Chicago Preparatory Charter Middle School does not discriminate against or limit the admission of any student on the basis of ethnicity, race, gender, socioeconomic status, disability, language background, national origin, intellectual ability, measures of achievement or aptitude, athletic ability, creed, housing status, religion, or ancestry.

APPENDIX 4.2: STUDENT RECRUITMENT AND ENROLLMENT

4.2a: Intent-to-Enroll Form

This Intent-to-Enroll form is to demonstrate interest in your child attending Chicago Preparatory Charter Middle School (Chicago Prep). Signing this Intent-to-Enroll does not obligate your child to attend Chicago Prep, nor does it guarantee admission. Students who will be entering 5th or 6th grade will be eligible for admission. Chicago Prep will grow by one grade every year until we are a full 5th-8th grade school.

<table>
<thead>
<tr>
<th>Student Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Student Name:</td>
</tr>
<tr>
<td>DOB:</td>
</tr>
<tr>
<td>Current Grade Level:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student Address (No P.O. Boxes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street:</td>
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<tr>
<td>Apt. No.:</td>
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<tr>
<td>City:</td>
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<tr>
<td>State:</td>
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<td>Zip Code:</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Parent/Guardian Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Parent/Guardian Name:</td>
</tr>
<tr>
<td>Relationship to Student:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
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<tr>
<td>Street:</td>
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<td>State:</td>
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<tr>
<td>Zip Code:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone 1:</th>
</tr>
</thead>
</table>

| Email Address: |

How did you hear about Chicago Prep? Please circle:  Facebook  Instagram  Word of Mouth
Flier at: ___________________  Event: ___________________  Other: ___________________

I, ____________________________, am interested in sending my child(ren), ______________________, to Chicago Prep Middle School, a proposed charter school in the Bronzeville community, in 2021.

__________________________________  _________________________
Parent or Guardian Signature       Date
Chicago Preparatory Charter Middle School
2021-2022 Application Form

Chicago Preparatory Charter Middle School (Chicago Prep) is a 5-8 school. We are currently accepting applications for students entering 5th and 6th grade only. This Application Form enters your student into the Chicago Preparatory Charter Middle School lottery to be held on Monday, April 5, 2021. Completing this Application does not obligate your child to attend Chicago Prep, nor does it guarantee admission.

<table>
<thead>
<tr>
<th>Application for Grade Level (check one):</th>
<th>Fifth (5th)</th>
<th>Sixth (6th)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Student Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOB:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Grade:</td>
<td>Fourth (4th)</td>
<td>Fifth (5th)</td>
</tr>
<tr>
<td>Siblings: List the full name and grade level of any siblings applying or already enrolled at Chicago Prep:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student Address (No P.O. Boxes)</th>
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</thead>
<tbody>
<tr>
<td>Street:</td>
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<tr>
<td>Apt. No:</td>
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<td>City:</td>
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<tr>
<td>State:</td>
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<td>Zip Code:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/Guardian Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Parent/Guardian Name:</td>
</tr>
<tr>
<td>Relationship to Student:</td>
</tr>
<tr>
<td>Phone 1:</td>
</tr>
<tr>
<td>Phone 2:</td>
</tr>
<tr>
<td>Email Address:</td>
</tr>
</tbody>
</table>

How did you hear about Chicago Prep? Please circle: Facebook Instagram Word of Mouth
Flier at: ___________________ Event: ___________________ Other: ___________________
4.2c: Registration Forms

Dear Families:

We are excited to inform you that your child has been offered a seat at Chicago Preparatory Charter Middle School for the 2021-2022 school year.

Yes! I would like to enroll my child at Chicago Preparatory Charter Middle School for the 2021-2022 school year.

No, while I appreciate your offer, I will be unable to enroll my child/children at Chicago Preparatory Charter Middle School for the 2021-2022 school year. I understand that once I have declined this enrollment position, my child's name will be removed from the waitlist and I would have to reapply to be eligible for enrollment. I have decided not to enroll my child at Chicago Prep because:

To complete the application process, you MUST submit this registration form. Please return to [address] or submit registration form online at www.chiprepmiddle.org no later than Friday, April 23, 2021. If we do not receive your registration form by then, your child’s seat may be offered to someone else.

<table>
<thead>
<tr>
<th>Student Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Student Name:</td>
</tr>
<tr>
<td>DOB:</td>
</tr>
<tr>
<td>Grade for 2021-2022 School Year:</td>
</tr>
<tr>
<td>Current School:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student Address (No P.O. Boxes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street:</td>
</tr>
<tr>
<td>Apt. No:</td>
</tr>
<tr>
<td>City:</td>
</tr>
<tr>
<td>State:</td>
</tr>
<tr>
<td>Zip Code</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/Guardian Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Parent/Guardian Name:</td>
</tr>
<tr>
<td>Relationship to Student:</td>
</tr>
<tr>
<td>Phone 1</td>
</tr>
<tr>
<td>Email 1</td>
</tr>
<tr>
<td>Phone 2</td>
</tr>
<tr>
<td>Email 2</td>
</tr>
</tbody>
</table>

Chicago Preparatory Charter Middle School does not discriminate against or limit the admission of any student on the basis of ethnicity, race, gender, socioeconomic status, disability, language background, national origin, intellectual ability, measures of achievement or aptitude, athletic ability, creed, housing status, religion, or ancestry.
Registration Requirements

Dear Families:

Congratulations on your successful enrollment at Chicago Preparatory Charter Middle School! We warmly welcome you into our new school community and look forward to meeting you soon.

For your immediate attention, please review and complete all enclosed registration forms. If you have any questions, please contact Head of School Ms. Mary Griffin at mgriffin@chiprepmiddle.org or 773-394-1311.

REQUIRED DOCUMENTS FOR REGISTRATION

<table>
<thead>
<tr>
<th>Document</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emergency Contact Information/Permission for Emergency Care</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>2. Dismissal Authorization Form</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>3. Proof of Residency</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>4. Student/Family Residence Questionnaire</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>5. Authorization for Transfer of Records</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>6. Release of Information</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>7. Media Release Form</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>8. Student Information Survey</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>9. Home Language Survey</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>10. Transportation Survey</td>
<td>Friday, June 11, 2021</td>
</tr>
<tr>
<td>11. Medical Requirements Checklist with all required items complete</td>
<td>Friday, July 23, 2021</td>
</tr>
<tr>
<td>12. Authorization to Dispense Medication</td>
<td>Friday, July 23, 2021</td>
</tr>
</tbody>
</table>
1. Emergency Contact Information

<table>
<thead>
<tr>
<th>Student Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Student Name:</td>
<td>Grade (2021-22):</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student’s Primary Residence</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Apt. No:</td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td></td>
<td>Zip Code:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Information for Parent/Guardian #1</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Parent/Guardian Name:</td>
<td></td>
</tr>
<tr>
<td>Relationship to Student:</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td>Apt. No:</td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>Phone 1:</td>
<td>Phone 2:</td>
</tr>
<tr>
<td>Email Address:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Information for Parent/Guardian #2</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Parent/Guardian Name:</td>
<td></td>
</tr>
<tr>
<td>Relationship to Student:</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td>Apt. No:</td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
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<tr>
<td>Phone 1:</td>
<td>Phone 2:</td>
</tr>
<tr>
<td>Email Address:</td>
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</tbody>
</table>

The information below is required in case your child becomes ill or injured at school or in the event of an emergency and you cannot be reached. Please list additional adults who can act in your absence to assume responsibility for your child and pick your child up from school. Must be over 18 years old.

<table>
<thead>
<tr>
<th>Additional Contact Information</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Name of Contact #1:</td>
<td></td>
</tr>
<tr>
<td>Relationship to Student:</td>
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<tr>
<td>Phone 1:</td>
<td>Phone 2:</td>
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<tr>
<td>Name of Contact #2:</td>
<td></td>
</tr>
<tr>
<td>Relationship to Student:</td>
<td></td>
</tr>
<tr>
<td>Phone 1:</td>
<td>Phone 2:</td>
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</tbody>
</table>

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<table>
<thead>
<tr>
<th>Name of Contact #3:</th>
<th></th>
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<tbody>
<tr>
<td>Relationship to Student:</td>
<td></td>
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<tr>
<td>Phone 1:</td>
<td>Phone 2:</td>
</tr>
</tbody>
</table>

I hereby consent to have Chicago Preparatory Charter Middle School provide on-site first aid for minor, non-life-threatening instances. In addition, for situations requiring medical intervention, I consent to Chicago Prep requesting emergency personnel to transport my child to the nearest emergency medical care facility. I understand that this will be provided at my own expense. I understand that this authorization may include providing medical care without first obtaining my consent.

______________________________  
Signature of Parent/Guardian  
______________________________  
Date
2. Dismissal Authorization Form

Please list a minimum of four (4) individuals who have permission to pick your child up from school. Please communicate to the individuals listed that they will need to show a valid form of identification in order to pick your child up. In the event that an individual arrives at the school- seeking to request a Dismissal for a Student and he or she does not have a valid identification or is not on the list of authorized individuals- the school will attempt to contact you seeking to establish a verbal or written authorization. If the school is not able to communicate with you, the school will not authorize the Students' Dismissal.

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>Grade Level</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Number</th>
<th>Relationship to Student</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Name of Parent or Guardian (please print)

Signature of Parent/Guardian ___________________________ Date ___________________________
3. Proof of Residency*

2021-2022

____________________________________  __________________________________________________________

Student(s) Name(s)                                                                              Parent(s)/Guardian(s) Name(s)

_____________________________________________________________

Street Address/Apartment Number

_____________________________________________________________

City/State/Zip Code

If child’s parent/guardian is primary renter or property owner at the above address, please complete the following:

I hereby certify that the above address is my legal residence and the legal residence of my child, ____________________________________________.

Someone else may legally rent or own the above residence and may be listed on the renter’s lease or owners’ deed. If someone other than the parent/guardian rents or owns the residence at the above address, please complete the following:

I hereby certify that the above address is my legal residence and the legal residence of my child, __________________________________ and of __________________________________.

I have enclosed copies of the following TWO documents as proof of residence:

□ Current utility bill
□ Illinois driver’s license or State of Illinois identification card
□ Deed
□ Employee identification number
□ MediPlan/Medicaid card
□ Court documents
□ Illinois Department of Public Aid card
□ Stamped United States Post Office change of address form
□ Illinois state aid check/social security check

____________________________________  ____________

Signature of Parent/Guardian                                                                 Date

*In compliance with Chicago Public Schools Students in Temporary Living Situations (STLS) policy, no homeless child or youth shall be denied immediate enrollment because the student is unable to produce health, immunization or school records, proof of guardianship, or proof of residence

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4. Student/Family Residence Questionnaire

Your child may be eligible for additional educational services through the Federal McKinney-Vento Assistance Act. Eligibility can be determined by completing this questionnaire.

1. Presently, are you and/or your family living in any of the following situations? Check all that apply.

- [ ] Staying in a shelter (family shelter, domestic violence shelter, youth shelter) or FEMA trailer
- [ ] Waiting for foster care placement
- [ ] Sharing the housing of others due to loss of housing, economic hardship or similar reason
- [ ] Living in a car, park, campground, abandoned building, or other inadequate accommodation
- [ ] Temporarily living in a motel or hotel due to loss of housing, economic hardship or similar reason
- [ ] Living alone as a minor student(s) without an adult (unaccompanied youth)

If you checked any box above please complete the remainder of this form and submit it to Chicago Prep staff. If you did not check any box above, you do not need to complete or submit this form.

2. Please list all children currently living with you.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date of Birth</th>
<th>Grade</th>
<th>School Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

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

__________________________________________  ________________
Parent/Guardian Name                     Parent/Guardian Signature Date

<table>
<thead>
<tr>
<th>Phone Number</th>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

Your children have the right to:

- Continue to attend school in the school attended before you became homeless (school of origin).
- Receive transportation to the school of origin
- Enroll in school without giving a permanent address and attend classes while the school arranges for a school transfer, immunization records or other documents required for enrollment.
- Receive the same programs and services, if needed, as provided to all other children served in these programs.
- Have enrollment disputes quickly addressed.

The McKinney Vento Homeless Education Assistance Act and the CPS STLS (Students in Temporary Living Situations) Policy ensure the educational rights above for students who are homeless. A copy of the CPS Notice of Rights of Homeless Students is included in this registration packet.
5. Authorization for Transfer of Records

Parents/Guardians: To ensure the successful enrollment of your child at Chicago Preparatory Charter Middle School, we need your child’s educational records from his/her current school. Please complete the information below and return this form to Chicago Prep. If you are enrolling multiple students at Chicago Prep, you must complete a separate form for each child. We will submit this form to your child’s current school in order to have the records transferred to Chicago Prep.

Name of Student: ____________________________________________

CPS ID number (if applicable): _______________________________________

Date of Birth: _____________________________________________________

Current School Name: ________________________________________________

Current School Address: ______________________________________________

Current School Phone: ________________________________________________

Current School Fax: _________________________________________________

I hereby request that my child’s current school provide a complete copy of my child’s educational and health records (including the cumulative record, NWEA MAP scores, and any files related to Special Education or EL services) to Chicago Preparatory Charter Middle School, where my child will be enrolled in the fall of 2021.

____________________________________
Name of Parent or Guardian (please print)

____________________________________
Signature of Parent/Guardian  Date
6. Release of Information

I hereby authorize Chicago Preparatory Charter Middle School to share and/or request any and all records, data, or information determined to be relevant to the education of my child, __________________________, with/from the Chicago Public Schools, the Illinois State Board of Education, and any other schools and school systems in which my child has previously been enrolled, and any governmental departments, health or social service providers, or other offices whose activities bear directly on the programs or services with which my child is provided at Chicago Preparatory Charter Middle School. I understand that all such information will be kept strictly confidential.

____________________________________
Name of Parent or Guardian (please print)

____________________________________  __________
Signature of Parent/Guardian             Date
7. Media Release and Student Displays
2021-2022

I give permission for Chicago Preparatory Charter Middle School to record, film, photograph, interview, and/or publicly exhibit, display, distribute, or publish my child’s name, appearance, and spoken words during the 2021-2022 school year, whether undertaken by school staff, students or anyone outside the school, including the media. I agree that the school may use, or allow others to use, those works without limitation or compensation. I release the Chicago Preparatory Charter Middle School staff from any claims arising out of my child’s appearance or participation in these works.

____________________________________
Student’s Name

____________________________________
Name of Parent or Guardian (please print)

____________________________________  __________
Signature of Parent/Guardian            Date

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8. Student and Family Information Survey

Name of Student: ________________________________  Date of Birth: ____________________________

Gender: ______________  CPS ID number (if applicable): ________________________________

---

**Student Race and Ethnicity**

**Instructions:** Note that indicating the student’s race and ethnicity is optional and is only used for statistical purposes. If you do choose to answer, please answer both questions. Part A asks about the student’s ethnicity and Part B asks about the student’s race.

**Part A.** Is this student Hispanic/Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.) Choose only one.

☐ No, not Hispanic/Latino
☐ Yes, Hispanic/Latino

_The question above is about ethnicity, not race. No matter which answer you selected, continue and respond to the question below by marking one or more boxes to indicate what you consider this student's race to be._

**Part B.** What is the student's race? Choose one or more.

☐ American Indian or Alaska Native (A person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.)
☐ Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
☐ Black or African American (A person having origins in any of the black racial groups of Africa.)
☐ Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
☐ White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

---

**Student Students**

**Instructions:** Please check the appropriate box for each question.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is your child currently eligible for free or reduced-price lunch at school?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does your child currently receive English Learner (EL) services?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does your child currently have an Individualized Education Plan (IEP)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does your child currently have a 504 plan?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does your child have a known disability?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

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Student and Family Information Survey, continued

Does your child have any medical, physical, learning, or other special needs of which we should be aware?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Is there any other information you think would be helpful for us to have about your child?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

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Complete this Home Language Survey at the student’s initial enrollment in a Chicago Public School. This form must be kept in the student’s folder.

<table>
<thead>
<tr>
<th>School: ________________________________</th>
<th>Room: _____</th>
<th>School ID #: __________</th>
<th>Network: __________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Student Name: ________________________________________</th>
<th>Student IS #: ___________________________________</th>
</tr>
</thead>
</table>

**English**

1. Is a language other than English spoken in your home?
   - [ ] No
   - [ ] Yes

2. Does the student speak a language other than English?
   - [ ] No
   - [ ] Yes

If the answer to either question is yes, the law requires the school to assess your child’s English language proficiency.

**IMPACT REGISTRATION PROCESS**

(For Office use only)
- The Non-English language identified on either question is the Home Language.
- If two different non-English languages are identified, enter the language identified in question 2 as the Home Language.
- Enter ENGLISH as a Home Language ONLY when both questions are answered no.

**Spanish**

1. ¿Se habla algún otro lenguaje que no sea inglés en su hogar?
   - [ ] No
   - [ ] Sí

2. ¿Habla el estudiante un lenguaje que no sea el inglés?
   - [ ] No
   - [ ] Sí

Si la respuesta a cualquiera de las preguntas es "Sí," la ley requiere que la escuela evalúe la fluidez de su niño en el idioma inglés.

**Polish**

1. Czy językim innym niż angielski mówi się w domu?
   - [ ] Nie
   - [ ] Tak

2. Czy uczeń mówi innym językiem niż angielski?
   - [ ] Nie
   - [ ] Tak

If you do not know the language they speak, identify the language they speak through the help available in the school.

**Chinese**

1. 在家中是否說英語之外的一種語言?
   - [ ] 否
   - [ ] 是

2. 該學生是否會說英語之外的一種語言?
   - [ ] 否
   - [ ] 是

If you entered "Other," the exact language must be determined within two weeks after enrollment.

**Arabic**

1. هل تتكلم في البيت بلغة أخرى غير اللغة الإنجليزية؟
   - [ ] نعم
   - [ ] لا

2. هل يتكلم الطالب في اللغة العربية؟
   - [ ] نعم
   - [ ] لا

اذا كانت الإجابة نعم على أي من السؤالين فإن القانون يتحم على المدرسة تقديم عمل للفحص في استخدام اللغة العربية.

**Bosnian/Croatian/Serbian**

1. Da li se u kući govori na stranom jeziku (različitom od engleskog)?
   - [ ] Da
   - [ ] Ne

2. Da li učenik govori neki strani jezik (različit od engleskog)?
   - [ ] Da
   - [ ] Ne

Ukoliko ste na bilo koje od ovih pitanja odgovorili sa “Da”, škola će biti zakonski dužna da procijeni nivo znanja engleskog jezika kod vašeg djeteta.

**Urdu**

1. ایکا کے بھر لگنی چیک کی اعلان کو کہنا چاہیے؟
   - [ ] نہ
   - [ ] ہے

2. ایکا بط بھر لگنی کے اعلان کو کہنا چاہیے؟
   - [ ] نہ
   - [ ] ہے

Notes:
- If the parent/guardian does not speak English and the school does not have staff who speaks the parent/guardian’s language, identify the language spoken by the parent/guardian through any assistance available in the school.
- If exact name of the language cannot be determined, enter “Other” as a temporary entry. If you entered “Other,” the exact language must be determined within two weeks after enrollment.
- If the language spoken by the parent is not reflected in this HLS, please visit the OLCE Forms page on the Knowledge Center at bit.ly/OLCEforms and click on Home Language Survey in Additional Languages.
Complete this Home Language Survey at the student’s initial enrollment in a Chicago Public School. This form must be kept in the student’s folder.

School: ________________________________  Room: _____   School ID #: __________  Network: __________________

Student Name: ________________________________________   Student IS #: ___________________________________  

### English

1. Is a language other than English spoken in your home?
   - [ ] No  
   - [ ] Yes  
   (Language)

2. Does the student speak a language other than English?
   - [ ] No  
   - [ ] Yes  
   (Language)

If the answer to either question is yes, the law requires the school to assess your child’s English language proficiency.

### IMPACT REGISTRATION PROCESS

(For Office use only)

- The Non-English language identified on either question is the Home Language.
- If two different non-English languages are identified, enter the language identified in question 2 as the Home Language.
- Enter ENGLISH as a Home Language ONLY when both questions are answered no.

### Romanian

1. În familia dvs. se vorbește și altă limbă decât engleză??
   - [ ] Nu  
   - [ ] Da  
   (limba)

2. Studentul vorbește și altă limbă decât engleză?
   - [ ] Nu  
   - [ ] Da  
   (limba)

Dacă așa răspunses afirmativ la oricare dintre întrebările, prin lege, instituția de învățământ trebuie să evaluateze cunoștințele de limbă engleză ale copilului dvs.

### Yoruba

1. Njẹ ẹ n so ede miran yato si Èdè-Gbàṣá ninu idile yin bi?
   - [ ] Bẹ̀ẹ̀kọ̀  
   - [ ] Bẹ̀ẹ̀nì  
   (Èdè)

2. Sé akekọkọ náa n so ede miran yato si Èdè-Gbàṣá bi?
   - [ ] Bẹ̀ẹ̀kọ̀  
   - [ ] Bẹ̀ẹ̀nì  
   (Èdè)

Tí idáhún ní ọdún tó ní ẹ̀kọ̀ẹ̀kọ̀ náa bí èdè Gbàṣá dirà.

### Assyrian

1. Համարե ուսումնական տարածքում իսպաներեն է ուսուցվում ե՞ւ ուսուցյալ մաթեմատիկայում աշխատում ե՞ս?
   - [ ] Ոչ  
   - [ ] Անջատում  
   (արաբական)

2. Համարե ուսումնական տարածքում իսպաներեն է ուսուցվում ե՞ս?
   - [ ] Ոչ  
   - [ ] Անջատում  
   (արաբական)

Հերթական, որպեսզի մեկնարկեն զարգացումը, ապա՝ երբեևել որևէ դեպքում, իսպաներեն է ուսուցվում ե՞ս.

### Gujarati

1. શું આપણા ઘરમાં અંગેજ સિવાય લાઇફશીની ભાષા અને કોઈ બાબતો બોલવામાં આવે છે?
   - [ ] ના  
   - [ ] હંમેશા  
   (ભાષા)

2. શું વિદ્યાર્થીઓ અંગેજ સિવાય કોઈ ભાષા બોલવામાં આવે છે?
   - [ ] ના  
   - [ ] હંમેશા  
   (ભાષા)

જેની વિદ્યાર્થીઓમાંથી કેટલાક શક્તિશાળી જીવન પણ માટે ઘરેફિર ત્યાં શક્તિશાળી પછી તથા વિદ્યાર્થી શક્તિશાળી માટે આખી ઉત્સાહ માંગે છે.

### Tagalog

1. May iba pa bang lenguwahe bukid sa Ingles na ginagamit sa iyong tahanan?
   - [ ] Hindi  
   - [ ] Oo  
   (Lengguwahe)

2. May ginagamit ba mo ibang lenguwahe an ang mag-aaral bukid sa Ingles?
   - [ ] Hindi  
   - [ ] Oo  
   (Lengguwahe)

Ayon sa baten, kun "Oo" ang sagot sa parehong tanong, kailangan marin ng paaralan an kakayahan at kaalaman ng mag-aaral sa wikang Ingles.

### Korean

1. 1. 가장에서 사용하는 언어 중에서 영어를 제외한 다른 언어가 있습니까?
   - [ ] Hindi  
   - [ ] Oo  
   (Lengguwahe)

2. 학생이 영어 이외의 다른 언어로 구사할 수까요?
   - [ ] Hindi  
   - [ ] Oo  
   (Lengguwahe)

Notes:
- If the parent/guardian does not speak English and the school does not have staff who speaks the parent/guardian’s language, identify the language spoken by the parent/guardian through any assistance available in the school.
- If exact name of the language cannot be determined, enter “Other” as a temporary entry. If you entered “Other,” the exact language must be determined within two weeks after enrollment.
- If the language spoken by the parent is not reflected in this HLS, please visit the OLCE Forms page on the Knowledge Center at [bit.ly/OLCEforms](http://bit.ly/OLCEforms) and click on Home Language Survey in Additional Languages.
10. Transportation Survey

Parents/Guardians: Please complete this form and return to Chicago Preparatory Charter Middle School.

PLEASE CHECK THE APPROPRIATE BOX (to be filled out by parent/guardian)

☐ My child will walk to and from school

☐ My child will receive a ride to and from school

☐ My child will take the CTA to and from school

☐ I have a child with disabilities for whom transportation is provided pursuant to an Individualized Education Program (IEP) or 504 Plan

☐ Carpool: our family is interested in carpool options. Please share my contact information with other interested families

Is there anything else regarding transportation that we should be aware of?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________
11. Medical Requirements Checklist*

In order to keep your child’s health records up to date and to provide proper health services, your child will need a Physical Examination by your family physician. Use the following check list to ensure you have completed all the required medical documents.

Have your physician conduct a Physical Examination of your child. Please be sure your child’s physician includes:

1. **A Physical Examination form** (your doctor will have this).
2. **Dental Exam:** Students entering 6th grade must have a dental exam completed by a licensed dentist prior to May 15th of the current school year.
3. **Vision Exam:** Students entering the State of Illinois for the first time must have a vision exam completed by the first day of school or no later than October 15th.
4. **Complete Immunization Record.** Please note the following CPS immunization requirements for enrollment:
   - Diphtheria, Pertussis (Whooping Cough), Tetanus (DTP/Td)
   - Inactivated Polio
   - Measles
   - Rubella
   - Mumps
   - Hepatitis B
   - Varicella (Chicken Pox)
   - Haemophillus Influenza, Type B (HIB)
5. Chicago Preparatory Charter Middle School’s ‘Physician and Parent/Guardian Authorization to Dispense Medication’ Form. Your physician will need to sign this form.

*In compliance with Chicago Public Schools Students in Temporary Living Situations (STLS) policy, no homeless child or youth shall be denied immediate enrollment because the student is unable to produce health, immunization or school records, proof of guardianship, or proof of residence.
12. Physician and Parent/Guardian Authorization to Dispense Medication

Section to be completed by licensed prescriber

Student Name: ____________________________  Parent Name: ____________________________
Physician Name: __________________________  Physician Phone: _________________________
Name of Medication: ________________________  Route: _________________________________
Dosage: __________________________________  Frequency/Administration Time(s): _________
Other Directions: ________________________________________________________________

Date of Order: ____________________________  Discontinuation Date: ______________________
Diagnosis: ________________________________  Possible Side Effects: ______________________
Signature of Physician/Licensed Prescriber: ________________________________
Date: _________________________________

Section to be completed by parent/guardian

Student Name: ____________________________  Date of Birth: ____________________________
Parent(s)/Guardian(s) Name ______________________________
Parent(s)/Guardian(s) Home Phone: _________________________________
Parent(s)/Guardian(s) Work Phone: _________________________________
Parent(s)/Guardian(s) Cell Phone: _________________________________
Name of Medication ____________________________________________
Child’s Food or Drug Allergies: __________________________________

I give permission to the school to administer my child’s medication, to share information relevant to the prescribed medication, to determine if self-administration of medication is safe and appropriate for my child’s health, and to allow self-administration of medication. I hereby release Chicago Preparatory Charter Middle School, its staff members, and its officers from any liability associated with administration of my child’s medication. I understand that medication may be destroyed if it is not picked up within one week following termination of the order or one week beyond the end of the school year.

____________________________________
Name of Parent or Guardian (please print)

____________________________________  ______________________
Signature of Parent/Guardian  Date
Students in Temporary Living Situations (STLS)

Notice of Rights of Homeless Students

The Board of Education of the City of Chicago (Board) shall provide an educational environment that treats all students attending the Chicago Public Schools (CPS) with dignity and respect. Every student in a temporary living situation shall have equal access to the same free and appropriate educational opportunities as students who are permanently housed. This commitment to the educational rights of students in a temporary living situation, youth, and youth not living with a parent or guardian, applies to all services, programs, and activities provided or made available by the Board.

A student is considered to be in a temporary living situation if he or she lacks a fixed, regular, and adequate nighttime residence and includes children and youth who are:

- sharing the housing of other persons due to loss of housing, economic hardship, or similar reason;
- living in a motel/hotel, trailer park or camping ground, due to lack of alternative, adequate housing;
- living in emergency or transitional shelters;
- living in cars, parks, public spaces, abandoned building, substandard housing, bus or train station, or similar setting;
- abandoned in hospitals;
- migratory children living in one of the above settings;
- youth not in the custody of a parent/guardian (unaccompanied youth) of any age, in one of the above settings.

All STLS Students Have Rights To:

- **Immediate school enrollment.** A school must immediately enroll students even if they lack health, immunization or school records, proof of guardianship, or proof of residence. “Enrollment” means enrolled into the school, attending classes and participating fully in school activities.

- **Enroll In:**
  - the school he/she attended when permanently housed or the school in which he/she was last enrolled (school of origin)
  - any school that permanently housed students living in the same attendance area in which the STLS student or youth is actually living are eligible to attend (attendance area school)

- **Remain** enrolled in his/her selected school for as long as he/she remains in a temporary living situation or, if the student becomes permanently housed, until the end of the academic year.

- **Enroll in** preschool

- **Access** to charter schools, selective enrollment schools, magnet schools, and all other CPS programs in the same manner as students who are permanently housed and assistance with application process will be provided upon request

- **Participate** in tutoring services beyond those provided to all students; school-related activities; and/or receive other support services

- **Receive** free school meals, fee waivers, free uniforms, and low-cost or free medical referrals

- **Transportation services:** If parents/caregivers choose to continue their child’s education in the school of origin and transportation is requested, CPS will provide transportation to and from the school of origin, and all school-related activities, for as long as the student is in a temporary living situation or, if the student becomes permanently housed, until the end of the academic year.

  - Eligible students receive CTA transportation cards and adult caregivers of eligible students in grades PK-6 receive CTA transportation cards to accompany the student to/from school. Eligible students in grades PK-6 whose caregiver is unable to accompany them on public transportation due to a hardship may apply for yellow school bus service by submitting documentation or affidavit of their inability to transport the student. Examples of a “hardship” situation are:
    - Parent/caregiver employment, job training, or education program
    - Parent’s/caregiver’s mental and/or physical disability
    - Children need to be transported to and from schools at different locations
    - Court order, DCFS, or DCFS contract agent requires activities that do not enable parent/guardian to transport children to and from school
    - Rules of shelter or similar facility will not permit parent/caregiver to leave to transport children to and from school
    - Other good cause why parent/caregiver cannot use public transportation to transport children to and from school

**Students who temporarily reside outside of Chicago due to homelessness and attend their CPS school of origin receive transportation assistance as do students experiencing homelessness who live in the City of Chicago but attend a school of origin outside of CPS.**

**Dispute Resolution:** When a school official denies a student in a temporary living situation enrollment, eligibility, school selection and/or transportation, the parent or student may file a complaint with the CPS STLS Department. The STLS Department will attempt to resolve the dispute in a timely manner. The STLS Department will refer you to free and low-cost legal services to help you, if you wish. During the dispute, the student must be immediately enrolled in the school with participation in school activities and/or provided transportation until the dispute is resolved. Every Chicago Public School, including charter schools, has an STLS Liaison who will assist you in making enrollment decisions, provide notice of the dispute resolution process, if needed assist you in completing the dispute resolution forms and refer you to low-cost legal assistance.

For more information about the rights of STLS students in Chicago Public Schools, call the STLS program at (773) 553-2242, fax at (773)553-2182, email at STLSInformation@cps.edu, go to www.cps.edu/STLS, or visit the STLS policy at www.cps.edu/STLSpolicy.
4.2d: Lottery Policy

Chicago Prep Lottery Policy

If Chicago Prep receives more applications than there are seats available for any grade level, then we will conduct a lottery in compliance with Illinois Charter School Law.

In our planning year, Chicago Prep will begin accepting student applications on January 1, or, if not authorized by January 1, within five business days of charter authorization. Each year thereafter, Chicago Prep will begin accepting applications on October 1. Applications may be completed online or on paper application form, mailed to Chicago Prep, or delivered in person. The deadline for applications is April 1 at 5:00pm, or the first business day after if April 1 is a Saturday or Sunday. After April 1 at 5:00pm, students may still apply, but those applications will be placed at the end of the waitlist in the order they were received, after the lottery is conducted.

Our lottery takes place on April 5 each year, or the first business day after. The lottery will be blind and randomized to provide each student an equal chance at admission. It is open to the public and will be recorded; CPS officials are invited to attend or to watch live. The lottery is run by an automated, randomized software program (included in line 36 of the Appendix 3.1). Preference will be given to siblings in an effort to keep families together; SchoolMint will be set up to select siblings first. After we reach our capacity for enrollment in each grade level, we will continue drawing names to create a waitlist until all names have been called.

Families of all students, both accepted and waitlisted, will be notified of their status phone, email, and mail. Emails and letters will be sent within five business day, as well as personal phone calls to each family. For any accepted families who do not respond to the initial email, mail, and/or phone call, Chicago Prep will call two more times in an attempt to make contact and ensure they know of their acceptance. Accepted families will have three weeks from the date of the lottery to accept their seat. Families who are waitlisted will receive notification of the process for enrollment from the waitlist.

Families have until April 23 (or the first business day after) at 5:00pm to provide to the school, in hand, a complete registration form and acceptance of enrollment. If the registration form is not received either online or at the school by 5:00pm on that date (after notification via email, mail, and three phone calls), we will remove the student and begin offering spots to students on our waitlist. Students who are removed may reapply at any time and will be added to the end of the waitlist.

Students on the waitlist will be accepted to Chicago Prep on a rolling basis as spaces become available. Parents/guardians of waitlisted students who are offered an open seat will receive notification via email and three phone calls, and will have five business days to both accept and register their child at Chicago Prep. If a family does not accept the seat and submit a complete registration form for their child within the five business day window, that seat will be released to the next student on the waitlist. The waitlist will be updated and submitted to the authorizer quarterly. If a student’s name is removed from the waitlist for any reason, the reason will be documented on the waitlist that is sent to the authorizer.