2018-2019 Instructions/Checklist for Paperwork

WELCOME! Thank you for choosing East Link Academy Charter School. We are excited to have you here.

Please complete the following steps to finalize the enrollment process.

Please complete one packet per child enrolling. Please PRINT LEGIBLY.

Please Note: All paperwork requested in this packet must be returned to secure your spot for enrollment. If all required paperwork is not turned in by this deadline and the \$45 supply fee has not been paid, the spot will be forfeited and given to the next student in line on our waitlist.

Our office hours will be 9:00am-1:00pm (M-F), after this time by appointment. Please call (864) 775-1818. Enrollment documents can be scanned and emailed to registrar@eastlinkacademy.org, brought to our office, mailed to the school address, or placed in the drop slot on the door of the office.

<u>Below is a complete list of ALL paperwork necessary to enroll your student at East Link Academy Charter</u> School. Please note there will be additional paperwork at school registration in August!

	\$45 Supply and Mandarin Instruction Fee (Paypal or check)		
	Enrollment Application (pages 2-3)		
	Family Volunteer Form (page 4) Media/Photo/Video/Voice Release and Terms (page 5) Request for School Records Form (page 6)		
	Copy of Current Immunization Records on SC DHEC Form or Religious Exemption Certificate		
	Copy of Birth Certificate Copy of Social Security Card		
	Proof of South Carolina Residency (driver's license, power bill, lease agreement, etc.) at		
	least one document		
	Most recent academic Information (if available)		
	✓ Report card		
	✓ Attendance records		
	✓ Standardized tests		
	✓ MAP/iReady/STAR scores		

Email (<u>registrar@eastlinkacademy.org</u>), U.S Mail or hand deliver to the temporary ELA office the completed enrollment package with all required documentation to:

East Link Academy
Attn: Registrar
4328 Wade Hampton Blvd, Suite G
Taylors, SC 29687

Enrollment Application for 2018-2019

(Complete One Form Per Child)

Check the grade your child will be at	ttending: 🗌 PreK 🔲 Kinde	dergarten First Second Third Fourth		
STUDENT INFORMATION: First:	Middle:	Last:	_ Last:	
Date of Birth (Month/Day/Year):		Male Female		
Current Age: Social s	Social security #:			
Street Address:				
City & State & Zip Code:				
Student lives with: (Check all that ap	oply)			
☐ Both Parents	☐ Stepparent	☐ Guardian		
☐ Mother	☐ Foster Parent	☐ Other(s):		
☐ Father	☐ Grandparent			
Ethnicity:				
□American Indian/Alaska Native	□Asian	□Native Hawaiian/ Pacific Island	ler	
□Asian	☐Hispanic/Latino	☐Two or More Race		
□White	□Black/African Ameri	rican		
Current School Attending:			_	
Public School Zoned for:				
Is your child currently receiving free	/reduced lunches? ☐ Ye	′es □ No		
Does your child currently participate	e in a gifted and talented pr	orogram? □ Yes □ No		
Name of Program:				
Has your child repeated a grade?	Yes □ No If yes,	, which one?		
Has your child ever been expelled?	☐ Yes ☐ No Is he/s	she under expulsion proceedings? ☐ Yes ☐ No		
Is your child currently receiving spec	cial education services or ha	ave a 504 plan? ☐ Yes ☐ No		
If yes, please specify: Resour	ce 🗆 Inclusion 🗆 Self	lf-contained		
If yes, please identify areas: $\ \square$	LD □ ED □ EMD □ Vis	isually Impaired Hearing Impaired		

Student Name:	Grade 18/19:
STUDENT SIBLING/FAMILY INFORMATION	
Name and grade of Siblings Enrolling in ELA:	
Sibling 1:	Grade:
Sibling 2:	
Sibling 3:	
If guardian, proof of guardianship	
Relationship to Student:	
PARENT/LEGAL GUARDIAN INFORMATION: Mother/Guardian	
First Name	Last Name
Mother/Guardian Home Phone:	
Father/GuardianFirst Name	 Last Name
Father/Guardian Home Phone:	
Email:	
City, State, Zip:	
HOME LANGUAGE SURVEY: Is a language other than English spoken in your home? [□ Yes □ No If yes, specify language:
Does your child communicate in a language other than I	English? ☐ Yes ☐ No If yes, specify language:
Which language did your child learn first?	
OPTIONAL STUDENT PROGRAMS (FEES MAY APPLY) Are you interested in Early Morning Care (6am-8am)?	□ Yes □ No
Are you interested in After School Care (4pm-6pm)?	☐ Yes ☐ No
Additional information will be available at the start of	school

ELA does not discriminate on the basis of race, color, national origin, sex, disability, age, religion, or immigrant status in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. The following person has been designated to handle the nondiscrimination policies. For questions pertaining to Section 504 or Title IX contact Dana Hutto 864.775.1733.

Student Name:	Grade 18/19:
FAMILY VO	OLUNTEER FORM
Volunteer Name:	Best Contact Info:
Volunteer Name:	Best Contact Info:
Volunteer Name:	Best Contact Info:
□ Parent Teacher Organization (PTO □ Before School Program □ After School Program □ Landscaping and/or outside project □ Student extracurricular activities □ Classroom project helpers □ Classroom homeroom parent □ Assist with technology needs of the parallel of	ects (chess, clubs, sports, cheering, etc) he school

Please list anything else you would like to help with, any special skills or access to resources, and ideas you want to share:

C+.	dent Name:
Stu	dent Name: Grade 18/19:
	MEDIA/PHOTO/VIDEO/VOICE RELEASE
pai pic oth rec	roughout the year, there are occasions when East Link Academy may want to take pictures/videos of your student ticipating in activities related to the school. We may use, duplicate, broadcast, distribute and display these tures/videos in East Link Academy publications, newspaper, school website, radio, TV and / or homerooms, advertising ter media outlets, etc. We request that you sign this media/photo/video/voice release for your student to allow us to ord on film, tape or otherwise, to edit such items as desirable/necessary and to use the student's name, likeness age, voice, and performance as outlined above. Thank you in advance for your support and understanding.
	☐ I give my consent for East Link Academy to use pictures/video of my student.
	☐ I do NOT give my consent for East Link Academy to use pictures/video of my student.
•	enrolling my child at East Link Academy I understand and agree to the following conditions of admission: East Link Academy is a public charter school as defined by the South Carolina Charter Schools Act (S.C. Code Ann. §59-40-10, et seq.). The Charter Schools Act provides for, among other things, the operation of public schools so that teachers and parents have greater say in the management of the school and to exempt the school from some state regulations.
3.	East Link Academy is governed by a Board of Directors and will operate as set forth in the charter and by-laws of East Link Academy. In accordance with Public Charter School legislation, the Board of Directors is elected by the parents and employees of the school. Each family receives one vote per student attending East Link Academy. Acceptance is conditional upon promotion to the grade the student has been admitted to East Link Academy. If the student is not promoted to the grade for which they have been accepted, there may not be a space available for them in East Link Academy. Proof of promotion must be received by East Link Academy via records transfer prior to placement.
TEI	I understand that East Link Academy is rigorous and sets high expectations in the areas of academics and discipline ✓ I understand that the school philosophy requires parental and student involvement and I agree to be an active participant in my child's education. ✓ I will be responsible for seeing that my child arrives on time each day. I will strive for daily attendance by my child Absenteeism by the student may result in a repeat grade. ✓ I will see that the student makes up his/her work assignments when he/she is absent. I agree to abide by the terms relating to absences as defined by the East Link Academy charter and/or regulations. ✓ I will attend Parent-Teacher educational meetings. ✓ I will keep current the information on the student enrollment card. I will inform the school immediately of new phone numbers, addresses, and any changes in the student's situation. ✓ I understand that my child must reside in South Carolina to attend East Link Academy.
Sig	nature of Parent/Legal Guardian Date

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Printed Name of Parent/Legal Guardian

4328 Wade Hampton Blvd, Suite G Taylors, SC 29687

Phone: 864-775-1818

Head of School: Dana M Hutto Administrative Assistant: Mary Hunte

REQUEST FOR RELEASE OF RECORDS

Does this student have an IEP, 504, or ESOL plan or in the process of being evaluated? Yes No			
Date:			
School Withdrawing From:			
School Address:			
School Telephone Number:			
Please forward a copy of the official record for the following Name:			
Grade: Date of Birth:	SS#:		
Name of Parent			
Parent's Signature	Date		
Please forward the following information, as applicable: ✓ Cumulative School Records ✓ Withdrawal form ✓ Discipline information ✓ Attendance information ✓ State/National Standardized test scores (SCPASS, SCREADY, MAP, iREADY, CoGAT/IA) ✓ Birth certificate & Social security card ✓ Health / Immunization records ✓ Special Education Records (if applicable)	 ✓ 504 / Behavior Plan(s) ✓ Psychological Records (if applicable) ✓ Gifted and Talented Profile Sheet (if applicable) ✓ Home language survey ✓ English Language Learn (ELL) Initial Placement Screener ✓ ELL State Language Proficiency Test Scores ✓ ELL Accommodation Plan ✓ Most recent state language proficiency test 		
According to the final regulations of the Buckley Amendment, writte no longer required. The Buckley Amendment states that school office to enroll may receive a student's record without a written consent for the state of the st	cials and officials in school systems in which a student may intend		
	864-775-1733		
For Office Use: 1st Request: 2nd Request: Records Rec'd:			

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