



Student's Name \_\_\_\_\_

Date \_\_\_\_\_

Entering Grade \_\_\_\_\_

---

Walnut Hills High School  
Registration Documents

- A photocopy of SCPP Test Results Letter
- A photocopy of 2011-12 Report Card  
( first semester and (second semester if available)**
- Transcript for grades 10-12  
OGT Scores
- A photocopy of Immunization Record including current  
MMR dates
- A photocopy of Proof of Residence  
(current utility bill, etc.)
- A photocopy of Birth Certificate
- A photocopy of Custodial Agreement – if applicable
- Please be certain to put your E-Mail Address  
on Parent Page



☆ CINCINNATI PUBLIC SCHOOLS ☆

**STUDENT REGISTRATION INFORMATION**

School Year \_\_\_\_\_

Today's Date **1** \_\_\_\_\_

School Name \_\_\_\_\_

School Code \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Student**

*Please provide legal names.*

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Entering Grade Level \_\_\_\_\_

Gender (Check One)  Male  Female

Resident Address \_\_\_\_\_

Apartment \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Unl:  No  Yes

Student Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Birth Document Source \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (if issued)

Race/Ethnic Code (Check One)  Black  White  Hispanic  
 Asian/Pacific Islander  Multi-Racial  
 Native American

Birthplace (City,St) \_\_\_\_\_

Birthplace (Country) \_\_\_\_\_

Nationality \_\_\_\_\_

Nickname (If Any) \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Parent/Guardian Resident District if not CPS \_\_\_\_\_

Reason to enroll if not CPS resident \_\_\_\_\_

**(CPS Use)**

Student ID 

|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|

Entry Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Entry Code \_\_\_\_\_

Homeroom \_\_\_\_\_

**Enrollment Reason (Check One)**

- From out of state/out of country
- From Home School in OH
- From nonpublic school in OH
- From another OH public district/community
- Not in OH public/community since 2003
- 1st time in OH pub/comm school due to age
- Not newly enrolled in this district

**Emergency Contacts**

Name \_\_\_\_\_

Relation \_\_\_\_\_

Phone \_\_\_\_\_

Alt/Cell Ph \_\_\_\_\_

Name \_\_\_\_\_

Relation \_\_\_\_\_

Phone \_\_\_\_\_

Alt/Cell Ph \_\_\_\_\_

**Home Language**

What language does this student most frequently speak?(primary) \_\_\_\_\_

What language is most often spoken by adults at home? (home language) \_\_\_\_\_

What was this student's first language? (first language) \_\_\_\_\_

**Physician**

Name \_\_\_\_\_

Phone/Ext \_\_\_\_\_

**Prior Education Information**

(Begin with most recent including preschool)

**Years Attending**

**Previous Schools** \_\_\_\_\_ **Street Address (City, State & Country)** \_\_\_\_\_ **From - To** \_\_\_\_\_ **Grade(s)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date first enrolled in US schools \_\_\_\_/\_\_\_\_/\_\_\_\_ Has this student ever received ESL or Bilingual Services?  No  Yes

**Preschool Experience**

**Kindergarten Experience**

- at CPS PreSchool/Head Start
- at Non-CPS Head Start
- at a Full Day, Full Year Child Care
- at a Part-time Private PreSchool
- at a Family Child Care Home
- at Home
- Other

- ½ Day (1)
- All Day (2)

I understand that any inaccurate information provided about this student on each page of the Student Registration Information forms may result in a change of grade level, a change of class, or an immediate transfer/withdrawal from this school.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**CINCINNATI PUBLIC SCHOOLS**  
**STUDENT REGISTRATION INFORMATION**

Today's Date **2**

\_\_\_\_/\_\_\_\_/\_\_\_\_

Use additional pages as necessary.

Student Name \_\_\_\_\_

|  |  |                                     |  |
|--|--|-------------------------------------|--|
| <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Stepparent <input type="checkbox"/> @Fosterparent <input type="checkbox"/> Grandparent <input type="checkbox"/> Surrogate Parent <input type="checkbox"/> Other |  |                                     |  |
| Last Name _____  |  | Deceased?                           | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| First Name _____   |  | District of Residence _____         |  |
| Marital Status   | <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Widowed | District of Primary Residence _____ |  |
|  | <input type="checkbox"/> Separated <input type="checkbox"/> Divorced                                 | Resides With Student?               | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| <i>If you check Divorce or Separated, we require current legal documentation related to the children.</i>  |  |                                     |  |
| (*)Address _____   |  | Custodial Parent?                   | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| City _____   |  | Legal Guardian?                     | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| State _____  |  | Grandparent POA? (see #)            | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Zip Code _____   |  | Caregiver Authorization?            | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Phone Number _____   | Unl: <input type="checkbox"/> No <input type="checkbox"/> Yes  |                                     |  |
| Alt/Cell Phone _____   |  |                                     |  |
| Employer _____   |  |                                     |  |
| Email Address _____  |  | Federal Employee                    | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Work Address _____   |  | Migrant Worker                      | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Work Phone _____   |  | Mail if not Custodial Parent?       | <input type="checkbox"/> No <input type="checkbox"/> Yes |

|  |  |                                     |  |
|--|--|-------------------------------------|--|
| <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Stepparent <input type="checkbox"/> @Fosterparent <input type="checkbox"/> Grandparent <input type="checkbox"/> Surrogate Parent <input type="checkbox"/> Other |  |                                     |  |
| Last Name _____  |  | Deceased?                           | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| First Name _____   |  | District of Residence _____         |  |
| Marital Status   | <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Widowed | District of Primary Residence _____ |  |
|  | <input type="checkbox"/> Separated <input type="checkbox"/> Divorced                                 | Resides With Student?               | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| <i>If you check Divorce or Separated, we require current legal documentation related to the children.</i>  |  |                                     |  |
| (*)Address _____   |  | Custodial Parent?                   | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| City _____   |  | Legal Guardian?                     | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| State _____  |  | Grandparent POA? (see #)            | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Zip Code _____   |  | Caregiver Authorization?            | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Phone Number _____   | Unl: <input type="checkbox"/> No <input type="checkbox"/> Yes  |                                     |  |
| Alt/Cell Phone _____   |  |                                     |  |
| Employer _____   |  |                                     |  |
| Email Address _____  |  | Federal Employee                    | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Work Address _____   |  | Migrant Worker                      | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Work Phone _____   |  | Mail if not Custodial Parent?       | <input type="checkbox"/> No <input type="checkbox"/> Yes |

|                 |                   |                        |   |
|-----------------|-------------------|------------------------|---|
| <b>Siblings</b> | Last Name _____   | Grade _____            |   |
|                 | First Name _____  | Gender                 | <input type="checkbox"/> Male <input type="checkbox"/> Female |
|                 | Middle Name _____ | School Attending _____ |   |
|                 | Last Name _____   | Grade _____            |   |
|                 | First Name _____  | Gender                 | <input type="checkbox"/> Male <input type="checkbox"/> Female |
|                 | Middle Name _____ | School Attending _____ |   |

(\*) If different from student's address; natural or adoptive parent address required

[#] If parent is not custodial, include copy of Grandparent Power of Attorney and Caregiver Authorization.

@ If foster parent, obtain copy of court order showing district of responsibility. Retain in cumulative file.

**CINCINNATI PUBLIC SCHOOLS**  
**STUDENT REGISTRATION INFORMATION**

Today's Date **3**

\_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name \_\_\_\_\_

|                    |  |  |
|--------------------|--|--|
| <b>PowerSchool</b> | PowerSchool is a web site where parents can login to see their child's grades, attendance, assignments, discipline and more. | Do you have a PowerSchool web site account? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>If not, would you like to sign up for one? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>If Yes, provide your email address below<br>_____ |
|--------------------|--|--|

*Note to Staff: If new account, give copy this form and page 1 to PowerSchool Coordinator at your school.*

|                                   |   |  |  |
|-----------------------------------|---|--|--|
| <b>How Did You Hear About Us?</b> | <input type="checkbox"/> District Publication<br><input type="checkbox"/> Web site<br><input type="checkbox"/> Friend or Relative | <input type="checkbox"/> Billboard<br><input type="checkbox"/> Letter or Postcard<br><input type="checkbox"/> Television News Story<br><input type="checkbox"/> CPS Staff Member | <input type="checkbox"/> Radio<br><input type="checkbox"/> Printed Advertisement<br><input type="checkbox"/> Newspaper Story<br><input type="checkbox"/> CPS Event |
|-----------------------------------|---|--|--|

|                                    |   |
|------------------------------------|---|
| <b>Students With Special Needs</b> | Does student require mobility assistance? (i.e. wheelchair, etc) <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Has this child ever had a multi-factored evaluation? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>If Yes, is there an evaluation form available? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Did this child receive Special Education and related services in the most recent school? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Does this child have a current IEP? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Does this child have a 504 Accommodation Plan? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Did this child receive gifted services in the most recent school? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>If Yes, is there a WEP available? <input type="checkbox"/> No <input type="checkbox"/> Yes |
|------------------------------------|---|

*Note to Staff: If Yes to any question, obtain copies of all available documentation and forward to appropriate school staff.*

|                          |   |
|--------------------------|---|
| <b>Exchange Students</b> | Is the student a Foreign Exchange student? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>If Yes, enter I-94 No. _____ |
|--------------------------|---|

|                                      |   |
|--------------------------------------|---|
| <b>Temporary Living Arrangements</b> | <p style="text-align: center;"><i>The following questions address the McKinney-Vento Act 42 U.S.C. 11435.</i></p> <p><i>The answers to these questions will help determine the services the student may be eligible to receive.</i></p> Is the student's current address a temporary living arrangement? <input type="checkbox"/> No <input type="checkbox"/> Yes<br>Is this temporary living arrangement due to loss of housing or economic hardship? <input type="checkbox"/> No <input type="checkbox"/> Yes<br><p><i>If the answer to <b>both</b> of these questions was <b>Yes</b>, the student is entitled to immediate enrollment.</i></p> Please indicate where the student is presently living.<br><input type="checkbox"/> In a motel/hotel <input type="checkbox"/> Unaccompanied youth<br><input type="checkbox"/> In a homeless shelter <input type="checkbox"/> Doubled up with more than one family in a house or apartment<br><input type="checkbox"/> Other; a place not designed for ordinary sleeping accommodations |
|--------------------------------------|---|

*Note to Staff: If the answers are Yes, please fax this form and page 1 to Project Connect at 363-3305.*

**Request to Restrict Privacy Information**

Federal and Ohio law prohibits Cincinnati Public Schools from publicly releasing information about our students, except for designated "directory information." CPS limits "directory information" to a student's name, participation in officially recognized activities and sports, and awards received. CPS releases this information in order to highlight the accomplishments of our students; however, the law requires the district to release directory information to any member of the media or public requesting it.

Parents, legal guardians, or students age 18 or over may refuse to allow CPS to release directory information. **Please indicate if you wish to restrict CPS from releasing directory information on the student named below by checking the appropriate box and returning this form to your child's school.**

Federal law permits parents/guardians to review their children's educational records. Students aged 18 and over may review their own records. Please contact the principal at your child's school with any questions regarding records, or to make an appointment to review records.

**General Public Release (including to media, potential employers, colleges and universities, etc.):**

- CPS **may not** release directory information about my child (name, participation in officially recognized activities and sports, and awards received).

**Military Recruiters:**

CPS must release the names, addresses and telephone numbers of secondary students to military recruiters, unless the parent/legal guardian (or student 18 or over) specifically objects.

- CPS **may not** release my child's name, address and phone number to military recruiters.

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
First Name

Birthdate

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month / Day / Year

*Please check one:*

- I am the student, and I am 18 years of age or older.
- I am the parent, guardian, or custodian of the student, and the student is under 18 years of age.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Student records may be routinely shared among CPS staff with a legitimate interest in the education of a student. A CPS official is a person employed by CPS or a person CPS determines has a legitimate educational interest in a record. A person has a legitimate educational interest if there is a need to review a record in order to fulfill his or her professional responsibility.

Parents and/or eligible students who believe their rights under the Federal Education Rights and Privacy Act (FERPA) have been violated may file a complaint with:

Family Policy Compliance Office, U.S. Department of Education, 400 Maryland Avenue, SW 20202-4605, Washington, D.C.,  
[www.ed.gov/offices/OM/fpco](http://www.ed.gov/offices/OM/fpco)

Informal inquiries may be sent to the Family Policy Compliance Office via the following email address: [FERPA@ED.Gov](mailto:FERPA@ED.Gov)

☆ CINCINNATI PUBLIC SCHOOLS ☆

**REQUEST FOR RECORDS**

To the Registrar:

Please send the records identified below, if available for this student, as soon as possible.  
If records are not available, please return our request indicating the following:

No Records Available. Reason(s): \_\_\_\_\_

Unable to Send Records. Reason(s): \_\_\_\_\_

We would appreciate receiving any additional information that would enable us to better meet the individual needs of the student. Thank you for your prompt cooperation.

Sincerely,

\_\_\_\_\_  
CPS School Registrar

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

**AUTHORIZATION TO RELEASE INFORMATION**

\_\_\_\_\_ authorizes the release of the records of

\_\_\_\_\_  
Parent / Guardian Name

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Mid. Initial

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Birthdate Mon / Day / Year

From the Following School/Institution:

Most Recent School \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Telephone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Grade Level \_\_\_\_\_

The following records may be released. Please check.

Transcript of subjects and grades

Attendance Record

Psychological or Other Individual Test Results

504 Accommodation Plan

English Language Proficiency Assessments

Special Education Records, including IEP and MFE and behavior plan

Ohio Achievement and Graduation Test Results

Standardized Test Results

Gifted Assessments

Health Records

\*\* Items that **cannot** be withheld due to non-payment of fees or obligations are state test scores, multifactor evaluation (MFE), individual educational program (IEP), IEP progress reports and immunization records.

The records may be released to:

New School \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Telephone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

I am authorizing the release of these records for these reasons. Please check one.

I am the subject of these records and 18 years of age or older.

I am the parent, guardian, or custodian of the subject of these records and the subject is under 18 years of age.

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date



WALNUT HILLS HIGH SCHOOL  
2011-2012

Enrollment Override Authorization Form

Please complete this form if you already have registered your child into another school but now wish him/her to be registered into Walnut Hills High School. **Please notify the other school that your child will not be attending.**

Walnut Hills High School

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Grade for 2011-12

\_\_\_\_\_  
(Student Name)

\_\_\_\_\_  
(Name of previously registered school for 2011-12)

**I understand that this authorization will remove my child from the school where previously registered. There is no guarantee that my child will be re-registered into the previous school if I no longer desire the program at Walnut Hills.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
(Date)

Note: **All prior acceptances, placements and waiting lists spots will be removed.**

# Cincinnati Public Schools

## Acceptable Use Policy and Internet/Network Safety Agreement

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### Statement of Purpose

The purpose of providing Internet and network access in schools is to support the District's educational objectives.

### Terms of Agreement

In order for a student to be allowed access to a school computer system, computer network, and the Internet, parents and students must sign and return the attached consent form.

### Rules for Internet/Network Usage

The District is providing access to its school computer systems, computer networks, and the Internet for **educational purposes only**. If you have any doubt about whether a contemplated activity is educational, you should consult with the person(s) designated by the school to help you decide. Use of the computer network and Internet is a privilege, not a right. A user who violates this agreement shall, at a minimum, have his or her access to the network and Internet terminated and is subject to disciplinary action by the school administrator. The District may also take other disciplinary actions. Accordingly, regulations for participation by anyone on the Internet/network shall include but not be limited to the following:

### Student Safety/Education

#### **Cyber-bullying**

Cyber-bullying may be defined as a situation when a person is repeatedly tormented, threatened, harassed, humiliated, embarrassed or otherwise targeted using text messaging, email, instant messaging, posting text or images, by means of electronic technology. **Any cyber-bullying, harassment, or intimidation is strictly prohibited.** If a student is found to have engaged in cyber-bullying, disciplinary action will be taken. If a student believes he/she is the victim of cyber-bullying, it is important to not respond to the cyber-bullying. Instead, the situation should be reported to an adult staff member, such as a teacher, principal, etc. Additionally, students are encouraged to notify school staff if they suspect another student is being victimized.

#### **Social Networks/Chat Rooms**

- Do not ever post personal information, such as full name, social security number, address, telephone number, bank or credit card number, etc.
- Consider not posting photographs of yourself. Do not ever post sensitive photos. If you do post a photo, consider whether it's one your mother would display in the living room.
- Assume that anything you post is on the internet permanently and can not be removed upon any requests.
- Do not ever agree to meet in person someone you've met on a social networking site or chat room.

### Basic Internet/Network Etiquette & Safety Rules

- Be polite. Use appropriate language and graphics.
- Don't use network or Internet access to make, distribute, or redistribute jokes, stories, or other material which is based on slurs or stereotypes relating to race, gender, ethnicity, nationality, religion, or sexual orientation.
- Teachers may allow individual students to use email, electronic chat rooms, instant messaging, social networking sites and other forms of direct electronic communications for **educational purposes only** and with proper supervision.
- **Student Photos/Student Work** - Publishing student pictures and work on websites promotes learning, collaboration and provides an opportunity to share the achievements of students. Images and products of K-12 students may be included on the website without identifying captions or names. Parents/guardians must indicate their written consent to publish their child's photo or school work on any school related website before the item is published to the web. Please note that under no circumstances will K-12 student photos or work be identified with first and last name on district, school, or teacher websites.
- **Privacy** - Network and Internet access is provided as a tool for your education. The District reserves the right to monitor, inspect, copy, review and store at any time and without prior notice any and all usage of the computer network and Internet access and any and all information transmitted or received in connection with such usage. All such information files shall be and remain the property of the District, and no user shall have any expectation of privacy regarding such materials.
- **Copyright** - All students and faculty must adhere to the copyright laws of the United States (P.L. 94-553) and the Congressional Guidelines that delineate it regarding software, authorship, and copying information. Do not download copyrighted material or software without permission of the owner.
- Students may not sell or buy anything over the Internet.
- Do not transmit or access obscene or pornographic material; notify your teacher if you receive such material.
- Any subscription to list serves, bulletin boards, or on-line services shall be reviewed by a District appointed official approved by the teacher prior to any such usage.
- District policies on "Plagiarism/Cheating" and "Harassment/Intimidation" apply to Internet/network conduct.
- Access to the network or Internet by any means/device other than that approved by the teacher, a District appointed official and Information Technology

- The use of blogs, podcasts or other web 2.0 tools is considered an extension of your classroom. Therefore, any speech that is considered inappropriate in the classroom is also inappropriate in all uses of blogs, podcasts, or other web 2.0 tools. This includes but is not limited to profanity; racist, sexist or discriminatory remarks. Comments made on blogs will be monitored and - if they are inappropriate – deleted. Disciplinary action may be taken.
- Use of the Internet/network for any illegal activity is prohibited. Illegal activities include (a) tampering with computer hardware, software or data, (b) unauthorized entry into computers and files (hacking/cracking), (c) knowledgeable vandalism or destruction of equipment, and (d) deletion of computer files. Such activity is considered a crime under state and federal law. Do not use the network or Internet to send messages relating to or in any way supporting illegal activities such as sale or use of drugs or alcohol; support of criminal or gang activity; threats, intimidation or harassment of any other person.

### **Network/System Security/Content Filtering**

- If an Internet/network security problem is identified, the user must notify an adult, such as a teacher, who will in turn notify Information Technology Management (ITM). The problem should not be demonstrated to other users.
- Attempts to log on as a system administrator will result in cancellation of privileges.
- The use of anonymous proxies to circumvent District implemented content filtering is strictly prohibited.
- No user is permitted to knowingly or inadvertently load or create a computer virus or load any software that destroys files and programs, confuses users, or disrupts the performance of the system.
- No third party software will be installed without the consent of the assigned administrator.
- Do not share your passwords.
- Do not use another person’s accounts or passwords.
- Technology protection measures may be disabled by only Information Technology Management (ITM) during adult computer usage to enable internet access for research or other lawful purposes.
- Do not participate in hacking/cracking activities or any form of unauthorized access to other computers, networks, or information systems.

### **Teacher Responsibilities**

- Will provide developmentally appropriate guidance to students as they make use of telecommunications and electronic information resources to conduct research and other studies related to the district curriculum.
- All students will be informed of their rights and responsibilities as users of the district network prior to gaining access to that network, either as an individual user or as a member of a class or group.
- Use of networked resources will be in support of educational goals.
- Treat student infractions of the Acceptable Use Policy according to the school discipline policy.
- Provide alternate activities for students who do not have permission to use the Internet.

### **Principal Responsibilities**

- Include Acceptable Use Policy in student handbook.
- Distribute handbooks to all students.
- Treat student infractions of the Acceptable Use Policy according to the school discipline policy.
- Keep Consent Forms on file for one year.
- Identify, to the teaching staff, students who do not have permission to use the Internet.

### **District Responsibilities**

- Ensure that filtering/blocking software is in use to block access to sites and materials that are inappropriate, offensive, obscene, contain pornography, or are harmful to minors.
- Restrict unauthorized disclosure, use, and dissemination of personal information regarding minors.
- Have Acceptable Use Policy approved by the Board.
- Have Acceptable Use Policy available on the District’s website.
- Submit the Acceptable Use Policy to the FCC upon request by the Commission.

### **Warranties**

Internet access is not guaranteed. This includes loss of data or service interruptions. The District disclaims responsibility for the accuracy or quality of information obtained via the Internet.

### **Disclaimer of Liability**

The District disclaims liability for material accessed on the Internet, for any damages suffered and for any other consequences of Internet use. This includes information retrieved online, personal property used to access district online resources, and unauthorized financial obligations resulting from use of district resources.

## Acceptable Use Policy and Internet/Network Safety

### Consent Form

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#### STUDENT:

I have read, understand, and agree to the Cincinnati Public Schools' Internet/Network Acceptable Use Policy (AUP).

Student's Full Name (please print) \_\_\_\_\_

Student's Signature \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_

Date \_\_\_\_\_

#### PARENT:

##### *Use of the Internet/Network*

I understand that Internet/network access is used for educational purposes and that precautions to eliminate inappropriate material have been taken. I accept responsibility for setting and conveying standards for my child to follow when independently using the Internet at school. I also consent to the monitoring of my child's accessed Internet sites and email messages (where applicable) as required by the Family Educational Rights and Privacy Act.

I understand that despite every effort for supervision and filtering, access to the Internet/network may include the potential for access to materials inappropriate for school-aged students. Every user must take personal responsibility for his or her own use of the network and Internet, and avoid these sites.

- I GIVE** permission for my child to use the Internet/network independently for educational purposes (which may include an email account if available).
- I DENY** permission for my child to use the Internet/network independently.

##### *Release of Information*

The universal nature of the Internet makes it necessary to use care when identifying students on the web. Cincinnati Public School (CPS) web sites may want to acknowledge student work, activities, and/or achievements on the Internet. Please indicate your consent below to include limited information about your child (**photograph, student work, first name, and/or grade level**) on the Internet.

- I GIVE** permission for limited information about my child to be included on CPS web sites.
- I DENY** permission for limited information about my child to be included on CPS web sites.

Parent/Guardian's Name (please print) \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_

Child's School \_\_\_\_\_ Grade \_\_\_\_\_

Date: \_\_\_\_\_

The Cincinnati Public School District reserves the right to change this policy at any time.

## STUDENT AGREEMENT & PARENT PERMISSION FORM

### Student:

As a user of the Cincinnati Public Schools' computer network, I hereby agree to obey the rules, use the computer equipment, network, and access to the Internet, in an appropriate way for legitimate school purposes. I understand that my equipment usage, e-mail messages (if available) either sent or received, as well as the Internet sites I access, may be monitored and that my parent(s) / guardian(s) may have access to this information upon request. I understand that any violation is unethical and may constitute a criminal offense. My access privileges may be revoked and school disciplinary action may be taken. This may include expulsion and/or appropriate legal action.

|                              |            |  |      |  |  |                           |  |  |  |  |                    |  |  |   |  |  |   |  |  |  |  |  |
|------------------------------|------------|--|------|--|--|---------------------------|--|--|--|--|--------------------|--|--|---|--|--|---|--|--|--|--|--|
|                              | First Name |  |      |  |  |                           |  |  |  |  | Last Name          |  |  |   |  |  |   |  |  |  |  |  |
| Student Name (please print): |            |  |      |  |  |                           |  |  |  |  |                    |  |  |   |  |  |   |  |  |  |  |  |
| Student Signature:           |            |  |      |  |  |                           |  |  |  |  | Birth Date:        |  |  | - |  |  | - |  |  |  |  |  |
| Date Signed:                 |            |  | -    |  |  | -                         |  |  | <b>Boxes Below For Office Use ONLY</b> |  |                    |  |  |   |  |  |   |  |  |  |  |  |
| Entering Grade:              |            |  | Age: |  |  | Expected Graduation Year: |  |  |  |  |                    |  |  |   |  |  |   |  |  |  |  |  |
|                              |            |  |      |  |  |                           |  |  |  |  | UserName Assigned: |  |  |   |  |  |   |  |  |  |  |  |

### Parent:

**Please 'check' the appropriate boxes below!**

|                  |     |
|------------------|-----|
| Account Created  | [ ] |
| Database Updated | [ ] |

As the parent or legal guardian of the minor student signing above, I have read this AUP for my son or daughter to independently use computer equipment and networked services including the Internet (and e-mail if available). I understand that this access is designed for legitimate educational purposes and that precautions to eliminate controversial material have been taken. I also recognize that individuals and families may be held liable for violations. I understand that some materials on the Internet may be objectionable, but I accept responsibility for guidance of Internet use, setting and conveying standards for my student to follow when selecting, sharing or exploring information and media. I also consent to the monitoring of my child's e-mail messages as well as accessed sites according to the Family Educational Rights and Privacy Act. I understand this information will be kept in a log for a (thirty) 30-day period.

**I certify that the information contained on this form is correct.**

- [ ] **I GRANT PERMISSION** for my student to use computer equipment, access e-mail (if available) and the Internet.  
 [ ] **I DENY PERMISSION** for my student to use computer equipment, access e-mail (if available) and the Internet.

The power of the web to reach people worldwide makes it necessary to use extreme care when disclosing information regarding students' identity on the web. From time to time Cincinnati Public School (CPS) web sites may desire to acknowledge student work, activities, and/or achievements on the Internet. Please indicate your consent below to include limited information about your child (**photograph, student work, first name, and/or grade level**) on the CPS or Walnut Hills High School authorized Internet site(s).

- [ ] **I GRANT PERMISSION** for limited information about my student to be included on CPS/WHHS web sites.  
 [ ] **I DENY PERMISSION** for limited information about my student to be included on CPS/WHHS web sites.

|                            |            |  |   |  |  |   |  |  |                      |  |           |  |  |   |   |  |   |  |  |  |  |
|----------------------------|------------|--|---|--|--|---|--|--|----------------------|--|-----------|--|--|---|---|--|---|--|--|--|--|
|                            | First Name |  |   |  |  |   |  |  |                      |  | Last Name |  |  |   |   |  |   |  |  |  |  |
| Parent Name (please print) |            |  |   |  |  |   |  |  |                      |  |           |  |  |   |   |  |   |  |  |  |  |
| Parent Signature           |            |  |   |  |  |   |  |  |                      |  | Date      |  |  | - |   |  | - |  |  |  |  |
| Street Address             |            |  |   |  |  |   |  |  |                      |  |           |  |  |   |   |  |   |  |  |  |  |
| City                       |            |  |   |  |  |   |  |  |                      |  |           |  |  |   |   |  |   |  |  |  |  |
| Daytime Phone Number       |            |  | - |  |  | - |  |  | Evening Phone Number |  |           |  |  |   | - |  |   |  |  |  |  |
| Parent's Email Address     |            |  |   |  |  |   |  |  |                      |  |           |  |  |   |   |  |   |  |  |  |  |



## **E-MAIL ADDRESSES**

**STUDENT'S NAME** \_\_\_\_\_

**ENTERING GRADE** \_\_\_\_\_

**PARENT/GUARDIAN'S NAME** \_\_\_\_\_

**PARENT/GUARDIAN'S E-MAIL ADDRESS**

\_\_\_\_\_

**PARENT/GUARDIAN'S NAME** \_\_\_\_\_

**PARENT/GUARDIAN'S E-MAIL ADDRESS**

\_\_\_\_\_

**PRIMARY TELEPHONE NUMBER FOR PARENT/GUARDIAN**

\_\_\_\_\_

**If your address, telephone number or e-mail changes during the school year, please notify the Registrar at 363-8546. Notification is very important to ensure communications.**







## Walnut Hills Math Placement 2011-2012 (Entering Grades 8 through 12)

Welcome to Walnut Hills. It is our pleasure to have you as a new member of our school. It is the intention of the math department to provide an exceptional learning experience for your child. In order to accomplish this task the proper placement of your child is essential. All incoming students for grades 8 through 12 are tested for placement in the appropriate math class. To properly register for the placement test it will be necessary for you to gather the following information. Please complete the ENTIRE form below.

**THIS FORM MUST BE SUBMITTED TO COMPLETE YOUR CHILD'S REGISTRATION:**

Student's Name \_\_\_\_\_  
(Please print clearly)

Incoming Grade: 8 9 10 11 12 Home schooled  
(Circle one)

Current School: \_\_\_\_\_

Current Math Course: General PreAlgebra \*Algebra 1 \*Geometry \*Algebra 2 \*PreCalculus  
(Circle Only One)

Other: \_\_\_\_\_

\*If any of these courses were take in grades 8 or 9 we need a contact person at your child's school to verify some information.

Contact Person (Counselor/Child's teacher/Principal): \_\_\_\_\_ (please Print)

Phone number: \_\_\_\_\_ Position: \_\_\_\_\_

Parent(s)/Guardian(s) Name: \_\_\_\_\_

Return Address: (Please print clearly and include a zip code)

Home Phone: \_\_\_\_\_ Work or Cell Phone #: \_\_\_\_\_

Email address (Please print clearly): \_\_\_\_\_

*(Whenever possible notifications, directions, and confirmations will be sent via email)*

Students must be pre-registered to be admitted on testing dates. You must complete this form and submit it at registration. Confirmation of registration for the **Math Placement test** will be sent to you via email whenever possible. Students will not be admitted to testing who are not pre-registered.

### Testing Dates

**4/30/2011-Incoming 7<sup>th</sup> grade students new to Walnut scoring 90 or above on SCPP test.**

**6/11/2011- new students entering Walnut for grades 7-12 who registered after 4/7/2011.**



## **Sign-Up for Sports**

Complete this sign-up sheet and we will have a way to contact you and let you know what is going on in these sports. This is not a commitment to play the sport, just a way for us to let you know what's happening.

Student Name, Gender & Grade Next Year

Parents' Email Address (print clearly)

Parents' Phone Numbers

### **Circle Sports You Are Interested In**

Fall: HS Football Cheerleading, HS Cross Country, JH Cross Country, JH Football, HS Football, HS Golf, JH Golf, Boys HS Soccer, Boys JH Soccer, Girls HS Soccer, Girls JH Soccer, Girls HS Tennis, Girls JH Tennis, Girls HS Volleyball, Girls JH Volleyball. Winter: HS Academic Team, Boys HS Basketball, Boys JH Basketball, Girls HS Basketball, Girls JH Basketball, HS Bowling, HS Basketball Cheerleading, HS Dance Team, HS In-Door Track, HS Ice Hockey, HS Swimming & Diving, JH Swimming & Diving, Wrestling. Spring: Baseball, Softball, Boys HS Lacrosse, Boys JH Lacrosse, Girls HS Lacrosse, Girls JH Lacrosse, Boys HS Tennis, Boys JH Tennis, HS Boys Track & Field, Girls HS Track & Field, JH Track & Field.

### **Returning This to Us**

- 1.) Mail it to us: Walnut Hills HS, c/o Tom Donnelly, AD, 3250 Victory Parkway, Cincinnati, OH 45207.
- 2.) Drop it off at school in my mailbox: Go to the main office and ask for Tom Donnelly's mailbox.

**A very good source of information on our sport teams and program is the athletic web page: <http://www.walnuthillseagles.com/Sports/> .**

# Walnut Hills Music Department Scheduling Information For Incoming Students

We look forward to you and your child becoming a part of Walnut Hills High School and, in particular, a member of the music department. Your child will need to follow one of the options listed below depending on their musical experience.

**Option 1:** If your child has **NOT** had any musical experience prior to attending Walnut Hills and they are entering as a 7<sup>th</sup> or 8<sup>th</sup> grader, they must sign up for either Beginning Band, Beginning Strings, or Beginning Choir.

**Option 2:** If your child **HAS** had previous music experience in band, orchestra, choir or private instruction, they need to audition for class placement. Please complete the **Audition Form** below and return it with your registration form. Please refer to the attached **Audition Information Sheet** regarding details of the audition.

## Audition Form

Parent's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Parent's Email \_\_\_\_\_

Student's Name \_\_\_\_\_

Current Grade (*circle one*) 6 7 8 9 10 11 Home Schooled

Current School \_\_\_\_\_

Instrument \_\_\_\_\_  
(flute, clarinet, violin, cello, etc.)

Voice\*\* \_\_\_\_\_  
(choir part if you know it)

Musical experience (*circle one*) 1 yr. 2 yrs. 3+ yrs. Other \_\_\_\_\_

# Walnut Hills High School Music Placement Audition Information

*When:* Saturday, April 30, 2011\*9 am – 11am

*Where:* Walnut Hills High School Music Modulars  
Orchestra Students: Room 9027  
Choir Students: Room 9026  
Band Students: Rooms 9000, 9011, 9012

*Students interested in choir, that do not READ music, are not required to audition and should option for beginning choir.*

*Piano students will be evaluated on a case by case basis. Please contact the music office directly for further assistance.*

## **Audition Suggestions**

**Orchestra Students:** a short musical selection from a recent concert or excerpts from a current Suzuki/method book

**Choir Students:** a short musical selection from a recent concert or a solo you know from a voice lesson, a musical or from church.

**Band Students:** a short musical selection from a recent concert or a selection from a method band book.

\*This date is in conjunction with the Math Placement Test which begins at 8 am

**Modern Foreign Language Placement Application**    Language: \_\_\_\_\_

**Goal:** To place each incoming student with previous foreign language experience into the appropriate level of modern language instruction.

**Instructions:** Please complete this form, print it and bring it with you to the school on the day of language placement testing. This information will be considered along with the results of the placement test in making a language placement recommendation to the counseling office.

Student name:

Entering grade:

Parent/Guardian:

Contact information. Cell:

Work:

Home:

Number of years of previous language study:

School where student studied the language:

Grade level(s) of language study (ex: 8<sup>th</sup> grade....)

Name of textbook used:

Focus of instruction: (Check any to indicate the focus of the instruction.)

speaking     writing     listening     vocabulary building     grammar     culture

immersion (class is conducted in the target language most of the time)

Other:

Travel/living abroad in the target language:

Length of time:

Is the target language spoken in the home?

Does an adult in the home speak the language?

Did an adult in the home study the language?

Goal / motivation for learning the language:

**Placement testing will include all of the skill areas: speaking, listening, reading and writing.**