



92 North Union St. Akron, Ohio

New Student Enrollment Packet

Each parent/guardian will receive the following form the school:

1. Student application
2. Dress code rules---After June 1st
3. Student/Parent handbook---After June 1st
4. Classroom supply list—After June 1st
5. Transportation application
6. Current school report card from the Ohio Department of Education

The parent/guardian must provide the following documents for their student to be officially enrolled at the school:

1. Completed application
2. Completed transportation application
3. Proof of residency (within the past 30 days)
4. Birth certificate
5. Social security Card
6. IEP/ETR/504 if applicable
7. Current immunization record

Public school your child would attend if he/she wasn't enrolled at The Edge Academy:

School: _____ District: _____
Address: _____

Applicant's Previously Attended Schools

Dates of Attendance

Address

| Applicant's Previously Attended Schools | Dates of Attendance | Address |
|---|---------------------|---------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

1) Does your child have an IEP/504 or require special services? Please explain: _____

(Please provide a copy of the current IEP and MFE)

1a) Does your child have a Reading Improvement and Monitoring Plan? _____

1b) Has your child ever been retained in grades K-5? _____ if yes what school year _____

2) Does your child have special medical concerns? Please explain: _____

3) Does your child require a behavior modification plan? Please explain: _____

4) Who has legal custody of this child? Please explain: _____

(Please provide court documents to support this statement)

******if your student is entering 4th grade proof of passage of the 3rd grade reading guarantee must be provided before enrollment will be completed******

As a community school, parent participation and involvement is very important to our school. By enrolling your child, you are agreeing to play a vital role in your child's education. Depending on your situation, this will include reading to your child at home, volunteering in class, participating in the Parent Organization, and participating in after-school activities. Other requirements include dropping off and picking up your child on time, attending parent/teacher conferences, returning forms and permission slips in a timely manner, calling in student absences and keeping current contact information on file.

The Edge Academy is a community school established under Chapter 3314 of the Revised Code. The school is a public school and students enrolled in and attending the school are required to take proficiency tests and other examinations prescribed by law. In addition, there may be other requirements for students at the school that are prescribed by law. Students who have been excused from the compulsory attendance law for the purpose of home education as defined by the Administrative code shall no longer be excused for that purpose upon their enrollment in a community school. For more information about this matter, contact the school administration or the Ohio Department of Education.

I/We agree to the above terms and hereby submit this application to enroll my/our child.

(Parent/Guardian Signature)

(Parent/Guardian Printed Name)

(Date)

The Edge Academy does not discriminate on the basis of race, religion, national origin, disability, age or gender in their student admission or retention policies or practices.

REQUEST FOR TRANSPORTATION



2018-2019

This form is only valid for the 2018-2019 school year. This form must be turned in **4 weeks PRIOR to school starting** to have transportation at the beginning of the school year.

*This form is only for students grades **KG - 8th**, who attend an approved charter or parochial school.

*This form must be turned in to the Akron Board of Education via Central Registration/ Transportation, 70 N. Broadway, Rm 17, Akron, OH 44308. You may fax this form and required documentation to (330) 761-3224 or scan and email to rcarroll@apslearns.org.

SCHOOLS ARE NOT REQUIRED TO TURN THIS FORM IN WITH REQUIRED DOCUMENTATION TO CENTRAL REGISTRATION - PARENT/GUARDIAN MUST TURN IN.

*You must reside 2.0 miles or more from school of attendance in order to qualify for transportation services.

*Bus stops may be up to a 1/2 mile away from residential address.
*Students must be able to ride a regular yellow school bus - van transportation is not provided.

*Anytime there is a change in address, school of attendance, or guardianship you must complete a **NEW RFT**.

*If your students are new to transportation from Akron Public Schools it is suggested to have a birth certificate along with this form in order to speed up processing of this request.

*This form will also require Proof of Residency with a statement date no more than 60 days old (utility bill, bank statement, lease, paystub, letter from government agency, medical bill, etc.)

*Transportation services are not offered if Akron Public Schools is closed due to inclement weather.

*Payment-in-lieu is at the discretion of Akron Public Schools. You will be required to complete this form along with required documentation and also complete an additional contract. Payment-in-lieu is **NOT** Retroactive. Date stamp of approval begins date of payment.

Questions? Please call Ramona Carroll ~ (330) 761-2738.

OFFICE USE ONLY

Approved Alt Trans PIL Denied

Only 1 (one) school of attendance may be marked.
*If your student(s) attend different schools, you will need to complete a different form for each school.

- Akron Preparatory School (13254)
- Akros Middle School (12060)
- Arlington Christian Academy (113050)
- Chapel Hill Christian - NORTH (60657)
- Chapel Hill Christian - SOUTH (71571)
- Canton College Preparatory School (13255)
- Colonial Preparatory (134221)
- Cornerstone Community School (134460)
- CVCA Christian (67611)
- Edge Academy (133538)
- Emmanuel Christian Academy (120865)
- Faith Islamic (143248)
- GSEL/SCOPE (11381)
- Holy Family (57513)
- Imagine Leadership (14121)
- Imagine Akron Academy (KG) (11947)
- Immaculate Heart of Mary (57232)
- Lake Center Christian (64915)
- Main Street Preparatory (14066)
- Mayfair Christian Academy (54171)
- Our Lady of the Elms (KG-8) (56937)
- Northside Christian Academy (10210)
- Old Trail (60848)
- Redeemer Christian Academy (60368)
- S.U.P.E.R. Learning Center (10582)
- Sacred Heart (57729)
- Spring Garden Waldorf (96693)
- St. Anthony of Padua (56994)
- St. Augustine (57182)
- St. Francis de Sales (57018)
- St. Hilary (57034)
- St. Joseph - Cuyahoga Falls (57240)
- St. Joseph - Mogadore (60062)
- St. Mary (57067)
- St. Matthew (57075)
- St. Paul (57083)
- St. Sebastian (60962)
- St. Vincent de Paul (57109)
- STEAM Academy (12627)
- STEEL Academy (14927)
- Summit Academy - Elementary (133587)
- Summit Academy - Middle (132779)
- Summit Christian School (96966)
- The Lippman School (65722)
- University Academy (14063)

OTHER: _____

Please Mark All That Apply:

Date of Request: _____

- New to Transportation for 18/19 school year
- Change of Address or Change of School
- Guardianship Change
- I am opting out of all transportation services (including Payment-in-Lieu; you may re-apply if needed)

Please complete all information listed below:

Student Name: _____

Birthdate: _____ **Grade:** _____ **OFC ONLY- SSID:** _____

Student Name: _____

Birthdate: _____ **Grade:** _____ **OFC ONLY- SSID:** _____

Student Name: _____

Birthdate: _____ **Grade:** _____ **OFC ONLY- SSID:** _____

Student Name: _____

Birthdate: _____ **Grade:** _____ **OFC ONLY- SSID:** _____

The above named student(s) resides at the following address with parent/guardian
Parent/Guardian (if married & living together both names must appear on this form)

Names: _____

Relationship: _____

Legal Guardian: Yes No Temporary Permanent

Address: _____

Apt: _____ **City:** _____ **OH Zip Code:** _____

All-Call number: _____

First Contact Number: _____

I agree that I have read and agree to the stipulations listed. Further, I am requesting consideration for transportation services for the above-named student/s.

X _____ X _____
Signature of Parent/Guardian Date



2018-2019

Request for Transportation Form ~ Grades K-8 *only*

Akron Public Schools * Central Registration/Transportation * Attn: Ramona Carroll
70 N. Broadway Street * Room 17 * Akron, OH 44308

Phone: (330) 761-2738

Fax: (330) 761-3224

Paperwork may also be scanned to: rcarroll@apslearns.org

ALL REQUESTS FOR TRANSPORTATION MUST HAVE THIS COMPLETED FORM ALONG WITH CURRENT PROOF OF RESIDENCY (POR) NO MORE THAN 60 DAYS OLD; **PHONE CALL REQUESTS ARE NOT ACCEPTED.**

This form **MUST** be turned in to Central Registration/Transportation ***no later than 4 weeks prior*** to the *start of the first day of school* of your choice of attendance. Changes throughout the school year may take 10-15 days to process. The *Parent/Guardian is responsible* for completing this form and turning it in to Akron Public Schools Central Registration/Transportation located at the address listed above. ***Schools are not required to turn this application in for transportation arrangements.***

This form MUST be completed any time there is a change of address and/or school of attendance. In order to speed up your request for transportation services, it is helpful if you provide your student's birth certificate – especially if your student is new to transportation services from Akron Public Schools. *You are also required to provide custody documentation for any type of custody – temporary or permanent. Please list both Parent/Guardian names and sign the application together if you are married and reside together.*

A valid **POR** (*proof of residency*) is to be attached to this form. A valid **POR** is a **current** utility bill, bank statement, medical bill, credit card bill, computerized rent receipt, paystub, lease with Parent/Guardian name, address, beginning and end date of lease, and signatures of both landlord and tenant/s. "Current" means no more than 60 days prior to date of request. Date of issue must be legible on all documents provided. Hand-written receipts are not valid forms of residency.

School Bus stops may be up to a 1/2 mile from residential address. All bus stops are located at corners. Students are to be at bus stops 5 minutes **prior** to bus stop time. **Buses do not wait for students.** Kindergarten and 1st grade students require a Parent/Guardian or older sibling to be at the bus stop for AM and PM pick-up/drop-off times. If transportation is not used for 10 consecutive school days, it may be considered invalid. Parent/Guardian will then be responsible to notify Akron Public Schools Transportation Services or contracted vendor in order to reinstate transport services at already previously approved stop. Depending upon length of absence, a new RFT may need to be completed.

This transportation request is only for students in grades KG–8. High School students must complete a separate RFT form to be considered for APS provided transport. That form allows a High school student to receive a limited METRO Bus Pass. Proof of residency must accompany both type of requests. APS does not transport pre-school students. Transportation is provided for students over 2.0 miles from school of enrollment in grades K-8; High school age students will meet the METRO bus at a regular METRO bus route stop.

All students who are eligible for transportation will be placed on an APS school bus, contracted school bus, provided a METRO bus pass, or considered for payment-in-lieu. When provided a METRO bus pass, it is the Parent/Guardian's responsibility to determine a valid bus line for service. Payment-in-lieu is at the discretion of Akron Public Schools. ***If there is a bus stop available, there will not be Payment-in-Lieu made available.*** You must meet eligibility requirements for Payment-in-Lieu status. If approved for Payment-in-Lieu, you will be required to complete an additional contract that will be mailed out and, once completed, returned to Akron Public Schools Transportation Department, 550 E. North Street, Akron, OH 44304. Failure to complete and return the additional contract voids all payment. ***Payment-in-Lieu status begins at time of date stamp and approval, not retroactively.***

You must meet eligibility requirements in order for transportation to be provided to your student(s). Eligibility requirements include, but are not limited to, completed RFT, accurate and current POR, mileage qualifications, time restraint qualifications, and/or custody. If you are denied, you will receive a one-time written notification regarding said denial. The denial (unless mileage/time restraint) may be amended with proper documentation being received by the Central Registration/Transportation office. Transportation cannot start until the student is actually enrolled and attending school of choice.

In the event of inclement weather that requires Akron Public Schools to close, transportation services will not be provided for that day. If your student's school is open when Akron Public Schools is closed, the Parent/Guardian will be responsible to get their child to school.

Please note that APS is not responsible for lost, damaged, or misdirected mail. It is suggested that you contact the Central Registration/Transportation office for verification of receipt if you have not heard back regarding transport within 3 weeks.

Please complete the back of this RFT (Request for Transportation Form) so that transportation may be provided.

NOTE: Failure to complete this application in its entirety and/or turn in required documentation can cause denial and/or substantially delay transportation services.

Kindergarten Registration Letter

Dear Kindergarten Parents/Guardians:

It is with much anticipation that we await your child's entrance into Kindergarten! Nursing services in this school district are provided by Akron Children's Hospital School Health Services. Akron Children's Hospital School Health Services is dedicated to supporting the academic success of all children and youth through health promotion, education and child advocacy.

The following forms are needed for school entry:

1. **Emergency Medical Authorization**, REQUIRED AT REGISTRATION.
2. **School Health Record** provides a student health history, completed by parent, REQUIRED AT REGISTRATION.
3. Current **Immunization Record**, completed by a healthcare provider, REQUIRED AT REGISTRATION. Please bring the record even if your child has not had the final boosters yet. We can make a copy if you have the original. State of Ohio health law requires the following immunizations for school entry:

| | |
|-------------|--|
| DPT, DTaP | 5 doses |
| Polio | 3-4 doses (Check with healthcare provider) |
| MMR | 2 doses |
| Hepatitis B | 3 doses |
| Varicella | 2 doses or documented date of disease |

Please note: Immunizations must be completed within 15 days of starting school, or your child may be excluded from attendance by the principal. Immunizations can be obtained through your child's primary healthcare provider or through the:

- Mahoning County Health Department
(330-270-2855 ext.125)
- Portage County Health Department
(330-296-9919)
- Stark County Health Department
(330-493-9904)
- Summit County Health Department
(330-375-2772)
- Trumbull County Health Department
(330-675-2480)
- Wayne County Health Department
(330-264-9590)
- Medina County Health Department
(330-661-0800)

4. **Healthcare Provider Report**, completed by the doctor. Can be mailed or faxed in to the school clinic.
5. **Dentist report**, completed by a dentist. Can be mailed or faxed in to the school clinic.
6. **Other:** _____

In addition, if your child has a medical condition that may need intervention at school, for example asthma, food allergies, medications, etc., please call us so accommodations can be arranged.

We are looking forward to a healthy school year!

Sincerely,

Ms. Michelle (Nurse)

Akron Children's Hospital School Health Staff

330-535-4581 ext 1109 Fax: 330-535-5074

Phone/Fax

Immunization Summary for School Attendance Ohio

| VACCINES | <i>FALL 2018</i> IMMUNIZATIONS FOR SCHOOL ATTENDANCE |
|--|--|
| DTaP/DT Tdap/Td Diphtheria, Tetanus, Pertussis | <p><u>K</u> Four (4) or more doses of DTaP or DT, or any combination. If all four doses were given before the 4th birthday, a fifth (5) dose is required. If the fourth dose was administered at least six months after the third dose, and on or after the 4th birthday, a fifth (5) dose is not required. *</p> <p><u>1-12</u> Four (4) or more doses of DTaP or DT, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children age seven (7) and up.</p> <p><u>Grades 7-12</u> One (1) dose of Tdap vaccine must be administered prior to entry. **</p> |
| POLIO | <p><u>K-8</u> Three (3) or more doses of IPV. The FINAL dose must be administered on or after the 4th birthday regardless of the number of previous doses. If a combination of OPV and IPV was received, four (4) doses of either vaccine are required. ***</p> <p><u>Grades 9-12</u> Three (3) or more doses of IPV or OPV. If the third dose of either series was received prior to the fourth birthday, a fourth (4) dose is required; If a combination of OPV and IPV was received, four (4) doses of either vaccine are required.</p> |
| MMR Measles, Mumps, Rubella | <p><u>K-12</u> Two (2) doses of MMR. Dose one (1) must be administered on or after the first birthday. The second dose must be administered at least 28 days after dose one (1).</p> |
| HEP B Hepatitis B | <p><u>K-12</u> Three (3) doses of Hepatitis B. The second dose must be administered at least 28 days after the first dose. The third dose must be given at least 16 weeks after the first dose and at least 8 weeks after the second dose. The last dose in the series (third or fourth dose), must not be administered before age 24 weeks.</p> |
| Varicella (Chickenpox) | <p><u>K-8</u> Two (2) doses of varicella vaccine must be administered prior to entry. Dose one (1) must be administered on or after the first birthday. The second dose should be administered at least three (3) months after dose one (1); however, if the second dose is administered at least 28 days after the first dose, it is considered valid.</p> <p><u>Grades 9-12</u> One (1) dose of varicella vaccine must be administered on or after the first birthday.</p> |
| MCV4 Meningococcal | <p><u>Grade 7-9</u> One (1) dose of meningococcal (serogroup A, C, W, and Y) vaccine must be administered prior to entry.</p> <p><u>Grade 12</u> Two (2) doses of meningococcal (serogroup A, C, W, and Y) vaccine must be administered prior to entry. ****</p> |

NOTES:

- Vaccine should be administered according to the most recent version of the *Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger* or the *Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind*, as published by the Advisory Committee on Immunization Practices. Schedules are available for print or download at <https://www.cdc.gov/vaccines/schedules/index.html>.
- Vaccine doses administered ≤ 4 days before the minimum interval or age are valid (grace period). Doses administered ≥ 5 days earlier than the minimum interval or age are not valid doses and should be repeated as age-appropriate. If MMR and Varicella are not given on the same day, the doses must be separated by at least 28 days with no grace period.
- For additional information please refer to the Ohio Revised Code 3313.67 and 3313.671 for School Attendance and the ODH Director's Journal Entry (available at <http://www.odh.ohio.gov>, Immunization: Required Vaccines for Childcare and School). These documents list required and recommended immunizations and indicate exemptions to immunizations.
- Please contact the Ohio Department of Health Immunization Program at (800) 282-0546 or (614) 466-4643 with questions or concerns.

* Recommended DTaP or DT minimum intervals for kindergarten students four (4) weeks between doses 1-2 and 2-3; six (6) month minimum intervals between doses 3-4 and 4-5. If a fifth dose is administered prior to the 4th birthday, a sixth dose is recommended but not required.

** Pupils who received one dose of Tdap as part of the initial series are not required to receive another dose. Tdap can be given regardless of the interval since the last Tetanus or diphtheria-toxoid containing vaccine. DTaP given to patients age 7 or older can be counted as valid for the one-time Tdap dose.

*** The final polio dose in the IPV series must be administered at age 4 or older with at least six months between the final and previous dose.

**** Recommended MCV4 minimum interval of at least eight (8) weeks between dose one (1) and dose two (2). If the first (1st) dose of MCV4 was administered on or after the 16th birthday, a second (2nd) dose is not required. If a pupil is in 12th grade and is 15 years of age or younger, only 1 dose is required. Currently there are no school entry requirements for meningococcal B vaccine.