

District Protocol for School Choice 2014-2015

Introduction

Schools that have been identified for Program Improvement (PI) must afford parents the option of School Choice. The District has developed the following protocol to implement School Choice. The Assistant Superintendent of Educational Services is responsible for the School Choice process.

Process

The Assistant Superintendent of Educational Services will review the protocol for School Choice with Cabinet and Management in August and communicate the dates for:

a) District runs School Choice letters and forms with address from the database for students at PI schools. ALL student names and addresses entered into the Q by August 14 will be mailed a PI School Choice letter and form.	August 14
b) PI school office managers (SOMs) to receive copies of PI letter/Choice Form for new enrollees who have not been entered into the student database by August 14.	August 15
c) Parent notification of Program Improvement, School Choice, and the deadline to submit School Choice Form.	August 19 – September 3
d) District notification to parents of the School Choice offer and their response.	Week of September 8 - 12
e) Communication with all principals on School Choice requests/offers/response.	By Thursday, September 11
f) First day of attendance for ALL School Choice students.	Monday, September 15

Protocols

The District notifies parents of PI status of School Choice:

- a) Educational Services updates the PI notification letters to be sent to parents/guardians of students at PI schools with an explanation of assessments results. The letter is written in English and in Spanish.
- b) Educational Services prints PI letters on August 14, mails each letter to all parents/guardians of students at PI schools.
 - Letters that are returned to sender will be sent to the SOM who will be asked to contact parents to pick up the letter at their home school. Parents will be advised of the 'time sensitive' nature.
 - Educational Services will flag 'RTS' letters in database.

District Protocol for School Choice
2014-2015
Page 2

- c) Parents are given a 10-day window to review the information and return a School Choice Form, if desired, to Educational Services at the District Office.

Educational Services updates the student database with the information on the School Choice Form. Existing intra-district transfer requests will not be altered but included in Choice process.

- × The Director of Human Resources confirms daily class enrollment with principals and communicates the information to Cabinet.
- × The Data Analyst provides a spreadsheet of enrollment numbers by school/by class with a space available analysis daily.
- × Bus transportation needs are analyzed and adjustments are made as needed.
- × Educational Services will place students in the non-PI school.
 - a) Students must be enrolled and attending school at the time of the School Choice process.
 - b) Educational Services will contact parents with the School Choice offer during the third week of school (Sept. 8-11).
 - The information to parents will include:
 - The first day at the new school — Monday, September 15.
 - Transportation options
 - Instructions to complete the enrollment and emergency card information at the new school.
 - c) Student transfers will be communicated by Educational Services to principals and SOMs on or before Thursday, September 11.
- × The PI School will forward any *consumable textbooks or workbooks* the student has used to the receiving Choice School (not textbooks).
- × School Choice and District transfers are centralized in the District database.

REQUEST FOR SCHOOL TRANSFER-SCHOOL CHOICE

2014-2015

Instructions: To request a transfer for your child to attend a school of choice, please complete the following form and return it to the District Office, 2500 Vineyard Avenue, Oxnard 93036 by September 3, 2014. You will be sent written notification of approval or denial.

Child's Name: _____ Current School: _____ Grade: _____

Please check school of choice:
_____ Rio Plaza

Parent Signature: _____ Date: _____

FOR OFFICE USE

Approved _____ Date _____

Denied _____ Date _____

Assistant Superintendent's Signature _____

If you have any questions, please contact Jeff Turner at 485-3111.
Please submit this form by September 3, 2014 to the District Office.

SOLICITUD PARATRANSFERENCIA A UNA ESCUELA DE OPCION

2014-2015

Instrucciones: Para solicitar la transferencia de su hijo/a a una escuela de opción tenga la bondad de rellenar la siguiente forma y enviarlo de vuelta antes del 3 de septiembre, 2014 a la oficina principal del distrito. Usted recibirá una notificación escrita si fue aprobada o no fue aprobada.

Nombre del niño: _____ Nombre de Escuela Actual: _____ Grado: _____

Por favor marque la escuela de opción:
_____ Rio Plaza

Firma del padre/tutor: _____ Fecha: _____

FOR OFFICE USE

Aprobado _____ Fecha _____

No Aprobado _____ Fecha _____

Firma del Asistente Superintendente _____

Si tiene alguna pregunta, póngase en contacto con Jeff Turner al número 485-3111.
Por favor regrese esta forma antes del 3 de septiembre, 2014 a la oficina principal del distrito.

REQUEST FOR SCHOOL TRANSFER-SCHOOL CHOICE

2014-2015

Instructions: To request a transfer for your child to attend a school of choice, please complete the following form and return it to the District Office, 2500 Vineyard Avenue, Oxnard 93036 by September 3, 2014. You will be sent written notification of approval or denial.

Child's Name: _____ Current School: _____ Grade: _____

Please check school of choice:
_____ Rio Plaza

Parent Signature: _____ Date: _____

FOR OFFICE USE

Approved _____ Date _____

Denied _____ Date _____

Assistant Superintendent's Signature _____

If you have any questions, please contact Jeff Turner at 485-3111.

Please submit this form by September 3, 2014 to the District Office.

SOLICITUD PARATRANSFERENCIA A UNA ESCUELA DE OPCION

2014-2015

Instrucciones: Para solicitar la transferencia de su hijo/a a una escuela de opción tenga la bondad de rellenar la siguiente forma y enviarlo de vuelta antes del 3 de septiembre, 2014 a la oficina principal del distrito. Usted recibirá una notificación escrita si fue aprobada o no fue aprobada.

Nombre del niño: _____ Nombre de Escuela Actual: _____ Grado: _____

Por favor marque la escuela de opción:

_____ Rio Plaza

Firma del padre/tutor: _____ Fecha: _____

FOR OFFICE USE

Aprobado _____ Fecha _____

No Aprobado _____ Fecha _____

Firma del Asistente Superintendente _____

Si tiene alguna pregunta, póngase en contacto con Jeff Turner al número 485-3111.

Por favor regrese esta forma antes del 3 de septiembre, 2014 a la oficina principal del distrito.

REQUEST FOR SCHOOL TRANSFER-SCHOOL CHOICE

2014-2015

Instructions: To request a transfer for your child to attend a school of choice, please complete the following form and return it to the District Office, 2500 Vineyard Avenue, Oxnard 93036 by September 3, 2014. You will be sent written notification of approval or denial.

Child's Name: _____ Current School: _____ Grade: _____

Please check school of choice:

_____ Rio Plaza

Parent Signature: _____ Date: _____

FOR OFFICE USE

Approved _____ Date _____

Denied _____ Date _____

Assistant Superintendent's Signature _____

If you have any questions, please contact Jeff Turner at 485-3111.

Please submit this form by September 3, 2014 to the District Office.

SOLICITUD PARATRANSFERENCIA A UNA ESCUELA DE OPCION

2014-2015

Instrucciones: Para solicitar la transferencia de su hijo/a a una escuela de opción tenga la bondad de rellenar la siguiente forma y enviarlo de vuelta antes del 3 de septiembre, 2014 a la oficina principal del distrito. Usted recibirá una notificación escrita si fue aprobada o no fue aprobada.

Nombre del niño: _____ Nombre de Escuela Actual: _____ Grado: _____

Por favor marque la escuela de opción:

_____ Rio Plaza

Firma del padre/tutor: _____ Fecha: _____

FOR OFFICE USE

Aprobado _____ Fecha _____

No Aprobado _____ Fecha _____

Firma del Asistente Superintendente _____

Si tiene alguna pregunta, póngase en contacto con Jeff Turner al número 485-3111.

Por favor regrese esta forma antes del 3 de septiembre, 2014 a la oficina principal del distrito.

REQUEST FOR SCHOOL TRANSFER-SCHOOL CHOICE

2014-2015

Instructions: To request a transfer for your child to attend a school of choice, please complete the following form and return it to the District Office, 2500 Vineyard Avenue, Oxnard 93036 by September 3, 2014. You will be sent written notification of approval or denial.

Child's Name: _____ Current School: _____ Grade: _____

Please check school of choice:

_____ Rio Plaza

Parent Signature: _____ Date: _____

FOR OFFICE USE

Approved _____ Date _____

Denied _____ Date _____

Assistant Superintendent's Signature _____

If you have any questions, please contact Jeff Turner at 485-3111.

Please submit this form by September 3, 2014 to the District Office.

SOLICITUD PARATRANSFERENCIA A UNA ESCUELA DE OPCION

2014-2015

Instrucciones: Para solicitar la transferencia de su hijo/a a una escuela de opción tenga la bondad de rellenar la siguiente forma y enviarlo de vuelta antes del 3 de septiembre, 2014 a la oficina principal del distrito. Usted recibirá una notificación escrita si fue aprobada o no fue aprobada.

Nombre del niño: _____ Nombre de Escuela Actual: _____ Grado: _____

Por favor marque la escuela de opción:

_____ Rio Plaza

Firma del padre/tutor: _____ Fecha: _____

FOR OFFICE USE

Aprobado _____ Fecha _____

No Aprobado _____ Fecha _____

Firma del Asistente Superintendente _____

Si tiene alguna pregunta, póngase en contacto con Jeff Turner al número 485-3111.

Por favor regrese esta forma antes del 3 de septiembre, 2014 a la oficina principal del distrito.

REQUEST FOR SCHOOL TRANSFER-SCHOOL CHOICE

2014-2015

Instructions: To request a transfer for your child to attend a school of choice, please complete the following form and return it to the District Office, 2500 Vineyard Avenue, Oxnard 93036 by September 3, 2014. You will be sent written notification of approval or denial.

Child's Name: _____ Current School: _____ Grade: _____

Please check school of choice:
_____ Rio Plaza

Parent Signature: _____ Date: _____

FOR OFFICE USE

Approved _____ Date _____

Denied _____ Date _____

Assistant Superintendent's Signature _____

If you have any questions, please contact Jeff Turner at 485-3111.
Please submit this form by September 3, 2014 to the District Office.

SOLICITUD PARATRANSFERENCIA A UNA ESCUELA DE OPCION

2014-2015

Instrucciones: Para solicitar la transferencia de su hijo/a a una escuela de opción tenga la bondad de rellenar la siguiente forma y enviarlo de vuelta antes del 3 de septiembre, 2014 a la oficina principal del distrito. Usted recibirá una notificación escrita si fue aprobada o no fue aprobada.

Nombre del niño: _____ Nombre de Escuela Actual: _____ Grado: _____

Por favor marque la escuela de opción:
_____ Rio Plaza

Firma del padre/tutor: _____ Fecha: _____

FOR OFFICE USE

Aprobado _____ Fecha _____

No Aprobado _____ Fecha _____

Firma del Asistente Superintendente _____

Si tiene alguna pregunta, póngase en contacto con Jeff Turner al número 485-3111.
Por favor regrese esta forma antes del 3 de septiembre, 2014 a la oficina principal del distrito.