NEW STUDENT ENROLLMENT CHECKLIST

Please complete the following forms and submit to Broome Street Academy.

- Student Enrollment Form
- Caregiver Request & Authorization Form for Release of Cumulative Records
- FERPA Caregiver Signature Page
- Acceptable Use Policy for Computer, Technology, and Internet Form
- Media Consent Form
- Community Walking Trip Form
- Identification & Recruitment Parent Survey

The following documents must be submitted to Broome Street Academy.

- Proof of residency - Provide a copy of ONE of the following (Documents must be within the same year of enrollment)
  - Utility Bill (gas, or electric), Cable Bill, Phone Bill or Water Bill
  - Rental Agreement, Mortgage Contract, Rental Bill, Copy of most Recent Lease
  - Documentation on official federal, state or local government agency
- A copy of the student’s birth certificate
- The student’s most up to date immunization records
- The student’s IEP (If applicable)
- The student’s most recent transcript

Office Use Only:

_______ NYC DOE Residency Questionnaire Form
_______ NYC DOE Home Language Identification Survey
_______ NYC DOE Military Opt Out Form
_______ NYS Migrant Parent Survey
_______ College Paths Intake Form
_______ Health Care Services Caregiver Form

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NEW STUDENT ENROLLMENT FORM

STUDENT INFORMATION

__________________________________________________
Student Name (Last, First, MI)

__________________________________________________
Name of Most Recent School Attended

________________________  ________________________ ________________________
Street Address                      Date of Birth             Place of Birth

________________________________________ ________________________
City            State          Zip Code             Best Contact Number

Best Number to Reach the Student: _______________________________________________

Gender:
  o Male
  o Female
  o Other
  o Non-Binary

Grade Entering: ______________________
CAREGIVER INFORMATION

Name of Primary Parent/Caregiver

Name of Secondary Parent/Caregiver (if applicable)

Relationship to Student

Relationship to Student

Street Address

Street Address

City State Zip Code

City State Zip Code

Home Phone Number

Cell Phone Number

Home Phone Number

Cell Phone Number

Email Address

Email Address

Employer Work Phone Number

Employer Work Phone Number

SPECIAL EDUCATION SERVICES

Has your child been tested or evaluated for Special Education Services? □ Yes □ No

If YES, please attach evaluations to this form.

ADDITIONAL INFORMATION

Are you available to volunteer at the school? □ Yes □ No

If yes, how would you like to contribute? ______________________________________________________

Would you like to join the Parent/Caregiver Association? □ Yes □ No

OTHER INFORMATION

HOW DID YOU HEAR ABOUT OUR SCHOOL? (Check all that apply)

□ Direct Mail/Postcard □ Word of Mouth □ Internet □ School Counselor/Case Worker

□ Social Media □ Bus Ad □ NYC Charter School Fair

□ Newspaper Other (Please Specify): ______________________________

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# EMERGENCY CONTACT INFORMATION

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<th>Name</th>
<th>Relationship to Student</th>
<th>Home Phone</th>
<th>Cell Phone</th>
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I hereby permit the school to release my child to any of the above names persons.

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<th>Parent/Guardian Name</th>
<th>Parent/Guardian Signature</th>
<th>Date</th>
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The following person may NOT remove my child from the school.

Name of Person Relationship/Connection to Student

Court/Restraining papers?
*If yes, please provide a copy to the school.*
- Yes
- No

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PARENT/CAREGIVER REQUEST and AUTHORIZATION FORM for
RELEASE of CUMULATIVE RECORDS

My child has enrolled at Broome Street Academy Charter High School for the
upcoming school year. Permission is granted for all available academic and medical
records concerning my child to be forwarded to the below address if I am unable to
secure these records at this time.

Please ensure that the following records are either given to the parent/caregiver or sent to
Broome Street Academy Charter High School.

- All report cards on file
- NYS Assessment Test scores
- All Discipline Reports
- All attendance Records
- Immunization Records

If the student requires special education services please include the following:

- Most recent IEP
- Most recent Confidential Reports

Name of Student: ____________________________________________

NYCDOE Student OSIS #: ___________________________________

Parent/Caregiver Signature: __________________________________

Date: ___ / ___ / ______

Files should be sent to:

Broome Street Academy Charter High School
Attn: Records
121 Avenue of the Americas, 4th fl
New York, NY 10013

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FERPA CAREGIVER SIGNATURE PAGE

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that ensures access by parents and eligible students to the educational records of their children and also protects the privacy of such records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.

Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.

Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):

- School officials with legitimate educational interest;
- Other schools to which a student is transferring;
- Specified officials for audit or evaluation purposes;
- Appropriate parties in connection with financial aid to a student;
- Accrediting organizations;
- Appropriate officials in cases of health and safety emergencies;
- Organizations conducting certain studies for or on behalf of the school to comply with a judicial order or lawfully issued subpoena;
- State and local authorities, within a juvenile justice system, pursuant to specific State law.

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FERPA CAREGIVER SIGNATURE PAGE

Schools may disclose, without consent, certain basic "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

For additional information, you may call 1-800-USA-LEARN (1-800-872-5327) (voice). Individuals who use TDD may use the Federal Relay Service.

You may also ask questions or file a complaint with the U.S. Department of Education concerning alleged failures by the BSA to comply with the requirements of FERP using the following address:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW Washington, D.C. 20202-8520

I have received a copy of the above policy and understand the contents thereof.

______________________________________________
Parent/Caregiver Name (Print)

______________________________________________
Parent/Caregiver Signature                               Date
FERPA CAREGIVER CONSENT OPT-OUT INFORMATION PAGE

The Family Educational Rights and Privacy Act (FERPA), a Federal law, requires that BSA, with certain exceptions, obtain your written consent prior to the disclosure of personally identifiable information from your child’s education records. However, BSA may disclose certain basic, appropriately designated “directory information” without written consent, unless you have advised BSA to the contrary in accordance with BSA’s procedures. The primary purpose of directory information is to allow BSA to include this type of information from your child’s education records in certain school publications. Examples include:

- A playbill, showing your student’s role in a drama production;
- The annual yearbook;
- Honor roll or other recognition lists;
- Graduation programs; and
- Sports activity sheets, such as for wrestling, showing weight and height of team members.

Directory information, which is information that is generally not considered harmful or an invasion of privacy if released, can also be disclosed to outside organizations without a parent’s prior written consent. Outside organizations include, but are not limited to, companies that manufacture class rings or publish yearbooks.

The following information is considered by BSA to be directory information:

☐ Student’s name
☐ Participation in officially recognized activities and sport
☐ Weight and height of members of athletic teams
☐ Degrees, honors, and awards received
☐ Address
☐ Telephone listing
☐ Electronic mail address
☐ Photograph
☐ Date and place of birth
☐ Major field of study
☐ The most recent educational agency or institution attended
☐ Dates of attendance
☐ Grade level
☐ Student ID number, user ID, or other unique personal identifier used to communicate in electronic systems that cannot be used to access education records without a PIN, password, etc. (A student’s SSN, in whole or in part, cannot be used for this purpose.)

*Parent/Caregivers are required to submit written notification to the School by September 30th, or within two weeks after enrolling at BSA if later than September 30th, if they do not want the school to release Directory information.*

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ACCEPTABLE USE POLICY FOR COMPUTER, TECHNOLOGY and
INTERNET USE

This policy governs the access and use of all telephones, voice mail, electronic mail, mail,
computers, faxes and the use of the internet, intranet and extranet, including all mail of any
kind sent by a member of the Broome Street Academy (“BSA”) community (staff, student,
volunteer, family member) or received at the Broome Street Academy through any BSA
computer or other systems (“Systems”). Please return a signed copy of this policy to the
office manager. All information transmitted, received or stored using these Systems is the
property of BSA.

BSA reserves the right to monitor its Systems and the content, including all e-mails. You
should not have an expectation that the information in the Systems is confidential or
private.

You may not use the Systems in any way that may be seen as offensive, harmful, insulting or
disruptive. You may not use the Systems to: send derogatory, threatening, insulting or harassing
remarks, sexually explicit messages, cartoon, jokes or other potentially offensive material; access
pornography or other offensive sites; gain access to others computers; steal computer files; to
damage in any way the Systems or any other system or computer; or write personal letters,
resumes, junk mail, or other documents not related to BSA.

Computer software on the Systems may not be downloaded, copied, reproduced, altered or
used by a person without prior authorization. The violation of copyright laws may result in a
fine and imprisonment, as well as expulsion from the school. BSA will cooperate with
software vendors in prosecuting those who violate copyright. BSA prohibits the use of any
“pirated” or “bootleg” software on the Systems. The use of personal disks or software is not
allowed on the Systems without prior authorization.

By signing below, I indicate that I understand and will abide by Broome Street Academy’s
Acceptable Use Policy. Should I violate this agreement, my access privileges may be revoked and
I will be subject to disciplinary action and/or appropriate legal action.

Student Name: ________________________________
Student Signature: ____________________________
Date: ____________________

Parent/Caregiver Name: _______________________
Signature of Caregiver: _________________________
Date: ____________________

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MEDIA CONSENT AND RELEASE AGREEMENT

I, ________________________________, hereby give Broome Street Academy and each of its subsidiaries, divisions, related entities or assigns (collectively “BSA”), the right and permission to use my name, comments, artistic work or image and/or likeness (collectively “Materials”) in any manner, anywhere in the world, any number of times for any period of time for whatever purpose BSA may choose. I further give BSA the right and permission to publish, republish and/or copyright the Materials through any media or medium (whether known or unknown), including without limitation on the internet and any other digital, multi-media or electronic mediums. I waive any right to approve any use of the Materials.

Releases: I hereby release, discharge and agree to hold BSA and any person acting on BSA’s behalf or with BSA’s permission harmless from any liability whatsoever related in any way to use of the Materials.

Please check one box:
*IMPORTANT: If you are a minor in foster care, you must complete the next page of this form.*

☐ I am a minor (under 18 years old) and a parent/caregiver/guardian will sign on my behalf below.
I hereby certify that I am the parent/caregiver/guardian of ________________________________ who is a minor, and hereby consent that his/her image and likeness, which has been or is about to be taken or recorded and any content provided by him/her through interviews or otherwise, may be used by BSA for any purposes set forth in the release above, signed by the minor, with the same force and effect as if signed by me.

_____________________________   _______________________________   ______________
SIGNATURE                        PRINT PARENT/GUARDIAN NAME      DATE

_____________________________   _______________________________   ______________
ADDRESS                        CITY/STATE/ZIP                     PHONE

☐ I warrant that I am NOT a minor and I am competent to sign my own name.
I have read the foregoing release, authorizations and agreement, before affixing my signature below, and warrant that I fully understand the contents thereof:

_____________________________   _______________________________   ______________
SIGNATURE                        PRINT NAME                              DATE

_____________________________   _______________________________   ______________
ADDRESS                        CITY/STATE/ZIP                     PHONE

*IMPORTANT: IF YOU ARE A MINOR IN FOSTER CARE, PLEASE FILL OUT THE FOLLOWING PAGE*

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☐ I am a minor (under 18 years old) and currently in foster care.

By signing below, I give BSA permission to contact my foster care case worker for information regarding consent for my image and likeness to be used for the purposes set forth in this release.

________________________________________  ______________________________  ________________
SIGNATURE                              PRINT NAME                              DATE

________________________________________  ______________________________  __________________
ADDRESS                              CITY/STATE/ZIP                              PHONE

________________________________________
FOSTER CARE AGENCY NAME

________________________________________
CASE WORKER PHONE NUMBER

________________________________________
CASE WORKER NAME (PLEASE PRINT)

________________________________________
CASE WORKER SIGNATURE
COMMUNITY WALKING TRIP PERMISSION FORM

Dear Parent/Guardian/Caregiver,

Over the course of the year, there will be many opportunities for students to take short walking trips in and around the SOHO area, supervised by BSA staff. Parent/caregiver signature allows for trips like this to happen in gym class or other classes, at the discretion of their teachers. Students will be chaperoned on their trips and brought back to school to continue their school day.

I, ___________________________ give permission for my child _________________________ to attend short walking trips from Broome Street Academy.

________________________________________
Parent/Caregiver Signature:

______________________________
Date: __________________________

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