_\_\_ Caucasian/White

1. What is the dominant language most often spoken by the student? \_\_\_\_\_
2. What is the language routinely spoken in the home, regardless of the language spoken by the student? \_\_\_\_\_
3. What language was first learned by the student? \_\_\_\_\_
4. Does the parent/guardian need interpretation services? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what language? \_\_\_\_\_
5. Does the parent/guardian need translated materials? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what language? \_\_\_\_\_
6. What was the date the student first enrolled in a school in the United States? \_\_\_\_\_  
MM/YYYY

Date (MM/DD/YYYY)

Parent / Guardian Signature

**Documentation**  
 Please have test score documentation available for the Regional Accreditation Officer to review.

- Other language than English indicated TWO OR MORE times on questions 1 – 3 above. The student is classified as "more often" and automatically qualifies as bilingual on the accreditation report.
- Other language than English indicated ONLY ONCE on questions 1 – 3 above. The student is classified as "less often" and only qualifies as bilingual on the accreditation report if he or she meets one of the following (any selection below REQUIRES appropriate documentation):
  - 1. Designated English Learner on one of the Oklahoma English language proficiency assessments: ACCESS for ELLs 2.0, Alternate ACCESS for ELLs, WIDA Screener, WIDA MODEL, K-WAPT, W-APT or Oklahoma Pre-K Language Screening Tool (PKST).
  - 2. Scored Basic or Below Basic in ELA on the Oklahoma State Testing Program (OSTP).
  - 3. Scored at or below the 35<sup>th</sup> percentile (or equivalent) composite reading score from spring of the previous school year on a state approved norm-referenced test (NRT).

DOCUMENTATION OF A TEST RESULT FOR STUDENTS MARKED LESS OFTEN

Date(s) of Kindergarten ACCESS, ACCESS for ELLs 2.0, or Alternate ACCESS Test	Score(s) on Kindergarten ACCESS, ACCESS for ELLs 2.0, or Alternate ACCESS	Date of WIDA Screener or K-WAPT/WAPT or WIDA MODEL	Score(s) on WIDA Screener or K-WAPT/WAPT or WIDA MODEL
	Composite / Overall Score		Composite / Overall Score
	1.		1.
	1.		
	1.		

Date(s) of ELA OSTP	Score(s) on ELA OSTP			
	Below Basic	Basic	Proficient	Advanced
	Below Basic	Basic	Proficient	Advanced
	Below Basic	Basic	Proficient	Advanced

Date of the Oklahoma Pre-K Language Screening Tool	Score on Pre-K Language Screening Tool
	%

Date(s) Norm Reference Test (NRT)	Name of the NRT	Composite / Percentile Score(s)

Question 1: Reference WAVE code 1036  
 Question 2: Reference WAVE code 1037  
 Question 3: Reference WAVE code 1038

# FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. Agra Public Schools offer healthy meals every school day. As mandated by the State of Oklahoma Department of Child Nutrition, each family must complete the attached eligibility form. One form per family must be completed and submitted along with enrollment packets. *Otherwise, your child will pay full price for breakfast and lunch.* Your children may qualify for free meals or for reduced price meals. This packet includes an application for free or reduced price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

1. **WHO CAN GET FREE OR REDUCED PRICE MEALS?**
  - All children in households receiving benefits from [State SNAP], [the Food Distribution Program on Indian Reservations (FDPIR)] or [State TANF], are eligible for free meals.
  - Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
  - Children participating in their school's Head Start program are eligible for free meals.
  - Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
  - Children may receive free or reduced price meals if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced price meals if your household income falls at or below the limits on this chart.
2. **HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY?** Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call or e-mail [Agra Public Schools].
3. **DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** No. Use one Free and Reduced Price School Meals Application for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information.
4. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS?** No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact the school immediately.
5. **I GET WIC. CAN MY CHILDREN GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
6. **WILL THE INFORMATION I GIVE BE CHECKED?** Yes. We may also ask you to send written proof of the household income you report.
7. **IF I DON'T QUALIFY NOW, MAY I APPLY LATER?** Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.
8. **WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION?** You should talk to school officials. You also may ask for a hearing by calling or writing to: [Jeff Kelly, Superintendent, jkelly@agra.k12.ok.us].
9. **MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN?** Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced price meals.

10. **WHAT IF MY INCOME IS NOT ALWAYS THE SAME?** List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
11. **WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT?** Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
12. **WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY?** Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
13. **WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY?** List any additional household members on a separate piece of paper, and attach it to your application.
14. **MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR?** To find out how to apply for [State SNAP] or other assistance benefits, contact your local assistance office or call 1-866-411-1877.

If you have other questions or need help, call 918-375-2261.

Sincerely,

Agra Public Schools  
Child Nutrition