

Roots Public Charter School
ENROLLMENT CHECK-OFF STATUS SHEET
School Year 2024-2025

STUDENT NAME: _____
(Last) (First) (Middle Initial)

GRADE: **(PK3) (PK4) (K) (1) (2) (3) (4) (5)** (*check one*)

- ADMISSION APPLICATION**
 - Enrollment and Support Agreement
 - Academic and Behavioral Contract
 - Media Release Form
 - PAC Committee Membership Form
 - Copy of Birth Certificate (*required for grades PK3-4*)
 - Home Language Survey (*new families only*)

- RESIDENCY DATA (2 Required)**
 - Driver's License
 - Vehicle Registration
 - Current Utility Bill (*with recent paid receipt*)
 - PEPCO, WASA, GAS ONLY

- RESIDENCY DATA (1 Required)**
 - Lease Agreement (*with recent paid receipt*)
 - Copy of Pay Stub (*within 45 days*)
 - SSI/SCHIP/TANF (*student's name must be listed*)
 - Proof of Ward-of-State Child

- ACADEMIC DATA (*from exiting school*)**
 - Official Withdrawal Form
 - Report Card
 - Standardized Test Scores

- HEALTH DATA**
 - Universal Health Certificate
 - Oral Health Assessment Form
 - Health Exemption Form (*if applicable*)

Roots PCS Verification: _____

Date: _____

ROOTS PUBLIC CHARTER SCHOOL

ENROLLMENT APPLICATION

SY 2024-2025

Enrolling Grade: _____

Student ID#: _____

STUDENT CONTACT INFORMATION

First Name	MI	Last Name	Suffix
Date of Birth ____ / ____ / ____ Student's Age:	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male	Race/Ethnicity <i>(check all that apply)</i> <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> White <input type="checkbox"/> Hispanic Origin <input type="checkbox"/> Two or More Races	
Name of Last School Attended	City/State	Date Last Attended ____ / ____ / ____	Last Grade Completed

Special Services *(check all that apply)*

- Current IEP *(Individualized Education Program)*
- Current 504 Plan
- English Language Learner *(ELL)*

Any health issues requiring emergency response?

- Yes No

If yes, please give a brief description:

How did you hear about Roots?

- DC EdFEST
- My School DC
- Referral *(Word of Mouth)*
- School Website
- Social Media
- Google Search
- Marketing Outreach

Student's Residential Address	City/State/Zip Code
Apartment/Suite Number	Are there any siblings currently enrolled at Roots?

I certify that the information given on this form is accurate. I understand that providing false information for purposes of defrauding the government is punishable by law.

Parent/Guardian Signature

Date

Please Note: In case of an emergency, the Administration will contact the parent/legal guardian; if neither can be reached, the first person on the Authorized Emergency List will be contacted.

PARENT/GUARDIAN CONTACT INFORMATION

PARENT/GUARDIAN (1)

PARENT/GUARDIAN (2)

First Name	MI	Last Name	First Name	MI	Last Name
Street Address (if different from student)			Street Address (if different from student)		
Apt #		Ward	Apt #		Ward
City			City		
State		Zip Code	State		Zip Code
Home Phone		Work Phone	Home Phone		Work Phone
Cell Phone			Cell Phone		
E-mail Address			E-mail Address		

EMERGENCY CONTACT INFORMATION (1)

(Other than parent/guardian)

EMERGENCY CONTACT INFORMATION (2)

(Other than parent/guardian)

Name	Name
Address	Address
Relationship	Relationship
Primary Phone	Primary Phone
Alternate Phone	Alternate Phone

EMERGENCY CONTACT INFORMATION (3)

(Other than parent/guardian)

EMERGENCY CONTACT INFORMATION (4)

(Other than parent/guardian)

Name	Name
Address	Address
Relationship	Relationship
Primary Phone	Primary Phone
Alternate Phone	Alternate Phone

ROOTS PUBLIC CHARTER SCHOOL

ENROLLMENT AND SUPPORT AGREEMENT

I/We, the undersigned hereby enroll _____ to the
Roots Public Charter School. (hereinafter "Roots") for the school year _____ through _____.

I/We are in full agreement with the Roots' mission, philosophy, and parent involvement rules. I/We agree to abide by the policies that are outlined in the Parent/Student Handbook, which we have read and understand.

I/We further agree and understand that enrollment is contingent upon my/our completion of a parent orientation session. This session is crucial to my/our understanding of the school's structure/design, methodology, and what is expected of me/us in the effort to ensure the school's success with my/our/child/children.

I/We understand that Roots will take precautions for my child's health and safety. I/We give consent, sent, without liability to anyone acting on behalf of Roots, to secure and provide First Aid and administer any medication/treatment that I/we bring to Root for him/her. If my child becomes ill or involved in an accident and I/we cannot be contacted, I/we authorize Roots to take my/our child or send him/her by ambulance to the hospital for treatment.

I/We accept responsibility for any necessary expense in the medical treatment of my/our child, which is not covered by the following:

Health Insurance Company: _____

Policy# _____

I/We consent that my/our child/children can participate in all Roots' field trips and school-based activities without liability to anyone acting on behalf of Roots. I also consent to our family's participation in print, video, broadcast, or published media related to the school without compensation or ownership rights.

Accepted by: _____

Roots Administration

_____ Date

Parent/Legal Guardian

Date

Parent/Legal Guardian

Date



ACADEMIC AND BEHAVIORAL CONTRACT

Between

Parent/Student and Roots Public Charter School

Roots Public Charter School maintains high academic and behavioral standards. Students must be self-motivated and self-disciplined. Therefore, as a parent, I promise to ensure:

1. that I will supervise all homework assignments.
2. that my child completes all homework assignments.
3. that I will review and sign my child's weekly academic grade report provided by the teacher.
4. that if my child's weekly academic grade report reflects poor performance, I will supervise my child's home free time to assist in enhancing knowledge in areas of weakness.
5. that my child is obedient, respectful, and demonstrates acceptable behavior.
6. that following the suspension of my child for unacceptable behavior, I will accompany the child to school and spend the days as part of in-school suspension.
7. that if my child is found to have a weapon (of any type) in school, I understand in compliance with the Gun-Free Schools Act, my child will be expelled from RPCS for one year and referred to the Juvenile Delinquency System.
8. that I am responsible for all information contained in correspondence sent home with my child.
9. that my child attends school daily with all school supplies.
10. that all textbooks issued to my child will be returned in satisfactory condition; otherwise, I will be charged for the cost of the textbooks.
11. that I will support all school community fundraisers.
12. that I will attend all parent meetings.
13. that I will be an active PAC member and volunteer a day or more in the classroom per semester.
14. that I will refrain from conflict or aggressive behaviors towards staff, students, and other parents.

I understand that breach of this contract may result in the dismissal of my child from Roots Public Charter School.

Agreed:

Parent/Guardian Signature

Date

Principal

Date

15 Kennedy Street Northwest, Wash, DC 20011

Phone: (202)882-8073 Fax: (202)882-8075

www.rootspcs.org

Media Release Form

I hereby authorize and irrevocably grant the Roots Public Charter School and assigns the unrestricted right to use and publish any film, videotape, audiotape, still photographs, print and any other media known and hereafter invented of my child.

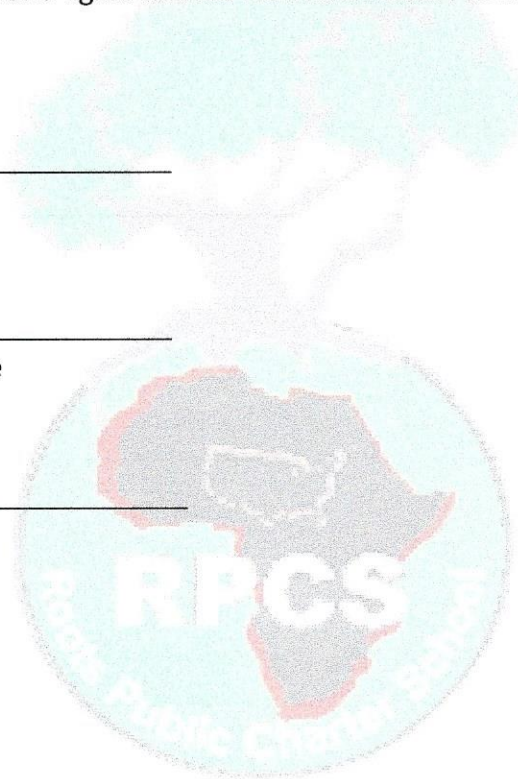
I acknowledge that Roots PCS shall own all rights, title, and interest in and to this media. I further agree that they may cause all or parts of this media to be used for publications, exhibitions, public displays, editorials, advertising, or other purposes.

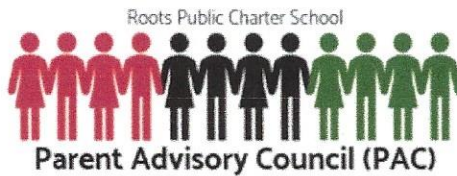
I waive any inspection or approval of the media or any advertising or publicity in which my child appears. I expressly release and agree to hold harmless Roots Public Charter School and its assigns from any liability.

Date

Parent/Guardian Signature

Print Name





ROOTS PUBLIC CHARTER SCHOOL PAC COMMITTEE MEMBERSHIP FORM

Please PRINT Clearly

Parent's Name: _____

Child's Name: _____

Child's Grade: _____

Address: _____

Phone No: () _____ Best time to call: AM or PM (circle one)

Email address: _____

Per your parent contract, each parent is encouraged to join **PAC (Parent Advisory Council)** and participate **each month**. **1.** Please choose (✓) one of the following committees and return this form to the PAC Committee and/or Administration. **2.** Fill out the Committee Roster that you selected and pick up a letter with your Chair's contact data.

- Classroom Helpers and Substitutes**: Arranges for parents to volunteer as a substitute when teachers are absent, and periodically helps in the classroom. From time to time, make phone calls to parents for reminders.
- Publicity/Educational Affairs Committee**: Makes flyers, posters, and tickets for fundraisers, writes, and post various articles in community news. Send alumni flyers about fundraisers and former students.
- Maintenance Committee**: Helps to maintain the upkeep of the school, place salt on ground/shovel snow for snow days. Responsible for Set-up and Clean-up for all school fundraisers and events.
- Hospitality Committee**: Helps prepare and serve food during all school events (Open House, Parent Orientation, Masquerade Ball, Family Fun Day, End of the Year Recital, Graduations, etc.)
- Curriculum and Educational Affairs**: Update performance objectives as needed, assist students with preparing for the science fairs, spelling bees, geography bee coach and/or judge, etc.
- Fundraising/Grants Committee**: Helps coordinate events (Skate Party, Masquerade Ball, etc.) Responsible for Box Tops coordination. Helps find grants and sponsors for the Brick project.
- Secretarial Committee**: Creates up-to-date parent directory, makes phone calls to arrange volunteer schedule for events, create various documents for teachers/staff, etc. Send group emails of who owes and who paid dues. Contribute to the PAC monthly newsletter.
- Supplies Committee**: Provides various school supplies and snacks each month throughout the year, as well as provides snacks during Standardized Test Week. Donates office and educational materials when needed.