



Back-to-School Night

Monday August 14 is our Back-to-School Night. K-5 starts at 6 PM and 6-8 starts at 6:35 PM. Parents are invited into the classrooms to meet the teachers. All teachers will be talking to you about the upcoming school year regarding student expectations, grading, behavior, etc.

Tropical Smoothie will be here to hand out samples of some of the items they will be offering to the students this year as a new vendor. In addition, Chamos LA will be here to explain their after-school Spanish Club.

We hope to see everyone Monday night.

Basketball Tryouts

Basketball tryouts/practice for boys grades 5-8 will be Tuesday, Wednesday and Thursday, Aug. 15-17 from 3 to 5 PM. Girls will tryout on Wednesday and Thursday from 3 to 4:30 PM.

Sports Physicals must be completed before a student is allowed on the court. Packets will be going home to those interested students with the Sport Physical Form included. You can go by a Care Spot type of clinic to get the physical completed this weekend if needed.

Cheerleading Tryouts will be scheduled soon.

The first few days of school have been going quite well. I want to thank the parents for helping us implement our new changes. We look forward to working with you in making our school community be the best it can be.

Upcoming dates...

August 14 – Back to School Night

August 15 – School Mass – Feast of the Assumption

August 25 – Early Dismissal

September 4 – Labor Day – No School

Attached are two documents that need parent signatures.

The first is acknowledging that parents have read the Parent-Student Handbook that went out on Wednesday. If you have not signed this form already please print, sign, and return to school.

The next form is our E-rate form. Our school qualifies for a rebate based on the amount we spend on internet/phone usage. The attached form is data needed to complete our surveys. This data is then added to the formulas used to calculate our rebate. Please print, fill out this form, and return to the Main Office.

Thank You for your help and support regarding these two items.



Parents:

Please read the following statements carefully and sign below to indicate your agreement.

I hereby affirm that I have read the Parent Student Handbook 2017-2018 and discussed its policies with my student(s). I certify that I consent to and will abide by all governing policies of the school, including all applicable policies in the Parent Student Handbook. I understand that the standards of the school do not tolerate profanity, obscenity in word or action, dishonor to the Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school. I understand that this Handbook is subject to change without notice by decision of the school's governing body.

Name of Student _____

Signature of Parent _____ Date _____

Students in Grades 6-8:

Please read the following statement carefully and sign below to indicate your agreement.

I hereby affirm that I have read the Parent Student Handbook 2017-2018. I certify that I consent to, and will abide by all governing policies of the school, including all applicable policies in the Parent Student Handbook. I understand that this Handbook is subject to change without notice by decision of the school's governing body. I understand that admission to the school is a privilege, not a right, and that any behavior, either on or off campus, which is not consistent with the school's standards could result in the loss of that privilege.

Signature of Student _____ Date _____

Resurrection Parish School

St. Augustine

SCHOOL NAME

DATE

DIOCESE

**DIOCESAN ADVOCATES, INC.
ANNUAL INCOME ELIGIBILITY PARENT SURVEY
Erate Funding Year 21**

RETURN IN A SEALED ENVELOPE TO SCHOOL PRINCIPAL

Please complete and return the survey below. In order for this survey to be considered a valid measure, **the survey must be returned to the principal even if your income does not meet any of the criteria.** The purpose of this survey is to collect data that will be used to determine the school's federal funding allocation. Use the chart below to find your family size. Family size may include a foster child, an emancipated youth or a special education student over age 18. *If you are paid on a weekly or monthly basis, please multiply that amount by the number of weeks or months actually worked each year to determine your "Annual Gross Income."*

PLEASE CIRCLE HOUSEHOLD SIZE IN TABLE BELOW:

Household Size	Annual	Month	Twice Per Month	Every Two Weeks	Week
1	\$ 22,311	\$ 1,860	\$930	\$ 859	\$430
2	30,044	2,504	1,252	1,156	578
3	37,777	3,149	1,575	1,453	727
4	45,510	3,793	1,897	1,751	876
5	53,243	4,437	2,219	2,048	1,024
6	60,976	5,082	2,541	2,346	1,173
7	68,709	5,726	2,863	2,843	1,322
8	76,442	6,371	3,186	2,941	1,471
For each additional family member, add:	+7,733	+645	+323	+298	+149

<i>Example:</i>	<i>Family Size</i>	<i>Annual Income</i>
	4	
		\$45,510

Please circle your answer

1. If your family income is the same or less than the amount shown on the chart beside your family size,

circle yes. If more than the amount shown, circle NO and move to the bottom portion.

YES NO

2. Is your family eligible for food stamps?

YES NO

3. Are you receiving public assistance? Food stamps, or TANF (formerly AFDC)

YES NO

4. Are any of your children eligible for the "Medicaid" program?

YES NO

5. Are you receiving full scholarship based on need for your child/children?

YES NO

6. Are you receiving free or reduced tuition for your child/children?

YES NO

7. Does your family live in a housing project or have poor housing conditions?

YES NO

8. Do you have an unusual financial burden? If yes, please explain: (If necessary use back of page)

YES NO

FAMILY NAME (PRINT): _____

FAMILY ADDRESS: _____

PUBLIC SCHOOL DISTRICT IN WHICH YOU RESIDE: DUVAL

List the name of all school age children living in your home, including which school they attend and their grade level.

NAME OF CHILD	NAME OF SCHOOL	GRADE LEVEL

