July 27, 2020

Dear Students and families,

It has been an exciting, busy month since I became the Atascadero High School Principal on July 1, 2020. I appreciate the opportunity to join this community and recognize the excellent work done by my predecessor, Bill Neely, and the entire AHS staff. I also want to acknowledge that this is a difficult time for all of us who long to return to school as it used to be. The joy that comes from being a high school principal comes from the opportunity to see our students, staff, and community engaged in inspiring activities. For me, that includes classroom learning and also athletics, the arts, FFA, ASB, assemblies, and every other venue in which our students learn, compete, perform, or demonstrate what they are and what they can do. We are committed to doing as much to recapture those opportunities within the safety guidelines set by the State, the County Health Department, and our School Board. We must focus on safety first; but we want to provide the best high school experience that we can in our new reality.

School will begin on August 12, 2020 in a full distance learning model. During this time, students will receive their instruction online. They will have daily live online interaction with teachers and peers and will have assignments to complete and submit through Google Classroom. We encourage all students to use their Google Calendars to keep organized. Teachers will post the lessons for the week on Thursdays to create consistency across the school.

For the first three days of school, we will use a 7-period minimum day schedule. This will allows all students and teachers to get to know each other, set expectations and routines, and prepare students for the distance learning schedule. On Monday, August 17, 2020, we will begin the “Blended Secondary Schedule” in which half of the students access live instruction in the morning and half in the afternoon. I know that some will want to switch from morning to afternoon or vice versa. We will not be able to make those changes during the first month of school. We need to operate according to the set schedule while we learn how things are working and what needs to be changed or adapted.

Like you, this is our first time to function under pandemic restrictions and we will be learning and gathering input along the way. We have put our best thinking into our plan; but we know that there will be changes needed along the way. We want to be thoughtful and responsive. We don’t want to create chaos by changing over and over, so we will gather information and input as we move forward together.

I’m optimistic and excited about joining you at AHS. I wish that conditions were different; but we will have a great year together regardless. I hope that all of our community will do what we can to hasten our full return to school by working to slow the spread of COVID-19.

Sincerely,

[Signature]

"Home of Scholars and Champions"
FIRST DAY PACKET CHECKLIST

PLEASE RETURN THE FOLLOWING ITEMS COMPLETED & SIGNED TO ATASCADERO HIGH SCHOOL:

REQUIRED TO GET YOUR SCHEDULE:

☐ Student Data MUST be confirmed online (includes Student Emergency Card info). **You must have a current email address on file with the school in order to access the online system! Call the school if you have a new email address or are unable to complete online Data Confirmation (805-462-4310).

☐ Annual Data Confirmation Parent/Student Signature Form

☐ Annual Notification to Parent/Guardian/Student Signature Form

☐ 9th Grade/New Students only: Technology Services Student Responsible Use Agreement

REQUIRED TO GET CHROMEBOOKS:

☐ AUSD Student Chromebook Contract

☐ Parent Chromebook Guidelines and Procedures

STRONGLY SUGGESTED:

☐ Application for Free & Reduced Meals (All children on one form. One form per family)

☐ Consent to Bill California Medi-Cal Form

☐ Family Information Form

OPTIONAL:

☐ PTSA Membership Volunteer Form and membership dues

☐ PE CLOTHES FORM

~FOR YOUR CLASS SCHEDULE PICK UP TIME SEE THE RETURN FIRST DAY PACKETS FORM IN THIS PACKET~
RETURN FIRST DAY PACKETS: (AHS GYM)

<table>
<thead>
<tr>
<th>Aug 3</th>
<th>Aug 4</th>
<th>Aug 5</th>
<th>Aug 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name A: 8-9am</td>
<td>Last name E-F: 8-9am</td>
<td>Last name Li-Ma: 8-9am</td>
<td>Last name Ro-Sal: 8-9am</td>
</tr>
<tr>
<td>Last name Ba-Bo: 9-10am</td>
<td>Last name Ga-Gr: 9-10am</td>
<td>Last name Mc-Mo: 9-10am</td>
<td>Last name San-Sm: 9-10am</td>
</tr>
<tr>
<td>Last name Br-Ca: 10-11am</td>
<td>Last name Gu-He: 10-11am</td>
<td>Last name Mu-O: 10-11am</td>
<td>Last name Sn-Te: 10-11am</td>
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<tr>
<td>Last name Ce-Co: 11-12pm</td>
<td>Last name Hi-Jo: 11-12pm</td>
<td>Last name Pa-Po: 11-12pm</td>
<td>Last name Th-V: 11-12pm</td>
</tr>
<tr>
<td>Last name Cr-D: 1-2pm</td>
<td>Last name Ju-Le: 1-2pm</td>
<td>Last name Pr-Ri: 1-2pm</td>
<td>Last name W-Z: 1-2pm</td>
</tr>
</tbody>
</table>

Schedule Distribution in Gym:
Students are NOT permitted without a mask. Families will not be permitted into the gym with their student(s).
Attend based on student’s last name. Take school photos, pick up schedules & textbooks. See First Day Packet for details.

First Week Schedule:

<table>
<thead>
<tr>
<th>Wednesday 8/12</th>
<th>Thursday 8/13</th>
<th>Friday 8/14</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 11:12 6 11:59 7 12:40 1:10 5 11:12 6 11:59 7 12:40 1:10 5 11:12 6 11:59 7 12:40 1:10 5 11:12 6 11:59 7 12:40 1:10</td>
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</tr>
</tbody>
</table>

Please Order Online: See your Aeries email for links or see the form included

YEARBOOK: $85.00
P.E. CLOTHES:
- T-Shirt $8.00
- Shorts $12.00
- Sweatshirt $16.00
- Sweatpants $16.00
- Bundle (T-Shirt, Shorts, & Sweatshirt) $30.00

Senior Portraits for the Yearbook are due by October 2nd.
IMPORTANT: Please do not email photos to the school- as all Seniors will be receiving an email with a link for submission instructions.
*Guidelines are available on the AHS website under the Student/Parents link- 2020-21 Senior Portrait Information.
Welcome, AUSD Parents!

Annual Online Student Data Confirmation!

Every Parent/Guardian with an email address on file will automatically have an Aeries Parent Portal.

Do you know your Aeries Parent Portal Account Username and Password?

Yes

Navigate to the Aeries Parent Portal log in screen (link found at www.atasusd.org/for-parents), enter email address and click forgot password

No

Have you updated and confirmed the records in Aeries for all applicable children enrolled with AUSD?

No

Enter your email address and wait for DoNotReply email. Follow link in the DoNotReply email and reset password

Yes

Log in to Aeries Parent Portal and update and confirm the records for all applicable children enrolled with AUSD.

MAY TO GO!
You're done with Data Confirmation!

No computer access at home or work?

Check with your School Site or District Office (462-4200) for open computer times.

Or

Use the Atascadero City Library (461-8161).

If you are still unable to get computer access, please contact school site.

Print and Sign the Data Confirmation Parent Signature Form. This form will need to be provided to your child’s school.

If you have multiple children, please print one out for each child after completing their data confirmation.
Bienvenidos, padres AUSD!

linea de confirmación de datos del estudiante!

Todos los padres/guardianes con una dirección de correo electrónico en el archivo tendrán automáticamente un Portal de padres Aeries (Aeries Parent Portal).

¿Conoce el nombre de usuario y la contraseña de su cuenta de Aeries Parent Portal?

¿Sabe qué dirección de correo electrónico tenemos archivada?

Póngase en contacto con el sitio escolar de su hijo para determinar la dirección de correo electrónico en el archivo.

¿Ha actualizado y confirmado los registros en Aeries para todos sus niños inscritos en AUSD?

Firme el formulario de firma de confirmación de los padres (imprime en línea o use el formulario provisto).

Vaya a la pantalla de inicio de sesión en Aeries Parent Portal (enlace encontrado en www.atasusd.org/for-parents), teclee la dirección de correo electrónico y haga clic en forgot password.

¿No hay acceso a una computadora en casa o en el trabajo?

Verifique con el sitio de la escuela o la oficina del distrito (805-462-4200) tiempos disponibles para usar las computadoras.

O

Utilice la biblioteca de la ciudad de Atascadero (805-461-6161).

Si aún no puede obtener acceso a una computadora, comuníquese con el sitio de la escuela.

Imprima y firme el formulario de firma de confirmación de datos de los padres. Este formulario deberá ser entregado a la escuela de su hijo.

Si tiene varios hijos, imprima uno para cada niño después de completar su confirmación de datos.
**Atascadero High School**

**2020-2021**

<table>
<thead>
<tr>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
<th>Fri</th>
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<tbody>
<tr>
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<td>Jul 30</td>
<td>Jul 31</td>
</tr>
</tbody>
</table>

**Welcome back!**

We are beginning this school year in full distance learning.

Keep an eye on Aeries email communications, as well as our website, for the latest updates!

http://ahs.atascusd.org/

**Aug 3**

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See First Day Packet for details.

- **Last name A:** 8-9am
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- **Last name Cr-D:** 1-2pm

**Aug 4**

- **Last name E-F:** 8-9am
- **Last name Ga-Gr:** 9-10am
- **Last name Gu-He:** 10-11am
- **Last name Hi-Jo:** 11-12pm
- **Last name Ju-Le:** 1-2pm

**Aug 5**

- **Last name Li-Ma:** 8-9am
- **Last name Mc-Mo:** 9-10am
- **Last name Mu-O:** 10-11am
- **Last name Pa-Po:** 11-12pm
- **Last name Pr-Ri:** 1-2pm

**Aug 6**

- **Last name Ro-Sal:** 8-9am
- **Last name San-Sm:** 9-10am
- **Last name Sn-Te:** 10-11am
- **Last name Th-V:** 11-12pm
- **Last name W-Z:** 1-2pm

**Note:** For students needing chromebooks (or repairs), please visit the Tech Building (6500 Atascadero Ave. - bottom of the hill near the AHS main office) during your Schedule Distribution window.

Tech support:
805-538-1013 or helpdesk@atascadero.usd.

gethelphss.com

**Aug 7**

**Aug 10**

**Aug 11**

**Aug 12**

**First Day of School**

**Aug 13**

**Aug 14**

Aug 12 - Aug 14:
Follow the 7-Period
Minimum Day Schedule (distance learning):
7:45am - 1:10pm

Parents/Guardians: Your Aeries Parent Portal is vital for receiving important school announcements, viewing attendance/grades, and completing Data Confirmation, which is required for students to receive their schedule. If you do not have an Aeries Parent Portal, please contact the high school ASAP (805-462-4300)!
School Calendar 2020-2021

Grade Reporting Periods

Progress Reports                      Report Cards
1st Prg – 9/11/20                      1st Sem - 1/05/21
2nd Prg – 10/16/20                     4th Prg – 2/05/21
3rd Prg – 11/13/20                     5th Prg – 3/12/21

General Information
Receptionist ~ Main Number 462-4300
Athletic Office 462-4311
Attendance 462-4320
Counseling Office 462-4308
Discipline 462-4327

Testing Dates
TBD SBAC & CAST Testing
(11th Grade)
May 3-14 AP Exams

School Begins
August 12
Virtual Back To School Night
August 18
Labor Day
September 7
Professional Learning Day
October 5
Veterans Day
November 11
Thanksgiving Break
November 23-30
Semester Finals
December 15-18
Winter Recess for Students
Dec. 21 – Jan. 5
End of Semester
January 5
Teacher Work Day
January 5
School Resumes
January 6
Martin Luther King Jr. Day
January 18
Lincoln’s Day
February 15
Washington’s Day
February 22
Local Recess
March 12-15
Minimum Day
April 1
Open House
TBD
Spring Break
April 2-9
Memorial Day
May 31
Semester Finals
May 26 - June 4
Graduation
June 3
Last Day of School
June 4
### 2020-2021 Secondary Rotating Schedule
#### Week 1 August 10 - 14

<table>
<thead>
<tr>
<th>Monday 8/10</th>
<th>Tuesday 8/11</th>
<th>Wednesday 8/12 Topic:</th>
<th>Thursday 8/13 Topic:</th>
<th>Friday 8/14 Topic:</th>
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<tbody>
<tr>
<td>PD &amp; Teacher work Day</td>
<td>Teacher Work Day</td>
<td>1 7:45 8:20</td>
<td>1 7:45 8:20</td>
<td>1 7:45 8:20</td>
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<tr>
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<td>No students</td>
<td>2 8:26 9:05</td>
<td>2 8:26 9:05</td>
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### Week 2 August 17 - 21

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<th>Wednesday 8/19</th>
<th>Thursday 8/20</th>
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<tbody>
<tr>
<td>In Person A-K</td>
<td>7:45 – 9:05</td>
<td>1</td>
<td>3</td>
<td>5</td>
<td>7:45 – 8:55</td>
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<tr>
<td></td>
<td>9:15 – 10:35</td>
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<tr>
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<td>Lunch/ Prep</td>
<td>Lunch/ Prep</td>
<td>Lunch/ Prep</td>
<td>Lunch/ Prep</td>
<td>10:15 - 11:45</td>
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<tr>
<td>In Person L-Z</td>
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<td>3</td>
<td>5</td>
<td>11:45 – 12:55</td>
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<td>1:25 – 2:45</td>
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<td>Distance Learning (DL)</td>
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<td>5</td>
<td>7</td>
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### Week 3 August 24 - 28

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<tbody>
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<td>5</td>
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<td>Office hours</td>
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<tr>
<td><strong>Distance Learning (DL)</strong></td>
<td>DL 1 Hour</td>
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### Week 4 August 31 - September 4

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<td>Lunch/ Prep</td>
<td>Lunch/ Prep</td>
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<td><strong>Distance Learning (DL)</strong></td>
<td>DL 1 Hour</td>
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<th>Friday 9/11</th>
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<tr>
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<td>Lunch/ Prep</td>
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<td>Lunch/ Prep</td>
<td>10:15 - 11:45</td>
<td>Lunch/ Prep</td>
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<td><strong>In Person L-Z</strong></td>
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### Week 6 September 14 - 18

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<th>Monday 9/14</th>
<th>Tuesday 9/15</th>
<th>Wednesday 9/16</th>
<th>Thursday 9/17</th>
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<td>7</td>
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<td>Office hours</td>
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<td>4</td>
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<td>Office hours</td>
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<tr>
<td><strong>Distance Learning (DL)</strong></td>
<td>DL 1 Hour</td>
<td>3</td>
<td>5</td>
<td>7</td>
<td>1</td>
<td>DL 1 hour</td>
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</tr>
<tr>
<td></td>
<td>DL 1 Hour</td>
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<td>6</td>
<td>none</td>
<td>2</td>
<td>DL 1 hour</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Bell Schedule</td>
<td>Monday 9/21</td>
<td>Tuesday 9/22</td>
<td>Wednesday 9/23</td>
<td>Thursday 9/24</td>
<td>Bell Schedule</td>
<td>Friday 9/25</td>
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<tr>
<td>In Person A-K</td>
<td>7:45 – 9:05</td>
<td>1</td>
<td>3</td>
<td>5</td>
<td>7</td>
<td>7:45 – 8:55</td>
<td>1</td>
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<tr>
<td></td>
<td>9:15 – 10:35</td>
<td>2</td>
<td>4</td>
<td>6</td>
<td>Office hours</td>
<td>9:05 – 10:15</td>
<td>2</td>
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<td></td>
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<td>Lunch/ Prep</td>
<td>Lunch/ Prep</td>
<td>Lunch/ Prep</td>
<td>10:15 - 11:45</td>
<td>Lunch/ Prep</td>
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<tr>
<td>In Person L-Z</td>
<td>11:55 – 1:15</td>
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<td>3</td>
<td>5</td>
<td>7</td>
<td>11:45 – 12:55</td>
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<td>1:25 – 2:45</td>
<td>2</td>
<td>4</td>
<td>6</td>
<td>Office hours</td>
<td>1:05 – 2:15</td>
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<td>Distance Learning (DL)</td>
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<td>none</td>
<td>2</td>
<td>4</td>
<td>DL 1 hour</td>
<td>6</td>
</tr>
</tbody>
</table>
Attendance Eligibility Requirements

In an effort to keep cuts and tardies at a minimum, eligibility to participate in extra/co-curricular activities will be based upon attendance.

Students are allowed a maximum of 4 tardies and/or 2 period cuts per grading period. A grading period is defined as any time a progress report or report card is sent home. If a student exceeds the number of cuts or tardies allowed, they are ineligible to participate in any extra/co-curricular activity until the tardies or cuts are made up. Tardies and cuts can be made up by the student serving detention or Saturday School.

Activities which require attendance clearance include, but are not limited to:

- Athletics
- Band
- Bonanzas
- Cheerleading
- Choir
- Dodgeball
- Drama Productions
- FFA
- Field Trips (where class time is missed)
- Graduation Ceremony (Seniors must maintain eligibility for the last two grading periods)
- Mock Rock
- Powder Puff Football
- Prom
- Winter Formal

Serving Saturday School or detention counts as “making-up” tardies or period cuts in the following ways**:

- Attending a Saturday School (3 hrs) will make up six tardies or three period cuts.
- Attending an after-school detention (1 hr) will make up two tardies or one period cut.
- Attending one lunch detention (30 minutes) will make up one tardy, or attending two lunch detentions will make up one period cut.

**While in distance learning, alternative opportunities or means may be offered to students who need to make up tardies or period cuts to maintain attendance eligibility. If a student is ineligible due to attendance during distance learning, they may be unable to participate in school activities.**

If a legitimate absence is not cleared by the parent/guardian, the student may not be able to participate in an important activity. All non-cleared absences will cause consequences to be assigned. Parents/guardians can monitor their student's attendance using the Aeries student information. Additionally, automated calls are made daily to notify parents/guardians of absences and tardies. During each eligibility period, students who are ineligible to participate in extra/co-curricular activities due to attendance will be notified via a letter mailed home.

Parents/guardians can clear most cuts and tardies by contacting the Attendance Office at 805-462-4320. Parents/guardians should contact the office to clear tardies for 1st period (due to unforeseen circumstances on the way to school) or for 5th period (due to unforeseen circumstances returning from lunch).

In order for a student to leave campus at any time other than lunch, the student must first obtain an off campus pass through the Attendance Office. If a student leaves campus without an off campus pass, the student will be assigned a cut that may not be cleared. Parents/guardians must contact the Attendance Office in order for a student to receive an off campus pass. To ensure that students receive the off campus pass in a timely manner, please contact the Attendance Office at least **one hour prior** to the time the student needs to be released.

If a senior is ineligible to participate in the graduation ceremony due to attendance, they may appeal the decision to the high school principal.

Additional information regarding attendance can be found in the AHS Student/Parent Handbook.
Greyhound Families,

The CIF State Office has released the plan and calendar for athletics for the 20-21 school year. The Atascadero Unified School District Board of Education, District Leadership, and School Site administration are committed to safely resume athletic activities as soon as state and local agencies deem it safe to return. We all understand the benefits to students who participate in athletics and other extra-curricular activities.

We are working now to get as much in place as we can so that we will be prepared when we have clearance to return. There will be work to do during the transition back to activity as well. We have one chance to do this the right way and are determined to responsibly meet the necessary requirements in order to assure the safety of our students.

Flexibility, Patience, and Cooperation will be the resounding theme. What we have known and have grown accustomed to will be different. Thank you for your continued patience as we are all trying to navigate through the unknown & uncertainty of the athletic landscape.

Ways you can be proactive at this time:
1. Complete and return athletic clearance packets as soon as possible.
2. Encourage your children to stay active and be healthy in a safe and responsible manner.
3. Continue with open and positive conversations regarding potential choices, changes, and adjustments.

Below, I have included information released by the State CIF and Central Section offices. Principals and Athletic Directors will be soon meeting to review, discuss the parameters and guidelines.

Regards,
Sam DeRose
Director of Athletics
Atascadero High School

**California State CIF Office.** – The California Interscholastic Federation (CIF) has determined, in collaboration with our 10 Sections, that education-based athletics for the 2020-2021 school year will begin with a modified season of sport schedule (see below for 2020-21 sports calendar). The calendar reflects the season for each CIF sport, Section Championships, and Regional/State Championships in those sports where a Regional/State Championship is currently offered. The CIF Central Section Office has released its calendar to reflect regular season starting and ending dates and Section playoffs (See CS sports calendar attachment.)

We are continuously monitoring the directives and guidelines released from the Governor’s Office, the California Department of Education, the California Department of Public Health, and local county health departments and agencies as these directives and guidelines are followed by our member schools/school districts with student health and safety at the forefront. As these guidelines change, CIF Sections may allow for athletic activity to potentially resume under the summer period rules of the local Section.
Statewide Changes for the 2020-2021 School Year

CIF Bylaws 600-605

CIF Bylaws 600-605 have been suspended for the 2020-2021 school year. Students will not be prohibited from participating in contests for outside teams during the high school season of sport.

Summer Period – Extended

It has been decided that Summertime Rules will be extended from when the school year begins in August/September through December and the beginning of fall sports. As schools open and students return, provided state and local health authorities deem it safe to do so, schools can begin their pre-season preparations as they see fit, depending on what is allowed by health authorities during that time period. Any activity that previously was allowed during the summer will now be allowed during August – November.

Why are there only two seasons (instead of 3 shortened seasons)?

After much consideration the decision was made to change from the traditional three season format to a two-season format. Trying to condense three seasons into six months did not provide as many opportunities as the two-season model. The overlap between the seasons in a three-season model would have been very challenging for three sport athletes while also dramatically shortening the seasons for those students that only play one or two sports.

Do we have to eliminate any contacts?

A positive aspect of the two-season model is that even though the season may be a little shorter than a traditional season it still allows schools to schedule and play as they choose to within the framework that Bylaw 1206 provides.

Are section championships being eliminated or shortened?

This schedule also allows for normal section championship experiences and opportunities in all sports. The only exception is that football playoff brackets will be 8 team brackets as this allows schools to maintain an 11-week regular season to play 10 contests. A plan for football playoffs that will not eliminate any teams from the playoffs and will add divisions if necessary.

What about regional and state championships?

The state office has made the decision to streamline all regional and section championships into a one week time period. More information will available from the state office in the months ahead. The 2020-2021 school year is sure to be one that we will remember for years to come.
Nicole Hider, President,  
Dawn Scherer Daner, VP, Membership  
Ashlynn Imhoff, Secretary, (Student)  
Roni DeCoster, Treasurer,  
Deena Miller, Auditor,  
Christian Maypa, Social Media (student)  
Anthony Cannavino, Hospitality (student)  
Ajai Daner, SR. Student Representative (student)  
Greg Hider, JR. Student Representative (student)  
Mr. Dan Andrus, Staff Representative, (Principal)  
atownptsapresident@gmail.com  
atownptsavp@gmail.com  
atownptsasecretary@gmail.com  
atownptsatreasurer@gmail.com  
atownptsaauditor@gmail.com  
atownptsasocialmedia@gmail.com  
atownptsahospitality@gmail.com  
atownptsarep@gmail.com  
atownptsarep@gmail.com  
danandrus@atasusd.org

Check out our Facebook page Atascadero High School PTSA and our Twitter page atownptsa

AHS PTSA Membership: $10.00 per person  
Checks payable to: AHS – PTSA

Every Greyhound Benefits, Every Membership Counts, Everyone can join!

Every student and staff paid membership is an automatic entry for our Greyhound Gift Basket. Each paid membership earns you a drawing ticket!

To be entered into Greyhound Gift Basket Drawing, 
AHS PTSA Memberships are due by September 25, 2021.

All checks should go into an envelope and be stapled to this form. Thank You! Please return form with Membership payment(s) during School Registration Days or drop in the PTSA BOX in School Main Office by September 20th to be entered in the Greyhound Gift Basket Prize Drawing!

Membership link
https://jointotem.com/ca/atascadero/atascadero-high-pta
Welcome to the 2020-21 school year and 100th anniversary of AHS! We hope you are staying healthy and well during these very unique times. Although we are not where we had hoped to be in terms of our AUSD and community at large we are moving forward and working together for the best interest of all our students, staff and families. So, we need your help, to help us continue to support AHS during this upcoming year no matter the format of how the school day transpires.

The Atascadero High School Parent Teacher Student Association invites all parents, teachers, students, grandparents, family and friends to join our PTSA and make a difference. There are many ways you can get involved with the school and have a positive impact on our AHS community.

The purpose of AHS PTSA is to represent and support students, teachers, staff and families at AHS. HOW CAN YOU BE INVOLVED? Please attend our open meetings, the first Monday of the month*, 6:30pm via ZOOM (until we are good to meet safely in person) send questions and comments to ddanerpta18@gmail.com.

*some meetings will be changed due to school holidays.

We have new and returning enthusiastic officers for the upcoming year! But we need you to make our membership complete. Remember, the voice of a few is quiet, but the voice of many is POWERFUL! Anyone can join our PTSA and be a GREYT supporter.

How do my family, friends and I join? Just complete the PTSA Membership form attached, go online via the TOTEM link or pick up your PTSA membership envelope in the AHS office; dues are $10 per person for 2020-21 school year. Please make checks made out to: AHS PTSA. If you are not paying via TOTEM link please bring your envelope & form with payment to the PTSA mailbox in the school office.

For every individual who joins PTSA 2020-21 year by September 25th, they will be entered into our prize basket drawing filled with school & office supplies along with additional goodies (1 Prize Basket for AHS staff & 1 Prize Basket for students/families) Thank you!

With your help, we are looking forward to another successful year at AHS!

Sincerely,

Dawn Scherer Daner
AHS PTSA, V.P. - Membership Chair

P.S. If you would like to see your support go further, or you are able to financially support our local PTSA even more, please consider an additional donation beyond your dues directly to AHS PTSA, any amount is appreciated. ALL such proceeds STAY 100% on campus to help underwrite our PTSA donations & programs for AHS students and staff. Please use the membership envelope provided or use one of your own. Thank You for your support!
YES, I WANT TO VOLUNTEER WITH PTSA @ AHS!

Please check ALL the areas you are interested in helping with during our 2018-19 school year.

- Library Textbook Check Out and Check In (August & June)
- Fundraising (Grocery Outlet 5% Card, Amazon Smile, Target red Card, etc.)
- Parent Education Events
- REFLECTIONS (PTA Sponsored Arts contest, poetry, drawings, photography, music etc)
- Health screenings (October & November)
- Career Fair (Spring)
- Box Tops For School (Fall and Spring)
- General Volunteer (Year-round as needed)
- Hospitality: Donate food, drinks, plates, gift cards, etc., help setup/serve/cleanup, etc. for Welcome Back Luncheon in August & Staff Appreciation in Spring (2 days - April or May)

Volunteers on school site must complete AUSD volunteer clearance form and provide CA Driver’s License/ID to office; if working with students, volunteers must comply with Megan’s Law.

PLEASE PRINT CLEARLY- We contact members via email, rarely by phone.

Membership Dues are only $10 per person. Membership dues are open to ALL AGES. With every membership, $6.50 supports the SLO District PTA, the State and National PTAs and keeping $3.50 here at AHS. Every PTSA Member receives their PTA Card which provides discounts with Multiple National Businesses. Any amount donated over the $10 Dues/person stays 100% with AHS. Please attach extra memberships on additional paper.

Member’s Name: __________________________ Phone: ______________
Member’s Name: __________________________ Phone: ______________
Grade: ___ Student’s Name: __________________________ Phone: ______________
Grade: ___ Student’s Name: __________________________
Grade: ___ Student’s Name: __________________________

Your Email Address: __________________________________________

Total # of Memberships: __________
Support the AHS PTSA Activity Fund: (any amount over the $10/person dues) $__________
TOTAL AMOUNT INCLUDED: PTSA Membership ($10/person) & AHS Activity Fund $__________
Health Coverage All Year Long

The COVID-19 pandemic has made it clear that the health of each one of us is deeply interconnected with that of every Californian. The current public health emergency has re-emphasized the importance of having accessible health care coverage and a well-funded safety-net available for our most vulnerable communities.

Health Coverage Options

Medi-Cal:
- Children—regardless of immigration status—foster youth, pregnant women, and legally present individuals—including those with DACA status—may be eligible for no- or low-cost Medi-Cal.
- Medi-Cal covers immunizations, checkups, specialists, vision and dental services, and more for children and youth at no or low cost.
- Medi-Cal enrollment is available year round.
- During COVID-19, Medi-Cal plans began offering more services using telehealth. Ask your provider about accessing care over video or telephone.

Covered California:
- Covered California is where legal residents of California can compare quality health plans and choose the one that works best for them.
- Based on income and family size, many Californians may qualify for financial assistance.
- Enroll during Open Enrollment or any time you experience a life-changing event, like losing your job or having a baby. You have 60 days from the event to complete enrollment.

Immigrant Families visit: www.allinforhealth.org/immigrantfamilies
Immigration status information is kept private, protected, and secure. It will not be used by any immigration agency to enforce immigration laws, but only to determine eligibility for health programs.

You and your family may qualify for financial help:

<table>
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<tr>
<th>Household Size</th>
<th>If 2020 household income is less than...</th>
<th>If 2020 household income is between...</th>
</tr>
</thead>
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<td>1</td>
<td>$17,609</td>
<td>$17,609 - $49,960</td>
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<tr>
<td>2</td>
<td>$23,792</td>
<td>$23,792 - $67,640</td>
</tr>
<tr>
<td>3</td>
<td>$29,974</td>
<td>$29,974 - $85,320</td>
</tr>
<tr>
<td>4</td>
<td>$36,156</td>
<td>$36,156 - $103,000</td>
</tr>
<tr>
<td>5</td>
<td>$42,339</td>
<td>$42,339 - $120,680</td>
</tr>
<tr>
<td>6</td>
<td>$48,521</td>
<td>$48,521 - $138,360</td>
</tr>
</tbody>
</table>

Adults may be eligible for Medi-Cal
Children may be eligible for Medi-Cal
May be eligible for financial help to purchase insurance through Covered California

Enroll.

Three ways to enroll in Medi-Cal and Covered California:
www.coveredca.com
1(800) 300-1506
Find in-person help: www.coveredca.com/get-help/local/

Get Care.

- Find a primary care doctor in your network.
- Schedule an annual checkup for you and your family.
- Make sure to take your child to the dentist.
- Pay your monthly premium if your plan requires it.

Renew.

- Medi-Cal must be renewed every year. If you receive a renewal notice, complete and return. You can also renew online or by phone. For help, contact your local Medi-Cal office.
- Health plans through Covered California must be renewed every year. Renewal information will be mailed at the end of the year, or contact Covered California at: 1 (800) 300-1506.

For more information go to:
www.allinforhealth.org
July 2020
La pandemia de COVID-19 ha dejado en claro que la salud de cada uno de nosotros está profundamente interconectada con la de cada californiano. La actual emergencia de salud pública ha enfatizado la importancia de tener una cobertura de atención médica accesible y redes de seguridad bien financiadas disponibles para nuestras comunidades más vulnerables.

### Sus Opciones de Cobertura de Salud

**Medi-Cal:**
- Los niños—sin importar su estatus migratorio—niños de crianza, mujeres embarazadas y personas que estén legalmente en el país—incluyendo aquellos que tengan DACA—pueden ser elegibles para Medi-Cal de bajo costo o sin costo alguno.
- Medi-Cal proporciona vacunas, visitas al doctor de prevención, especialista, ocultista y servicios dentales para niños y jóvenes gratis o a bajo costo.
- Inscripción al programa de Medi-Cal está disponible todo el año.
- Durante COVID-19, los planes de Medi-Cal comenzaron a ofrecer más servicios utilizando telemedicina. Pregúntele a su proveedor sobre cómo acceder a la atención por video o teléfono.

**Covered California:**
- Covered California es donde los residentes legales de California pueden comparar planes de salud de alta calidad y elegir el que les conviene.
- Dependiendo de los ingresos y el tamaño de la familia, muchos Californianos también podrían calificar para obtener ayuda financiera.
- Inscríbase durante la Inscripción Abierta o en cualquier momento durante el año que a tenido un evento calificado de vida, como si perdió su trabajo o tuvo un bebé. Tienen 60 días del evento para inscribirse.

### Usted y su familia podrían calificar para asistencia financiera:

<table>
<thead>
<tr>
<th>Tamaño de la familia</th>
<th>Si el ingreso familiar en 2020 es menos de...</th>
<th>Si el ingreso familiar en 2020 es entre...</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$17,609 - $33,942</td>
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<td>4</td>
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</tr>
<tr>
<td>6</td>
<td>$48,521 - $138,360</td>
<td></td>
</tr>
</tbody>
</table>

| Adults podrían calificar para Medi-Cal | Niños podrían calificar para Medi-Cal | Podría calificar para asistencia financiera en la compra de un seguro a través de Covered California |

### Tres maneras para inscribirse con Medi-Cal y Covered California:

- [www.coveredca.com/espanol/](http://www.coveredca.com/espanol/)
- 1(800) 300-0213

### Cuide Su Salud.

- Elija su doctor de su red médica.
- Haga sus citas anuales con su doctor para usted y su familia.
- Asegúrese de llevar a su hijo(s) al dentista.
- Si su plan lo requiere, haga su pago mensual.

### Renueva Su Cobertura.

- Medi-Cal tiene que ser renovada cada año. Si recibe un aviso de renovación, se debe completar y devolver. También puede renovar en línea o por teléfono. Para obtener ayuda, póngase en contacto con su oficina local de Medi-Cal.
- Los planes de salud a través de Covered California se deben renovar cada año. La información para renovar se le enviará a finales de año o contacte a Covered California al 1 (800) 300-0213.
Checklist for Parents

Parents, you can help protect your family and others from COVID-19 by practicing and promoting everyday healthy habits and making sure that when your students leave for school they are healthy.

Things to check for daily, prior to sending your child to school or other school activities:

- Does your child have a temperature of 100.4 degrees or higher?
- Does your child have a cough, shortness of breath or difficulty breathing?
- Does your child have a sore throat?
- Does your child have muscle pain, is unusually tired, or low activity level?
- Does your child have a new loss of taste or smell?
- Does your child have any other signs of a new illness unrelated to a preexisting conditions such as allergies?
- Has your child been exposed to anyone who has the above symptoms or is self-isolating due to their exposure to the Coronavirus?

If you answer yes to any of the above statements, please keep your child home from school and follow up as needed with medical professionals. Thank you parents for your support in promoting a healthy environment for our students to learn and grow.

Things to check for daily, prior to leaving home:
Lista de verificación para padres

*Padres, pueden ayudar a proteger a su familia y a otras personas de COVID-19 practicando y promoviendo hábitos saludables cotidianos y asegurándose de que cuando sus estudiantes salgan a la escuela estén sanos.*

Cosas que debe verificar diariamente, antes de enviar a su hijo a la escuela u otras actividades escolares:

- ¿Tiene su hijo una temperatura de 100.4 grados o más?

- ¿Tiene su hijo tos, dificultad para respirar o dificultad para respirar?

- ¿Tiene su hijo dolor de garganta?

- ¿Tiene su hijo dolor muscular, está inusualmente cansado o tiene un bajo nivel de actividad?

- ¿Su hijo tiene una nueva pérdida de sabor u olor?

- ¿Tiene su hijo algún otro signo de una nueva enfermedad no relacionada con afecciones preexistentes, como alergias?

- ¿Ha estado expuesto su hijo a alguien que tiene los síntomas anteriores o se está autoaislado debido a su exposición al coronavirus?

Si responde afirmativamente a cualquiera de las declaraciones anteriores, mantenga a su hijo en casa fuera de la escuela y haga un seguimiento según sea necesario con profesionales médicos.

Gracias a los padres por su apoyo en la promoción de un ambiente saludable para que nuestros estudiantes aprendan y crezcan.
AUSD Student Chromebook Contract - Grades 7-12

When using your Chromebook,

- The Chromebook may only be used to access websites and files that apply to your classroom learning. It should not be used for non-school activities like personal messaging or games.
- You must follow all directions given by your teacher or other staff members about when you may have your Chromebook out, turned on, and open. You must also follow their directions about which files and apps you may have open.
- You should only share files or email others when you have your teacher’s permission.
- When listening to directions, your headphones should be off.
- When carrying the Chromebook, close it, use two hands, and hold it like you love it, hugging it close to your body. Purchasing a sleeve for the Chromebook is suggested for protection.
- You may not take pictures or videos of anyone at school and share them.
- You must follow all class, school, and district rules, including the District Responsible Use Policy.
- All activities while using your chromebook is monitored. Inappropriate activities or activities of concern will be reported to the School Principal.

Having your own Chromebook to use is a privilege. If you do not follow class, school, or district rules, you will lose Chromebook privileges and receive other consequences appropriate to the situation and at the discretion of the teacher and principal.

Student Signature: _______________________________

Student Printed Name: ___________________________

Student ID: ____________________________________
Contrato de Chromebook para estudiantes de AUSD - Grados 7-12

Cuando usas tu Chromebook,

- El Chromebook solo se puede usar para acceder a sitios web y archivos que se apliquen al aprendizaje en la clase. No debe usarse para actividades no escolares como mensajes personales o juegos.
- Debe seguir todas las instrucciones dadas por su maestro u otro miembro del personal sobre cuándo puede tener su Chromebook, encendido y abierto. También debe seguir sus instrucciones sobre qué archivos y aplicaciones puede tener abiertos.
- Solo debe compartir archivos o enviar correos electrónicos a otros cuando tenga el permiso de su maestro.
- Cuando escuche las instrucciones, sus auriculares deberían estar apagados.
- Cuando lleve el Chromebook, ciérrelo, use las dos manos y sosténgalo como lo quiere, abrácelo cerca de su cuerpo. La compra de una manga para el Chromebook se sugiere como protección.
- No puede tomar fotos o videos de nadie en la escuela y compartirlos.
- Debe seguir todas las reglas de la clase, la escuela y el distrito, incluida la Política de uso responsable del distrito.
- Se monitorean todas las actividades mientras usa su Chromebook. Actividades inapropiadas o actividades de preocupación serán reportadas al director de la escuela.
- Tener su propio Chromebook para usar es un privilegio. Si no sigues las reglas de la clase, la escuela o el distrito, perderás los privilegios de Chromebook y recibirás otras consecuencias apropiadas a la situación y a discreción del maestro y el director.

Tener su propio Chromebook para usar es un privilegio. Si no sigues las reglas de la clase, la escuela o el distrito, perderás los privilegios de Chromebook y recibirás otras consecuencias apropiadas a la situación y a discreción del maestro y el director.

Frma del alumno: ____________________________

Nombre del alumno: ____________________________

Identificación del alumno: ____________________________
Atascadero Unified School District is pleased to announce our 1 to 1/BYOD Chromebook program. For the school year, each student will be given a Chromebook to work collaboratively in real time, complete homework assignments, create digital documents, and conduct research. The students will be allowed to take their Chromebook home each night and bring it back to school each day with a full charge. Internet Access is helpful but is not required to use the Chromebook at home. **If you student has their own chromebook and you want to allow them to bring theirs to school that is allowed.**

Your son/daughter will be issued a Chromebook to improve and personalize his/her education this year. It is essential that the following guidelines be followed to ensure the safe, efficient, and ethical operation of this device.

The student will be issued ONE Chromebook and ONE power cord. The Chromebook and power cord are on loan and remain the property of the Atascadero Unified School District. If the device is damaged the student will be required to fill out a Chromebook Service request form and report the damage to the Library as soon as possible. If the Chromebook is stolen, a police report must be filed by the parent/guardian within 24 hours of discovery of the theft. The theft must be reported to the School office as soon as possible and a copy of the police report needs to be turned into the school office. The student will not be issued another Chromebook until this issue has been resolved. A daily checkout only device will be available during this time.

SYSCloud and BARK will be used to monitor Chromebook Internet activities. Both Systems provide advanced filtering and monitoring for our Chromebooks both at school and when away from the district while the Chromebook is in use. SYSCloud is also FERPA compliant and will help our schools meet CIPA and FERPA (student safety and privacy) requirements. District Administrators will be notified if a page that a student is attempting to access is deemed inappropriate or a Student’s safety may be in question.

- I will supervise my child’s use of the Chromebook at home.
- I will discuss our family’s values and expectations regarding the use of the Internet and email at home and I will supervise my Child’s use of the Internet and email.
- I will not attempt to repair the Chromebook, nor will I attempt to clean it with anything other than a soft, dry cloth.
- I will report to the school any problems with the Chromebook.
- I will not attempt to install or delete any apps from the Chromebook.
- I will not allow my child to use the Chromebook around food or drink.
- I will remind my child to recharge their chromebook nightly (if taken home) and to take it to school daily.
- I agree to make sure that the Chromebook is returned to school when requested at the end of the school year, or upon my child’s withdrawal from the school.
- I understand that no filtering/monitoring system is 100% accurate.
Parent Chromebook Guidelines and Procedures
Grades 7 - 12

Please return this page to your Child’s School
Without this signed page your student will not be able to take his/her chromebook home.

________________________________________________________________________

Student Name:____________________________________________________________________

Parent Name:____________________________________________________________________

Parent Signature:_________________________________________________________________

Date:__________________________________________________________________________
Guías y Procedimientos de Chromebook Para Padres
Grados 7 a 12

El Distrito Escolar Unificado de Atascadero se complace en anunciar nuestro programa de Chromebook BYOD 1 a 1. Para el año escolar, cada estudiante recibirá una Chromebook para trabajar en colaboración en tiempo real, completar tareas, crear documentos digitales y realizar investigaciones. Los estudiantes podrán llevar su Chromebook a su casa todas las noches y llevarlo a la escuela todos los días con un cargo total. El acceso a Internet es útil, pero no es obligatorio utilizar el Chromebook en casa. **Si su estudiante tiene su propio Chromebook y quiere permitirle traer el suyo a la escuela, está permitido.**

Su hijo / hija recibirá un Chromebook para mejorar y personalizar su educación este año. Es esencial que se sigan las siguientes pautas para garantizar el funcionamiento seguro, eficiente y ético de este dispositivo.

El estudiante recibirá un Chromebook y UN cable de alimentación. El Chromebook y el cable de alimentación están en préstamo y siguen siendo propiedad del Distrito Escolar Unificado de Atascadero. Si el dispositivo está dañado, se le pedirá al alumno que complete un formulario de solicitud del Servicio Chromebook e informe el daño a la Biblioteca lo antes posible. Si se roba el Chromebook, el padre / tutor debe presentar un informe policial dentro de las 24 horas posteriores al descubrimiento del robo. El robo debe ser reportado a la oficina de la escuela tan pronto como sea posible y una copia del informe de la policía debe ser entregada a la oficina de la escuela. Al estudiante no se le enviará otra Chromebook hasta que se haya resuelto este problema. Un dispositivo de pago diario solo estará disponible durante este tiempo.

SYSCloud y BARK se usarán para controlar las actividades de Chromebook en Internet. Ambos sistemas proporcionan filtrado y monitoreo avanzados para nuestros Chromebooks tanto en la escuela como fuera del distrito mientras el Chromebook está en uso. SYSCloud también cumple con FERPA y ayudará a nuestras escuelas a cumplir con los requisitos de CIPA y FERPA (seguridad y privacidad de los estudiantes). Los administradores del distrito serán notificados si una página a la que el estudiante intenta acceder se considera inapropiada o si la seguridad del alumno puede estar en duda.

- Supervisaré el uso que mi hijo hace del Chromebook en casa.
- Discutiré los valores y las expectativas de nuestra familia con respecto al uso de Internet y el correo electrónico en el hogar y supervisaré el uso de Internet y correo electrónico de mi hijo.
- No intentaré reparar el Chromebook, ni intentaré limpiarlo con otra cosa que no sea un paño suave y seco.
- Informaré a la escuela de cualquier problema con el Chromebook.
- No intentaré instalar o eliminar ninguna aplicación del Chromebook.
- No permitiré que mi hijo use el Chromebook con comida o bebida.
- Le recordaré a mi hijo que recargue su Chromebook todas las noches (si es llevado a casa) y que lo lleve a la escuela todos los días.
- Acepto de asegurarme de que el Chromebook se devuelva a la escuela cuando se solicite al final del año escolar o cuando mi hijo se retire de la escuela.
- Entiendo que ningún sistema de filtrado / monitoreo es 100% exacto.
Guías y Procedimientos de Chromebook Para Padres
Grados 7 a 12

Por favor devuelva esta página a la escuela de su hijo
Sin esta página firmada, su alumno no podrá llevarse su Chromebook a casa.

Nombre del alumno: ____________________________

Nombre del padre: ____________________________

Firma de los padres: ____________________________

Fecha: ____________________________
Active Military Parent or Guardian
Is either parent/guardian on active duty in the U. S. armed forces (Army, Navy, Air Force, Marine Corps or Coast Guard) or on full-time National Guard duty?

☐ Yes, Active Duty Military (Army, Navy, Air Force, Marine Corps, or Coast Guard)
☐ Yes, Full-Time National Guard
☐ No

Please select one of the following options to complete the residence survey:
☐ Living in a single-home residence that is permanent
☐ Staying in a shelter (family shelter, domestic violence shelter, youth shelter) or Federal Emergency Management Agency (FEMA) trailer
☐ Sharing housing with other(s) due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason
☐ Living in a car, park, campground, abandoned building, or other inadequate accommodations (i.e. lack of water, electricity, or heat)
☐ Temporarily living in a motel or hotel due to loss of housing, economic hardship, natural disaster, or similar reason
☐ I am a student under the age of 18 and living apart from parent(s) or guardian

Please list the full (legal) name of each student below and the corresponding school site. Also include the names of siblings who have not entered school.

<table>
<thead>
<tr>
<th>Student</th>
<th>Birth Date</th>
<th>School</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

The undersigned parent/guardian certifies that the information provided above is correct and accurate.

Name of Parent / Guardian: ______________________________ (Circle one)

Address / Current Location: ______________________________

Phone: __________________ Emergency Contact: __________________

_________________________________________  ________________________
Signature of Parent / Guardian                 Date
Padres militar activo o Guardián
Es uno de los padres / tutores en servicio activo en las fuerzas armadas U. S. (Ejército, Armada, Fuerza Aérea, Infantería de Marina o Guardacostas) o en el servicio de tiempo completo de la Guardia Nacional?

☐ Sí, Servicio Activo Militar (Ejército, Armada, Fuerza Aérea, Infantería de Marina o Guardacostas)
☐ Sí, Guardia Nacional a tiempo completo
☐ No

Por favor, seleccione una de las siguientes opciones para completar la encuesta de residencia:

☐ VIVE EN UN REFUGIO DE EMERGENCIA, REFUGIOS DE TRANSICIÓN, O UN REFUGIO DE VIOLENCIA DOMÉSTICA. Una residencia temporal prevista personas sin hogar que de otro modo dormirán en la calle o una residencia temporal prevista a las personas en situaciones de emergencia. Esto es aplicable a los niños que están en residencias temporales en espera de la colocación permanente en hogares de guarda también.

☐ VIVO EN UN MOTEL / HOTEL DEBIDO A DIFICULTADES FINANCIERAS O COLOCACIÓN DE EMERGENCIA. Una residencia temporal para personas sin hogar suelen exigir el pago o vales para alojamiento y servicios sobre una base diaria, semanal o mensual.

☐ VIVO CON AMIGOS Y FAMILIARES POR NO PODER ACCEDER A UNA VIVIENDA. Una residencia temporal en una familia sin hogar está compartiendo la vivienda con otras personas debido a la pérdida de vivienda, problemas económicos, o por otras razones similares.

☐ A FALTA FIJA, REGULAR NOCHE RESIDENCIA DEBIDO A DIFICULTADES FINANCIERAS, O UN JOVEN NO ACOMPAÑADO (EN VIVO POR MI CUENTA). Un tipo de residencia para las personas sin hogar que no es para la habitación humana, tales como automóviles, parques, aceras, edificios abandonados, campings, parques de casas rodantes RV, estaciones de autobuses y trenes, o las personas abandonadas en el hospital (en la calle). Una regla de oro sería para ver la vivienda como comparable a la de un automóvil en el que los refugios, pero no es una vivienda adecuada.

☐ NINGUNA DE LAS ANTERIORES
Puede seleccionar esta opción si ninguna de las situaciones familiares anteriores se corresponde con este estudiante.

Por favor, indique el nombre completo (legal) de cada estudiante a continuación y el sitio de la escuela correspondiente. También incluya los nombres de los hermanos que no han entrado en la escuela.

<table>
<thead>
<tr>
<th>Estudiante</th>
<th>Fecha de nacimiento</th>
<th>Escuela</th>
<th>Grado</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Nombre del Padre / Guardián: ___________________________ (Encierre en un círculo)

Dirección/ Lugar actual: ______________________________

Teléfono: ___________________________ Contacto de Emergencia: ___________________________

Firma del Padre / Guardián: ___________________________ Fecha: ___________________________
You must bring this signed form to your school office to complete the annual required data updates, permissions and acknowledgments for your student. Documentation verified through the Parent Portal is available for download in the Parent Portal and on our district website at www.atasusd.org under the tab For Parents.

**Annual Data Confirmation**

- Family Information
- Student Information
- Emergency Contact Information
- Medical Information
- Military Release of Information
- Annual Notification To Parents
- Responsible Use Agreement for Students
- Attendance and Extra/Co-curricular Policy (HS Only)

In case of emergency: I authorize school personnel to apply first aid, medical care, or secure transport by ambulance to the nearest medical facility for my student.

Your signatures confirm that the information you updated, approved and confirmed on the Parent Portal is accurate to the best of your knowledge and that you have reviewed, understand, and agree to abide by the policies of the Atascadero Unified School District.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Student Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother/Guardian Name</td>
<td>Mother/Guardian Signature</td>
<td>Date</td>
</tr>
<tr>
<td>Father/Guardian Name</td>
<td>Father/Guardian Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>

To complete the data confirmation process, this form must be returned to the school site.

Rev 06/2019
Debe traer este formulario firmado a su oficina de la escuela para completar las actualizaciones de los datos requeridos anuales, permisos y reconocimientos para su estudiante. Documentación será verificado a través del Portal de Padres está disponible para su descarga en el Portal de Padres y en nuestra página de Web del distrito www.atascadero.org bajo la sección para los padres.

### Confirmación Anual de Datos

<table>
<thead>
<tr>
<th>Información familiar</th>
<th>Autorización para dar información a la fuerzas militares</th>
</tr>
</thead>
<tbody>
<tr>
<td>Información del estudiante</td>
<td>La notificación anual a los padres</td>
</tr>
<tr>
<td>Información de Contacto en caso de Emergencia</td>
<td>Acuerdo de Uso Responsable de Estudiantes</td>
</tr>
<tr>
<td>Información médica</td>
<td>Asistencia y Política / Co-curricular extra (Sólo AHS)</td>
</tr>
</tbody>
</table>

En caso de emergencia: Autorizo el personal escolar para aplicar los primeros auxilios, asistencia médica, o un transporte seguro en ambulancia al centro médico más cercano para mi estudiante.

Sus firmas abajo confirman que la información está al día, ha sido corregida, y usted a confirmado en el Portal de Padres que esta exacta o a lo mejor de sus conocimientos y de que ha revisado, entendido y aceptado cumplir con las políticas del distrito escolar unificado de Atascadero.

<table>
<thead>
<tr>
<th>Nombre del estudiante</th>
<th>Estudiante Firma</th>
<th>Fecha</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Nombre de la madre / tutor</th>
<th>Madre / Tutor Firma</th>
<th>Fecha</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Nombre del padre / tutor</th>
<th>Padre / Guardián Firma</th>
<th>Fecha</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Para completar el proceso de confirmación de datos, este formulario debe ser devuelto a la escuela.
Consent to Bill California Medi-Cal/Consent to Release Information for Health Related Services

Dear Parent/Guardian,

Through the Medi-Cal Local Education Billing Option, this district may submit claims to Medi-Cal for covered health services provided to Medi-Cal eligible students. The Medi-Cal LEA program is a way for schools to receive federal reimbursements for the health services provided to its students. These are pertinent facts you should know:

1. You have the option to refuse your consent.
2. Information about your child and family is confidential.
3. Your rights are preserved under Title 34 code of Federal Regulations 300.154, Family Education Privacy Act of 1974, Title 20 of the United States code, Section 1232(g), Title 34 Code of Federal Regulations, Section 99.
4. This consent will remain in effect through the length of your student’s attendance at this district unless you choose to withdraw consent at any time.
5. Your consent is voluntary. It will not result in denial or limitation of school based health services. If you refuse to consent for this district to access Medi-Cal to pay for health related services, this district still must ensure that all required services are provided at no cost to you.
6. The LEA Medi-Cal program will not affect your student’s personal Medi-Cal coverage, such as share of cost.

Please mark, sign, and date the appropriate statement below and return this letter to your district.

I give permission for this district to release my child’s personal information to Medi-Cal and the billing agent, which will include his/her name, date of birth, type of service, date of service, and the name of the health provider. This information may be disclosed for the sole purpose of processing claims to Medi-Cal for reimbursement for these health services.

I do not give permission for this district to release my child’s personal information to Medi-Cal and the billing agent for the sole purpose of processing claims to Medi-Cal for reimbursement of health services.

Child’s Full Name:

Parent/Guardian Name (printed):

Parent/Guardian Signature:

Date of Signature:

DEDICATED TO STUDENTS – COMMITTED TO EXCELLENCE

sjp/2017
Hoja de Información Confidencial de AseguranzMedica

Esta forma debe regresarse a la escuela junto con la Tarjeta de emergencia

Nombre del estudiante: ___________________________ Escuela: ___________________________

Fecha de Nacimiento: ____________________________

Nombre(s) de Padres(s)/Guardianes(s): ____________________________

Dirección: ____________________________ Ciudad: ____________________________ Estado: _____ Z.p.: _____

Tiene su hijo aseguranza de cobertura médica? [ ] Privada [ ] Medi-Cal [ ] Ninguna

Información de aseguranci

Nombre de la persona asegurada: ____________________________ Tel.del trab.: ____________________________

Lugar de trabajo: ____________________________

Nombre de la cia. aseguradora: ____________________________

Dirección: ____________________________ Ciudad: ____________________________ Estado: _____ Z.p.: _____

Número de grupo: ____________________________ Número de póliza: ____________________________

Respuesta a los cargos de la asegurancia por Atascadero Unified School District (marque solo uno)

[ ] Doy mi consentimiento para presentar cargos y autorizo al AUSD a dar a mi agente de seguro la información necesaria para presentar cargos o requerir pagos de beneficios de asistencia a Medi-Cal.

[ ] No doy el consentimiento para presentar cargos a mi agente de seguro.

Firma del Padre/Guardián ____________________________ Fecha ____________________________

FACTURACION DE MEDI-CAL: Nuestro distrito escolar ha hecho un acuerdo con el Departamento de educación de California y el Departamento de servicios de salud, que nos permitirá recaudar fondos federales para algunos de los servicios de salud que proveemos en la escuela y cobramos a Medi-Cal. Para poder hacer esto tenemos que ofrecer también la opción de cobrar a la aseguranza privada. No cambiarán los servicios que actualmente proveemos en la escuela. No se le cobrará a los padres por ningún
ATASCADERO UNIFIED SCHOOL DISTRICT
2020-2021 ~ Parent/Guardian/Student Acknowledgment of the Annual Notification to Parent/Guardian/Student Booklet

This booklet is located on the District Website, www.atasusd.org. If you would like to request a printed copy please contact your school site secretary or the District Office at 462-4200.

Section 48982 of the Education Code requires that the parent or guardian acknowledge that he/she has received, read, and understands the information contained in this annual publication. Please share the information in this booklet with your student.

Please sign below and return this form with your student to school BY FRIDAY, August 28, 2020 (or at the time of the student’s school registration).

Your signature does not indicate that consent to participate in any particular program has either been given or withheld. Your cooperation is appreciated.

_________________________________   ________________________________
STUDENT NAME                        SCHOOL

_________________________________   ________________________________
Parent / Guardian Signature          Date
DISTrito escolar unificado de Atascadero

2020 -2021 ~ Nota de Recibo para
Padre/Guardián/Estudiante de la
Notificación Anual para Padre/Guardián/Estudiante

La sección 48982 del Código de Educación requiere que el padre o guardián reconozca que el/ella ha recibido, leído, y entendido el Folleto de Notificación Anual para Padres/Guardiánes.

Este folleto se encuentra en la pagina web del distrito, www.atasusd.org. Si usted desea solicitar una copia impresa, por favor pongase en contacto con la secretaria de su escuela o con la oficina del distrito al 462-4200.

Por favor firme en la línea de abajo y devuelva esta forma a la escuela de su estudiante antes del viernes 28 de agosto 2020.

Su firma no indica su consentimiento a participar en ningún programa particular. Su cooperación es apreciada.

NOMBRE DEL ESTUDIANTE

ESCUELA

Firma del Padre/Guardián

Fecha
# Greyhound Physical Education Gear

## Order Form

<table>
<thead>
<tr>
<th>ITEM</th>
<th>SIZES</th>
<th>PRICE</th>
<th>QUANTITY</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>PE T-Shirt</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td>$8.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Hoodie</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td>$16.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Sweat Pants</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td>$16.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Short</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td>$12.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADD $1.75 FOR XXL / $2.00 FOR XXXL SIZES

### Short / TEE / Hoodie Package

<table>
<thead>
<tr>
<th>ITEM</th>
<th>SIZES</th>
<th>PRICE</th>
<th>QUANTITY</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>PE T-Shirt</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Hoodie</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td>$30.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Short</td>
<td>S / M / L / XL / XXL / 3XL</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADD $1.75 FOR XXL / $2.00 FOR XXXL SIZES

---

**NOTE:**

Please bring order form with payment to pick up.

All checks to be made to Atascadero High School.

---

**# of Items:**

**Total Cost:**
Because of COVID-19, WE GAVE AWAY CAP & GOWN PORTRAIT PACKAGES back in June to the Class of 2020 and we’re at it again for YOU!

Class of 2021 we are WAVING OUR SENIOR PORTRAIT SESSION FEE to give you a “normal” senior year. Waving the session fee is about a $100 discount!! You pay a small deposit when you make your appointment, which will be applied to your order during your preview session (use coupon code COVID-SPECIAL). There is no obligation to buy anything. If for any reason you’re not happy with your portraits we will give you back your deposit.

You’ve seen our work hanging on the wall at El Camino and Traffic Way and you can visit our website to see more. While you’re on our website make your appointment though the link at the top of our web page. It’s super easy!

Call Dennis TODAY!
(805) 406-6300
www.studio101west.com
info@studio101west.com

NEW STUDIO ADDRESS
(just around the corner from DK Donuts)
8793 Plata Lane, Suite D
Atascadero, CA 93422

Book your senior shoot before August 31st and get your session fee for FREE! (Use coupon code COVID-SPECIAL online or by phone when you make your appointment)

Studio 101 West is an approved photographer for San Luis Obispo County High Schools including, but not limited to: San Luis Obispo, Templeton, Paso Robles, and Atascadero.
Senior Portrait Guidelines & Submission Info

The Atascadero High School Yearbook Staff has developed the following guidelines for Senior Portraits to be included in the Yearbook. The High School Management Team supports this policy. The Yearbook Staff reserves the right to refuse acceptance of any photo that does not adhere to the following guidelines. Thank you for your cooperation.

Not considered suitable for publication are, but not limited to the following:

- Others in the picture with the Senior: no children, friends, groups of people.
- Attire, which is not neat, clean and non-disruptive.
- Clothing which denotes affiliation with a group or gang that advocates disruptive behavior or illegal activities.
- Clothing which does not maintain privacy.
- Weapons of any kind.
- Anything that promotes, advertises, implies or suggests the use of drugs, alcohol, tobacco, violence or any illegal activity.
- Anything that is inappropriate, obscene or lewd.
- Anything worn or displayed that is inflammatory in regards to race, religion, heritage or politics.

Seniors and/or their parents may choose to have portraits taken, as they desire; however, the above specifications must be followed for the picture to be included in the yearbook. Please review this list and keep these guidelines in mind when you schedule Senior pictures. Your cooperation is requested.

Portrait Guidelines

- Photo must be Vertical, not horizontal.
- Digital photos are required and must be high quality/resolution.
- Important: All photos will be cropped slightly, therefore have the photographer “back-off” a bit to avoid having important detail cropped.

All Portraits must be received no later than FRIDAY, October 2nd.

*DO NOT EMAIL PHOTOS - Use the google form emailed to you.

*PLEASE SEE ATTACHED OFFER FROM STUDIO WEST FOR WAIVED SESSION FEES FOR ALL SENIORS*
Anote TODOS los miembros del hogar que son bebés, niños o estudiantes hasta el grado 12 (si necesita más espacio para más nombres, adjunte otra hoja de papel)

<table>
<thead>
<tr>
<th>Primer nombre del menor</th>
<th>Inicial</th>
<th>Apellido del menor</th>
<th>¿Estudiante?</th>
<th>¿Sí?</th>
<th>No</th>
</tr>
</thead>
</table>

¿Algún miembro del hogar (incluyéndolo a usted) participa actualmente en uno o más de los siguientes programas de asistencia?

- CalFresh
- CalWORKs
- FDPIR

Núm. de caso:

No solo un número de caso en este paso

Declare los ingresos de TODOS los miembros del hogar (salte este paso si respondió que ‘Sí’ en el PASO 2)

A. Ingresos de los menores

<table>
<thead>
<tr>
<th>Nombre del menor</th>
<th>Ingresos de trabajo</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

B. Todos los miembros adultos del hogar (incluyéndolo a usted)

| Nombre de los miembros adultos del hogar (nombre y | Ingresos de trabajo |
|------------------------------------------------|
| $                                               |
| $                                               |
| $                                               |

Total de miembros del hogar (Del PASO 1 y PASO 3)

Últimos cuatro dígitos del número de seguro social (NECESARIO)

Información de contacto y firma del adulto

Certificación: "Certifico (prometo) que toda la información en esta solicitud es verdadera y que he declarado todos los ingresos. Entiendo que esta información se proporciona en relación con la recepción de fondos federales y que los funcionarios escolares podrán verificar la información. Entiendo que si do yo intencionalmente información falsa, mis hijos podrían perder los beneficios alimentarios y yo podría ser enjuiciado bajo las leyes estatales y federales pertinentes."

Dirección de correo: 

No. de departamento: 

Ciudad: 

Estado: 

Código postal: 

Teléfono o correo electrónico: 

Nombre en letra de moldes del adulto que llenó la solicitud: 

Firma (NECESARIO) del adulto que llenó esta Fórmula:

Opcional: Identidad étnica y racial de los menores

El USDA y el CDE son proveedores y empleadores que ofrecen igualdad de oportunidades.

Estamos obligados a pedir esta información sobre la raza y la identidad étnica de sus hijos. Esta información es importante y nos ayuda a asegurarnos de que estamos sirviendo de manera efectiva a nuestra comunidad. Responder esta sección es opcional y no afecta la cumplimiento de los requisitos de sus hijos para recibir comidas y reducción. Identidad étnica (marca una): ☐Asian ☐Indígena americano o nativo de Alaska ☐Negro o afroestadounidense ☐Nativo de Hawai o otra isla del Pacífico ☐Blanco

Identidad racial (marca una): ☐Hispano o latino ☐No hispano o latino ☐Blanco

NO LLENE LA SIGUIENTE INFORMACIÓN. ES PARA USO DE LA ESCUELA SOLAMENTE.

Total Household Members (From STEP 1 and STEP 3): 

Total Household Income: 

<table>
<thead>
<tr>
<th>Weekly</th>
<th>Bi-Weekly</th>
<th>2xMonthly</th>
<th>Monthly</th>
</tr>
</thead>
</table>

Approved as: 

☐Free 

☐Reduced-Price 

☐Denied 

Reason: 

Verified as: 

☐Homeless 

☐Migrant 

☐Foster 

☐Runaway 

☐Snap/Tanf
2019-2020 Atascadero Unified School District Application for Free and Reduced-Price Meals

California Education Code Section 49557(a): "Applications for free and reduced-price meals may be submitted at any time during a school day. Children participating in the National School Lunch Program will not be overly identified by the use of special tokens, special tickets, special serving lines, separate entrances, separate dining areas, or by any other means."

**STEP 1** List ALL Household Members who are infants, children, and students up to and including grade 12 (if more space is required for additional names, attach another sheet of paper)

**Definition of Household Member:** "Anyone who is living with you and shares income and expenses, even if not related."
- Children in foster care, Head Start, or Kin-GAP and children who meet the definition of homeless, migrant, or runaway are eligible for free meals. Read How to Apply for Free and Reduced-Price School Meals for more information.

**STEP 2** Do any Household Members (including yourself) currently participate in one or more of the following assistance programs?

- If YES > Check the applicable program box, enter your case number (REQUIRED) then skip to STEP 4
- If NO > Complete STEP 3

**STEP 3** Report Income for ALL Household Members (Skip this step if you answered ‘Yes’ to STEP 2)

**A. Child Income**

Sometimes children in the household earn income. Please enter the total income earned by all children listed in STEP 1 here.

<table>
<thead>
<tr>
<th>Name of Adult Household Members (First and Last)</th>
<th>Earnings from Work</th>
<th>How often?</th>
<th>Public Assistance/Child Support/Alimony</th>
<th>How often?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**B. All Adult Household Members (including yourself)**

List all household members not listed in STEP 1 (including yourself) even if they do not receive income. For each household member listed, if they receive income, report total income for each source in whole dollars only. If they do not receive income from any source, write ‘0’. If you enter ‘0’ or leave any fields blank, you are certifying (promising) that there is no income to report.

**STEP 4** Contact Information and Adult Signature

Certification: "I certify (promise) that all information on this Application is true and that all income is reported. I understand that this information is given in connection with the receipt of federal funds, and that school officials may verify the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable state and federal laws."

Mailing Address:  
Apt #  City  State  Zip  Daytime Phone and/or E-mail  Print Name of Adult Completing this Form

Signature (REQUIRED) of Adult Completing this Form

**OPTIONAL** Children's Racial and Ethnic Identities

The USDA and the CDE are equal opportunity providers and employers. We are required to ask for information about your children’s race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children’s eligibility for free or reduced-price meals.

Ethnicity (check one):  
- Hispanic or Latino  
- Not Hispanic or Latino  

Race (check one or more):  
- Asian  
- American Indian or Alaska Native  
- Black or African American  
- Native Hawaiian or Other Pacific Islander  

DO NOT COMPLETE THE INFORMATION BELOW. IT IS FOR SCHOOL USE ONLY.
Atascadero Unified School District
Technology Services
Student Responsible Use Agreement

Student Account Agreement

Print Student Name: ___________________________ Grade: ______

Student School: ___________________________ Birthdate: ______

I have read the Atascadero Unified School District Responsible Use Agreement. I agree to follow the rules contained in this Agreement. I understand that if I violate the rules, my account can be terminated and I may face other disciplinary measures.

Student Signature: ___________________________ Date: __________

Parent or Guardian Section

I have read the District Responsible Use Policy. I hereby release the District, its personnel, and any institutions with which it is affiliated, from any and all claims or damages of any kind whatsoever arising from my child’s use of, or inability to use, the District system, including, but not limited to, claims that may arise from the unauthorized use of the system to offer, provide, or purchase products or services. I will assist in instructing my child regarding restrictions against accessing inappropriate material. I will emphasize to my child the importance of following the rules for personal safety. I give permission for my child to access Atascadero Unified School District’s Technology Access and certify that the information on this form is correct.

Parent/Guardian Signature: ______________________________________

Print Parent/Guardian Name: ______________________________________

Date: ________________ Phone Number: ____________________________

This file will be filed in the Student’s Cumulative Folder.
Solo para Estudiantes
*** Novenos y Nuevos ***

Distrito Escolar Unificado de Atascadero
Servicios de Tecnología
Acuerdo para Uso Responsable para Estudiantes

Acuerdo de la Cuenta para Estudiante

Nombre del Estudiante: ___________________________ Grado: ______
Escuela: ___________________________ Fecha de Nacimiento: ______

He leído el Acuerdo de Uso Responsable del Distrito Escolar Unificado de Atascadero. Estoy de acuerdo con las reglas en este Acuerdo. Entiendo que si no sigo las reglas, mi cuenta puede ser terminada y puedo sufrir medidas disciplinarias.

Firma del Estudiante: ___________________________ Fecha: __________

Sección para Padre/Guardian

He leído el Acuerdo de Uso Responsable del Distrito. Por este medio libero al Distrito, su personal, y cualquier institución con las cuales puede estar afiliada, de cualquiera y todos los reclamos o daños de cualquier clase que ocurran del uso de mi hijo/hija, o inhabilidad de usar, el sistema del Distrito, incluyendo pero no limitado a, reclamos que puedan ocurrir por el uso no autorizado de sistema para ofrecer, proveer, o comprar productos o servicios. Yo asistiré en instruir a mi hijo/hija sobre las restricciones sobre el acceso de material no apropiado. Enfatizaré a mi hijo/hija la importancia de seguir las reglas para seguridad personal. Doy mi permiso para que mi hijo/hija pueda tener acceso a la Tecnología del Distrito Escolar Unificado de Atascadero y certifico que la información en esta forma es correcta.

Firma del Padre/Guardián: ___________________________

Nombre en Imprenta del Padre /Guardián: ___________________________

Fecha: ________________ Num. de teléfono: ________________

Esta forma estará en los archivos permanentes del estudiante.