



ENROLLMENT INFORMATION

2021-2022

HIGH SCHOOL ENROLLMENT DATES

JUNIORS & SENIORS – TUESDAY, AUGUST 10

FRESHMAN & SOPHOMORES – WEDNESDAY, AUGUST 11

OPEN ENROLLMENT – THURSDAY & FRIDAY, AUGUST 12 & 13

ENROLLMENT TIMES – 8:00 – 3:00 (12:00 TO 1:00 OFFICE CLOSED FOR LUNCH)

A PARENT OR LEGAL GUARDIAN MUST COMPLETE THE ENROLLMENT FORMS.

NOTE: SEPARATE CHECKS ARE REQUIRED FOR EACH DIFFERENT FEE TO BE COLLECTED.

HIGH SCHOOL ENROLLMENT FEES

Textbook Fee - \$25 Computer Fee - \$50 Technology Fee - \$10

Art Fee - \$15 Welding Fee \$15 Wood Technology Fee \$35

Health Science 1 - \$17.00

THE STUDENT HANDBOOK IS AVAILABLE AT WWW.USD404.ORG

THE FIRST DAY OF SCHOOL WILL BE ON AUGUST 18, 2021

RIVERTON U.S.D 404

RETURNING STUDENT ENROLLMENT FORM

2021 – 2022 School Year

Date _____

Primary Household Name: _____

Parent Cell # _____ Parent Email _____

Parent Cell # _____ Parent Email _____

Secondary Household Name: _____

Parent Cell# _____ Parent Email _____

Parent Cell# _____ Parent Email _____

Student Names Currently in Household:

_____ Grade Level _____ _____ Grade Level _____

Student Cell# _____ Student Cell # _____

_____ Grade level _____ _____ Grade Level _____

List all children in the household ages 0 to 5 not attending school at this time.

1. _____ DOB _____ 2. _____ DOB _____

3. _____ DOB _____ 4. _____ DOB _____

*******IMPORTANT*******

Please note any changes to addresses, phone numbers, contacts, etc. that have changed from the previous school year that you would like to make USD 404 aware of for your demographic information.

Parent Approval for Activities

STUDENT _____ Grade _____ Date _____

*** Your signature will NOT provide permission for your student to leave school to go home for assignments or other errands. Telephone contact with you will be required for this type of activity.

Rules on Activity Trips

1. Students must ride school-provided transportation to all activities. Only in extreme or unusual situations would a student be allowed to drive his/her own car to an activity. Both the sponsor and the principal must give prior approval to the parent request.
2. Students may ride home from activities with their parent if the parent signs the student out with coach/sponsor at the activity.
3. Students may ride home from activities with other parents by providing a parent note to the office in advance of the activity. The office must verify the note prior to the day of the trip.
4. Students may not ride with other students to or from activity trips.
5. In case of an emergency medical situation, coaches/sponsors must have permission to have your student treated or admitted to a hospital if deemed necessary. This consent does not release the parent or guardian from medical expenses incurred.

Sign for consent to give permission under the above rules: _____
Parent/Legal Guardian

Driving Permit

Student _____ Driver's License# _____

Main Vehicle: Model _____ Year _____ Color _____ License Plate# _____

2nd Vehicle: Model _____ Year _____ Color _____ License Plate # _____

Riverton High School Driving Guideline

1. All Students must adhere to the policies which have been approved by the Board of Education.
2. Students must park in assigned parking areas. At no time are the students to park in reserved spaces or fire lane areas. Violation will result in disciplinary consequences and/or lose of privileges.
3. Students who drive to school are required to park their vehicle upon arrival on school grounds and leave it parked until the student leaves at the end of the school day except with permission from the principal.
4. Students are not allowed to sit in their vehicle or another student's vehicle in the morning before entering the building. Once drivers are on school grounds they are required to park their vehicle and enter the school building.
5. Students are not allowed to go to their vehicle for any reason without permission from the office.
6. When school is out, students are expected to leave school property immediately unless they are involved in an after school activity. No loitering will be permitted.
7. Students must follow the rules and laws of driving, as they would be expected to follow on the highways. Failure to demonstrate safe driving, driving too fast, burning tires, illegal parking, etc. will result in disciplinary action and /or lose of driving privileges.
8. All driving and parking rules apply to activities after school hours.

Driving/Parking Violations

1st Offense: Detention, In-School suspension, or Saturday School.

2nd Offense: Saturday School and lose of driving privileges.

3rd Offense: 1 to 3 days suspension and lose of driving privileges.

Subsequent: 5 to 10 days suspension and lose of driving privileges.

Notification of Responsibility: USD #404 will in no way be responsible for damage incurred to a student's vehicle while on school property. It is the responsibility of the student and parent/legal guardian to contact local law enforcement to report vehicle damage and accidents. The school will not investigate vehicle damage situations. Local law enforcement officers will investigate after a formal report has been made.

Sign for consent to give permission under the above rules: _____
Parent/Legal Guardian

U.S.D. 404 – Riverton Public Schools
Enrollment Residency Questionnaire

If your family lives in any of the following situations:

- In a shelter, motel, vehicle, or campground
- On the street
- In an abandoned building, trailer, or other inadequate accommodations, or
- Doubled up with friends or relatives because you cannot find or afford housing

Then, your preschool-aged and school-aged children have rights or protections under the McKinney-Veto Homeless Education Assistance Act.

These questions cover the definition of homeless that is within the No Child Left Behind Act. This enrollment form will meet MSIP Standard 8.3.1 for enrollment identification.

1. Are you sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason? Yes _____ No _____

Explain if it is a similar reason.

Explain: _____

2. Are you currently residing at a motel, hotel, in a car, or at a campsite because your home has been damaged or because of economic reasons?

Yes _____ No _____

3. Are you currently residing in a shelter? Yes _____ No _____

4. Are you currently living in a temporary housing arrangement due to economic hardship? Yes _____ No _____
-

Student Name _____ Date of Birth _____

Grade _____ Male _____ Female _____

Parent/Guardian(s) _____

Present Address _____

City _____ State _____ Zip _____ Phone _____

Last School Attended _____ City _____ State _____

GREENBUSH HOME LANGUAGE SURVEY

Upon enrollment, every student or parent/guardian must be given a Home Language Survey. This survey will be used to determine which students should be assessed for English proficiency. Knowledge of, or exposure to another language does not, in and of itself, qualify a student for ESOL services. If a language other than English is indicated in any of questions 1-4, the student will be assessed to determine eligibility for English for Speakers of Other Languages (ESOL) services. The assessments approved by Kansas State Department of Education include: The Language Assessment Scales (LAS)/LAS LINKS/Pre-LAS, the IDEA Proficiency Test (IPT)/Pre-IPT, the Language Proficiency Test Series (LPTS), and the Kansas English Language Proficiency Assessment (KELPA)/KELPA-P. If a student scores below proficient/fluent in any of the language domains: listening, speaking, reading, or writing, s/he is eligible for ESOL services. Please complete one form for each child.

Student Information:

Name	Grade
Address	Date of Birth
Date first enrolled in a school in the U.S.	Phone Number

Student Language Information:

1. What language did your child first learn to speak/use?
 English _____ Spanish _____ Other (please specify) _____

2. What language does your child speak/use at home? Do not include language learned in a class or through television or other such programming.
 English _____ Spanish _____ Other (please specify) _____

3. What language do you speak/use with your child?
 English _____ Spanish _____ Other (please specify) _____

4. What language do the adults regularly present or living in the home speak/use while in presence of the child?
 English _____ Spanish _____ Other (please specify) _____

Parent/Guardian Information:

Which language do you prefer? English ___ Spanish ___ Other (specify) _____
 (Please specify "written" or "spoken". To the extent practicable, communication from the school will be provided in this language.)

Migrant Education Program Information:

The Migrant Education Program (MEP) is authorized by Title I Part C of the Elementary and Secondary Education Act of 1965 (ESEA). The MEP provides formula grants to local education agencies to establish or improve education programs for children who may qualify for the Migrant Program. Please help us determine your child's eligibility for the Migrant Program by responding to the following questions.

Have you or a member of your family moved in the last 36 months to do, or apply for, agriculture or fishing related work, including dairies, nurseries, meat or vegetable processing, feed yards, or field work?
 Yes _____ No _____

Have your children moved with or to join the worker above in the past 36 months?
 Yes _____ No _____

For the School: If the answer to either of the previous two questions is Yes, please contact the Greenbush Migrant office at jennifer.delee@greenbush.org, toll free 866-806-9026, or fax 620-724-6284.

Signature of Parent or Guardian

Date

PICTURE PERMISSION FORM

Dear Parents,

There may be occasions over the course of the school year that your child will have the opportunity to have his or her picture posted on our school website or in the local newspaper. You may view that website by navigating to: www.usd404.org and then clicking on the building tab at the top of the page. In order to comply with our technology policy, we need your signed permission to post your child's picture. Please complete the following so that we may abide by your wishes.

Yes, you may post _____ picture on the U.S. D. 404 website or local newspaper. (Student's Name)

No, please do NOT post _____ picture on the U.S.D. 404 website or local newspaper. (Student's Name)

X _____

Date _____

(Parent/Guardian Signature)

Dear Parents:

Throughout the school year Riverton USD 404 are asked to participate in surveys containing information that is essential to local and state grant funding and to planning effective prevention programs in our school and community. Surveys such as the *Kansas Communities That Care Student Survey*, *Local Student Needs Assessment Surveys*, and various other surveys are valuable tools to help us understand how students perceive things like substance use, suicide, bullying, teacher effectiveness, and many other important topics. These surveys give us insight into the problems students face and shows what we can do to help them succeed.

Surveys given within the Riverton USD 404 School system:

1. **Are completely anonymous.** Students will not be asked for their names on the questionnaire, nor will anyone be able to connect any individual student with his/her responses. School staff will not see any one student's responses, but only summaries of results. To further guarantee anonymity, results will not be reported on any particular question without sufficient response from enough students to guarantee anonymity.
2. **Participation is entirely voluntary.** Your child may decline to participate in surveys, or may simply skip any particular question they do not wish to answer.
3. **Annual participation is important.** Even if your child has participated in previous surveys, annual data is extremely helpful in determining the effectiveness of previous efforts and changes in program areas.

I hope you will allow your child to participate in our district's surveys. . Please check the appropriate box below. Thank you in advance for your cooperation.

Sincerely,

Todd Berry
Superintendent
Riverton USD 404

Please check one:

- Yes, I give permission** for my child to participate in surveys conducted by Riverton USD 404.
- No, I do not give permission** for my child to participate in surveys conducted by Riverton USD 404

Signature of Parent/Guardian

Printed Parent/Guardian Name

Printed Name of Child

Date

Riverton Unified School District #404

Student Drug Testing Policy

The Riverton Unified School District #404 Board of Education, in an effort to protect the health and safety of its students involved in extracurricular and/or co-curricular activities from illegal and/or performance-enhancing drug use and abuse or injuries resulting from the use of drugs, and to set an example for all other students of Riverton Unified School District #404, proposes the following policy for drug testing and students participating in extracurricular and/or co-curricular activities.

I. Statement of Purpose and Intent

- A. Participation in school sponsored extracurricular and/or co-curricular activities at Riverton Unified School District #404 is a privilege. Students who participate in these activities are respected by the student body and are expected to set a high standard of personal conduct, sportsmanship and training. This includes avoiding the use or possession of illegal drugs and alcohol.
- B. It is the desire of the Board of Education, administration and staff that every student in Riverton Unified School District #404 refrain from using, possessing, or distributing illegal drugs and alcohol. The sanctions of this policy relate solely to limiting the opportunity of any student in violation of this policy to participate in extracurricular and/or co-curricular activities. There will be no academic sanction for violations of the policy.
- C. The purpose of this policy is to prevent drug/alcohol use, educate students as to the serious physical, mental, and emotional harm caused by drug use, alert students with possible drug problems to the potential harms of use, prevent injury, illness and harm as a result of drug use and to maintain an educational environment free of drug use and abuse. The Riverton Unified School District has adopted this policy for use by all participating students in grades 7-12.

II. Definitions

- A. "Illegal / Illicit Drugs" means any substance which an individual may not sell, possess, use, distribute or purchase under either Federal or Kansas law. This includes, but is not limited to, all scheduled drugs as defined by Kansas law, all prescription drugs obtained without authorization and all prescribed and over-the-counter drugs being used for an abusive purpose as well as alcohol.

A positive test result of any student's drug use test will be reported to the principal, the head coach, sponsor, the student and the student's parents or guardians.

IV. Procedure

- A. Each student (grades 7-12) in an extracurricular and/or co-curricular activity shall receive copies of the "Student Drug Testing Policy" and "Student Drug Testing Consent" form, which shall be read, signed and dated by the student and parent or guardian. No student shall be allowed to practice or participate in any extracurricular and/or co-curricular activity unless the student has returned the properly signed "Student Drug Testing Consent" form. Transfer students will be placed in the testing pool within one week after enrollment should they wish to be eligible for extracurricular and/or co-curricular activities. There will be two pools, one consisting of grades nine through twelve (9-12) and one consisting of grades seven through eight (7-8). All students wanting to participate in extracurricular and/or co-curricular activities must sign the "Student Drug Testing Consent" form and return to the high school or middle school within one (1) week of the beginning of each new school year. Failure to turn in the properly signed forms within the time limits set forth in this policy will keep a student from participating in extracurricular and/or co-curricular activities.
- B. Students will be required to provide a urine and/or saliva sample as follows:
1. On a random selection basis from a list of all extracurricular and co-curricular activities, three to five (3-5) students will be drawn from each pool to provide a urine and/or saliva sample for testing on a weekly basis.
 2. On a random selection basis from a list of students only involved in school dances, three to five (3-5) students will be drawn from each pool to provide a urine and/or saliva sample for testing on a quarterly basis.
 3. Any time requested based on reasonable suspicion to be tested for illegal or performance-enhancing drugs.
 4. Selected students will be interviewed regarding any information on medication that would create a positive test prior to submitting a urine and/or saliva sample.
- C. Any drug use test required by the Riverton Unified School District #404 under the terms of this policy will be administered by or at the direction of a professional laboratory chosen by the Riverton Unified School District #404 using scientifically validated toxicological methods. The professional laboratory shall be required to have detailed written specifications to assure chain of custody of the specimens, proper laboratory control and scientific testing.
- D. All aspects of the drug use testing program, including the taking of the specimen, will be conducted so as to safeguard the personal and privacy rights of students to the maximum degree possible. The test specimen shall be obtained in a manner designed to minimize intrusiveness of the procedure. In particular, the specimen

- I. A student who tested positive may be required to undergo one or more additional drug use tests to determine whether the student is no longer using illegal drugs or performance-enhancing drugs; before he or she may rejoin an extracurricular and/or co-curricular activity. Riverton Unified School District #404 will rely on the opinion of the laboratory that performed or analyzed the additional drug use test in determining whether a positive result in the additional drug test was produced by illegal or performance-enhancing drugs used by the student, which caused the first positive result, or by more recent use. Depending on the circumstances, the cost of the retest may be the obligation of the student or the parent or custodial guardian.
- J. All parents or guardians of students who tested negative in the initial screening will be contacted by personnel of the Riverton Unified School District #404 within five (5) days after testing.

V. Violations

Any student who tests positive in a drug/alcohol use test under this policy shall be subject to the following restrictions:

- A. For the first offense, the student shall be suspended from participation in all extracurricular and /or co-curricular activities including all performances and competitions, for a period of four (4) weeks (20 school days). During this time, it is recommended that the parent/guardian obtain a substance abuse evaluation and education/counseling for the student. If the student and/or parent/guardian can provide proof of enrollment and a minimum of five (5) hours attending a school approved substance abuse program, the suspension will be reduced to two (2) weeks (10 school days). Additionally, the student must voluntarily submit to a second drug test to be administered within two (2) weeks in accordance with the testing provisions of this policy. The student must attend and participate in all practices during his/her days of ineligibility.
- B. For the second offense that occurs during a student's high school career, the student shall be suspended from participation in all extracurricular and/or co-curricular activities including all meetings, practices, performances, and competitions for nine weeks (45 school days) continuous from the date of the initial report of the second offense as stated in the this policy. As a result of a second offense, the student must voluntarily submit to random monthly testing for a period of thirty-six (36) weeks (180 school days) in order to maintain eligibility for all extracurricular and co-curricular activities.
- C. For the third offense that occurs during the student's high school career, the student shall be suspended from participation in all extracurricular and/or co-curricular activities including all meetings, practices, performances and

DRUG TESTING POLICY

The Riverton USD #404 Student Drug Testing Policy does not supercede the student handbooks of Riverton High School or Riverton Middle School with regard to students found to be in possession of, using, providing or under the influence of illegal substances or alcohol while on school property or at a school activity (home or away). Therefore, a student, who violates the policy as set forth in the handbook, should expect further consequences as deemed appropriate by the administration.

SIGNATURES

(Parent)

Date

(Student)

Date

Health Services

2021-2022 School Year Riverton USD 404

Students name

DOB

Grade

YES	NO	
		Attention Deficit Disorder (if YES circle) ADHD ADD Medication:
		Allergies (if YES, circle below and explain) Food Insect bites/stings Pollen Animals Medication Will your child have an Epi-pen at school? YES NO
		Asthma Will your child have an inhaler at school? YES NO
		Diabetes Medication:
		Emotional Problems Medication &/or Counseling:
		Seizure Disorder Type of seizure: Medication:
		Other Health Concerns Including Hospitalizations, Operations Or Medications Not Previously Mentioned:

Kansas State Law requires that each student must have on file at the school:

An **up to date immunization record** or a religious or medical exemption.

A **physical exam** performed by a licensed health care provider

A copy of an **official state issued Birth Certificate**

All medications given at school must be provided by the parent and come in a properly labeled original container with a signed consent form from the parent (over-the-counter) and/or doctor (prescription).

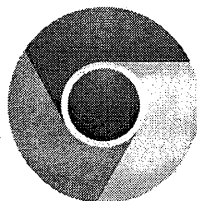
I hereby certify that I have read and understand the school requirements for my child. Furthermore, permission is hereby granted to the attending team physician, athletic trainer, coach, school nurse, sponsor and/or teacher to render any necessary first aid treatment to the child listed below. I understand that in an emergency, effort will be made to contact the Parent/Guardian or other contact persons listed. If such a contact is not possible, the transportation and treatment necessary for the best interest of the student may be given.

I also authorize Riverton USD 404 schools to release, exchange and obtain immunization and/or health information in his/her/their possession relating to the named student to the Health Department, physician(s), school personnel working with student, and/or Kansas Immunization Registry. I understand that this authorization will expire when the student is no longer enrolled in the above named school district and that I may revoke this authorization in writing at any time.

Parent/Guardian Signature

Today's Date

**Riverton USD 404 District
Laptop Care Policy Agreement
Student Pledge Sign Off
2021-22**



- ✓ Laptops are never to be left unattended, or in an unsecured or unsupervised location.
- ✓ Individuals are not to loan laptops to any other individual.
- ✓ The location of the laptop should be known at all times by the user.
- ✓ Each evening the laptop battery will be charged to full capacity.
- ✓ The laptop will be kept away from food, drinks and pets.
- ✓ The laptop will not be repaired or dissembled by the individual.
- ✓ At all times when the laptop is not in use and between classes, the laptop will be kept in its carrying case.
- ✓ The laptop will be shutdown prior to placing it in its carrying case or backpack.
- ✓ The laptop will not be altered or vandalized in any way.
- ✓ The laptop is the property of the district and is subject to inspection at any time, with or without notice.
- ✓ The user will be responsible for filing a police report in case of theft, vandalism, and other acts covered by personal insurance.
- ✓ The student is responsible for all damage or loss caused by negligence or abuse.
- ✓ The student is responsible for replacement of the power cord in the event that this item is lost, damaged, or stolen.
- ✓ The student will return the laptop and all issued accessories in the same condition as when they were issued.

Student Name _____ Grade _____

Student Signature _____ Date _____

Parent Signature _____ Date _____

***The complete Technology User Agreement is available at
<https://www.usd404.org/cms/lib/KS01001120/Centricity/Domain/14/RHS%20Laptop%20Policy%202021-22.doc.pdf>

UNIFIED SCHOOL DISTRICT NO. 404

BOARD OF EDUCATION

Tim Wilson, President
Danny Anderson, Vice-President
Judy Adams
Kristen Greer
Mike Hatfield
Gary Neal
Chade Parker

Susie Nowlin, Clerk
Royce Donaldson, Treasurer

KSDE/KESA ACCREDITED

Todd D. Berry, Superintendent
P.O. Box 290
6860 SE Hwy 66
Riverton, KS 66770
Phone: (620)848-3386
Fax: (620)848-9853

5-27-2021

ADMINISTRATIVE STAFF

Riverton High School
Chad Harper, Principal
Shelly Livingston, Asst. Prin.

Riverton Middle School
Zachery Martin, Principal

Riverton Elementary School
Adam Thomasson, Principal
Linda Wassom, Asst. Prin.

Greetings, Riverton USD 404 Families:

Thank you for your continued support of our students, staff, and school community. We hope you are well, and we are reaching out today with some important information and a convenient process that can assist families and our school district. Even though all children will eat free during the 2021-22 school year, the Household Economic Survey (HES) generates additional funding for our local educational programs.

We encourage all families to consider, review, and complete the HES application. Eligibility determination will be made according to the established guidelines, and if your family qualifies the district will still receive the funds accordingly. A few additional reasons for this consideration include:

- Other school district benefits for families that qualify, include reduced computer fees, possible waivers of enrollment fees, and summer and afterschool programming for students who need extended learning opportunities.
- If families do not complete the application, state funding for our school district may be reduced, which could impact our ability to provide classroom support services as well as reduced class sizes.

We have included a copy of the HES application for your convenience and consideration, and please feel free to contact our district's office with any questions using the information below.

Todd Berry, Superintendent
tberry@usd404.org
620.848.3386

If you prefer, you can submit the Household Economic Survey application by mail or return it in person at your child's school. If you decide to send your documents by mail, please send them to the address below.

Thank you for your consideration of this important process.

Attn: Judy Price
Riverton Unified School District No. 404
P.O. Box 290
Riverton, KS 66770

2021-2022 Household Economic Survey

Do not complete this form if you are Directly Certified to receive free meals or if you have filled out a Child Nutrition Program Meal Benefits Application.

For your school to receive specific state and federal benefits and funding, you must fill out this form.

There are _____ people in my household, including all children and adults.

The total annual income for all people in the household **before any deductions** for taxes, insurance, medical expenses, child support, etc. is _____ per year.

Student Name	School	Grade	Date of Birth

Additional students are listed on the back of this page.

I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will receive federal and state funding based on the information provided. I understand that school officials may verify (check) the information.

Signature of Parent or Guardian

Date

Phone

For School Use Only: Free Reduced Not Eligible