OPEN-ENROLLMENT CHARTER CONTRACT RENEWAL PETITION

Current Information in Charter School Tracking System

Charter Holder Name:

IDEA ACADEMY, INC.

Charter School Name:

IDEA PUBLIC SCHOOLS

4102 **Y** PAU

Charter School County/District #:

108-807

Generation:

04

Maximum Approved Enrollment:

45,000

Grades Approved:

PK3,PK4,K,1,2,3,4,5,6,7,8,9,10,11,12

Campuses:

108807001	108807002	108807003
IDEA COLLEGE PREP	IDEA QUEST COLLEGE PREPARATORY	IDEA FRONTIER COLLEGE
401 S 1 ST ST	14001 N ROOTH RD	PREPARATORY
DONNA, TX 78537	EDINBURG, TX 78541	2800 S DAKOTA AVE
		BROWNSVILLE, TX 78521
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
6,7,8,9,10,11,12	6,7,8,9,10,11,12	6,7,8,9,10,11,12
108807004	108807005	108807006
IDEA COLLEGE PREPARATORY	IDEA COLLEGE PREPARATORY SAN	IDEA COLLEGE PREPARATORY
MISSION	BENITO	SAN JUAN
1600 S SCHUERBACH RD	2151 RUSSELL LN	600 E SIOUX RD
MISSION, TX 78572	SAN BENITO, TX 78586	SAN JUAN, TX 78589
,		
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
6,7,8,9,10,11,12	6,7,8,9,10,11,12	6,7,8,9,10,11,12
108807007	108807008	108807009
IDEA COLLEGE PREPARATORY	IDEA COLLEGE PREPARATORY PHARR	IDEA EDINBURG COLLEGE
ALAMO	600 E LAS MILPAS RD	PREPARATORY
325 E SH 495	PHARR, TX 78577	2553 N ROEGIERS RD
ALAMO, TX 78516		EDINBURG, TX 78541
		,
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
6,7,8,9,10,11,12	6,7,8,9	6,7,8

		T
108807010	108807011	108807012
IDEA COLLEGE PREP WESLACO	IDEA MCALLEN COLLEGE	IDEA BROWNSVILLE COLLEGE
2931 E SUGAR CANE DR	PREPARATORY	PREPARATORY
WESLACO, TX 78599	201 N BENTSEN RD	4395 PAREDES LINE RD
	MCALLEN, TX 78501	BROWNSVILLE, TX 78526
	,	, ,
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
6,7,8	6.7	6,7
108807013	108807020	108807021
	IDEA CARVER COLLEGE PREPARATORY	IDEA SOUTH FLORES COLLEGE
IDEA WESLACO PIKE COLLEGE	i	
PREPARTORY	217 ROBINSON PL	PREPARTORY
1000 E PIKE BLVD	SAN ANTONIO, TX 78202	6919 S FLORES
WESLACO, TX 78596		SAN ANTONIO, TX 78221
		[
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
****	6,7	16
108807022	108807023	108807035
IDEA MONTERREY PARK	IDEA WALZEM COLLEGE	IDEA ALLAN COLLEGE
COLLEGE PREPARATORY	PREPARATORY	PREPARATORY
222 SW 39 TH STREET	8750 FOURWINDS DRIVE	1701 VARGAS RAOD
SAN ANTONIO, TX 78237	WINDCREST, TX 78239	AUSTIN, TX 78741
J. II (III (I J. (I	, 111	,
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
Grade Bevers Currently Served.	Grade Bevels Carreinly Served.	6,7
108807101	108807102	108807103
	1	\$
IDEA ACADEMY	IDEA QUEST ACADEMY	IDEA FRONTIER ACADEMY
401 S 1 ST ST	14001 ROOTH RD	2800 S DAKOTA AVE
DONNA, TX 78537	EDINBURG, TX 78541	BROWNSVILLE, TX 78521
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
K,1,2,3,4,5	K,1,2,3,4,5	K,1,2,3,4,5
108807104	108807105	108807106
IDEA ACADEMY MISSION	IDEA ACADEMY SAN BENITO	IDEA ACADEMY SAN JUAN
1600 S SCHUERBACH RD	2151 RUSSELL LN	200 N NEBRASKA AVE
MISSION, TX 78572	SAN BENITO, TX 78586	SAN JUAN, TX 78589
,		
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
K,1,2,3,4,5	K,1,2,3,4,5	K,1,2,3,4
108807107	108807108	108807109
IDEA ACADEMY ALAMO	IDEA ACADEMY PHARR	IDEA EDINBURG ACADEMY
325 E SH 495	600 E LAS MILPAS RD	2553 N ROEGIERS RD
	PHARR, TX 78577	EDINBURG, TX 78541
ALAMO, TX 78516	111MKK, 1A /03//	EDINDUKU, FA 70341
Condo I anala Comento C	Condo 1 anala Commente Comment	Cando I quala Cirricativa Carria
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
K,1,2,3	K,1,2,3	K,1,2,3,4
108807110	108807111	108807112
IDEA ACADEMY WESLACO	IDEA MCALLEN ACADEMY	IDEA BROWNSVILLE ACADEMY
2931 E SUGAR CANE DR	201 N BENTSEN RD	4395 PAREDES LINE RD
WESLACO, TX 78599	MCALLEN, TX 78501	BROWNSVILLE, TX 78526
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
K,1,2,3,4	K,1,2,3	K,1,2,3
108807113	108807120	108807121
IDEA WESLACO PIKE ACADEMY	IDEA CARVER ACADEMY	IDEA SOUTH FLORES ACADEMY
1000 E PIKE BLVD	217 ROBINSON PL	6919 S FLORES
	- I	
WESLACO, TX 78596	SAN ANTONIO, TX 78202	SAN ANTONIO, TX 78221
Cond-Tarrata Consisting	Condo Lavala Committee Co.	Cando Lovala Community Community
Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
	K,1,2,3,4,5	K,1,2

108807122	108807123	108807135
IDEA MONTERREY PARK	IDEA WALZEM ACADEMY	IDEA ALLAN ACADEMY
ACADEMY	8750 FOURWINDS DRIVE	220 FOREMOST DR
222 SW 39 TH STREET	WINDCREST, TX 78239	AUSTIN, TX 78745
SAN ANTONIO, TX 78237		

Grade Levels Currently Served:	Grade Levels Currently Served:	Grade Levels Currently Served:
		1,2,3

Geographical Boundary:
The original charter application and amendment history reflects that the following district(s) comprise the charter school's geographic boundary:

ALAMO HEIGHTS ISD	HARLANDALE ISD	LULING ISD	ROUND ROCK ISD
AUSTIN ISD	HARLINGEN CISD	MANOR ISD	SAN ANTONIO ISD
BASTROP ISD	HAYS CISD	MCALLEN ISD	SAN BENITO CISD
BROWNSVILLE ISD	HIDALGO ISD	MCDADE ISD	SAN ISIDRO ISD
COUPLAND ISD	HUTTO ISD	MERCEDES ISD	SAN MARCOS CISD
DEL VALLE ISD	JARRELL ISD	MISSION CISD	SANTA MARIA ISD
DONNA ISD	JIM HOGG COUNTY ISD	MONTE ALTO ISD	SANTA ROSA ISD
DRIPPING SPRINGS ISD	JUDSON ISD	NORTH EAST ISD	SHARYLAND ISD
EANES ISD	LA FERIA ISD	NORTHSIDE ISD	SMITHVILLE ISD
EAST CENTRAL ISD	LA JOYA ISD	PFLUGERVILLE ISD	SOMERSET ISD
EDCOUCH-ELSA ISD	LA VILLA ISD	PHARR-SAN JUAN-ALAMO ISD	SOUTH SAN ANTONIO ISD
EDGEWOOD ISD	LACKLAND ISD	POINT ISABEL ISD	SOUTHSIDE ISD
EDINBURG CISD	LAGO VISTA ISD	PRAIRIE LEA ISD	SOUTHWEST ISD
ELGIN ISD	LAKE TRAVIS ISD	PROGRESO ISD	TAYLOR ISD
FLORENCE ISD	LEANDER ISD	RANDOLPH FIELD ISD	THRALL ISD
FT SAM HOUSTON ISD	LIBERTY HILL ISD	RIO GRANDE CITY CISD	VALLEY VIEW ISD
GEORGETOWN ISD	LOCKHART ISD	RIO HONDO ISD	WESLACO ISD
GRANGER ISD	LOS FRESNOS CISD	ROMA ISD	WIMBERLEY ISD

OPEN-ENROLLMENT CHARTER RENEWAL APPLICATION FOR CONTRACT END DATE OF JULY 31, 2015

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Requires the chart showing	Organizational Charts
Requires the	Admission Policy
Requires the implementar commission amendments	Special Education Assurances
This section Requires the implemental and commis further cert	Serving Students at Residential Facilities Assurances
Requires the complies wappropriate 6 504 of the R	I. Bilingual/ESL, Section 504, and Dyslexia Assurances

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Explanation of Renewal Process

19 Texas Administrative Code (TAC) §100.1031 contains additional information about charter renewal.

The renewal process is separate from the charter amendment process. Significant changes from the original charter should not be made in the renewal application unless a charter amendment has been previously approved.

As authorized in *Texas Education Code (TEC) §12.1141*, the commissioner's procedures for renewal must include three distinct processes: expedited renewal, discretionary renewal, and expiration.

Definitions of the three renewal processes:

Expedited (30 days)

If in the preceding 3 years:

- · Highest or second highest academic performance rating
- · Satisfactory or higher financial rating; and
- No campus has been assigned the lowest rating or no campus has been closed for low ratings

Discretionary (90 days)

Consideration among others of:

- Academic Performance 2009-2010, 2010-2011, 2012-2013, 2013-2014
- Financial Ratings 2009-2010, 2010-2011, 2011-2012, 2012-2013, 2013-2014
- Performance Framework (TEC §12.1181)

Expiration (30 day notification)

If for any 3 of the 5 preceding school years:

- · Lowest academic performance rating
- · Lower than satisfactory financial rating
- The charter was assigned any combination of ratings, or
- A campus has been assigned the lowest performance rating for the 3 preceding school years and has not been closed

The due date for charters to submit the completed renewal application to the Texas Education Agency (TEA) is **Wednesday**, **January** 7, 2015.

You may request an informal review of the findings and actions described in this letter by sending a written request to:

Brandon Spenrath, Program Specialist Charter School Administration Texas Education Agency 1701 North Congress Ave. Austin, Texas 78701 Fax (512) 936-9281 brandon.spenrath@tea.state.tx.us

The request must be received no later than <u>Wednesday</u>, <u>December 17, 2014</u>. Your request must identify what changes you are requesting, the reasons for your request, and documentation to support your request. If we do not receive your request before the deadline, final action will be taken without further review.

Please see 19 TAC Chapter 157, subchapter EE, Division 1 for addition information about the informal review process.

Application Instructions

The renewal application contains ten sections to be completed electronically, printed into hardcopy form for required signatures and dates, and submitted on or before the due date to the Division of Charter School Administration.

- 1. **Deadline:** The completed application must be returned by mail to the Division of Charter School Administration by Wednesday, January 7, 2015.
- 2. **Typing Requirement:** All of the responses to the application sections, with the *exception* of signatures and dates of signatures, must be typed.
- 3. Printing Requirement: The application must be printed on one-sided 8 1/2" x 11" white paper.
- 4. Signature Requirement: Where signatures and dates of signatures are required, they must be in blue ink.
- 5. Submission of Original Document and One Copy: The completed and unbound (rubber bands or clips are acceptable) original renewal application, including fillable forms and attachments, and one additional copy must be submitted as follows:

Texas Education Agency
Division of Charter School Administration
1701 North Congress Avenue
Austin, Texas 78701

Selected Definitions

Please review *TEC §12.1012* and *19 TAC §100.1001* for definitions of terms which are available at the <u>education laws and rules</u> page. Listed below are selected terms and definitions:

- Charter holder the entity to which a charter is granted under TEC, Chapter 12
- Charter school a Texas public school operated by a charter holder under an open-enrollment charter granted by the commissioner n pursuant to TEC, §12.101
- Governing body of a charter holder the board of directors, board of trustees, or other governing body of a charter holder
- Governing body of a charter school the board of directors, board of trustees, or other governing body of an open-enrollment charter school; the term includes the governing body of a charter holder if that body acts as the governing body of the open-enrollment charter school
- Management company a person or entity, other than a charter holder, that provides management services for an open-enrollment charter school
- Officer of a charter school the principal, director, or other chief operating officer of an open-enrollment charter school; an assistant principal or assistant director of an open-enrollment charter school; or a person charged with managing the finances of an open-enrollment charter school
- Board chair or chairperson generally the board president or presiding officer of the governing board

Section I.

Coversheet

ATTACHMENT A: OPEN-ENROLLMENT CHARTER CONTRACT RENEWAL

The enclosed document entitled OPEN-ENROLLMENT CHARTER CONTRACT RENEWAL will serve as the coversheet when the application is completed and submitted and includes current information in the Charter School Tracking System. Verify the accuracy of the information on the <u>coversheet</u> and, if updates to the information are needed, create a separate sheet detailing your corrections and label the sheet "Update to Data Provided by TEA", and include it in the renewal packet immediately following the preprinted coversheet.

Section II.

Contact Information

The persons listed below will be contacted by agency staff if there are issues to be resolved in any of the renewal application sections. Note that any contact information, including email addresses, provided with the renewal application will be public information.

Superintendent Contact Information:			
Superintendent's Name:	JoAnn Gama		
Telephone Number:	956-377-8000		
Fax Number:	956-447-3796		
E-mail Address:	joann.gama@ideapublicschools.org		
Charter Holder Board C	hair Contact Information:		
Board Chair's Name:	Mike Rhodes		
Telephone Number:	830-708-4255		
Fax Number:			
E-mail Address:			
Application Preparer's C	Contact Information: Same as Superintendent Same as Board Chair		
Contact Name:	Leanne Hernandez		
Telephone Number:	956-975-0352		
Fax Number:	956-447-3796		
E-mail Address:	leanne.hernandez@ideapublicschools.org		
Charter School Website:			
Web address:	http://www.ideapublicschools.org		

Section III.

Website Postings

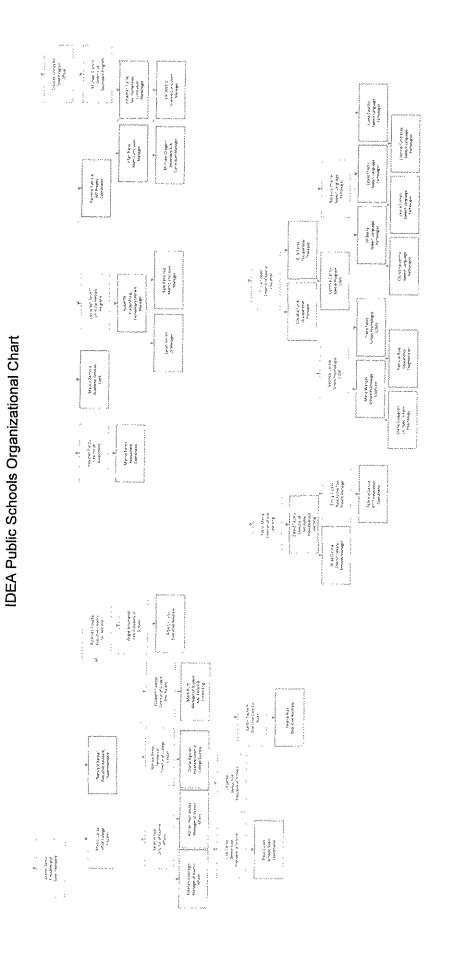
members of the governing body on the home page of the school's internet website. Provide the internet URL address where the names of the members of the governing body are listed.
http://www.ideapublicschools.org/domain/41
In accordance with the requirements of <i>TEC §12.136</i> , an open-enrollment charter school shall post the salary of the school's superintendent or CEO on the school's internet website. Provide the internet URL address where the superintendent's salary is posted.
Finance and Budget Page - http://www.ideapublicschools.org/domain/35
In accordance with <i>Local Government Code §140.006</i> , an open-enrollment charter school shall post continuously on the school's internet website the annual financials of the school. Provide the internet URL address where the annual financial statements of the charter school are continuously posted.
Finance and Budget Page - http://www.ideapublicschools.org/domain/35

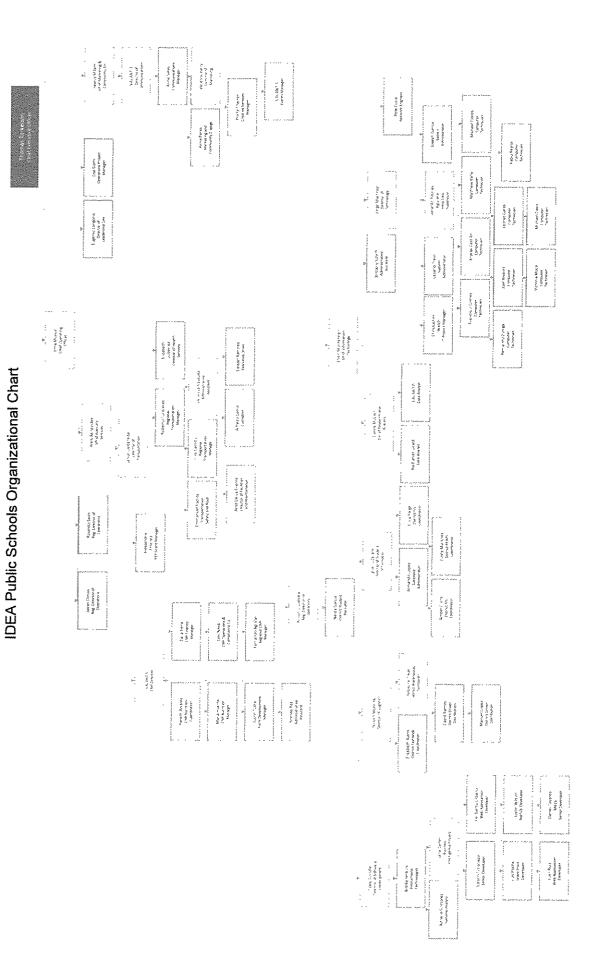
Section IV.

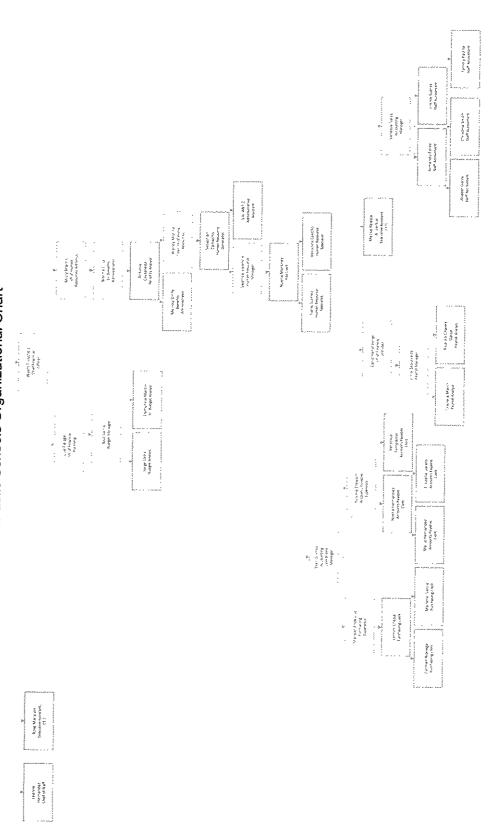
Organizational Charts

Submit, as **Attachment 1**, the organizational chart for the charter school that specifies the administrative positions including the title and name of the individual currently in each position.

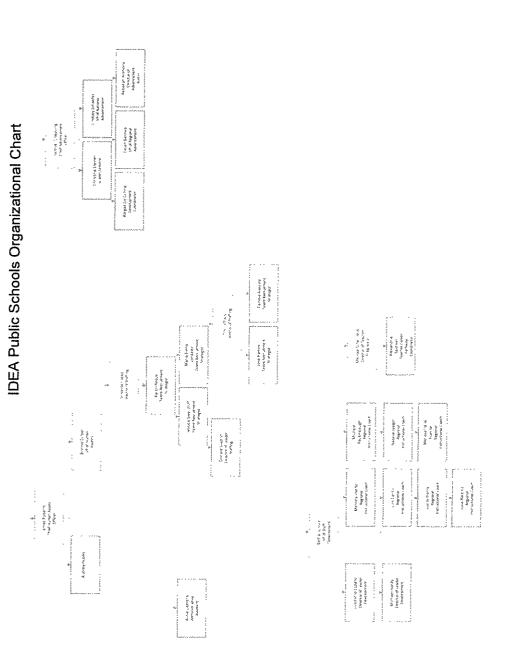
Submit, as **Attachment 2**, a chart that identifies all other entities under the direction of the charter holder. This would include entities and/or programs that the charter holder governs/manages in addition to the charter school.







IDEA Public Schools Organizational Chart



Section V.

Admission Policy

Please be aware that any change to the terms of an open-enrollment charter that relates to the following sub-	an open-enrollment charter that relates	the following subjects
---	---	------------------------

- · grade levels,
- · maximum enrollment,
- · geographic boundaries,
- approved campus(es),
- · approved sites,
- relocation of campus,
- charter holder name,
- · charter school (district) name,
- · charter campus name,
- · charter holder governance,
- articles of incorporation,
- · corporate bylaws,
- · management company,
- · admission policy, or
- the educational program of the school

requires the commissioner of education's approval of an <u>amendment</u>. (See §100.1033(b) Types of amendments, 19 TAC Chapter 100.)

A. Specify the period during which applications for admission are accepted. *TEC*, §12.117, requires that a charter school establish a reasonable application deadline for the submission of applications for admission.

Beginning of Period (Month/Day)	End of Period (Month/Day)
September 1	April 10

B. If the school admits students by lottery when the number of admissions applications received exceeds the number of available spaces, describe the procedures followed in conducting the lottery.

For the upcoming school year, the lottery will be held on April 11. During the lottery, names will be drawn at random, by grade, with spots offered in the order of names drawn. When the capacity for each grade level is reached, the remaining applications are assigned a position on our waiting list in randomized order (only applications completed before the deadline participate in the lottery). The lottery is open to the public and is overseen by IDEA Public Schools officials.

- C. If the school utilizes a lottery when oversubscribed, are any categories of applicants exempted from the lottery?
 - O Yes
 - No
 - O Not applicable (because lotteries are not utilized)

If "Yes" was indicated in C above, state the categories of applicants that are exempted.

N/A

Section V. (Continued) Admission Policy

D. If the school utilizes a lottery when oversubscribed, specify the approximate date on which a lottery will be

conducted.

	Approximate Date of Lottery (Month/Day)
	April 11
E.	If the school does not utilize a lottery when oversubscribed, but rather fills the available positions in the order in which applications were received before the expiration of the application deadline (i.e., a "first-come, first-served" admission process), describe the manner in which the school notifies the community of the opportunity to apply for admission. TEC, §12.117, requires a charter school that uses a first-come, first-served admission process when oversubscribed to publish a notice in a newspaper of general circulation not later than the seventh day before the application deadline.
	N/A
F.	If the school has a separate process for re-enrollment, state the process and the timeline to be used.
	Returning students will automatically be re-enrolled provided they notify the school of their intent to return by March 1st of each school year.
G.	State the procedures for processing applications received once the application deadline has passed.
	The deadline to submit an application for the upcoming school year is April 10th. Any application submitted after the deadline will be placed on the wait list until August 31 of the school year. Students who are not selected by August 31 will need to re-apply September 1 through April 10 for the next school year.
H.	Describe the information that an applicant must provide in order to be considered for admission. Applicants may not be required to provide copies of transcripts or other academic records until after they are offered admission and are enrolling. Furthermore, a student may not be precluded from enrolling due to the charter school's failure to receive information required for enrollment from the student's parent or guardian or previous school. See TEC, §25.002.

The application will ask for the student's name, contact information, birthday, as well as parent/guardian information. The process is simple and straightforward and designed to take no more than 10 minutes to complete. Families can apply at

www.ideapublicschools.org/apply, via phone, or in person at an IDEA campus.

Section V. (Continued) Admission Policy

I. The charter holder certifies that the non-discrimination statement required by TEC, §12.111 (a)(5) is printed in the school's admission policy. TEC, §12.111 (a)(5) requires that a charter school's admission policy include a statement

	that the school will not discriminate in admissions based on gender, national origin, ethnicity, religion, disability academic, artistic, or athletic ability, or the district the child would otherwise attend.
	⊙ Yes
	ONO
J.	Does the admission policy either require or permit the school to exclude from admission all students with documented histories of a criminal offense, a juvenile court adjudication, or discipline problems under TEC Chapter 37, Subchapter A as authorized by TEC , § 12.111 (a)(5)(B)?
	• Yes (The school excludes such students or reserves the right to exclude such students from admissions.)
	O No (The school does not deny admission to such students based on their documented histories of misconduct.)
Su	bmit
	• A current copy of the admission policy that incorporates the information provided in the above answers to questions
	A through H and any other relevant information (Attachment 3);
	• A blank copy of the current admission application, i.e., the information requested when the student first seeks admission (Attachment 4); and
	• A blank copy of the current enrollment form(s), i.e., the information required once an applicant has been offered admission and is registering for enrollment (Attachment 5)

IDEA Public Schools K-12 Admissions Policy

Students are admitted by lottery. Returning students and their siblings are given priority in admission. Returning students will automatically be re-enrolled provided they notify the school of their intent to return by March 1st of each school year.

Our application period is September 1st through April 10th. As of March 1st, all Inter-District Transfers & siblings of current students will be added to student rosters for next year, provided sufficient space is available. If there are enough slots for all remaining students, then all will be admitted. In the event that there are more applicants than slots available, all remaining applicants will be drawn by lottery to be conducted on the second Saturday of April. If the second Saturday of April is a holiday weekend, then the lottery will take place the following Saturday. If a new applicant is selected in the lottery and they have siblings, their sibling(s) also gets preference for the grade they are applying for.

Parents will be notified of acceptance or placement of waitlist, in writing, one week after the lottery. If parents have not received word by said date, it is the parent's responsibility to contact the school. After all remaining slots are filled, students will be placed on the waiting list in the order the name is selected.

If there are additional students who apply after April 10th, they will be added to the waiting list in the order that their application was received. Students on the waiting list will be admitted as spots become available in the school year for which they applied. Students not selected will need to reapply for the subsequent school year.

It is the policy of IDEA Public Schools to comply with all non-discrimination provisions of all federal and state laws. IDEA Public Schools admits students without regard to race, ethnicity, religion, color, sex, national origin, disability, athletic, artistic, academic ability, limited English proficiency, or the district the child would otherwise attend.

In addition, under TEC §12.111(a) (6), IDEA Public Schools is authorized to exclude a student with a documented history of a criminal offense, a juvenile court adjudication, or discipline problems under TEC Chapter 37, Subchapter A.

E IDEA STUDENT APPLICATION 2015-16

CAMPUS PREFERENCE									
for will be avail and from in cas	Select your campus preferences. You can only select campuses where the grade you are applying for will be available next school year. Please ONLY select the campuses you are willing to drive to and from in case of an emergency. RGV								
Lower Valley	☐ Frontier	☐ Brownsville	☐ San Benito	Riverview					
Mid Valley	☐ Weslaco	☐ Weslaco Pike	Donna	☐ Alamo ☐ San Juan ☐ Pharr					
Upper Valley	☐ McAllen	☐ Quest	☐ Mission	☐ Edinburg					
CENTRAL TEXAS									
San Antonio 🖂		☐ South Flores		Park Walzem Eastside					
Austin 🔲	Allan	☐ Rundberg	•						
STUDENT INFO:	AMATION ===								
First Name		Middle Name	<u></u>	Last Name					
FIISLIAGILIE		Militale Mairie		Last Indine					
Date of Birth	Αį	ge on 9/01/2015	Current Grade Level	Main Phone Number					
Does your child o	currently attend	l: ☐ Private Sch	ool 🔲 Public S	School 🔲 None					
Physical Address				Suite, Apt #					
•									
City		State		Zip Code					
•				,					
☐ Mailing Address	same as Physical								
		Mailing Address		O A PARTIE AND A P					
PARENT INFOR	And the state of t								
	· -	ırdian names is rec							
☐ Father ☐	Mother 🔲 I	_egal Guardian (must pr	ovide official court docu	iments for custodial rights)					
P1		A A Calaba Silva		N-					
First Name		Middle Name	Last	Name					
									
Mobile Number	En	nail Address		na managan ang					
Employed by				Work Number					
EUDIOACA DA				ANIMA INCHINOCI					

First Name	Middle	Name	Last N	Jame
	IVIIOUIG	Name	must i	vame
OOB	Current Grade			
TUDENT #3 INFOR	MATION			
			············	
First Name	Middle I	Name	Last N	lame
OOB	Current Grade			
DEA TEAM & FAN	IIV			
	hildren currently atter	nding IDEA?	Yes 🗆 No	
Name		Grade	Campus	
Child of IDEA emplo	oyee? 🗆 Yes 🗀] No		
Child of IDEA emplo Employee Name	oyee?] No Campi	JS	
Employee Name	oyee?	Сатрі	JS	
Employee Name	near about IDEA?	Сатрі	us ☐ Student Only	☐ Both Parent & Student
Employee Name How did you FIRST I	near about IDEA?	Campa Parent Only		
Employee Name How did you FIRST I	near about IDEA?	Campa Parent Only	☐ Student Only	
Employee Name How did you FIRST I Whose IDEA was it t What had a positive Ipplicant's Stateme certify, under penalty of ue and correct. I certify	near about IDEA? To apply Influence on your decontrol of perjury under the laws of yalso that I have not with	Campa	Student Only st all influences/media. instruction on this form, and the information affect the outco	
Employee Name How did you FIRST I Whose IDEA was it to What had a positive pplicant's Stateme certify, under penalty of ue and correct. I certificates of any information	near about IDEA? to apply influence on your decentric for perjury under the laws of perjury under the laws of y also that I have not with on from my records that II	Campa Campa Parent Only devery question and of the United States of the United States of the DEA Public Schools not the United be selected.	Student Only st all influences/media instruction on this form, as America, that the informa that would affect the outco	/people>s well as my answer to each questition provided with this application is the provided with this application. I authorize

IDEA APLICACION DEL ESTUDIANTE 2015-16

ESHUELA DE SUPREBERENO A Seleccione la escuela de su preferencia. Solo puede seleccionar escuelas que tengan disponibles el grado para el cual está aplicando para el próximo año escolar. Por favor seleccione solo la escuela a la cual está usted dispuesto a manejar en caso de alguna emergencia. RGV ☐ Riverview ☐ Frontier ☐ Brownsville San Benito Valle bajo ☐ Weslaco ☐ Weslaco Pike □ Donna ☐ Alamo ☐ San Juan ☐ Pharr Valle medio ☐ McAllen ☐ Quest ☐ Mission ■ Edinburg Valle alto **CENTRO DE TEXAS** ☐ Walzem San Antonio

Carver ☐ South Flores ☐ Eastside Rundberg ☐ Allan Austin INFORMACION DEL ESTUDIANTE Primer Normbre Segundo Nombre Apellido Edad en 09/01/2015 Numero de Teléfono Fecha de nacimiento Grado Escolar Actual Su hijo asiste a una escuela: Privada ☐ Publica ☐ Ninguna Dirección suite/# de departamento Ciudad Estado Código Postal ☐ Misma dirección física y de correo Dirección de correo INFORMACION DE LOS PADRES DE FAMILIA Se requiere al menos el nombre de uno de los padres/tutor. ☐ Padre ☐ Madre Tutor (debe proporcionar documentos oficiales de la corte para demostrar custodia) Primer Nombre Segundo Nombre Apellido Dirección de Correo Electrónico Numero de Celular Empleado en Teléfono del trabajo

Primer Nombre	Segundo Nombre	Apellido	
Fecha de nacimiento	Grado Escolar Actual		
ESTUDIANTE # 3	e programment en l'altre de l'alt		**************************************
Primer Nombre	Segundo Nombre	Apellido	
Fecha de nacimiento	Grado Escolar Actual		
IDEA EQUIPO Y FAMIL	LIA		
¿Tiene hijos que están a	actualmente estudiando en IDE	A? SI No	
Nombre completo		Grado Escuela	NW
¿Hijo de empleado de Il	DEA? SI No		
Nombre de empleado		Escuela	
¿Cómo supo de IDEA?¸			
¿De quién fue la ldea de	e aplicar a IDEA?	☐ Estudiante ☐ Padres y Estudiante	}
¿Tuvo alguna influencia	positiva que lo motivo a aplica	r? <enliste comunicación<="" de="" gente="" influencias="" la="" medios="" td="" todas=""><td>1></td></enliste>	1>
oregunta. Certifico bajo jurar es verdadera y correcta. Cer que IDEA Public Schools con Declaración de Transfer	nento de la leyes de los Estados Uni tífico además que no retuve ninguna nparta mi información si es necesari encia: Entiendo que, si mi hijo(a) e	untas e instrucciones en esta forma, así como mis respuestas a idos de América, que la información proporcionada en esta apli a información que pueda afectar el resultado de esta aplicación io para determinar elegibilidad para los beneficios que estoy bu s seleccionado para asistir a una escuela de IDEA, debe de asis ar un cambio a alguna otra escuela de IDEA.	icación i. Autoriz iscando.



Student Registration Form Hoja de Inscripción para Alumnos

Please complete the following information about your student.

Favor de llenar la siguiente información sobre su estudiante.

General Information					
Student's Name: (Nombre de Estudiante:)					
(Nombre de Estudiante:) Mailing Address: (Dírección de Correo:)					
Current Grade Level: (Grado Escolar Actuali)					
Physical Address: (Dirección de Domicilio:)					
Home Pliene: (Teléfono de Casa:)					
		그 사내용 했다 살았			
Mother: (Madre:)			 		
Mother's Employer: (Lugar de trabajo de la madre:)					
Mother's Phone Number: (Telefóno de la madre:)					
Pather: (Padre:)					
Father's Employer: (Lugar de trabajo del padre:)					
Father's Phone Number: (Telefóno del padre:)					
Guardian: (Tutor:)			 		
Guardian's Employer: (Lugar de trabajo del tutor:)			 	<u> </u>	
Guardian's Phone Number: (Teléfono del tutori)		<u></u>	 		
Name and Phone of first emergency					
(Nombre y Teléfono del primer contacto de amergencia.)					
Relationship to student: (Relación a estudiante:)			 		
Name and Phone of Second Emergency Contact:			 		<u> </u>
(Nombre y Teléfono del segundo contacto de emergencia:)					
Relationship to Student: (Relación a estudiante:)			 		
Parent/Guardian Email: (Correo electrónico de Padre de			 		
familia/tutor:) Medical Information					
Doctor's Name:	T		 	<u> </u>	x _ 3
(Nombre del doctor) Doctor's Phone:			 		
(Teléfono del doctor)			 		
Allengies: (Alergias:)			 		
Medical Alert: (Alerta medica.)			 		
Dennst: (Nombre del denusta)			 		
Dentist Phone (Teléfono del dentista.)			 		



Student Registration Form Hoja de Inscripción para Alumnos

Pu	blic	Informatio	n requests	/Solicitu	des de	inform	ación	nública

Would you like for your student's information to be released to third parties?/¿Le gustaria que la información del estudiante sea compartida con terceras partes?

Yes/Si No/No

Media Release/Autorización para medios de comunicación

May we use your child's picture in any publications? / ¿Podemos usar la imagen de su hijo(a) en cualquier publicación?

Yes/Si No/No

Transfer Statement/Declaración de Transferencia

I understand that, should my child be selected to attend a specific IDEA campus, they must attend said campus for one full school year prior to requesting a transfer to another IDEA campus, contingent on space being available at that campus.?/¿ Entiendo que en caso que mi bijo/a sea seleccionado/a para un plantel de IDEA, es requerido que asista a ese plantel por lo menos un año escolar completo antes de poder solicitar una transferencia a otro plantel de IDEA, siempre y cuando baya cupo en ese plantel?

Yes/Si No/No

By signing the following/ Al firmar,

I understand each and every question and instruction on this form, as well as my answer to each question. I certify, under penalty of perjury under the laws of the United States of America, that the information provided with this application is all true and correct. I certify also that I have not withheld any information that would affect the outcome of this application. Entiendo todas y cada una de las preguntas e instrucciones en esta solicitud, al igual que mi respuesta para cada pregunta. Yo certifico, bajo pena de perjurio bajo las leyes de los Estados Unidos de América, que la información proporcionada en esta solicitud es verdadera y correcta. Certifico también que no he ocultado ninguna información que pueda afectar el resultado de esta aplicación.

I authorize the release of any information from my records that IDEA Public Schools needs to determine eligibility for the benefit I am seeking.

/ Yo autorize la divulgación de cualquier información de mis registros los cuales IDEA Public Schools determine necesario para determinar la elegibilidad para el beneficio que busco.

Parent's Signature/Firma de Padre de Familia Date/Fecha



This form is to be completed for all students new to IDEA Public Schools, Pre-K - 12. For students who previously received LEP services in another Texas School, a copy of the original Home Language Survey must be requested from the student's previous district. When received, the copy of the Home Language Survey from the previous district should be kept along with this completed form. Student's Name_ Grade Nombre del alumno Grado Date of Birth: Previous School Fecha de Nacimiento Escuela previa Home Language Survey / Cues tenario de Idioma Natal 1. What language is spoken in your home most of the time? ¿Cuál es el idioma que se habla más en su hogar? 2. What language does your child speak most of the time? ¿Cuál es el idioma que su bijo(a) habla más? 3. Date off first entry into ANY public school in the USA ¿Fecha del PRIMER ingreso en CUALOUIER escuela pública de E.U.? 4. Circle the grade levels that your child attended school in the US. Marque los grados que su hijo(a) asistió a la escuela en los Estados Unidos. 1 2 3 4 5 6 7 8 9 10 11 12 5. My child attended school ___partial year _all year todo el año Mi hijo(a) asistió a la escuela años parciales Parent Signature_ _Relationship to Child_ Date

Relación al estudiante

Fecha

Firma del padre/tutor

AppID: Campus:

Texas Education Agency Texas Public School Student/Staff Ethnicity and Race Data Questionnaire

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race. *United States Federal Register (71 FR 44866*)

and race. United States Federal Register (71 FR 44866)								
The federal government requires school districts to collect (1) ethnicity and (2) race information. Below is the information we have for your child.								
Part 1. Ethnicity: Is the person Hispanic/Latino? (Choose only one)								
Hispanic/Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.								
Not Hispanic/Latino Parental Refusal								
Part 2. Race: What is the person's race? (Choose one ormore)								
American Indian or Alaska Native - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.								
Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.								
Black or African American - A person having origins in any of the black racial groupsof Africa.								
Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.								
 White - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. Parental Refusal 								
Student/Staff Name (please print) (Parent/Guardian)/(Staff) Signature								
Date Student/Staff Identification Number								
Texas Education Agency - March 2009								

ApplD: Campus:



Military Connected and Foster Care Survey

Student Name: Grade Level:

The State of Texas requires schools to collect data relating to the enrollment of military connected and foster care students. This collection allows schools to recognize and monitor critical elements of student success for children who are dependents of military personnel or foster care.

Parent Signature	Date
This <u>DOES NOT</u> apply to my student	
My student receives Foster Care Services	
Foster Care	
This <u>DOES NOT</u> apply to my student	
Reserve Duty - Army, Navy, Air Force, Marine Corp	os, or Coast Guard
Texas National Guard	
Active Duty - Army, Navy, Air Force, Marine Corps,	, or Coast Guard [This includes Missing in Action (MIA)]
Please check one box below to indicate if your ch	ild is a dependent of a member of:









Confidential Medical Form SY 2014-2015 Student Health History

THIS FORM MUST BE COMPLETED ANNUALLY _ID Number: ____ (Last, First, Middle) _____Date of Birth: Student Name: -(MM/DD/YYYY) _____Work Phone Number: Home Phone Number: Cell Phone Number: -Please check any current health concern: ADD/ADHD Allergy __ Anaphylaxis/Epi-Pen Asthma Cerebral Palsy Autism Blood Disorder Cancer Down Syndrome Cystic Fibrosis Diabetes Type 1 Diabetes Type 2 Heart Condition High Blood Pressure Gastric/Intestinal Disorder (Stomach) Hearing Loss Mental Health Obesity Pervasive Developmental Delay Pregnant/Parenting Scizures Spina Bifida Tuberculosis Urinary Condition or Catheterization Vision Problems Other: If you answered "Yes" to any of the above, please explain further: Has your child been seriously ill, hospitalized and/or had a serious accident in the pastyear? YES NO If YES, please explain: In order to keep your child safe at school, certain health conditions may require a health care plan developed by the school clinic staff. This may require that the clinic staff receive physician's orders before attending school, Special Procedures require updated physician orders annually. Please contact the school clinic staff. Consent to Release Health Information: I understand and agree that, in order to provide a coordinated system of care, the health services team may exchange health care information about the Student with the Student's physician or other healthcare providers in non-emergency situations, upon separate, additional approval by me. Separate consent I GIVE /__I DO NOT GIVE permission to release information to/from student's physician or other healthcare provider in nonemergency situations. I understand that this information will be shared in emergencies as necessary. Parent/Guardian signature: Medications: Parents of students that have medication at school must complete the "Consent to Medication Form" and bring the form and the medication directly to the school health aide. Medications taken at school (please list): Medication taken at home (please list): Student Health Services Consent to Treat: I understand that the school clinic provides basic first aid for injuries and illnesses. I give permission for clinic staff at IDEA or staff under the guidance of the health services team, to provide described services to the student as he/she may require while present inschool. I understand that, if the student has a serious injury or illness, I will be contacted and/or Emergency Medical Services (EMS) may be contacted if necessary. I understand and agree that IDEA nor their staff will be responsible for any cost involved if the student needs emergency medical care.

IDEA protocol, in order to provide appropriate attention to the student's health care needs.

IMMUNIZATIONS: Students are required by Texas State Law to provide complete, up-to-date immunization records to the school.

Date:

I understand and agree that the health services team may share the student's health care information with IDEA personnel, in accordance with

Parent/Guardian signature: ____

AppiD: Campus:



Student Name:	Date of Birth:	ID Number:	(Last, First, Middle)		
Home Phone Number:	Work Phone Number:	(MM/DD/YYYY)Cell Phone Number:			
guidance of the health services tean school. Please check the medication	n, to administer described over the o	counter medications to my student a taff to use on your child during the s	clinic staff at IDEA or staff under the she/she may require while presenting school year.		
Eye drops (Visine, Op-Con)	Eye rinse (commercially prepared)	Oral pain reliever (Orașol)	Anti-tich cream (Caladryl lotion)		
Allergic reaction cream (Benadryl)	Antacid (Turns)	Sore Throat Spray (Chloraseptic)	Headache /Fever / Aches and Pains (Ibuprofen like Advil, Motrin)		
Antibíotic ointment (Neosporin)	Cough Drops, Sore Throat (like Halls, Sucrets)	Burn Freeze	Headache /Fever / Burns (Acetaminophen, like Tylenol)		
Vick's		William Co.			
Yo doy permiso que administren los sig Gotas para los ojos (Visine, Op-Con		"gel" para dolor buçal (Orasol)	Crema anti-comezon (Caladryllotion)		
Crema o liquido oral para reacciones alérgicas (Benadryl)	Antiacidos (Tums)	"spray" para dolor de garganta (Chloroseptic)	Pastillas para dolor y fiebre (Ibuprofen, Advil, Motrin)		
Antibiotico en pomada (Neosporin)	Pastilla para tos y dolor de garganta (Halls, sucrets)	Pomada para Quemaduras (Burn Freeze)	Pastillas para dolor y fiebre (Acetaminophen, Tylenol)		
Vick's					
Parent/Guardian signature:		Date:			

Student:

IDEA Public Schools Multi-Child Free and Reduced Price School Meals Application for 2014—2015

Part 1: All Children in School in the Household Part 2, Benefits—If any									
A. List the names of all children in school in your household. (First, Middle Initial, Last)	B. List the name of the school for	the follo	he appropriate wing programs hese programs	. If all childrer	participate ir	n at least	D. Check if child has no	member of your household receives SNAP, TANF, or FDPIR, provide the Eligibility Determination Number (EDG) for the person who receives	
	each child.	Foster	Homeless	Migrant	Runaway	Head Start	income		
1.		a	0	0	D	0	0	benefits and skip to F	
2,	C belonder annual resource and a second and		g	, D	G	ļ		no one receives thes	е
3,		O	а		D			benefits, go to Part 3	
4.		D	О	0	D	О	С	EDG:	
5.		0	l o	L C		0	0		
6.		0	0		О		С	_	
7			<u> </u>		0		0		
8.	MANAGE AND	D	O		۵		0		
Part 3. Total Household Gross Inc			,, , , , , , , , , , , , , , , , , , ,					> ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
A. List all children recorded in Part 1 who have an income and all household members not recorded in Part 1.	Mark the box (A=Annually	under <i>No Inc</i> M= Monthly	come if the pers T=Twice Per	son has no ine Month E=E	come. Ivery Two Wa	eks W =We	ekly)	received in the second I	olank.
not recorded in 1 dit 1,	Earnings from W Deduction			hild Support, mony	\$	Security, SSI, or rement Benefits	1	All Other Income	Νo
(Example) Jane Smith	\$199.00/E		\$149.00/M		\$99.00/A	1		\$50.00/T	Income
1.	\$	_/	\$		\$		\$		0
2.	\$		\$		\$		\$		0
3.	\$		\$		\$	/_	_ \$		ם
4.	\$	_/	\$	/	\$		\$		
5.	\$	/	\$		\$		\$		0
6.	5		\$		\$		\$		a
7.	\$		\$		\$		\$	/	0
8.	\$	_/	\$	/	\$		\$		D D
Part 4. Signature and Last Four Digits of Social Security Number—An adult household member must sign the application. If Part 3 is completed, the adult signing this form must provide the last four digits of his/her Social Security number or mark the box in front of "I do not have a Social Security number." I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted.									
Sign Here: Date:			Fil	int Name Here	ž				
Address:			Dk	one Number:					
City:				ate:				Code:	
Last Four Digits of Social Security N	lumber:	***_**_	Ω						
Multiple income frequencies must be col converting income to annual, round only	nverted to annual am the final number—A	nounts and con nnual Income	not Fill Out This Pa mbined to determ Conversion: We	ine household i ekly x 52 Eve	income. Do not ery 2 Weeks x 2	?6 Twice a Mo	nth x 24 Moi	nthly x 12	usehold. If
	r □ Week □ E	-					ehold Size: _		
	Meal Eligibility:	□ Free	☐ Reduced	☐ Denied		Withdrawn:			
Reviewing/Determining Official	's Signature:			·····	***	Date: _			
Confirming Official						Date: _	***************************************		İ
Follow –Up Official's Signature:									

Nondiscrimination Statement: This explains what to do if you believe you have been treated unfairly. The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint for complaint form complaint form from found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

Student:

Multi-Child Free and Reduced Price School Meals Application for 2014–2015 Extra Household Member Reporting Sheet

Use this sheet if needed to report additional children in the household or additional household members.

Part 1: All Children in School in the	**************************************	ngana garangaga ga jimati na ndamatan ka samatikan ndahasa dan sa barana barana sa barana sa barana sa barana	***************************************	Montain Mark Statement of Josephines of Australian Statement (1984)				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
A. List the names of <u>all</u> children in school in your household. (First, Middle Initial, Last) B. List the name child.		ne school for each	following	C. Check the appropriate box if a child participates in any one of the following programs. If all children participate in at least one of these programs go to Part 4. If only some, go to Part 2.				
	and provided the contract of t			Homeless	Migrant	Runaway	Head Start	
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11.			O		O	0		О
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20.)	no e e companyo no e e e e e e e e e e e e e e e e e e	D				. 0	О
1 who <u>have</u> an income and all household members not recorded in Part 1.	(A=Annua))y M=1		Income if the person has no income. Inly T=Twice Per Month E=Every Two Weeks W=Weekly) Welfare, Child Support, Social Security, SSI, or VA All Other					
	Earnings from Work Be	efore Welfare, Ch	ild Support,	Social Securi	ty, SSI, or VA	All (e en en consensament ten. Det
	Deductions	efore Welfare, Ch Alim	Transfer Production Contract Committee Committee	Social Securi Retiremen	ty, SSI, or VA	All (ome	C OLO COOPER MINER IN TO
(Example) Jane Smith	Deductions \$199.00/E	efore Welfare, Ch Alim \$149.00/M	ild Support,	Social Securi Retiremen	ty, SSI, or VA	All (No Income
9.	Deductions \$199.00/E \$	efore Welfare, Ch Alim \$149.00/M \$	ild Support,	Social Securi Retiremer \$99.00/ M	ty, SSI, or VA	All C Inc. \$50. \$	ome	U
9.	Deductions \$199,00/E \$/_	efore Welfare, Cr Alim \$149.00/M \$\$	ild Support,	Social Securi Retiremer \$99.00/ M \$	ty, SSI, or VA	All (Inc. \$50. \$	ome	<u> </u>
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The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced-price meals. You must include the last four digits of the Social Security number of the adult household member who signs the application. The last four digits of the Social Security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a Social Security number. We will use your information to determine if your child is eligible for free or reduced-price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.



STUDENT TRANSPORTATION REGISTRATION FORM

1.	Student First Name:	Middle Initial:	Student Last Name:	IDEA student's ID#:			
	Student Physical Address (No P.O. Boxes or Rural Routes)	House Number:	Street:	City: Zip Code:			
	Parents/Guardians Phone Numbers:	Student's Grade:	Student's Campus:				
2.	Will your child be requiring IDEA's transportation services next year?	Δ YES Δ NO	form.	, please proceed to complete this			
3.	Does your child require Special Transportation accommodations?	Δ YES Δ NO	If you answered YES, please explain:				
4. Please select which Route and Stop your child will be using. To see current listing of campus routes please visit www.ideapublicschools.org / Schools / Transportation / School bus Routes. Not e: IDEA Public Schools does not offer custom transportation (e. g. Service to different addresses on different days, term changes or transportation on alternate days).							
	Route Number:	Sto	p Number:				
5.	Only students in 4th-12th grade are permitted to be dropped off at an IDEA bus stop without parent/guardian supervision. Please select one of the following options:	Δ IDO Δ IDO NOT	bus stop without parental/gua	th grade child to be dropped off at			
6.	If you child is not in 4th grade or above or permit your child to be dropped off at an please provide the full name, phone relationship of at least three persons that receive your child at the designated bus allow our drivers to confirm that you chreceived by you or the responsible par student will be returned to the school).	IDEA bus stop, number and you authorize to stop: (This will aildren are being	b) Name, phone number and relationship				
	Parent/Guarding please provide your:						
Na	ime:	ture:	Date:				

Please contact the Transportation Department representative located at each campus to obtain/update any information related to your child's transportation needs.





Section VI.

Special Education Assurances

The charter holder certifies it has policies and procedures in place that ensure implementation of all federal laws and regulations, Texas laws, State Board of Education (SBOE) and commissioner of education rules related to students with disabilities and further certifies any future amendments to the laws, regulations, and rules will be incorporated and implemented.

Signature of Charter Holder Board Chair (Must sign in blue ink)

Date

12-18-14

Mike Rhodes

Printed Name of Charter Holder Board Chair

Section VII.

Serving Students at Residential Facilities Assurances

If the charter school is <u>not</u> currently approved to serve students at residential facilities, do not provide a signature and indicate N/A on the signature line.

If operating a charter school campus on the site of a residential facility (RF) or serving students residing in or receiving services from an RF, the charter holder chair certifies by signing the assurance that:

Compliance with Special Education Requirements: The charter holder assures that it will comply with all of the requirements for the provision of educational services to students with disabilities as mandated by the Individuals with Disabilities Education Act, as amended, the Texas Education Code, and federal and state special education regulations. The charter holder acknowledges that state and federal special education requirements require, among other things, it provide a free and appropriate public education (FAPE) in the least restrictive environment (LRE) to students with disabilities residing in RFs. The charter holder further assures that it will provide, or seek the provision of, a FAPE to students with disabilities, which may require it to contract with outside service providers or another local educational agency to provide necessary services and supports to students with disabilities.

Geographic Boundaries: The charter holder assures that it will accept students who reside in the school district(s) that are within each campus's geographic boundaries regardless of the presence or absence of a disability or admission to or participation in an RF program.

Admissions Criteria: The charter holder assures that its admissions criteria will not be based on the presence or the absence of a disability; or on gender; national origin; ethnicity; religion; academic; artistic or athletic ability; or the home district the child would otherwise attend.

School Choice: The charter holder assures that parents/legal guardians (or adult students) will be advised that they may choose to enroll their child in either the charter school or the local public school district and that the elected choice will be documented in writing and filed for purposes of review or audit by the Texas Education Agency (TEA), an external auditor, or another entity.

Residential Facilities Monitoring (RFM) System: The charter holder assures that it understands that, pursuant to 19 (TAC) §97.1072, there is a specific system for monitoring school districts and charter schools serving students with disabilities who reside in RFs. The charter holder further assures that it understands it will be required to report data related to students with disabilities residing in RFs in TEA's data collection system known as RF Tracker and it may be subject to RFM intervention activities and on-site visits based upon a review of the data reported on a random selection or other means of selection.

Training: The charter holder assures that all personnel involved with serving students with disabilities residing in a RF and personnel involved with reporting data in RF Tracker will receive training on the RFM system. Please contact your regional Educational Service Center for information regarding the required RFM system training.

Section VII. (Continued)

Serving Students at Residential Facilities Assurances

The charter holder assures this document has been shared with, and understood by, the RF board and that the RF board has acknowledged its understanding of all federal laws and regulations, Texas laws, State Board of Education (SBOE) and commissioner of education rules related to charter schools serving students at residential facilities and further certifies that any future amendments to the laws, regulations, and rules will be incorporated and implemented.

Signature of Charter Holder Board Chair (Must sign in blue ink)

The Rhodes

Date

Mike Rhodes

Printed Name of Charter Holder Board Chair

Please write N/A in the signature line if the charter does not serve students at residential facilities.

Section VIII.

Bilingual/ESL, Section 504, and Dyslexia Assurances

Texas Education Code, Chapter 29, Subchapter B, TEC §12.104(b)(2)(G), and 19 TAC §89.1201-89.1265 require charter schools to identify limited English proficient students based on state criteria and to provide an appropriate bilingual education or English as a second language program conducted by teachers certified for such courses.

A.	A. The charter holder certifies it has policies and procedures in place to ensure it complies with the legal and regulator requirements concerning identifying and providing appropriate educational services to limited English proficien students.		
	⊙ Yes		
	O No		
pro	ection 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794, prohibits discrimination on the basis of disability in any organ receiving federal financial assistance. A recipient that operates a public education program or activity shall evide a free, appropriate public education to qualified individuals.		
B.	B. The charter holder certifies it has policies and procedures in place to ensure it complies with the legal and regulatory requirements concerning identifying and providing appropriate educational services to students protected by Section 504.		
	⊙ Yes		
	O No		
Texas Education Code §38.003, TEC §12.104(b)(2)(K), 19 TAC §74.28 and Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794, require charter schools to identify students with dyslexia or related disorders and to provide appropriate educational services.			
C. The charter holder certifies it has policies and procedures in place to ensure it complies with the legal and regulatory requirements concerning identifying and providing appropriate educational services to students with dyslexia or related disorders.			
	⊙ Yes		
	O No		
I further certify that any future amendments to the laws, regulations, and rules will be incorporated and implemented.			
	Mh/hde 12-18-19		
	Signature of Charter Holder Board Chair (Must sign in blue ink) Date		
	Mike Rhodes		

Printed Name of Charter Holder Board Chair

Section IX.

Fingerprinting and Criminal Record Check Assurance

The charter holder certifies it is in compliance with *TEC* §12.120, and confirms that no individual is serving in any capacity if he or she has been convicted of a misdemeanor involving moral turpitude; a felony; an offense listed in *TEC* §37.007(a); or an offense listed in *Article* 62.001(5) Code of Criminal Procedures; unless the individual is eligible to be employed in a position in a school district under *TEC* §12.120 (a-1).

Additionally, the charter holder confirms all current fingerprinting and criminal record checks are available for all employees, including contract employees; volunteers who indicated in writing their intention to serve; board members; and officers of the charter holder who are not on the board, in compliance with TEC §§12.1059, 22.0832-22.0835.

Signature of Charter Holder Board Chair (Must sign in blue ink)

Date

Mike Rhodes

Printed Name of Charter Holder Board Chair

Section X.

Certificate of Acknowledgement

This section requires at least a majority of the governing body of the charter holder to certify it has had an opportunity to review the completed renewal application and has authorized, during an open meeting, submission of the application to the commissioner of education for consideration of renewal of the charter.

CERTIFICATE OF ACKNOWLEDGEMENT

The undersigned members of the governing body of the charter holder hereby acknowledge that they have had an opportunity to review the completed renewal application and have authorized its submission, during an open meeting, to the commissioner of education for consideration of the renewal of the charter:

Typed Name (Type name next to corresponding signature)	Signature (Must sign in blue ink)	Date*
Mike Rhodes	Mich Made M	H 12/18/14
Bill Martin	W. F. Leville	12/18/14
Eric Ziehe		12/18/14
Gabriel Puente		
David Guerra		
Ruben M. Lopez		
Reba Cardenas-McNair	Ruba Candenas	mcNau 19/18/14
Sergio Sanchez		
Bert Garcia		12-18-14
Edna De Saro	Edur Lo Savo	12-18-14
Thomas Torkleson	Thomas I. She Old The	ms 1. Sue Q 12/18/11
		1

^{*}Members are to sign the acknowledgement during an open meeting; therefore, the date next to each signature must reflect the date of the meeting.

Michael Williams Commissioner of Education

Lizzette C. González Reynolds Chief Deputy Commissioner

Michael Berry Deputy Commissioner, Policy and Programs

Sally Partridge
Associate Commissioner, Accreditation and School Improvement

Heather Mauzé
Director, Division of Charter School Administration

For further information contact the Division of Charter School Administration at:

Texas Education Agency 1701 North Congress Avenue Austin, Texas 78701

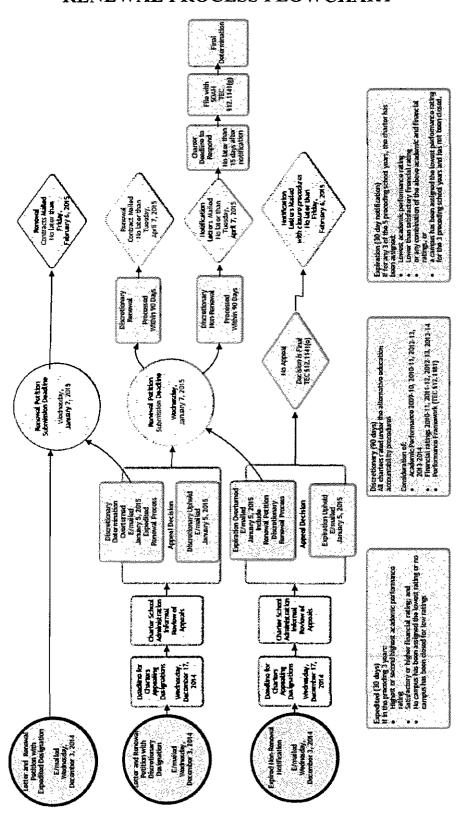
> (512) 463-9575 (512) 463-9732 fax

Email - CharterSchools@tea.state.tx.us

Or visit the website:

http://tea.texas.gov/Texas Schools/Charter Schools/Charter Schools/

RENEWAL PROCESS FLOWCHART



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1701 North Congress Avenue • Austin, Texas 78701-1494 • 512 463-9734 • 512 463-9838 FAX • tea.texas.gov

Charter Renewal Contract

Michael Williams Commissioner

February 2, 2015

Mr. Michael Rhodes, Board Chair IDEA ACADEMY, INC. 505 Angelita Drive, Suite 9 Weslaco, TX 78599

Re: Charter Renewal Contract for IDEA PUBLIC SCHOOLS (CDN 108807)

Dear Mr. Rhodes:

I am pleased to inform you that the charter renewal is approved for IDEA PUBLIC SCHOOLS with a contract ending date of <u>July 31</u>, <u>2025</u>. After renewal, the charter contract shall consist of the following:

- the representations and assurances made by the charter holder in the original request for application under the standard application system, including all revisions made during the contingency process;
- the original contract for charter, as signed by the charter holder and the State Board of Education:
- any condition, amendment, modification, revision, or other change to the charter approved by the State Board of Education or the commissioner of education, including any prior renewal documents with revisions based on contingency responses;
- the final renewal application received in spring 2015, on file with the Division of Charter School Administration, including any revisions required by the agency and any amendments to the charter made through the renewal application; and
- all statements, assurances, commitments, and representations made by the charter holder in its application for charter renewal and its attachments or related documents, to the extent that these documents are consistent with those listed above.

By accepting these renewal terms, the charter holder represents that it understands that the charter holder, including any and all governance, at whatever level whether appointed or elected, employees, agents, and volunteers, shall fully cooperate with every Texas Education Agency investigation and/or sanction deemed necessary by the commissioner based on authority and responsibility given to the commissioner in state or federal law. This means that Texas Education Agency staff may conduct confidential interviews of charter school personnel and contractors outside the presence of representatives of the charter school's administration and board and that failure to timely reply with reasonable requests for access to site, personnel, documents, or other materials and/or items is a material violation of the contract for charter.

By accepting these renewal terms, the charter holder represents that it is understood by all parties that, if the charter holder loses its 501(c)(3) tax exempt status for any period of time, through action of the Internal Revenue Service or any other action which renders the charter holder no

longer an "eligible entity" within the meaning of TEC §12.101(a), the charter contract shall be rendered void, and it shall automatically return to the Texas Education Agency without any other action having to be taken by the commissioner.

Note that this contract is contingent upon legislative authorization and that the contract and the funding under state and federal law may be modified or even terminated by future legislative acts. Furthermore, state and federal laws and rules may periodically be adopted, amended, or repealed, and all such changes applicable to the charter holder or its charter school(s) may modify this contract, as of the effective date provided in the law or rule. Nothing in the charter contract shall be construed to entitle the charter holder to any privilege or benefit, including any funding, but in accordance with state and federal laws in effect and as they may in the future be amended. A contract term that conflicts with any state or federal law or rule is superseded by the law or rule to the extent that the law or rule conflicts with the contract term.

Notwithstanding the granting of this renewal, it is understood by the parties, that the charter continues to be subject to future actions by the commissioner including but not limited to possible revocation under TEC 12.115(c).

To acknowledge acceptance of this renewed contract, the chair of the charter holder board must sign below and return the entire original document to:

Texas Education Agency
Division of Charter School Administration
William B. Travis Building, Room 5-107
1701 North Congress Avenue
Austin, Texas 78701-1494

The charter holder should keep a copy of the document for its files. Please contact the Division of Charter School Administration at (512) 463-9575 with any questions.

Sincerely,

Michael Williams

Commissioner of Education

MW/bs

cc: Ms. Joann Gama, Superintendent

I the undersigned hereby certify that the governing body of the charter holder has accepted and agreed to the charter renewal agreement for IDEA PUBLIC SCHOOLS as outlined in the foregoing letter and has authorized me to sign below.

Agreed and Accepted:

Mr. Michael Rhodes

Board Chair, IDEA ACADEMY, INC.

Date