

# Meekins Middle School

Stuttgart Public Schools

Stephen Saranie, Principal

2501 So. Main – Stuttgart, AR 72160

870-673-3565

## Student Records Request

Requesting records from:

PREVIOUS SCHOOL (Name, City, State) \_\_\_\_\_

\_\_\_\_\_

<u>STUDENT</u>	<u>DATE OF BIRTH</u>	<u>GRADE</u>

Meekins Middle School  
2501 So. Main Street  
Stuttgart, AR 72160

Phone: 870-673-3565 - Option 2  
Fax: 870-673-0610

Please email records to Julie Eldridge, Counselor  
email: [jeldridge@stuttgartschools.org](mailto:jeldridge@stuttgartschools.org)

- Official administrative records: name, address, birth date, grades, attendance, grade level, birth certificate, immunization records, social security number
- Health and medical records
- Special service information: Special Education (IEP), Gifted and Talented, 504, occupational/physical therapy, speech, AIP, IRI
- Psychological test data (include therapy notes, treatment plan, discharge summary)
- Achievement test scores

"99.31 prior consent for disclosure not required"

(a) An education agency or institution may disclose personally identifiable

~~information from the education records of a student without the written consent of the~~  
parent of the student or the eligible student if the disclosure is (1) to other school officials, including teachers, within the education institution or local education agency who have been determined by the agency or institution to have legitimate education interests; (2) to officials of another school or school system in which the student seeks or intends to enroll, subject to the requirements set forth in 99.34.

Date \_\_\_\_\_

**Stuttgart School District  
Meekins Middle School  
Enrollment Form**

Homeroom: \_\_\_\_\_  
Grade: \_\_\_\_\_  
Student ID #: \_\_\_\_\_

*General Student Information*

First Name: _____	Middle Name: _____	Last Name: _____
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Birthdate: \_\_\_\_\_ Gender: (Circle one) Female Male Nickname: \_\_\_\_\_  
SSN: (Optional) \_\_\_\_\_

<b>Ethnicity (check one):</b> <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<b>Primary Race (check only one):</b> <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White	<b>Additional Race (check all that apply):</b> <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White
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Language Spoken at Home: \_\_\_\_\_ Student Email Address: \_\_\_\_\_

*Student Physical / 911 Address:*

*Student Mailing Address:*

Address: _____ City: _____ State: _____ Zip Code: _____	<input type="checkbox"/> Mailing Address is same as Physical / 911 Address Address: _____ City: _____ State: _____ Zip Code: _____
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Student Home Phone: \_\_\_\_\_ Student Cell Phone: \_\_\_\_\_

*Parent/Guardian Contact Information*

<b>Parent/Guardian 1</b>	
Name: _____	
Relationship to Student: _____	
Language of Correspondence: _____	
Mailing Address: _____	
City: _____	
State: _____ Zip Code: _____	
Email: _____	
Home Phone: _____ Cell Phone: _____	
Work Phone: _____ *Alternate Phone: _____	
Employer: _____	
<input type="checkbox"/> Student Primarily Resides with this Guardian.	

<b>Parent/Guardian 2</b>	
Name: _____	
Relationship to Student: _____	
Language of Correspondence: _____	
Mailing Address: _____	
City: _____	
State: _____ Zip Code: _____	
Email: _____	
Home Phone: _____ Cell Phone: _____	
Work Phone: _____ *Alternate Phone: _____	
<small>*Alternate Phone is used by the district's automated phone message system.</small>	
Employer: _____	
<input type="checkbox"/> Student Primarily Resides with this Guardian.	

**Living With:** (Circle One)

- |                         |                  |                    |
|-------------------------|------------------|--------------------|
| A – Alone               | F – Father Only  | I – Institution    |
| D – Father & Stepmother | G – Grandparents | L – Legal Guardian |
| E – Mother & Stepfather | H – Homeless     | M – Mother Only    |
|                         |                  | P – Both Parents   |
|                         |                  | S – Spouse         |
|                         |                  | T – Foster Parent  |

**Travel Information**

Travel TO School (check one): <input type="checkbox"/> Bus <input type="checkbox"/> Drives Self <input type="checkbox"/> Parent/Guardian (includes walkers, child care vans, etc.) <input type="checkbox"/> District Paid Transportation	Travel FROM School (check one): <input type="checkbox"/> Bus <input type="checkbox"/> Drives Self <input type="checkbox"/> Parent/Guardian (includes walkers, child care vans, etc.) <input type="checkbox"/> District Paid Transportation
Distance from home to school (miles) one way: _____	

**Pre-School Participation** (Circle One)

A – Arkansas Better Chance	H – Headstart	O – Other
E – Even Start	NA – Not Applicable	P – Private Pre-school
EC – Early Childhood	C – 21 <sup>st</sup> Century Community Learning Center	PS – Public School Pre-school

City of Birth: \_\_\_\_\_ State of Birth: \_\_\_\_\_ Birth Country: \_\_\_\_\_

Birth Certificate #: \_\_\_\_\_ Resident Country: \_\_\_\_\_

Is this student a twin (or triplet, quadruplet, etc.)? Yes No

Is this child a dependent of an active or reserve member of a branch of the United State Armed Services? Yes No

If this child resides in a household with an active or reserve member of a branch of the United States Armed Services, please select the branch below.

<input type="checkbox"/> Active Duty – US Army	<input type="checkbox"/> Reserves – US Army	<input type="checkbox"/> National Guard – US Air Force
<input type="checkbox"/> Active Duty – United State Coast Guard	<input type="checkbox"/> National Guard – US Army	<input type="checkbox"/> Active Duty – US Marines
<input type="checkbox"/> Reserves – US Marines	<input type="checkbox"/> Active Duty – US Navy	<input type="checkbox"/> Reserves – US Navy
<input type="checkbox"/> Active Duty – US Air Force	<input type="checkbox"/> Reserves – US Air Force	<input type="checkbox"/> Parents serve in multiple branches

**Emergency/Additional Contact Information:** The Stuttgart School District may contact, or release, my child to the following:

Contacts <i>OTHER</i> than guardians				
Contact Order	Name	Relationship to Child	Phone #	Phone Type (Home, Cell, Work)
1				
2				
3				
4				
5				

**Sibling Information** (List other children in your home that attend Stuttgart School District)

Sibling's FIRST Name	LAST Name	School	Grade

Physician's Name: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

List any medical concerns and/or medications for this child: \_\_\_\_\_  
 \_\_\_\_\_

Has this child been expelled from school in any other district or is the child a party to an expulsion proceeding? Yes No  
 Has this child met the requirements of the Arkansas State Health laws necessary to enter school? Yes No

Please list the names of anyone who is NOT allowed to check out/pick up this child from school: \_\_\_\_\_  
 \_\_\_\_\_

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

STUTTGART PUBLIC SCHOOLS

Student Health Information Sheet

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_ Grade \_\_\_\_

Parent/Guardian \_\_\_\_\_ Home/Cell # \_\_\_\_\_ Work \_\_\_\_\_

Child's Physician/Specialty Dr. \_\_\_\_\_ Phone # \_\_\_\_\_

Child's Dentist \_\_\_\_\_ Phone # \_\_\_\_\_

Please indicate if your child has had any of the following by check below:

\_\_\_\_ ADD/ADHD    \_\_\_\_ Arthritis    \_\_\_\_ Asthma    \_\_\_\_ Blood Disorder    \_\_\_\_ Cerebral Palsy  
\_\_\_\_ Concussions    \_\_\_\_ Diabetes    \_\_\_\_ GI Problem    \_\_\_\_ Head Injury    \_\_\_\_ Hearing Problem  
\_\_\_\_ Heart Disorder    \_\_\_\_ Hepatitis    \_\_\_\_ Hypothyroidism    \_\_\_\_ Kidney Problems    \_\_\_\_ Migraines  
\_\_\_\_ Scoliosis    \_\_\_\_ Seizure Disorder    \_\_\_\_ Skin Condition    \_\_\_\_ Speech Problems  
\_\_\_\_ Tuberculosis    \_\_\_\_ Urinary Problem    \_\_\_\_ Vision Problems    Other \_\_\_\_\_

Does your child have ALLERGIES to any **foods, medications, insects, or bee stings**? \_\_\_\_ Yes \_\_\_\_ No

Please explain & include treatment: \_\_\_\_\_  
\_\_\_\_\_

Does the allergy require an EpiPen? \_\_\_\_ Yes \_\_\_\_ No

\*If yes, EpiPen & Allergy Action Plan **MUST** be provided by the 1<sup>st</sup> day of school. **REQUIRED**

If student has Asthma, is there an emergency inhaler used? \_\_\_\_ Yes \_\_\_\_ No

\*If yes, an Inhaler and Asthma Action Plan **MUST** be provided by the 1<sup>st</sup> day of school. **REQUIRED**

Please list any daily medications (including home & school). State name, dose, time, frequency, and route.  
\_\_\_\_\_

Please list any physical limitations: \_\_\_\_\_

Is there anything concerning the health of your child. which the school should know in order to provide special care. If yes, please specify: \_\_\_\_\_

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

*By signing this form, I acknowledge the responsibility of providing the school with accurate and updated information. I give my permission to release medical information to appropriate school personnel.*

# STUTT GART PUBLIC SCHOOLS

2501 S. Main St., Stuttgart, AR 72160

Dear Parent/Guardian:

Your child's vision and hearing may be screened by a school nurse this school year. With parental consent, the Stuttgart Public Schools can seek federal Medicaid/ARKids First reimbursement for the cost of health services provided the students who have Medicaid/ARKids First.

If your child is covered by Medicaid/ARKids, please complete the form below and return it to the school on or before October 1, 2023.

Your cooperation is greatly appreciated.

In compliance with the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 123g: 34 CFR Part 99)

I, \_\_\_\_\_, (parent/guardian name) give permission for my child,

\_\_\_\_\_ (First and Last Name)

Personally identifiable information/student education records to be disclosed to a Third Party Billing Agent for the purpose of billing Medicaid and/or private insurance.

\_\_\_\_\_ (Printed Name of Parent/Guardian)

\_\_\_\_\_ (Signature of Parent/Guardian)

\_\_\_\_\_ (Date Signed)

**RECEIPT OF STUDENT HANDBOOK  
2023-24**

Dear Student and Parent:

This handbook has been prepared to provide you with information that you need so that you are familiar with the policies, procedures and expectations of Stuttgart Public School District. This handbook is in compliance with current laws governing Arkansas public schools and the adopted board policies of the Stuttgart Public School District. In the event that there is a conflict between the local school parent/student handbook and the district board policy, the one with the more recently adopted language will be considered binding and controlling on the matter.

This handbook has been prepared for the purpose of outlining for you the expectations of Stuttgart Public School District in regard to student conduct, and providing you with information concerning the operation of the total school program.

**Beginning the 2016/2017 school year, the Stuttgart School District provided electronic handbooks. Handbooks will be available online at [www.stuttgartschools.org](http://www.stuttgartschools.org). Parents/guardians who do not have electronic devices to access the online handbook or who wish to receive a paper copy may do so by requesting one from your student's building.**

Students who lose their paper copy handbook may purchase additional handbooks for \$5.00 a copy.

Please make sure you receive a packet of information documents to sign and return to school. We must have all of these documents on file for each student in our district.

The signatures below reflect the individuals acknowledge they have received a Stuttgart School District Parent/Student handbook (either electronic or paper) with the following policies:

1. Homework
2. Discipline Policy/Student Behavior
3. Weapons and Firearms
4. Attendance and Absences
5. Retention
6. Bus Policy
7. Bullying
8. Title I Parent/Community Involvement
9. Parent Compact
10. Objection to Publication of Directory Material
11. Internet Use
12. Photo Display
13. Participation of Surveys
14. Medication
15. Grading

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We have received a Stuttgart Public School District Handbook (either electronically or paper), and a packet of required information documents to sign and return to school.

Student: \_\_\_\_\_

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

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

ACCEPTANCE OF STUTTGART SCHOOL BOARD POLICY SUMMARIES  
2023 - 2024

I acknowledge that I am in receipt of the Stuttgart Parent/Student Handbook, from the Stuttgart School District website, electronically or a paper copy.

Please read the policy summaries below and check the appropriate box.

4.29F - STUDENT INTERNET USE AGREEMENT (summary)

We, the person(s) who have signed below, are in receipt of a copy of the Student Internet Use Agreement and agree to be bound by the terms and conditions of this policy. Use of the Internet is privilege conditional to the student abiding by the agreement. The Student agrees that he/she will use the District's Internet access for educational purposes only.

Agree       Disagree

5.20F1 - PERMISSION TO DISPLAY PHOTO OF STUDENT ON WEB SITE (summary)

We, the person(s) who have signed below, are in receipt of a copy of the Permission to Display Photo of Student on Web Site and grant permission to the Stuttgart School District to display photographs or video clips of my student (under the age of 18) on the District's website, other District publications, and newspaper.

Agree       Disagree

5.24F1 - PERMISSION TO PARTICIPATE IN A SURVEY, ANALYSIS, OR EVALUATION (summary)

I, the undersigned, parent or guardian of a student, hereby grant permission to the student to participate in a survey, analysis, or evaluation.

Agree       Disagree

The acceptance of the above policies will remain in effect until I am provided notice of policy changes or I withdraw my agreement in writing.

\_\_\_\_\_  
Name of Student (Printed)

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

\_\_\_\_\_  
Date

## Meekins Middle School Acknowledgement Of Additional Handbook Policies

School employees are not responsible for delivering food for lunch &/or special occasion snacks to students. **Students must have prior knowledge** and pick up in designated area.

\_\_\_\_\_  
Initial

Parents/Guardians checking out their child should not call school offices and ask to have a student pulled from class, before they arrive. Students will be called from class when the parent/guardian arrives.

\_\_\_\_\_  
Initial

**Transportation changes will NOT be accepted over the phone.** All changes for transportation must be in writing or email sent to the homeroom teacher or office PRIOR to date of change.

\_\_\_\_\_  
Initial

Copies; the documents we have in your child's cumulative folder, were provided by you, parents &/or guardians. If you have lost/misplaced your documents and MUST have a copy, there is a \$.25 charge per page. We will do our best to have it ready for pick-up within 24 hrs. This includes verification of registration.

\_\_\_\_\_  
Initial

Weather related closures will be sent to parents via phone number provided, reported to local radio stations, and television stations. Please do not call the schools or radio station. You may also check our website: [www.stuttgartschools.org](http://www.stuttgartschools.org) or Facebook page: Stuttgart School District.

\_\_\_\_\_  
Initial

\_\_\_\_\_  
Name of Student / Grade (Printed)

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

\_\_\_\_\_  
Date



Return to School Office



### HOUSING INFORMATION FORM

Your answers will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

List all children in your family birth through age 21.

Name of Child	School	Age	Grade	Date of Birth

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

Address \_\_\_\_\_

City \_\_\_\_\_

Zip Code \_\_\_\_\_

Is this address Temporary or Permanent? (circle one)

Please choose which of the following situations the student currently resides in (you can choose more than one):

- House or apartment with parent or guardian
- Motel, car, or campsite
- Shelter or other temporary housing
- With friends or family members (other than or in addition to parent/guardian)

If you are living in shared housing, please check all of the following reasons that apply:

- Loss of housing
- Economic situation
- Temporarily waiting for house or apartment
- Provide care for a family member
- ~~Living with boyfriend/girlfriend~~
- Loss of employment
- Parent/Guardian is deployed
- Other (Please explain)

Are you a student under the age of 18 and living apart from your parents or guardians?

Yes            No

Return to School Office

### Housing and Educational Rights

Students without fixed, regular, and adequate nighttime residences have the following rights:

- 1) Immediate enrollment in the school they last attended or the local school where they are currently staying even if they do not have all of the documents normally required at the time of enrollment without fear of being separated or treated differently due to their housing situations;
- 2) Transportation to the school of origin for the regular school day;
- 3) Access to free meals, Title I and other educational programs, and transportation to extra-curricular activities to the same extent that it is offered to other students.

Any questions about these rights can be directed to the local McKinney-Vento liaison **Nikki Hawkins** at 870-673-8701, ext. 1008 or the State Coordinator at 501-683-5428.

By signing below, I acknowledge that I have received and understand the above rights.

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*Signature of Parent/Guardian/Unattached Youth*

*Date*

*Nikki Hawkins*

*Signature of McKinney-Vento Liaison*

*August, 2023*

*Date*

Return to School Office



## Services for McKinney-Vento Identified Students

Student: \_\_\_\_\_

School: \_\_\_\_\_

Grade \_\_\_\_\_

Please check the services needed or desired:

- Free Lunch
- Transportation to the school of origin
- Clothing/Uniform
- School supplies
- Counseling
- Medical/dental referral
- Vision referral
- Medicaid/DSHS services – food stamps
- Preschool Enrollment records
- Missing enrollment records
- Birth certificate

- Immunization/medical records
- Tutoring
- After-school programs
- Teen Center
- Mentoring
- Special Education
- Gifted/talented
- Vocational/technical
- Community resource
- Prior academic records
- LEP/Bilingual program
- Guardianship issues

\_\_\_\_\_  
*Signature of Parent/Guardian/Unattached Youth*

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

*Nikki Hawkins*  
*Signature of McKinney-Vento Liaison*

August, 2023  
*Date*

## 4.29F—STUDENT INTERNET USE AGREEMENT

Student's Name (Please Print) \_\_\_\_\_ Grade Level \_\_\_\_\_

School \_\_\_\_\_ Date \_\_\_\_\_

The Stuttgart School District agrees to allow the student identified above ("Student") to use the district's technology to access the Internet under the following terms and conditions which apply whether the access is through a District or student owned technology device:

1. **Conditional Privilege:** The Student's use of the district's access to the Internet is a privilege conditioned on the Student's abiding to this agreement. No student may use the district's access to the Internet, whether through a District or student owned technology device, unless the Student and his/her parent or guardian have read and signed this agreement.
2. **Acceptable Use:** The Student agrees that he/she will use the District's Internet access for educational purposes only. In using the Internet, the Student agrees to obey all federal and state laws and regulations. The Student also agrees to abide by any Internet use rules instituted at the Student's school or class, whether those rules are written or oral.
3. **Penalties for Improper Use:** If the Student violates this agreement and misuses the Internet, the Student shall be subject to disciplinary action.
4. **"Misuse of the District's access to the Internet" includes, but is not limited to, the following:**
  - a. using the Internet for other than educational purposes;
  - b. gaining intentional access or maintaining access to materials which are "harmful to minors" as defined by Arkansas law;
  - c. using the Internet for any illegal activity, including computer hacking and copyright or intellectual property law violations;
  - d. making unauthorized copies of computer software;
  - e. accessing "chat lines" unless authorized by the instructor for a class activity directly supervised by a staff member;
  - f. using abusive or profane language in private messages on the system; or using the system to harass, insult, or verbally attack others;
  - g. posting anonymous messages on the system;
  - h. using encryption software;
  - i. wasteful use of limited resources provided by the school including paper;
  - j. causing congestion of the network through lengthy downloads of files;
  - k. vandalizing data of another user;
  - l. obtaining or sending information which could be used to make destructive devices such as guns, weapons, bombs, explosives, or fireworks;
  - m. gaining or attempting to gain unauthorized access to resources or files;
  - n. identifying oneself with another person's name or password or using an account or password of another user without proper authorization;
  - o. invading the privacy of individuals;
  - p. ~~discussing personally identifying information about himself/herself or anyone else either on the~~ Internet or in an email. Personally identifying information includes full names, address, and phone number.
  - q. using the network for financial or commercial gain without district permission;
  - r. theft or vandalism of data, equipment, or intellectual property;
  - s. attempting to gain access or gaining access to student records, grades, or files;
  - t. introducing a virus to, or otherwise improperly tampering with the system;

- u. degrading or disrupting equipment or system performance;
  - v. creating a web page or associating a web page with the school or school district without proper authorization;
  - w. providing access to the District's Internet Access to unauthorized individuals;
  - x. failing to obey school or classroom Internet use rules; or
  - y. taking part in any activity related to Internet use which creates a clear and present danger of the substantial disruption of the orderly operation of the district or any of its schools.
  - z. Installing or downloading software on district computers without prior approval of technology director of his/her designee.
5. Liability for debts: Students and their cosigners shall be liable for any and all costs (debts) incurred through the student's use of the computers or the Internet including penalties for copyright violations.
6. No Expectation of Privacy: The Student and parent/guardian signing below agree that if the Student uses the Internet through the District's access, that the Student waives any right to privacy the Student may have for such use. The Student and the parent/guardian agree that the district may monitor the Student's use of the District's Internet Access and may also examine all system activities the Student participates in, including but not limited to e-mail, voice, and video transmissions, to ensure proper use of the system. The District may share such transmissions with the Student's parents/guardians.
7. No Guarantees: The District will make good faith efforts to protect children from improper or harmful matter which may be on the Internet. At the same time, in signing this agreement, the parent and Student recognize that the District makes no guarantees about preventing improper access to such materials on the part of the Student.
8. Signatures: We, the persons who have signed below, have read this agreement and agree to be bound by the terms and conditions of this agreement.

Student's Signature: \_\_\_\_\_ Date \_\_\_\_\_

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

Date Adopted: 06/24/03

Last Revised: 06/29/04

## Electronic device - Chromebook/iPad Use Permission Form

*RETURN THIS SIGNED FORM TO THE CAMPUS OFFICE*

This agreement is between Stuttgart School District (SSD), the student and the parent/guardian.

Any parent/guardian who wishes for their child to use a Stuttgart School provided "technology device" (Chromebook, iPad, Laptop, etc.), must read and sign this agreement. Parents and students who sign this form agree to all technology, computer, and internet use handbook policies, as well as, the following:

- The student takes full responsibility for the district provided technology device and shall keep it with him or herself at all times. SSD is not responsible for the security of devices.
- The guardian or student will be liable for payment of all damages (accidental and/or intentional) to and/or loss of the district technology device. A new device will not be reissued to students until damages and/or losses are paid to Stuttgart School District.
- Estimated costs (subject to change) for Chromebook/iPad parts and replacements:
  - Chromebook replacement - \$260.00
  - System board- \$120.00
  - LCD panel/screen – \$37.00
  - Keyboard (including removed, missing or damaged keys) - \$45.00
  - Charger - \$33.00
  - Protective Case- \$30.00
  - iPad repairs- \$130.00 – \$275.00
  - iPad replacement- \$330.00
- The student shall not attempt to repair a school owned device.
- Violations of any board policies, administrative procedures, or school rule involving a personally owned or school-issued device may result in the loss of use of the device in school and/or disciplinary action.
- Student's use of district provided technology device will be subject to The Student Internet Acceptable Use policy whether device is on campus or offsite.
- Students who need to have their district provided technology device repaired or replaced should report this to their teacher or other school personnel in charge of technology. Case by case determination will be made as to whether a loaner device is allowed.

### **Content Filter**

The school utilizes an Internet content filter that complies with the federal mandated Children's Internet Protection Act (CIPA). All district technology devices (whether used on campus or offsite), will have internet activity filtered and logged. SSD cannot guarantee that access to all inappropriate sites will be blocked. No filter is as reliable as adult supervision.

### **No Expectation of Privacy**

Students have no expectation of confidentiality or privacy with respect to school-issued technology device regardless of whether that use is for school-related or personal purposes, other than as specifically provided by law. The school may, without prior notice or consent, log, supervise, access, view, monitor and record use of student devices at any time for any reason related to the operation of the school. By using a district provided technology device, students agree to such access, monitoring, and recording of their use.

Please follow these steps to minimize the risk of damage to your school assigned device:

#### Exposure to liquids

- Keep liquids away from your Chromebook. Liquids poured or spilled on your Chromebook will cause permanent damage to internal electronics.

#### Dropping

- Though your Chromebook is in a protective case, every effort should be made to avoid dropping it. Dropping may cause damage to internal parts or lead to a broken screen or other damage.
- Keep your Chromebook away from the edges of tables and desks.
- If walking away from your desk, make sure you don't get up from your desk while you are still wearing headphones or earbuds that are still plugged into the Chromebook.

#### The Screen

- Your Chromebook's LCD Display is a sensitive component. If you drop your Chromebook, slam the lid shut, and/or expose it to excessive pressure or weight, it may crack.
- Make sure you don't have anything between the screen and keyboard as you close the case.
- Make sure you don't put anything between the device and the case it resides in.
- Don't place items on top of your Chromebook as the weight can cause damage to the screen.

#### Carrying

- DO NOT CARRY THE CHROMEBOOK ONE-HANDED, be sure to use both hands if you are moving your Chromebook when it is in the open position.
- Never lift or carry your Chromebook by the screen as you can break the screen. Placing your fingers on the screen and squeezing can cause a break. It's safer to close the Chromebook before moving.
- Don't squeeze your Chromebook case. Doing so can cause damage to the screen.

### Student Expectations

#### I Promise to...

- be responsible for my Chromebook at all times
- immediately report technical problems with my district provided technology device (iPad, chromebook, etc.) to the Library Media Specialist
- charge my district provided technology device (iPad, chromebook, etc.) each evening. Bring the technology device to school fully charged
- not loan my technology device, charger, or case to another student for any reason.

### Parent Expectations

1. Remember that while the school system will provide Internet content filtering, *there is no substitute for parental supervision when using a computer.*
2. Monitor student use of the technology device and Internet at home.
3. Ensure your child understands and adheres Internet policies and the guidelines set forth in this use agreement.
4. Sign the agreement.

5. If the device is intentionally damaged, parents will reimburse Stuttgart School District per school policy for any costs incurred due to misuse, neglect, damage, or loss, including theft, up to the full replacement cost of the device.
6. Review Stuttgart School District's Acceptable Internet Use Policy, and the conditions of this use agreement.
7. Ensure the return of the device and all accessories in good working condition at the end of the current school year or before the student withdraws from school.

Print Student's name: \_\_\_\_\_

Print Parent's name: \_\_\_\_\_

I understand and will abide by the conditions of this policy as well as the Acceptable Internet Use Policy in the Student Handbook. I further understand that any violation of these policies may result in the loss of device privileges as well as other disciplinary action.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Student's Signature Date

As a parent/guardian, I understand that my child will be responsible for abiding by these conditions of this policy, as well as, the Acceptable Internet Use Policy in the Student Handbook. I have read and discussed them with her/him and they understand the responsibility they have in the use of any district provided technology device.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Parent/Guardian's Signature Date



ARKANSAS DEPARTMENT OF EDUCATION

Please complete/update the following and return the form to your child's school.

*DIGITAL EQUITY SURVEY*

---

1. Does this child have Internet Access at home  Yes  No
2. What type of Internet Access does this child have? (Select one)  
 Residential Broadband  Dial-up  
 Cellular Network  Other  
 Hotspot  None  
 Community Provided Wi-Fi  Unknown  
 Satellite
3. What type of device does this child use most often to complete learning activities away from school?  
(Select one)  
 Desktop Computer  Smartphone  
 Laptop Computer  None  
 Tablet  Other  
 Chromebook
4. If there is no Internet Access, what is the reason this child does NOT have Internet Access?  
 Not Available  Other  
 Not Affordable  NA-Not Applicable
5. Is the Internet Performance acceptable for learning activities? (Select ONE of the following)  
 Yes – experiences very few or no interruptions in learning activities caused by poor internet performance in the primary place of residence.  
 Sometimes – regularly experiences interruptions in learning activities cause by poor internet performance in their primary place of residence.  
 No – unable to complete learning activities due to poor internet performance in their primary residence.
6. What is the source of the primary learning device?  
 District Provided  Other  
 Personal  Not Applicable
7. What is the child's access to this primary learning device? (Select one of the following)  
 Shared  Not Applicable  
 Not Shared

**Meekins Middle School  
School-Parent Compact  
2023-2024**

The Stuttgart Public School District believes that our students do their best through the teamwork of parents, families, students, and the entire school staff. This compact is a partnership agreement that lists the responsibilities of students and adults that we believe are so important to quality education.

**School Responsibilities**

**Meekins Middle School will:**

**1. Provide high-quality curriculum and instruction in a supportive and effective learning environment that enables the participating children to meet the State's student academic achievement standards as follows:**

- By utilizing a standards-based curriculum taught by a highly-qualified staff.
- By employing instructional strategies that enable our students to become independent thinkers.
- By clearly communicating our high expectations for students and staff.
- By creating a safe and positive learning environment that provides support, success and value for all.

**2. Hold parent-teacher conferences during which this compact will be discussed as it relates to the individual child's achievement.**

- Conferences will be held once each semester during the school year.

**3. Provide parents with frequent reports on their children's progress. Specifically, the school will provide reports as follows:**

- Hold an annual meeting to inform parents of the school's participation in Title I, Part A programs, and to explain the Title I, Part A requirements, and the right of parents to be involved in Title I, Part A programs.
- Provide information to parents of participating students in an understandable and uniform format, including alternative formats upon the request of parents with disabilities, and, to the extent practicable, in a language that parents can understand.
- Provide to parents of participating children information in a timely manner about Title I, Part A programs that includes a description and explanation of the school's curriculum, the forms of academic assessment used to measure children's progress, and the proficiency levels students are expected to meet.
- Provide to each parent an individual student report about the performance of their child on the State assessment in at least math and literacy.
- Provide each parent timely notice when their child has been assigned or has been taught for four (4) or more consecutive weeks by a teacher who is not highly qualified.

**4. Provide parents reasonable access to staff. Specifically, staff will be available for consultation with parents as follows:**

- At the request of parents, provide opportunities for regular meetings for parents to formulate suggestions, and to participate, as appropriate, in decisions about the education of their children. The school will respond to any such suggestions as soon as practicably possible.

**5. Provide parents opportunities to volunteer and participate in their child's class, and to observe classroom activities.**

- Volunteer opportunities will be displayed on the MMS office window, published in school newsletters and will be posted on the district's website: [www.stuttgartschools.org](http://www.stuttgartschools.org).

**Parent Responsibilities**

**We, as parents, will support our children's learning in the following ways:**

- Make sure my child attends school every day and is on time.
- Make sure that my child's homework is completed.
- Check my child's backpack everyday for home/school communications.
- Stay informed about my child's education and communicating with the school by promptly reading all notices from the school or the school district either received by my child or by mail and responding, as appropriate.
- Make sure that homework is completed.
- Make sure my child reads for at least 20-30 minutes every day. My child can read aloud, be read to, or read to herself or himself.
- Monitor my child's television and video game time.
- Volunteer in my child's classroom and participate in other school-wide volunteer opportunities.
- Contact teachers or staff when I am concerned or have a question about my child.
- Participate, as appropriate, in decisions relating to my child's education.
- Attend parent-teacher conferences, PTO meetings and workshops whenever possible in order to help my child learn.
- Serve, to the extent possible, on advisory groups and other committees.

**Student Responsibilities**

We, as students, will share the responsibility to improve our academic achievement and achieve the State's high standards. Specifically, we will:

- Come to school on time and ready to learn.
- Do my homework every day and ask for help when I need to.
- Read at least 20-30 minutes every day outside of school time.
- Give to my parents, or the adult who is responsible for me, all notices and information received by me from my school every day.
- Bring reading books, signed homework and papers to school on time.

**Teacher Responsibilities**

We, as teachers, will share the responsibility to improve our students' academic achievement and achieve the State's high standards. Specifically, we will:

- Expect all students to learn to read. I will provide challenging opportunities for learning. I will address students' individual needs, whether basic or advanced, and offer special assistance whenever needed.
- Help parents identify ways to help their children learn to read and write well. I will communicate with parents and families about resources, materials and workshops.

- Provide take-home books that the student can read with 90 to 95% accuracy or, for non-readers, books that can be read to the students, in order to permit 20-30minutes of reading a day.
- Participate regularly in professional development programs about reading, writing and other topics.

**Principal Responsibilities**

As principal of Meekins Middle School, I will:

- Set high standards in all academic areas. I will implement an effective instructional program throughout the school.
- Educate the community of students, teachers, families and school staff about the importance of daily reading and the partnership approach of the Compact. I will report publicly on reading performance and create programs to encourage achievement in reading.
- Allocate resources to ensure that high standards are met.
- Provide workshops/trainings for parents that will show them how to help their student learn.
- Ensure that teachers provide activities to encourage daily reading at home or after school.
- Welcome all families. I will include and encourage families with low literacy abilities and/or limited English proficiency. I will ensure that translators or equipment are available to translate workshops so the ESL parents can participate in programs.

We agree to share the above responsibilities and work together to help

\_\_\_\_\_ be successful in school:  
Name of Student \_\_\_\_\_

Parent(s) /Guardian(s) \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Student \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Teacher \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

*Stephen Saranie, Principal*

870-673-3565

August, 2023



**Arkansas Division of Elementary and Secondary Education (DESE)  
Home Language Usage Survey**

The Home Language Usage Survey is completed by *all* students initially enrolling in Arkansas schools.

<b>Student Name:</b>		<b>Grade:</b>	<b>Date:</b>
<b>School:</b>	<b>Student State ID #:</b>	<b>Gender:</b>	<b>Date of Birth:</b>
<b>Parent/Guardian Name:</b>		<b>Parent/Guardian Signature:</b>	
<p><b>Right to Translation and Interpretation Services</b> Indicate your language preference so we can provide an interpreter or translated documents, free of charge, when you need them.</p>		<p>All parents have the right to information about their child's education in a language they understand.</p> <p>1. a) In what language do you prefer to receive written communication from the school? _____</p> <p>b) In what language would you prefer to communicate with school staff when speaking? _____</p>	
<p><b>Eligibility for Language Development Support</b> Information about the student's language usage helps us identify students who may qualify for extended support to develop the language skills necessary for success in school. Testing may be necessary to determine if language supports are needed.</p>		<p>2. What language(s) is (are) spoken in your home? _____</p> <p>3. What language did your child learn first? _____</p> <p>4. What language does your child use most often at home? _____</p> <p>5. What language does your family speak most often at home? _____</p> <p>6. What language do adults speak most often with each other at home? _____</p>	
<p><b>Prior Education</b> Your responses about your child's birth country and previous education give us information about the knowledge and skills your child is bringing to school. <i>This form is not used to</i></p>		<p>7. Where was your child born? _____</p> <p>8. When did your child first attend a school in the United States (the 50 states, DC)? (Kindergarten – 12<sup>th</sup> grade) _____ Month      Day      Year</p>	
<p><b>identify students' legal immigration status.</b></p>		<p>9. Has your child attended a school in Puerto Rico? _____</p>	

Thank you for providing the information needed on the Home Language Usage Survey. Contact your child's school if you have further questions about this form or about services available at your child's school.



*Note to district: This form is available in multiple languages on <http://www.arkansased.gov/divisions/learning-services/english-learners>. A response that includes a language other than English to questions #1-6 indicates English language proficiency screening is needed.*

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Stuttgart School District  
2501 South Main St.  
Stuttgart, AR 72160  
870-673-8701

Name of Student \_\_\_\_\_

DOB \_\_\_\_\_ Grade \_\_\_\_\_ Social Security \_\_\_\_\_

Previous School \_\_\_\_\_  
Name City State

Has your child been enrolled in any of the following Special Services?  
(Please circle all that apply)

Speech	Yes	No	Resource - Math	Yes	No
Dyslexia	Yes	No	Resource – Literacy	Yes	No
504 Plan	Yes	No	Self-Contained Class	Yes	No
ELL/LEP	Yes	No	Gifted and Talented	Yes	No

Please provide any documentation from previous school, if you circled yes for any of the above services.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

MEEKINS MIDDLE SCHOOL  
Parent Volunteer Survey – Volunteers in Public School

Parent(s) Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

Student(s) Name/Grade: \_\_\_\_\_

Please check any hobbies or interests that you would like to share:

- |       |                          |       |                       |
|-------|--------------------------|-------|-----------------------|
| _____ | Art/Crafts               | _____ | Computer/Technology   |
| _____ | Cooking/Baking           | _____ | Dancing               |
| _____ | Drama/Theater            | _____ | Gardening/Agriculture |
| _____ | Vocal/Instrumental music | _____ | Woodworking           |
| _____ | Photography/Videography  | _____ | Poetry                |
| _____ | Science                  | _____ | Sports/Exercise/Yoga  |
| _____ | Travel                   | _____ | Communications        |
| _____ | Collecting (Theme)       | _____ | Other _____           |

Please check any of the following activities that might interest you:

- \_\_\_\_\_ Participate in PTO
- \_\_\_\_\_ Participate in fundraising
- \_\_\_\_\_ Volunteer in a classroom
- \_\_\_\_\_ Volunteer to help with school events
- \_\_\_\_\_ Help with Fall/Spring Pictures
- \_\_\_\_\_ Help with Flu Clinic
- \_\_\_\_\_ Serve on an advisory committee
- \_\_\_\_\_ Donate requested materials/supplies
- \_\_\_\_\_ Participate in campus cleanup
- \_\_\_\_\_ Serve as a translator, language: \_\_\_\_\_
- \_\_\_\_\_ Share information on your culture/language/hobby/career
- \_\_\_\_\_ Teacher Appreciation Week
- \_\_\_\_\_ Other: \_\_\_\_\_

When are you able to participate? \_\_\_Anytime \_\_\_Days \_\_\_Evenings