CHATTANOOGA ELEMENTARY SCHOOL
SUPPLY LIST 2018-19
Enrollment for new students and those who did not pre-enroll – August 8, 2018
9:00 AM – 1:00 PM
Music Room by the Elementary Office

PRE-KINDERGARTEN
2 Box Crayola Crayons (24 only)
2 Box Jumbo Crayola Crayons (8 only)
1 Box Crayola colored pencils (12 or 24 count)
1 Package Crayola colored pencils (12 or 24 count)
4 Glue Sticks
1 Bottle of Elmer's glue
1 Box of Jumbo or regular size pencils (Ticonderoga preferred)
1 Pair Fiskar Kid’s Scissors (Blunt end)
2 Boxes of Kleenex
1 Bottle Hand Sanitizer
1 Backpack (Must be big enough for 9x12 folders)
1 Prang Water Colors or 1 bottle Tempera Paint for kids (any color)
1 Nap Mat or towel
1 Change of clothes and underwear in Ziploc bag (labeled with student's name)

PLEASE LABEL YOUR CHILD’S NAME
ON ALL ITEMS

<table>
<thead>
<tr>
<th>Kindergarten</th>
<th>Optional Supplies</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Box of No. 2 Pencils</td>
<td>2 Pocket Folders</td>
</tr>
<tr>
<td>1 Pair Fiskar Kid Scissors</td>
<td>1 12” Inch Binder</td>
</tr>
<tr>
<td>2 Large Pink Erasers (No cap)</td>
<td>1 School Supply Box</td>
</tr>
<tr>
<td>3 Elmer’s Glue Sticks</td>
<td>1 Backpack</td>
</tr>
<tr>
<td>1 Elmer’s Glue</td>
<td>1 Sport Top or Flip Top Water Bottle</td>
</tr>
<tr>
<td>1 Box Washable Magic Markers (classic)</td>
<td>2 Boxes of tissues</td>
</tr>
<tr>
<td>1 Watercolor paint set</td>
<td>1 Bottle of Germ-X (Girls)</td>
</tr>
<tr>
<td>1 Box Crayola Crayons (24 count)</td>
<td>1 Clorox Wipes (Boys)</td>
</tr>
</tbody>
</table>

FIRST GRADE
2 Boxes No. 2 Pencils
4 Boxes Crayons (24 only)
2 Boxes Washable Markers
1 School Supply Box (cigar box size)
12 Glue Sticks
2 Pink Erasers
1 Composition Notebook
1 Package of Clear Plastic Sleeves
4 Two-Pocket Plastic Folders with Brads
2 Large Boxes of Facial Tissue
1 Pair of Scissors
1 Pkg Skinny Dry Erase Markers
1 Sport Top or Flip Top Water Bottle
1 Book Bag (not roller type)

PLEASE LABEL ALL SUPPLIES INCLUDING JACKET
* P.E. Shoes (not too small) See Comment on Back Page
**Personal Headphones, optional

SECOND GRADE
2 Boxes Crayola Crayons (16 or 24 count only)
2 Boxes Crayola Markers (1 skinny 1 regular)
12 Glue Sticks (Elmer’s Only)
3 Boxes #2 Pencils (No Mechanical)
4 Pink Erasers
2 Pkg Pencil Top Erasers
1 Pkg Baby Wipes (Refills Only)
1 Green 70 page Spiral Notebook (this size only)
1 Spiral Notebook (Journal)
2 Pkg. Gallon Size Ziploc Bags
1 Folder with Prongs
12 pack Expo Markers
1 Pair of Scissors
1 School Box
1 Clipboard
1 Lysol or Clorox Wipes
1 Sport Top or Flip Top Water Bottle
1 Old Painting Shirt
1 Bookbag
* P.E. Shoes (See Comment On Back Page)
**Personal Headphones (optional)
**THIRD GRADE**

- **Personal Headphones, optional**
- 1 Subject wide-lined notebook (spiral)
- 1 inch 3-ring Binder (White w/Plastic Insert on Front Cover)
- 1 Box Washable Markers
- 3 Glue Sticks
- 2 Glue Bottles
- 24 No. 2 Pencils
- 1 Box **Crayola** Crayons (24 count)

**FOURTH GRADE**

- **Personal Headphones**
- 24 No. 2 Pencils (No Mechanical Pencils)
- 1 24 Count **Crayola** Crayons
- 1 12 Count Colored Pencils
- 2 Highlighters
  - Extra Erasers
- 2 Glue sticks
- 1 Elmer’s School Glue (8oz)

**FIFTH GRADE**

- **Personal Headphones**
- 1 Box **Crayola** Crayons (24 count)
- 1 Pkg Clorox Wipes
- 1 Large Box of Kleenex
- 1 Pkg Construction Paper (Any Color)
- 1 Pkg Pencil Top Erasers
- 2 Highlighters (Any Color)
- 1 Plastic School Supply Box
- 1 Box Colored Pencils (12 count)

**SIXTH GRADE**

- **Personal Headphones**
- 2 Boxes No. 2 Pencils (12 count or higher)
  - (No Mechanical Pencils or Liquid Pencils)
- 1 Simple (Inexpensive) Four Function Calculator (+/-/x/divide)
- 1 Pencil Pouch W/Holes for Binder
- 1 Box of Map Pencils
- 1 Box of **Crayola** Markers (Skinny Only) or Colorful Pens
- 1 1½ or 2” 3 Ring Binder (No Trapper Keepers or Zippers)
- 2 Pkgs. Wide Line Notebook Paper
- 1 One Subject Wide Ruled Notebooks
- 4 Folders with Prongs

**OPTIONAL SUPPLIES**

- Index Cards
- Ziplock Bags (any size)
- Hand Sanitizer
- Expo Markers
- Water Bottle

**NO SHARPIES**

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*An extra pair of inexpensive tennis shoes will be needed for use in the gym (No black sole shoes will be allowed if they make marks on the gym floor). 5th and 6th graders may change clothes for P.E. class.*

**Personal Headphones may be purchased at school. (5.00) K-6th grade**

Headphones will be kept in Computer class through 6th grade. No Large Over the Ear Headphones.

Supplies may be requested or need to be replaced as the year progresses.
**Chattanooga Public School**
403 3rd Street / P.O.Box 129
Chattanooga, OK 73528
580-597-6638 (Elem)  580-597-3347 (HS)
580-597-2396 (Fax)  580-597-3344 (Fax)

**Chattanooga Elementary Enrollment Form**
School Year 2018 - 2019

<table>
<thead>
<tr>
<th>Enrollment Date:</th>
</tr>
</thead>
</table>

Chattanooga Public School does not discriminate on the basis of race, color, national origin, age, or otherwise qualified handicapping condition.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>(Last, First, Middle)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Social Security #</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>F</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Birth date</th>
<th>Birthplace (City, State, Country)</th>
<th>Has student attended Chattanooga School before?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone Number:</th>
<th>Does student live in Chattanooga school district?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Citizenship:</th>
<th>Did student move into the Chattanooga district within the past 3 years?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S.</td>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name(s) of Parent(s)/Guardian(s) student lives with:</th>
<th>Relationship to student:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mother</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address:</th>
<th>Mailing Address (if different):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>City</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Special Programs:</th>
<th>Reading Plan</th>
<th>Gifted Program</th>
<th>Speech</th>
<th>Special Education</th>
<th>Section 504</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Mother/Guardian Name:</th>
<th>Father/Guardian Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (if different):</td>
<td>Address (if different):</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Phone:</th>
<th>Cell Phone:</th>
<th>Home Phone:</th>
<th>Cell Phone:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Business phone:</th>
<th>Business Name:</th>
<th>Business Address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Email address:</th>
<th>Email address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Race: (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
</tr>
<tr>
<td>African American</td>
</tr>
<tr>
<td>American Indian</td>
</tr>
<tr>
<td>Alaska Native</td>
</tr>
<tr>
<td>Pacific Islander</td>
</tr>
<tr>
<td>Asian</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Is student of Hispanic ethnicity?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Native Language of Student:</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If other, specify language:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Is a language other than English spoken in your home?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Does student live ⅓ miles or more from the school?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Bus Route #:</th>
<th>Driver:</th>
</tr>
</thead>
</table>

| Permission is hereby given to use the name, picture, or likeness of my child or legal ward for the creation of any educational, training, promotional, or demonstration materials for school purposes. | Yes | No |

| Permission is hereby given for my child to have access to the Chattanooga Public School's Wide Area Network and Internet. (See complete policy in handbook). | Yes | No |

| Permission is hereby given for my child to receive nonprescription, symptomatic medication, or medication I have sent with a note, from a designated school employee. | Yes | No |

| Permission is hereby given for my child to be screened in the following areas: Vision, Hearing, Speech/Language, and Academics. | Yes | No |

| Permission is hereby given for my child to participate in all field trips sponsored by Chattanooga Public School during the current school year. | Yes | No |

| As parent/guardian, I agree to read and review the Student Handbook on the Chattanooga Public School website. | Yes | No |

| As parent/guardian, I agree to allow my child to receive swats as an option for disciplinary measures. (Parent will be notified prior to disciplinary action.) | Yes | No |

| Is either parent/guardian active military or working for the federal government in Civil Service? | Yes | No |

| Signature of Parent/Guardian |

*continued on back*
Is contact allowed by both parents/guardians? Yes No

If no, which one cannot be contacted?

(Chattanooga Public School must have a copy of legal documentation prohibiting access to the student.)

Other than parent/guardian, the following person(s) may pick up my child from school or may be called in case of an emergency:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
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<tr>
<td>2.</td>
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<tr>
<td>3.</td>
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<td>4.</td>
<td></td>
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<tr>
<td>5.</td>
<td></td>
<td></td>
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<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Including enrolled student, list all students living at this address:

<table>
<thead>
<tr>
<th>Student's name</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student's name</td>
<td>Grade</td>
</tr>
<tr>
<td>Student's name</td>
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<td>Grade</td>
</tr>
</tbody>
</table>
CHATTANOOGA ELEMENTARY PARENT-SCHOOL COMPACT

It is important that families and school work together to help students achieve high academic standards. Through a process that included teachers, families, students, and community representatives, the following are agreed upon roles and responsibilities that we as partners will carry out and to support student success in school and in life.

As a STAFF MEMBER, I will provide your child with every opportunity to learn and grow by:

- Maintaining a quiet and organized work place.
- Having a high expectation of myself and my students.
- Giving instruction and assignments appropriate for the skill and development required by state and district standards.
- Monitoring Student work on a daily basis to ensure success and progress.
- Reporting regularly to parents with returned work, written notices, and conferences.

As a STUDENT, I will keep my focus on what is important in meeting my goal of learning by:

- Being in class on time, every day, with my homework in hand (if assigned) and prepared to work.
- Allowing the teacher to teach and everyone in class to learn.
- Completing my work on time and accurately.
- Keeping my hands feet, objects and comments to myself.
- Respecting others and their property.

As a PARENT/GUARDIAN, I will support Chattanooga Elementary School’s programs and activities that give my child the optimum opportunity for learning by:

- Expecting my child to complete daily homework assignments, providing assistance as needed, and check for a timely return to school.
- Accentuating the positive events at school and help my child resolve issues of concern and conflict.
- Support the discipline policy and reinforcing the highest expectations of the school staff.
- Reading to and listening to my child read daily as a way of building a lifelong interest and joy of reading.
- Seeing that my child gets adequate rest and is in school on time with a positive outlook.
- Attending conferences to discuss my child’s progress and attending events which showcase my child’s work and learning experiences.
- Providing and maintaining accurate information on my child’s records for contact.

<table>
<thead>
<tr>
<th>Parent/Guardian:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student:</td>
<td>Grade: Date:</td>
</tr>
<tr>
<td>Teacher:</td>
<td>Date:</td>
</tr>
<tr>
<td>Principal:</td>
<td>Date:</td>
</tr>
</tbody>
</table>
TO: PARENTS OF TRANSPORTED STUDENTS

FROM: CHATTANOOGA BOARD OF EDUCATION

The school bus driver has a great responsibility. Each day he carries a “precious cargo” and his only concern should be to see that all of his passengers are transported to and from school safely. Unfortunately, there are times when children (young and old) do things that cause the driver to be distracted from his job. This is dangerous and cannot be allowed. It is necessary, therefore, that Student Conduct Rules and Regulations be in force and that they are followed without question. Each parent must see that their child understands the importance of good behavior while riding a bus.

Riding a school bus is not a right but a privilege granted to those who are eligible and are able to abide the rules and regulations. It is not right that a student be allowed to ride a school bus when he continues to jeopardize the safety of others. The Board of Education realizes that a hardship may result in having to take your child to and from school but it is sometimes necessary.

Therefore, the Chattanooga School System must have the parent sign an agreement that their child will abide by the rules and regulations. If the rules are broken, appropriate punishment will be administered. Punishment could be in the form of:

1. Student barred from riding the bus (this could be temporary or permanent)
2. Students placed in detention.
3. Students could face other punishment beneficial for the offence (for example, writing on bus seats will result in having to clean the bus seats).

This applies only to students in 5th through 12th grades. There will be no Counseling with them. They have read the rules and you have gone over it with them. Punishment will be immediate, and by the administrator of their respective school. If a student shows an uncontrolled malicious disregard for the safety and well-being of the passengers and driver, it is possible that immediate suspension will occur.

The bus driver accepts the responsibility of getting your child to and from school safely, therefore, what he observes and reports to the administrator is final. The driver is not there to determine the right or wrong of one student in a dispute with another, but is there to report any misconduct or behavior that might keep him from properly doing this job.

For students in Pre-K through 4th grades a counseling process will be administered for controlling discipline and conduct problems, with occasionally some punishment assessed after counseling fails. Only in very rare cases is it necessary to deny riding privileges to students Pre-K through 4th.

Any student who is involved in damage to a school bus will be required to pay for the damage. All students will be assigned to a seat and they will be expected to remain in that seat. Students will not move from their seat to other seats without permission from the administrator, unless some situation exist where the driver’s discretion will be called upon. These incidents will be reported to the administrator.

Riding a school bus is a privilege and the privilege may be removed for not abiding by the bus rider rules.
PLEASE COMPLETE THE FORM BELOW – IN ORDER TO RIDE THE SCHOOL BUS, THIS FORM MUST BE RETURNED WITHIN THE FIRST TWO WEEKS OF SCHOOL. (The form can be returned to teachers, bus drivers or the office)

To the Chattanooga School System:

We have read and discussed with our children the school bus policy and rules. We agree with the Chattanooga School System that these rules should be enforced and that any student who cannot abide by these simple rules should be disciplined and/or counseled according to the stated policy. As parents, we ask that the school contact us by telephone or written letter each time our children are involved in incidents so that we might further counsel our children on proper bus conduct.

Sincerely,

________________________________________________________________________

Date ___________________________________________________________________

Phone Number ___________________________________________________________________

Please write in the names and grade of each child in your family that will ride the school bus. This statement will be in effect for the current school year.

________________________________________________________________________

Grade __________________

________________________________________________________________________

Grade __________________

________________________________________________________________________

Grade __________________

________________________________________________________________________

Grade __________________

________________________________________________________________________

Grade __________________
Authorization will be valid until parent or guardian notifies school of any changes.

Date

Parent or Guardian Signature

________________________________________

Signed

[Signature]

Yes _____ No _____

Note: If my child is listed above, yes

Other Pre-existing, Symptomatic medication (Tylenol) or medicine I have sent with a

hereditary authority the school principal or a designated school employee to administer.

1. __________________________________

2. __________________________________

3. __________________________________

4. __________________________________

IN CASE OF EMERGENCY THE FOLLOWING STEPS ARE TO BE TAKEN:

1. __________________________________

2. __________________________________

3. __________________________________

THE FOLLOWING STEPS ARE TO BE FOLLOWED WHEN MY CHILD IS ILL:

1. __________________________________

2. __________________________________

3. __________________________________

Presenting Symptoms

Chalmaoga School Medical Alert Form

Current Medications

Other Diseases

Neurological Type

Alzheimer’s Type

Attention Deficit Hyperactivity Disorder

Primary Diagnosis

Heart Condition Diagnosed

Seizure Type

Diabetes Type

Allergies

Please check the following conditions that apply to this student:

Name

Phone

Phone

Primary Physician

Address

Business Address & Phone of Mother

Address

Business Address & Phone of Father

Phone

Parent Name

Phone

Student Name

Phone

Credence