



2016-2017

Franklin SUN Community School Registration (page 1 of 2)

All Franklin students are required to complete this form for participation in any SUN-sponsored activities.

9/15: Club Fair (Tutorial) **9/19:** After school activities & supper begin **10/27:** Harvest Festival (6pm)
Questions? Contact Amber McGill Call/text: 971-570-1384 Email: amcgill@impactnw.org

-Last Name: _____ -First Name: _____ -Grade: _____

-Birth Date: ____/____/____ -Student ID #: _____ -Gender: Female Male _____

-Identity: (check all that apply) African Asian Black/African-American Hispanic/Latino Middle Eastern
 Native American/Alaska Native Native Hawaiian/Pacific-Islander Slavic White Decline-to-answer

-Primary Language: _____ -Free/Reduced lunch? (Circle) YES or NO

-STUDENT Phone #: _____ -Texting ok? (Circle) YES or NO

-Parent/Guardian Name(s): _____ -Home/Parent Phone #: _____

-Relevant Health/Medical Concerns: _____


-Emergency Contact: _____ -Relationship: _____ -Phone Number: _____

I give permission for the above-named child to participate in any activities that are held at Franklin High School as part of the SUN program. In an emergency and I can't be reached, I grant permission for emergency medical treatment to be given to my child. I agree to pay all medical bills not covered by the insurance company listed below. I release Portland Public Schools, Impact Northwest, and SUN's partners from responsibility for any bills resulting from injuries incurred in these programs. I understand that my child will be responsible for checking in and out with the SUN program staff every day when arriving/leaving the SUN Extended-day program. I release SUN, Impact Northwest, Portland Public Schools and program partners from responsibility for my child after s/he checks out with SUN program staff and/or leaves school property. I have included information regarding allergies or other medical conditions about my child of which staff should be aware.

➡ Yes or No

I give permission for Impact NW to photograph and/or videotape my child for publicity purposes (initial below):

➡ Yes or No

➡  Parent/Guardian Signature: _____ Date _____

Activities you are interested in:

- After-school homework help
- Pathways to Manufacturing
- Volunteer Opportunities
- ESL Tutoring
- ASPIRE: Post high school planning support/mentoring (College/ scholarship applications, financial aid, etc)
- Tutoring Center: Mon (B-6), Tues-Thurs (Library) 3:15- 5:00pm / Tutorial 2:06-4p.m.
- Other: _____
- Innovation Academy
- Student Clubs
- Dance
- Girls Inc.
- Jobs 101
- Individual Support/Mentoring
- Empowerment Groups
- Supper (free meal after school)
- Theater
- Step Up

Impact Northwest's SUN Community Schools are a collaboration of Multnomah County Department of Human Services, the City of Portland Parks and Recreation and Portland Public Schools.



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Student Last Name: _____ **Student First Name:** _____

Notice of Non-discrimination:

SUN Community Schools programs and services reflect the diversity of our community. We do not discriminate on the basis of religion, race, color, gender, national origin, sexual orientation, age or disability.



Behavioral Expectations:

The safety and well-being of all participants and staff is of utmost importance. To ensure safety in SUN Community Schools, we require that all participants be able to follow all three of the following criteria:

1. **Be age-appropriate for the activity/program.**
2. **Be able to maintain safe behavior during the activity. This means that they can participate without harming themselves or others. Specific required behaviors include:**
 - Treating adults and other students with respect
 - Following directions of adult instructors and coordinators
 - Remaining in the assigned room until dismissal
 - Engaging in safe, non-violent behavior
3. **Participate meaningfully in the activity and not disrupt or distract others.**

If you have questions or concerns about whether your child can follow the behavioral expectations above or whether s/he will benefit from the program being offered, please talk with the SUN CS Site Manager, Amber McGill. (971-570-1384 or amcgill@impactnw.org)

I have read the Behavioral Expectations and will discuss any questions or concerns I have with the SUN Site Manager.

  **Parent/Legal Guardian Signature:** _____ **Date:** _____

2016-2017 Release of Information Agreement

Our SUN Community School is a collaboration of Portland Public Schools, Multnomah County, the City of Portland and many community partners and agencies who come together to support children's success in school and life. We do this by working together to meet the specific needs of our students and their families.

In order to provide your child with the best services and support possible, the SUN Community School Site Manager needs your permission to be able to share information with the people who are teaching and serving your child specifically. This information may include student name, student ID #, grade level, achievement test scores, course grades and grade point averages, attendance, Individual Education Plan, demographic, and behavior/discipline information. The SUN Community School Site Manager will only share this information when it is required by a partner organization or supports your student's success. This information may also be shared with the City/County SUN Initiative and their evaluation contractors for program evaluation.



Organizations receiving information about your student are informed of state and federal confidentiality provisions. This includes employees and volunteers managed by the SUN Community School site manager and staff of other partner agencies providing the activities in which my child participates. They are not authorized to release information to any agency or person not listed in this release without specific written consent of the parent/legal guardian.

Children may participate in SUN activities whether or not their Parent/Guardian agrees to the release or exchange of educational information to other staff or agencies.

Check box AND sign below

I authorize the release and exchange of student records (including attendance of classes and events) between Portland Public Schools, Impact NW, and the Franklin SUN program employees and volunteers:

 **YES** or **NO**

  **Parent/Legal Guardian Signature:** _____ **Date:** _____

This permission is effective from 6/15/2016 – 8/31/2017 unless cancelled in writing.