

**OPEN-ENROLLMENT CHARTER
CONTRACT RENEWAL PETITION**



Current Information in Charter School Tracking System

Charter Holder Name: THE HUGHEN CENTER, INC.
Charter School Name: BOB HOPE SCHOOL
Charter School County/District #: 123-807
Generation: 14
Maximum Approved Enrollment: 250
Grades Approved: 6,7,8,9,10,11,12

Campuses:

123807001
BOB HOPE SCHOOL
2849 9TH AVE
PORT ARTHUR, TX 77642

Grade Levels Currently Served:
06,07,08,09,10,11,12

Geographical Boundary:

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

NEDERLAND ISD
PORT ARTHUR ISD
PORT NECHES-GROVES ISD

RECEIVED MAR 14 2014

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 petition sections. Note that any contact information, including email addresses, provided with the renewal petition will be public information.

Superintendent Contact Information: ✓

Superintendent's Name: Roberto I. Lopez
Telephone Number: (409) 983-3244
Fax Number: (409) 983-6408
E-mail Address: bobby.lopez@bobhopeschool.org

Charter Holder Board Chair Contact Information:

Board Chair's Name: Johnny Huckaby
Telephone Number: (409) 540-0428
Fax Number: (409)727-8288
E-mail Address: jlhuckaby@hotmail.com

Petition Preparer's Contact Information:

Contact Name: Kent Jones
Telephone Number: (409) 983-3244
Fax Number: (409) 983-6408
E-mail Address: kent.jones@bobhopeschool.org

Charter School Website:

Web address: ✓ <http://www.bobhopeschool.org>

Section III.
Website Postings

In accordance with the requirements of TEC §12.1211, an open-enrollment charter school shall list the names of the 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.bobhopeschool.org/apps/pages/index.jsp?uREC_ID=103717&type=d&pREC_ID=202909 ✓

In accordance with the requirements of TEC §12.136, 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. ✓

http://www.bobhopeschool.org/apps/pages/index.jsp?uREC_ID=103717&type=d&pREC_ID=334420

In accordance with Local Government Code §140.006, 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. ✓

http://www.bobhopeschool.org/apps/pages/index.jsp?uREC_ID=103717&type=d&pREC_ID=336432

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.

Section V.
Admission Policy

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

- grade levels,
- maximum enrollment,
- geographic boundaries,
- approved sites,
- school name,
- charter holder 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 a substantive amendment. (See §100.1033(c) Substantive Amendment, 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)

January 1

End of Period (Month/Day)

April 1

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.

On April 15 of each year when the number of admission applications received during the enrollment period exceeds the number of available spaces a lottery will be conducted. Names of prospective students will be randomly drawn and listed first to last by grade level. Available spaces for students will be filled from the top down of these lists until all vacant spaces are filled. If any student applications remain once all spaces are filled they will be placed on a waiting list in the order drawn in the lottery.

C. If the school utilizes a lottery when oversubscribed, are any categories of applicants exempted from the lottery?

- Yes
- No
- Not applicable (because lotteries are not utilized)

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

Returning students are exempted from the lottery.

Note: Bob Hope School has submitted an amendment request to exempt the siblings of enrolled students from the lottery.

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 15

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.

N/A

G. State the procedures for processing applications received once the application deadline has passed.

Applications received after April 1 are receiving-date stamped and stored in the event that space becomes available following the lottery drawing and the waiting list is exhausted until maximum enrollment is reached.

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.*

Applicants to the Bob Hope School must provide their name, parent/guardian's name and contact information, including their address. They must provide their date of birth, current enrolled grade, and grade they are applying for. Additionally they must provide the name of their current school and district, and how long they attended. Finally, must indicate whether or not they have a sibling attending our school and whether or not they have any doc. history of a criminal offense or juvenile court adjudication.

Section V. (Continued)

Admission Policy

1. The charter holder certifies that the non-discrimination statement required by TEC, §12.111(a)(6) is printed in the school's admission policy. *TEC, §12.111(6) 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
 No
1. 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)(6)?
- Yes (The school excludes such students or reserves the right to exclude such students from admissions.)
 No (The school does not deny admission to such students based on their documented histories of misconduct.)

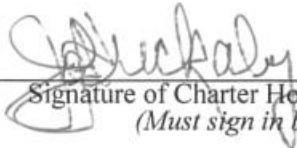
Submit

- 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**)

Section VI.

Special Education Assurances

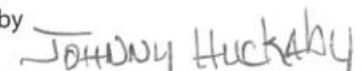
The charter holder certifies it has policies and procedures in place that ensure implementation of all federal laws and regulations, Texas laws, State Board of Education (SBOE) and commissioner of education rules related to students with disabilities and further certifies any future amendments to the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



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

3-12-14

Date

Johnny Huckaby


Printed Name of Charter Holder Board Chair

Section VII.

Serving Students at Residential Facilities Assurances

If the charter school is not 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 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 an other entity.

Residential Facilities Monitoring (RFM) System: The charter holder assures that it understands that, pursuant to 19 Texas Administrative Code (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 assurance 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.

N/A

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

N/A

Date

N/A

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

TEC, Chapter 29, Subchapter B, TEC §12.104(b)(2)(G), and 19 TAC §§89.1201-.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. 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 limited English proficient students.

Yes

No

Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794, prohibits discrimination on the basis of disability in any program receiving federal financial assistance. A recipient that operates a public education program or activity shall provide a free, appropriate public education to qualified individuals.

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

No

TEC §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

No

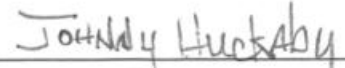
I further certify that any future amendments to the laws, regulations, and rules will be incorporated and implemented.



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

3-11-14

Date

Johnny Huckaby 

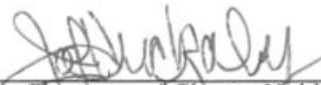
Printed Name of Charter Holder Board Chair

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)

3-11-14

Date

Johnny Huckaby 

Printed Name of Charter Holder Board Chair




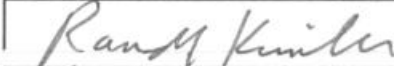

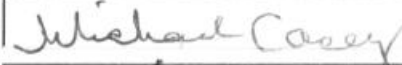



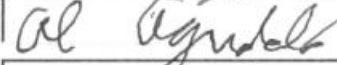


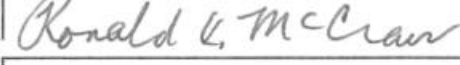

Section X.

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 petition and has authorized, during an open meeting, submission of the petition 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 petition 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*
Johnny Huckaby		3-11-14
Bobby Martin, Jr.		3-11-2014
David Olson		3-11-14
Randy Kimler		3-11-14
Mark Domingue		3-11-14
Michael Casey		3/11/2014
Cheryl Cherry		3-11-14
Kent Walston		
Randy Sonnier		3-11-14
Al Agudelo		3-12-14
James McDuffie		3-11-2014
Bobby Simon		
Ronald McCraw		3-11-14
Brit Featherston		

*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

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

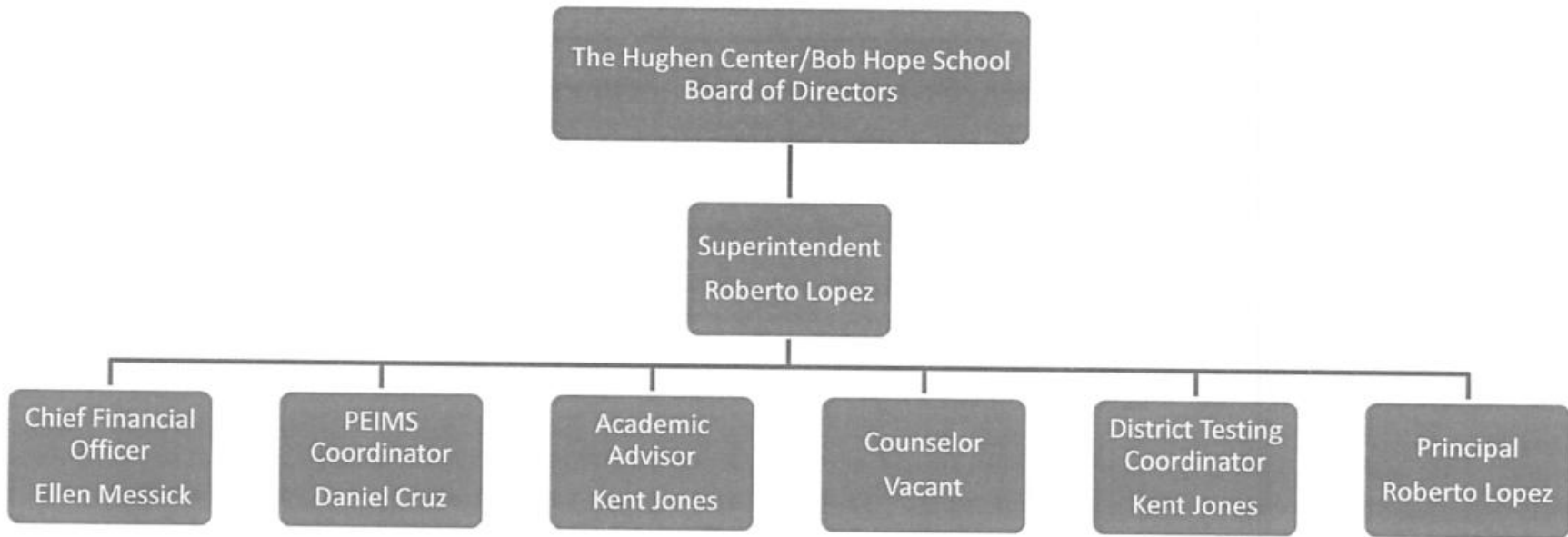
(512) 463-9575
(512) 463-9732 fax

Email - CharterSchools@tea.state.tx.us

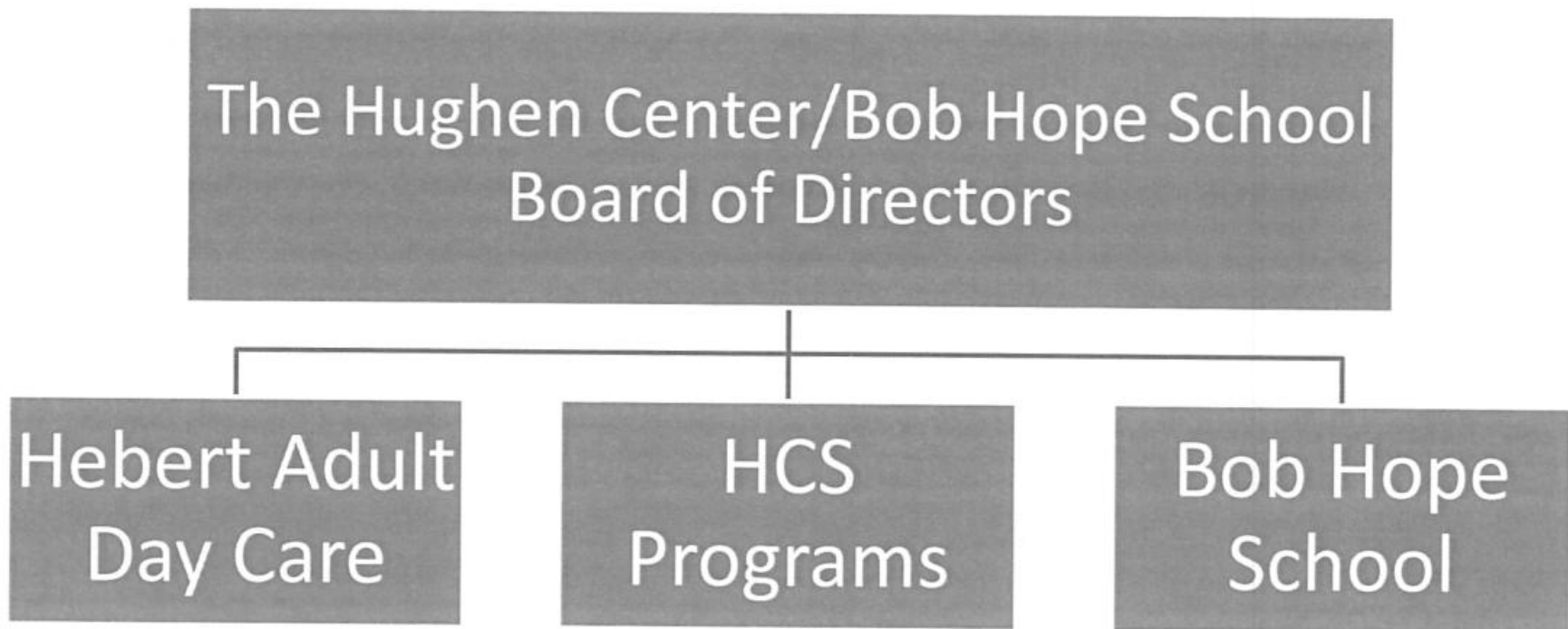
Or visit the website:

<http://www.tea.state.tx.us/charters/>

The Hughen Center, Inc.



The Hughen Center, Inc.



THE BOB HOPE SCHOOL ADMISSION POLICY

A student (or the student's parent) seeking enrollment in the school for the first time or following attendance in another Texas school, out-of-state attendance, or admission through a bona fide foreign exchange program should contact the school at 1-409-983-3244. The following items are required prior to admission to the School:

- Certified Copy of Birth Certificate - State Law (Sec. 25.002) requires a parent or legal custodian to present a birth certificate within 30 days of enrollment.
- Social Security Card - The school requests a social security number on each of its students. Should the parents or guardians not make this number available, a state student identification number is assigned to the student for record identification.
- Immunization Record - A validated document of immunization (one issued by a public health facility or signed by a licensed physician.)
- Proof of permanent residence in the School geographical area - The school requires that the person eligible to enroll the student provide proof of residency. A current lease agreement, closing contract on a home or a current utility bill (gas, light, or water) in the parent or guardian's name may be used as proof of residency. The school may withdraw any student who ceases to be a resident.
- Whether the applicant has a documented history of a criminal offense, a juvenile court adjudication, or discipline problems under Chapter 37 of the Education Code.
- Completed admissions application.

A person who knowingly falsifies information on a form required for a student's enrollment in the Bob Hope School understands that false or misleading information given in a child's application for enrollment may result in disciplinary action or possible discharge from the school.

NON-DISCRIMINATION STATEMENTS

The Bob Hope School does not discriminate on the basis of race, religion, color, national origin, sex or disability in providing education or providing access to benefits of educational services, activities, and programs, including vocational programs, in accordance with Title IX of the Educational Amendments of 1972; Section 504 of the Rehabilitation Act of 1973, as amended; and Title II of the American Disabilities Act.

THE BOB HOPE SCHOOL ADMISSION POLICY

A student (or the student's parent) seeking enrollment in the school for the first time or following attendance in another Texas school, out-of-state attendance, or admission through a bona fide foreign exchange program should contact the school at 1-409-983-3244.

The following items are required prior to admission to the School:

- Whether the applicant has a documented history of a criminal offense, juvenile court adjudication, or discipline problems under Chapter 37 of the Education Code.
- Completed admissions application.

The following four documents must be submitted within 30 days of enrollment.

- Certified Copy of Birth Certificate - State Law (Sec. 25.002) requires a parent or legal custodian to present a birth certificate within 30 days of enrollment.
- Social Security Card - The school requests a social security number on each of its students. Should the parents or guardians not make this number available, a state student identification number is assigned to the student for record identification.
- Immunization Record - A validated document of immunization (one issued by a public health facility or signed by a licensed physician.)
- Proof of permanent residence in the School geographical area - The school requires that the person eligible to enroll the student provide proof of residency. A current lease agreement, closing contract on a home or a current utility bill (gas, light, or water) in the parent or guardian's name may be used as proof of residency. The school may withdraw any student who ceases to be a resident.

A person who knowingly falsifies information on a form required for a student's enrollment in the Bob Hope School understands that false or misleading information given in a child's application for enrollment may result in disciplinary action or possible discharge from the school.

NON-DISCRIMINATION STATEMENT

The Bob Hope School does not discriminate on the basis of race, religion, color, national origin, sex or disability in providing education or providing access to benefits of educational services, activities, and programs, including vocational programs, in accordance with Title IX of the

The Bob Hope School does not discriminate in admissions based on gender, national origin, ethnicity, religion, disabilities, academic, artistic, or athletic ability, or the district the child would otherwise attend.

The Bob Hope School reserves the right to deny enrollment for students with documented histories of criminal offense, juvenile court adjudication, or discipline problems under TEC Chapter 37, Subchapter A.

The following district staff members have been designated to coordinate compliance with these legal requirements:

- Title IX Coordinator, for concerns regarding discrimination on the basis of gender: Bobby Lopez, Superintendent
- Section 504 Coordinator, for concerns regarding discrimination on the basis of disability: Bobby Lopez, Superintendent
- All other concerns regarding discrimination: See the superintendent

ACCEPTANCE PROCEDURES

If a school receives more applications than it has spaces available, then the charter school will:

- Conduct a random lottery
 - o For any school currently receiving federal start up funding through the Charter Schools Program of the U.S. Department of Education, a random lottery is mandatory.
 - o The lottery will be held on April 15 each year that the school is oversubscribed for all applications received during the application period.
- Students who are exempted from the lottery include:
 - (a) Returning students who were enrolled at the conclusion of the previous school year

DIRECTORY INFORMATION

The law permits the district to designate certain personal information about students as —directory information. This directory information will be released to anyone who follows procedures for requesting it.

However, release of a student's directory information may be prevented by the parent or an eligible student. This objection must be made in writing to the administration within ten (10) school days of your child's first day of instruction for this school year.

BOB HOPE SCHOOL

2849 9th Ave. Port Arthur, TX 77642 ♦ Tel: 409-983-3244 ♦ Fax: 409-983-6408

APPLICATION FORM FOR 2013-2014

FOR OFFICE USE ONLY

Date Application Received	_/_/___
Application #	
Stamp in Date/Time	

DEAR PARENT(S) AND APPLICANT:

Thank you for your interest in Bob Hope School. Please fill out this application form completely. Falsifications, misrepresentations, or omissions may disqualify your application. Information you supply may not be given to other companies. Applications received unsigned or incomplete may not be considered for acceptance.

Please either type or print clearly using black or blue ink.

STUDENT INFORMATION				
LAST NAME	FIRST NAME		MIDDLE NAME	
DATE of BIRTH	CURRENT GRADE ENROLLED		GRADE APPLIED FOR	
MM / DD / YYYY / / /				
PERMANENT ADDRESS			APT#	ZIP
HOME PHONE	CELL PHONE		WORK PHONE	
() -	() -		() -	
CURRENT SCHOOL NAME			SCHOOL DISTRICT	YEARS ATTENDED

Does this applicant have a sibling who is attending this school? Yes No If yes, please write:
 Student Name: _____ and Current Grade Level: _____

Does the student have any documented history of a criminal offense or juvenile court adjudication? Yes No
 If yes, please explain: _____

We/I, the undersigned, hereby certify that, to the best of our/my knowledge and belief, the answers to the foregoing questions and statements made by us/me in this application are complete and accurate. We/I understand that any false information, omissions, or misrepresentations of facts may result in rejection of this application or future dismissal of the applicant.

PARENT INFORMATION	
PARENT OR GUARDIAN NAME	DATE
PARENT OR GUARDIAN SIGNATURE	E-MAIL

Please mail or fax the completed application to:

BOB HOPE SCHOOL
 2849 9th Ave. Port Arthur, TX 77642
 Phone: 409-983-3244 Fax: 409-983-6408
 E-mail: info@bobhopeschool.org



Bob Hope School
 2849 9th Ave
 Port Arthur, TX 77642

Revised During Contingency Process

Bob Hope School – Enrollment Form

2013 – 2014 School Year

Student Name: _____ Date: _____

For Staff Use ONLY:

_____ Birth Certificate _____ Social Security (Original) _____ Proof of Address

_____ Lunch Application _____ Copy of I.D. (Person Enrolling) _____ Report Card

_____ Transcript (Grades 9-12) _____ TAKS/STAAR Scores _____ Shot Records

_____ Home Language Survey _____ Appendix F

Staff Signature: _____ Date: _____

Date Enrolled: _____ Staff Signature: _____

Date Withdrawn: _____ Staff Signature: _____

Note: In the event that enrollment is capped, students will be placed on a lottery system.

Please be informed that the Bob Hope School's decision to admit an application can be withdrawn if the school determines:

- That the applicant provided false information on the admissions application;
- That the school's later review of the applicant's education records indicates that the student should be placed in a grade level for which there are no spaces available; or
- That the school's later review of disciplinary records indicated that the student is disqualified from admissions eligibility.

The Bob Hope School does not discriminate in the admission process based on sex, national origin, ethnicity, religion, disability, academic ability, artistic ability, athletic ability or the school district the child would otherwise attend under state law.



Bob Hope School
 2849 9th Ave
 Port Arthur, TX 77642

Approved During Contingency Process

Enrollment Form for Returning Students
 2013 – 2014 School Year

Student Name: _____ Date: _____

For Staff Use ONLY:

_____ Birth Certificate _____ Social Security (Original) _____ Proof of Address
 _____ Lunch Application _____ Copy of I.D. (Person Enrolling) _____ Report Card
 _____ Transcript (Grades 9-12) _____ TAKS/STAAR Scores _____ Shot Records
 _____ Home Language Survey _____ Appendix F

Staff Signature: _____ Date: _____

Date Enrolled: _____ Staff Signature: _____

Date Withdrawn: _____ Staff Signature: _____

Note: In the event that enrollment is capped, students will be placed on a lottery system.

Please be informed that the Bob Hope School's decision to admit an application can be withdrawn if the school determines:

- That the applicant provided false information on the admissions application;
- That the school's later review of disciplinary records indicated that the student is disqualified from admissions eligibility.

The Bob Hope School does not discriminate in the admission process based on sex, national origin, ethnicity, religion, disability, academic ability, artistic ability, athletic ability or the school district the child would otherwise attend under state law.

****Student Information****

<u>Last Name</u>	<u>Middle Name</u>	<u>First Name</u>	<u>Gender</u> <input type="checkbox"/> Male <input type="checkbox"/> Female
<u>Social Security Number</u>	<u>Place of Birth</u>	<u>Date of Birth</u>	

<u>Current Mailing Address</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>
<u>Student Email</u>		<u>Student Phone Number</u>	



****Academic****

<u>Last School Attended</u>	<u>District</u>
<u>School Name for 2013-2014</u>	<u>District</u>

<u>Last Grade Attended</u>	<u>Grade for 2013-2014</u>	<u>How many years has the student been in U.S. schools?</u>	<u>Have you ever failed a grade?</u> No _____ Yes _____ Grade(s) _____
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****Has the student had any disciplinary issues in the past 6 months? If so, please list and explain.** _____

****Family****

<u>Father's Name</u>	<u>Home Number</u>	<u>Cell Number</u>	<u>Person Enrolling Student?</u> Yes _____ No _____
<u>Father's Employer</u>	<u>Work Number</u>	<u>Email Address</u>	<u>Level of Education</u>
<u>Is father allowed to receive student info?</u> ____ Yes ____ No	<u>Is father allowed contact with student?</u> ____ Yes ____ No	<u>If father is not allowed contact please state whether there is legal documentation.</u> _____ _____ _____	
<u>Mother's Name</u>	<u>Home Number</u>	<u>Cell Number</u>	<u>Person Enrolling Student?</u> Yes _____ No _____
<u>Mother's Employer</u>	<u>Work Number</u>	<u>Email Address</u>	<u>Level of Education</u>
<u>Is mother allowed to receive student info?</u> ____ Yes ____ No	<u>Is mother allowed contact with student?</u> ____ Yes ____ No	<u>If mother is not allowed contact please state whether there is legal documentation.</u> _____ _____ _____	

****Emergency Contacts****

<u>Name</u>	<u>Relationship</u>	<u>Home Phone</u>
<u>Cell Phone</u>	<u>Right to Transport</u> ____ Yes ____ No	
<u>Name</u>	<u>Relationship</u>	<u>Home Phone</u>
<u>Cell Phone</u>	<u>Right to Transport</u> ____ Yes ____ No	



Bob Hope School
2849 9th Ave
Port Arthur, TX 77642

Contact Information of Person Enrolling Student 2013 – 2014 School Year

TEC Sec. 25.002 REQUIREMENTS FOR ENROLLMENT

Except as otherwise provided by this subsection, for a child to be enrolled in a public school, the child must be enrolled by the child's parent or by the child's legal guardian or other person with legal control of the child under a court order. A school district shall record the name, address and date of birth of the person enrolling a child.

Please provide the following information:

Parent/Legal Guardian Name: _____
Last First MI

Current address: _____
Street Number Street Name Zip

Date of Birth: _____
Month Day Year

Email Address: _____

Right to Transport: Yes No Driver License Number: _____

State: _____ Vehicle Make: _____ Vehicle Model: _____

Color: _____ Plate Number: _____ State: _____

Parent/Legal Guardian Signature: _____

Date: _____

TEC Sec. 25.002 REQUISITOS PARA LA INSCRIPCIÓN

Excepto cuando se indique lo contrario en este artículo, para que se pueda inscribir a un niño en una escuela pública, el niño deberá ser inscrito por uno de los padres, por el tutor legal del niño o por toda otra persona que tenga el control legal del niño bajo orden judicial. El distrito escolar deberá anotar el nombre, el domicilio y la fecha de nacimiento de la persona que inscribe el niño.

Sírvase Proporcionar la Siguiente Información:

Nombre del Padre/Tutor Legal: _____
Apellido Nombre Inicial

Dirección: _____
Número de la Calle Nombre de la Calle Código Postal

Fecha de Nacimiento: _____
Mes Día Año

Dirección de Correo Electronico: _____

Derecho al Transporte: Si No Driver License Number: _____

Estado: _____ Marca del Vehiculo: _____ Modelo del Vehiculo: _____

Color: _____ Numero de Placa: _____ Estado: _____

Firma del Padre/Tutor Legal: _____

Fecha: _____



Bob Hope School
2849 9th Ave
Port Arthur, TX 77642

Bob Hope School – Home Language Survey

19 TAC Chapter 89, Subchapter BB §89.1215

This form is to be completed by a parent or guardian (or a student if grades 9-12): The state of Texas requires that the following information be completed for each student that enrolls for the first time in Texas public schools. This survey shall be kept in each student's permanent record folder.

Name of Student: _____ Student ID#: _____

Address: _____ Phone #: _____

Campus Name: _____ Bob Hope School _____

1.) What language is spoken in your home most of the time? _____

2.) What language does your child (do you) speak most of the time? _____

Signature of Parent/Guardian

Date

Signature of Student if Grades 9-12

Date



Bob Hope School
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Port Arthur, TX 77642

Bob Hope School – Home Language Survey

19 TAC Chapter 89, Subchapter BB §89.1215

Esta forma debe de completarse por el padre/madre/o representante legal (o por el estudiante si esta en los grados 9-12): El estado de Texas requiere que la siguiente informacion se complete para cada estudiante que se matricula por primera vez en una escuela publica de Texas. Este cuestionario se archivara en el expediente del estudiante.

Nombre del Estudiante: _____ # ID: _____

Direccion: _____ Telefono: _____

Escuela: _____ Bob Hope School _____

1.) Que idioma se habla en su hogar la mayoria del tiempo? _____

2.) Que idioma habla su hijo/a (usted) la mayoria del tiempo? _____

Firma del Padre/Madre/ O Representante Legal

Fecha

Firma del Estudiante se esta en los grados 9-12

Fecha

2013 – 2014 PEIMS Data Standards

Appendix F – Ethnicity and Race Reporting Guidance

Exhibit 1A

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)*

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**

Part 2. Race: What is the person's race? (Choose one or more)

- 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 groups of 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.

Student/Staff Name (Please Print)

(Parent/Guardian)/(Staff) Signature

Student/Staff Identification Number

Date

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:

_____ Hispanic / Latino

_____ Not Hispanic/Latino

Race – choose one or more:

_____ American Indian or Alaska Native

_____ Asian

_____ Black or African American

_____ Native Hawaiian or Other Pacific Islander

_____ White

Observer signature:

Campus and Date:

2013 – 2014 PEIMS Data Standards

Appendix F – Ethnicity and Race Reporting Guidance

Exhibit 1B

Agencia de Educación de Texas

Cuestionario de Información de Datos Raciales y de Etnicidad de Estudiantes/Miembros de Personal de las Escuelas Públicas de Texas

El Departamento de Educación de Estados Unidos (USDE) requiere que todas las instituciones estatales y locales de educación, recopilen datos sobre etnicidad y raza de los estudiantes y de miembros de personal. Esta información es utilizada para los reportes estatales y federales así como para reportar a la Oficina de Derechos Civiles (OCR) y a la Comisión de Igualdad en el Empleo (EEOC).

Al personal del distrito escolar y los padres o representante legal de estudiantes que deseen matricularse en la escuela, se le requiere proporcionar esta información. Si usted rehúsa proporcionarla, es importante que sepa que el USDE requiere que los distritos escolares usen la observación para identificación como último recurso para obtener estos datos utilizados para reportes federales.

Favor de contestar ambas partes de las siguientes preguntas sobre la etnicidad y raza del estudiante así como del miembro de personal. Registro Federal de Estados Unidos (71 FR 44866).

Parte 1. Etnicidad: ¿Es la persona Hispana/Latina? (Escoja solo una respuesta)

- Hispano/Latino** – Una persona de origen cubano, mexicano, puertorriqueño, centro o sudamericano o de otra cultura u origen español, sin importar la raza.
- No Hispano/Latino**

Parte 2. Raza. ¿Cuál es la raza de la persona? (Escoja uno o más de uno)

- Indio Americano o Nativo de Alaska** – Una persona con orígenes o de personas originarias de Norte y Sudamérica (incluyendo América Central), y que mantiene lazos o apego comunitario con una afiliación de alguna tribu.
- Asiático** – Una persona con orígenes o de personas originarias del Lejano Este, Sureste de Asia o el subcontinente indio, incluyendo, por ejemplo a Cambodia, China, India, Japón, Corea, Malasia, Pakistán, las Islas Filipinas, Tailandia y Vietnam.
- Negro o Africano-Americano** – Una persona con orígenes de cualquier grupo racial negro de África.
- Nativo de Hawai u otras islas del pacífico** – Una persona con orígenes o de personas originarias de Hawai, Guam, Samoa u otras Islas del Pacífico.
- Blanco** – Una persona con orígenes de personas originarias de Europa, el Medio Este o el Norte de África.

Nombre del Estudiante/Miembro de Personal
(por favor use letra de imprenta)

Firma (Padre/Representante legal)
/(Miembro de personal)

Número de Identificación del Estudiante/Miembro del
personal

Fecha

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:

- _____ Hispanic / Latino
_____ Not Hispanic/Latino

Race – choose one or more:

- _____ American Indian or Alaska Native
_____ Asian
_____ Black or African American
_____ Native Hawaiian or Other Pacific Islander
_____ White

Observer signature: _____

Campus and Date: _____



Bob Hope School
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Port Arthur, TX 77642

Bob Hope School – Prior Year Special Programs Information
2013 – 2014 School Year

The Bob Hope School is always striving to assist each student to the fullest. We ask that each parent/legal guardian complete this section of the enrollment form in order to help the Bob Hope staff provide any services needed to all students who qualify. This information will also be requested through TReX from the student's previous school.

****Special Programs****

Special Education Services: Yes No

Year(s) services were given: _____

Name of school where these services were given: _____

504 Services: Yes No

Year(s) services were given: _____

Name of school where these services were given: _____

ESL/BIL/LEP Services: Yes No

Year(s) services were given: _____

Name of school where these services were given: _____

By signing this document, I, _____, hereby state that the above information is true.

 (Parent/Legal Guardian Signature)

 (Date)



Bob Hope School
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Port Arthur, TX 77642

Bob Hope School – Student Health Form

2013 – 2014 School Year

Student Name: _____ DOB: _____

Family Doctor's Name: _____ Phone#: _____

Insurance Carrier: _____ Policy #: _____

Grade: _____ Closest Hospital Name & Phone Number: _____ St. Mary (409) 985-7431

My child has serious life-threatening allergies to the following:

Life threatening reactions may include:

Please check one of the following:

My child has exercise induced asthma. Please watch his/her breathing.

My child has asthma which may prohibit exercise when he/she is ill.

My child does NOT have asthma.

If a reaction requires emergency treatments, he/she:

Carries emergency medicine in their backpack and can administer his/her medicine.

My student keeps their medicine in the school nurse's office.

Instructions for medicines: _____

Diabetes:

My child is diabetic and requires insulin throughout the day.

My child is diabetic and does not require insulin.

My child is NOT diabetic.

Please help keep my child safe during school by eliminating these allergic triggers from any classroom, lunchroom, playground or bus.

Our phone numbers in case of emergency are:

Parent's Name: _____ Home Phone Number: _____

Cell Phone Number: _____ Alternative Number: _____

(Parent/Legal Guardian Signature)

(Date)



Bob Hope School
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Port Arthur, TX 77642

Bob Hope School – Cafeteria Allergy Form

2013 – 2014 School Year

Student Name: _____ DOB: _____

Family Doctor's Name: _____ Phone#: _____

Insurance Carrier: _____ Policy #: _____

Grade: _____ Closest Hospital Name & Phone Number: _____ St. Mary (409) 985-7431

My child has life-threatening allergies to the following foods:

<input type="checkbox"/> Peanut	<input type="checkbox"/> Tree nuts, of any kind	<input type="checkbox"/> Eggs
<input type="checkbox"/> Milk	<input type="checkbox"/> Soy	<input type="checkbox"/> Wheat/Gluten
<input type="checkbox"/> Corn	<input type="checkbox"/> Fish/Shellfish	<input type="checkbox"/> Legumes

Other: _____

Even trace amounts can cause a serious reaction. Please check all new food items added to the menu or from new vendors to ensure that they do not include any ingredients that my child may be allergic to.

Life threatening reactions may include swelling of the lips, mouth or throat. Other reactions that my child may exhibit are: _____

If they cannot breathe call the school nurse to administer emergency medication or call 911 immediately.

Special diet Information: _____

Foods that my student cannot eat due to religious beliefs: _____

Diabetes:

My child is diabetic and requires insulin throughout the day.

My child is diabetic and does not require insulin.

My child is NOT diabetic.

Please help keep my child safe during school by eliminating these allergic triggers from any classroom, lunchroom, playground or bus.

Our phone numbers in case of emergency are:

Parent's Name: _____ Home Phone Number: _____

Cell Phone Number: _____ Alternative Number: _____

(Parent/Legal Guardian Signature)

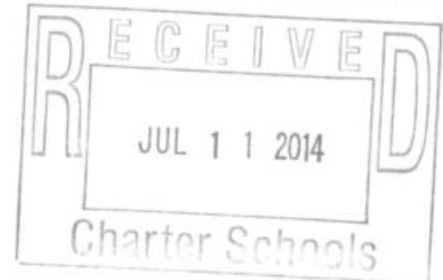
(Date)

Michael Williams
Commissioner

Charter Renewal Contract

June 30, 2014

Mr. Wayne Walston, Board Chair
The Hughen Center, Inc.
221 South Memorial Freeway
Nederland, Texas 77627



Re: Charter Renewal Contract for Bob Hope School (CDN 123807)

Dear Mr. Walston:

I am pleased to inform you that the charter renewal is approved for Bob Hope School with a contract ending date of July 31, 2024. 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 2014, 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.

Mr. Wayne Walston, Board Chair
The Hughen Center, Inc.
Page 2

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.

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

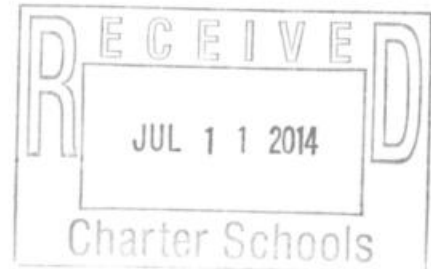
**Texas Education Agency
Division of Charter School Administration
William B. Travis Building, Room 5-107
1701 North Congress Avenue
Austin, Texas 78701-1494**

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/rs



cc: Dr. Roberto Lopez, Superintendent

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

Agreed and Accepted:



Mr. Wayne Walston
Board Chair, The Hughen Center, Inc.

7-7-14

Date