### Fernwood Montessori

2015-2016 Parent Newsletter #2 September 8, 2015



# How are we doing?

As part of MPS' commitment to customer service, there is a "Comment Box" located across from the Office. Please fill out a comment card in order to provide feedback and comments about your experience at Fernwood.

### **Upcoming Events**

### **PTO Meeting**

Wednesday, September 9<sup>th</sup>, 6:15 pm Fernwood Library

#### **Back-to-School Picnic**

Saturday, September 12<sup>th</sup>, 11am – 2pm (note correction)
Fernwood's East Playground
\*\*\* VOLUNTEERS NEEDED! (see page 3) \*\*\*

### **School Governance Council Meeting**

Monday, September 14<sup>th</sup>, 5:30 pm Fernwood Library

#### **Open House**

Thursday, September  $17^{th}$ , 6:00 - 7:30 pm

### **Third Friday**

Friday, September 18<sup>th</sup>
Please be sure your child is in attendance today!

### Inflatables

### Back-to-School Picnic

The annual Back-to-School Picnic is on

Saturday, September 12<sup>th</sup>, 11 am – 2 pm.

Please help us start this school year with a SPLASH!

Please sign up to VOLUNTEER; we have one hour shifts

available so you can still enjoy the event with your family ©

http://vols.pt/E9eUm2

### If your last name begins with

<u>A-D</u>: please bring VEGGIES (cut-up)

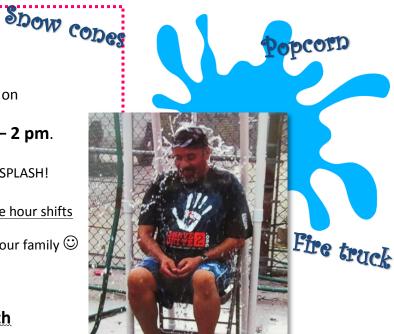
<u>E-I</u>: please bring BAG OF CHIPS

<u>J-M</u>: please bring DESSERT

N-R: please bring SALAD

<u>S-V</u>: please bring CASE OF WATER or JUICE BOXES

W-Z: please bring FRUIT (cut-up)



Dunk tank

Bounce house

Food

### **K3 and K4 Early Dismissal Update**

Due to construction

~

All K3 and K4 students MUST be ready to go out to the East Playground between 10:30am and 10:45am.

If you <u>pick up your child at dismissal</u>, please arrive on the <u>East Playground by 10:45am</u>.

Children taking the bus will board by 10:45 so that busses can pull out by 11:00am.

Thank you for your cooperation during this exciting time!



Soccer registration is open for 1<sup>st</sup>-3<sup>rd</sup>

and 4<sup>th</sup>-6<sup>th</sup> graders. Please have forms turned in by Monday, September 14<sup>th</sup>.

We are in need of **coaches** for 4<sup>th</sup>-6<sup>th</sup> grade.

Please see Mr. Comp to volunteer.

Thank you.

# MPS MUSIC LESSONS



Milwaukee Recreation and the MPS Music Department are pleased to offer the following Youth Music Lessons on Saturdays this fall:

- Acoustic Guitar
- Band
- Brass
- Choir
- Drumline
- Harp

- Piano
- Violin
- Viola
- Percussion
- Voice
- Woodwinds

All registered patrons must attend the Organization Day held at MPS Central Services (5225 W. Vliet St.) on Saturday, September 19, 2015, 8:00a.m.-12:00p.m. The Organization Day will provide patrons the following opportunities: Rent a musical instrument for the entire 15-16 School year for \$10 and purchase a method book for \$5. ALL RENTALS and Method Book payments Must Be Cash or Check. On December 19, 2015, all music lessons at each site will come together to perform a Winter Concert demonstrating their skills developed during the semester. Please call (414) 475-8811 with any questions. Register online at MilwaukeeRecreation.net.



MILWAUKEE RECREATION
SINCE 1911 Experience Life.

PUBLIC SCHOOLS

For specific class listings, see pages 14 & 15 of Milwaukee Recreation's Fall Recreation Guide, available at MilwaukeeRecreation.net. Please call (414) 475-8811 with any questions.

### **Alternate Household Income Form**

MPS is participating in the Community
Eligibility Program, which now allows all
students – regardless of income – to receive
breakfast and lunch at no charge.

However, the district still needs to collect income information from families to assists us as we apply for grants and for other projects.

Please be sure to complete the attached income survey forms and return the forms no later than **SEPTEMBER 11, 2015** or at their earliest opportunity. Thank you.

### PARENT-TEACHER CONFERENCES

When do you prefer to have Parent-Teacher Conferences?

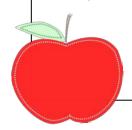
Get your vote in now!

Take the survey:

https://www.surveymonkey.com/r/BGC5HTJ

Survey closed on Wednesday,

September 9<sup>th</sup>.



### **Piano and Strings**

The deadline for piano and string applications was Friday, September 4<sup>th</sup>.

The programs are currently full. After 3<sup>rd</sup>

Friday, we will examine the budget. At that time, we may be able to entertain more applications.

Thank you for your understanding.

# CAMP FERNWOOD

Camp Fernwood is looking for donations of

- paper towels
- facial tissue

Donations can be dropped off in "Room 1," located to the left of the Nurse's Office on the lower level.

Thank you in advance!



Troop 8344, for 3<sup>rd</sup> grade girls, will have our first meeting at Fernwood on Monday, September 14 from 6:00 - 7:30.

The girls will be earning their yoga badges, so please bring a yoga mat or towel. New girls are always welcome!

If you have any questions please contact Jen Sarnowski at jensarnowski@gmail.com

### **Kids After School Yoga**

with Ellie Pierson!

Sign up for the Fall Session!

Class will be held September-November. Wednesdays, Thursdays, or Fridays from 2:30-3:30 in the auditorium.

The Wednesday class is reserved for K5 and 1st grade. Classes will begin the week of September 14th.

An eight week session is \$52.

Class size is limited, so please don't wait to e-mail the instructor elliepiersonyoga@gmail.com.



## **STAY CONNECTED**

#### Like us on Facebook



Fernwood Montessori has a NEW, \*official\* Facebook page. "Like" the Fernwood Montessori School page to stay up-to-date on school happenings and get additional information.

#### **Fernwood Montessori Website**

Check out our \*updated\* schools website at



http://www5.milwaukee.k12.wi.us/school/fernwood/.

This is a great resource to find staff contact information, learn about upcoming events, download newsletters and documents, and see highlights of our school.



Please be sure Fernwood has your UP-TO-DATE EMAIL ADDRESS so we can send you the weekly newsletter.

ALL newsletters are being sent home electronically, no more paper copies.

| inank | you for | your co | operation. |  |
|-------|---------|---------|------------|--|
|       |         |         |            |  |

### **Fernwood Parent Newsletter Delivery**

We have a weekly Parent Newsletter; in order for us to save on the cost of paper we would like to send all our parents the newsletter electronically. Please provide us with your email (please print legibly):

| Parent's name: | _ Email: |
|----------------|----------|
| Parent's name: | _ Email: |
| Child's name:  | Room:    |

Note: The newsletter will also be found on our website:

http://www5.milwaukee.k12.wi.us/school/fernwood/

Return this form to Ms. Burns in the office.





### Fernwood Montessori School

3239 South Pennsylvania Avenue Milwaukee, Wisconsin 53207

Phone: (414) 294-1300 Fax: (414) 294-1315

September 4, 2015

Dear Fernwood Families,

As many of you know the construction project for the new addition is starting soon. Following a preconstruction meeting yesterday, the timeline has been pushed forward slightly and the safety fence for the project will be going up on Tuesday morning, September 8<sup>th</sup>. For this reason we will need to adjust the dropoff and pick-up procedures for the school.

The two entrances off the West playground (Doors 3 and 4) will no longer be accessible after Tuesday morning for entry or exit from the building. All students and staff will enter the building through Door 1 and Door 2.

Please use the following routines when dropping off and picking up your child(ren).

ENTRY PROCEDURES - Students will be allowed to enter the building at 7:30 to reduce congestion

- Door 2 (main door) is for primary students only (K3-K5)
  - Siblings who escort a primary aged brother or sister may continue to use Door 2 until routines are established.
- Door 1 is for lower elementary, upper elementary and adolescent students.
  - Please use Stairwell 1 to go to the basement or up to the 2<sup>nd</sup> or 3<sup>rd</sup> floors. DO NOT cut across the 1<sup>st</sup> floor.

**EXIT PROCEDURES - Primary and lower elementary** students will be exiting with their teachers at <u>2:30</u> **Upper elementary and adolescent students** will be exiting with their teachers at <u>2:35</u>

Parents who pick up their children are asked to:

- **Not** enter the building. Over 700 children will be exiting from Door 1 and Door 2 in a 10-minute time frame. Therefore, we need to keep corridors and stairwells clear for safety reasons.
- Stand near the tot-lot (play structure) away from the stairs.
- Greet your child as his/her class exits the building and comes down the stairs onto the playground

The class will then proceed to the busses, beginning on Pennsylvania Ave. and then going around the corner to the busses on Falling Heath PI. If you did not see your child as they exited, the class will come around to the playground again for you to pick them up. It is important that only teachers and students be on the sidewalk to avoid confusion.

#### **PARKING**

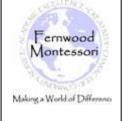
Parents are asked NOT to park on the school side of Pennsylvania Ave. or Falling Heath Pl. as it is reserved for bus/van pick-up.

Thank you for adhering to these procedures as we begin the journey into the construction of the new Fernwood Montessori School.

Sincerely,

# SAVE THE DATE

Please join the Fernwood Montessori PTO facebook group to stay connected throughout the school year



### Annual Fernwood Montessori Back to School Picnic

When: Saturday Sept. 12th, 2015 11 am - 2pm

## Where: Fernwood East/West Playground depending on construction

Join the Fernwood family as we celebrate back to school. Join us Saturday Sept. 12<sup>th</sup> for the back to school picnic. Lots of activities for the kids.

Bounce Houses

Dunk tank

(\$1 for 3 throws)

Fire Truck (be prepared to get wet)

Games / Tattoos

Snow Cones / Popcorn

Lunch

Fernwood PTO will provide hot dogs, plates, utensils, and napkins.

Please bring a dish to pass by last name as assigned below:

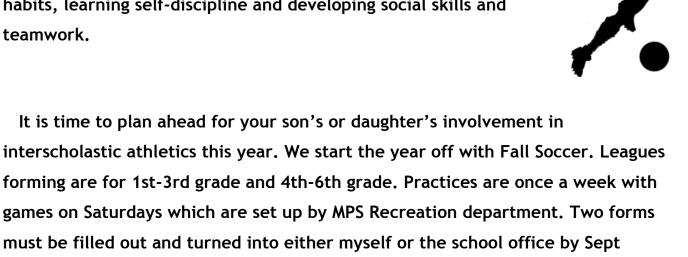
A-D Veggies (Cut-up) N-R Salads

E-I Bag of Chips S-V Case of water or Juice Boxes

J-M Dessert W-Z Fruit (Cut-up)

<u>Please sign up to volunteer.</u> This picnic would not be possible without you! Volunteering is a great way to get involved. We need set up help on the playground and in the kitchen; bounce house supervisors, game helpers, tattoo appliers, teardown, clean-up crew, etc. Please email: Lisa Pieper (<a href="mailto:limpieper@yahoo.com">limpieper@yahoo.com</a>) to sign up for an hour to help or call/text Lisa at 414-581-3737 or sign up online via the link on the PTO facebook page.

Welcome to the 2015-2016 school year. On behalf of the Fernwood Athletic Department, I welcome all students to participate in our interscholastic sports programs. Sports are an excellent way to grow emotionally and physically while building healthy habits, learning self-discipline and developing social skills and teamwork.



gym. We are in need of coaches especially for the 4-6th soccer teams. We presently only have one coach. The more coaches we get the more teams we can add which allows for more playing time for the kids.

14th. The forms are the activities permit and the concussion agreement. Both

can be found on Fernwood's home web page or picked up at my office in the

As always I am excited for another successful and fun season.

Feel Free to Email or call with any questions or concerns.



Mr. Comp P.E./Sports Coordinator

414-294-1327 <u>compra@milwaukee.k12.wi.us</u>

# Activities Permit Elementary School Sports Leagues 2015-2016

**Circle Sport** 

| Sc                      | OCC        | er              |        |       | Bas          | ketball     |      |                           | Volleyball         |
|-------------------------|------------|-----------------|--------|-------|--------------|-------------|------|---------------------------|--------------------|
|                         |            |                 |        |       |              |             |      |                           |                    |
| Student na              | ame        |                 |        |       |              |             |      |                           |                    |
| Address                 |            |                 |        |       |              |             |      |                           |                    |
| City, Zip               |            |                 |        |       |              |             |      |                           |                    |
| School and sport        | d   I      | ernwood         | M      | on    | tessori      |             |      |                           |                    |
| Birth Date              | ٠,         |                 |        |       |              |             |      | □Female                   | □ Male             |
| Age & Gra               | de         |                 |        |       |              |             |      |                           |                    |
| Parent                  |            |                 |        |       |              |             |      |                           |                    |
| email(s)                |            |                 |        |       |              |             |      |                           |                    |
|                         |            | filled out by F | arent  | t/Le  | gal Guardiar | n-Please pi |      | and bring to S            |                    |
| Parent/Le               | -          | _               |        |       |              |             |      | Home phone                | #                  |
| Guardian                | <u>nam</u> | e               |        |       |              |             |      | 18/ a what in he a sa a d | <u> </u>           |
| Address                 |            | 1               |        |       |              |             |      | Work phone #              | Ŧ                  |
| List any pr<br>injuries | evio       | us              |        |       |              |             |      |                           |                    |
| List any ph             | •          | al              |        |       |              |             |      |                           |                    |
| List any al             | lergie     | es              |        |       |              |             |      |                           |                    |
|                         |            | ation the athle | ete    |       |              |             |      |                           |                    |
| may be ta               |            |                 |        |       |              |             |      |                           |                    |
| Physician               |            |                 |        |       |              |             | Off  | ice Phone #               |                    |
|                         | ıries      | are a natural   | oart c | of sp | orts. MPS is | not respo   | nsik | ole for injuries          | incurred by        |
| players du              | ıring      | official games  | or pr  | acti  | ce. Players  | should be   | cov  | ered by their             | own insurance.     |
| Name of F               | lealt      | h insurance     |        |       |              |             |      |                           |                    |
| In case of              | eme        | rgency, please  | list t | wo    | persons you  | recomme     | nd   | we call if you o          | cannot be reached: |
| Name                    |            |                 |        |       |              |             | F    | Phone #                   | _                  |
| Name                    |            |                 |        |       |              |             | 1    | Phone #                   |                    |



MPS Recreation Division 5225 West Vliet Street Milwaukee, WI 53208 Phone: (414) 475-8180 Fax: (414) 475-8541

Website: www.MilwaukeeRecreation.net

June, 2012

#### Dear Parent/Guardian and Coach:

The State of Wisconsin and the Milwaukee Public Schools (MPS) recognize that concussions and head injuries may result in youth who participate in sports and other recreational activities and that there are dangerous risks when a concussion or head injury is not properly checked or managed.

The State of Wisconsin recently passed Wisconsin Act 172 which requires improved education of sports related head injuries and concussions for parents, athletes and coaches. As a result, MPS has conducted a complete review of its sports and recreational activities and developed the following set of required guidelines to ensure the safety of all youth participants:

- For each sport, MPS will distribute a Head Injury and Concussion Information sheet to all parents/guardians and youth participating in competitive sports activities.
- 2. Parents/guardians <u>and</u> athletes must sign and return an Agreement Form indicating they have reviewed and understand the information about head injuries and concussions.
- Youth <u>are not allowed</u> to practice or compete until the signed Parent/Guardian and Athlete Agreement Forms are on file with MPS.
- 4. Coaches are also required to return an Agreement Form indicating they have read and understand the information before they can begin coaching. Furthermore, all coaches of competitive sport activities are required to follow the Wisconsin Interscholastic Athletic Association guidelines for the management of head injuries and concussions.

Additionally, all parents/guardians and coaches, including volunteers, are <u>highly encouraged</u> to complete a free course relating to concussions in sports among kids and teens at www.preventingconcussions.org.

Thank you for working with us to ensure the safety of our youth athletes. If you have any questions regarding these requirements, please contact me at 414-475-8219.

Sincerely,

Bill Molbeck MPS Commissioner of Sports & Athletics







### **PARENT & ATHLETE AGREEMENT**

As a Parent and as an Athlete it is important to recognize the signs, symptoms, and behaviors of concussions. By signing this form you are stating that you understand the importance of recognizing and responding to the signs, symptoms, and behaviors of a concussion or head injury. This form must be completed for every sports season and every youth athletic organization the athlete is involved with.

| Parent Agreement: Click here → Parent Concussion and Head Injury Information  |
|---|
| l have <b>read</b> the Parent Concussion and Head Injury Information and <b>understand</b> what a concussion is and how it may be caused. I also understand the common signs, symptoms, and behaviors. I agree that my child must be removed from practice/play if a concussion is suspected. |
| I understand that it is my responsibility to seek medical treatment if a suspected concussion is reported to me.  |
| I understand that my child cannot return to practice/play until providing written clearance from an appropriate health care provider to his/her coach.  |
| I understand the possible consequences of my child returning to practice/play too soon.   |
| Parent/Guardian SignatureDate   |
| Athlete Agreement:  |
| I have <b>read</b> the Athlete Concussion and Head Injury Information and <b>understand</b> what a concussion is and how it may be caused.  |
| I understand the importance of reporting a suspected concussion to my coaches and my parents/guardian.  |
| I understand that I must be removed from practice/play if a concussion is suspected. I understand that I must provide written clearance from an appropriate health care provider to my coach before returning to practice/play.   |
| I understand the possible consequence of returning to practice/play too soon and that my brain needs time to heal.  |
| Athlete SignatureDate   |
|   |



### **Questions and Contact Information**

| Name                                     |                      |                                | _Date                                       |
|--|----------------------|--------------------------------|---|
| Address                                  |                      |                                |   |
| City                                     |                      | Zip                            | _County                                     |
| Phone                                    | E                    | Email                          |   |
| Age School                               |                      | School Distric                 | ot  |
| Check all that appl<br>I participate in: | у                    |                                |   |
| O Soccer<br>O Track & Field              | O Tennis             | O Volleyball<br>O Cheerleading | O Wrestling<br>O Skiing/Snowboarding<br>ing |
| Name of Current T                        | eam                  |                                |   |
| 1. Have you ever ha                      | ad a concussion?     | , if yes, hov                  | v many?                                     |
| 2. Have you ever ex                      | perienced concussion | n symptoms? [                  | oid you report them?                        |
| Emergency Contac                         | ets:                 |                                |   |
| Name:                                    |                      | _ Relationship:                |   |
| Phone Number:                            |                      |                                |   |
| Name:                                    |                      | _ Relationship:                |   |
| Phone Number:                            |                      |                                |   |

Please complete this form and return to the person operating the youth athletic activity.



# 2015-2016 Alternate Household Income Form Only 1 Form per Family

Your school is a Community Eligible school, which means <u>all</u> students qualify for free meals. However, to determine eligibility to receive <u>additional</u> benefits beyond free meals for your child(ren) and school, please complete a household income form. Return form to: **Your school secretary no later than September 11**<sup>th</sup>.

- 1. Select the total number of people in your household. Be sure to include all children and adults, related and unrelated, that live in a single dwelling and share income and expenses.
- 2. Select the box that represents the range of annual household income. Make sure to include all of the following income sources: work, welfare, child support, alimony, pensions, retirement, Social Security, SSI, VA benefits, child income and/or all other income. The amount should be before any deductions for taxes, insurance, medical expenses, child support, etc.

| 1. Total No. of people    | 2.    | Select the appropriate range of combined annual income for all people in the |                          |  |  |
|---------------------------|-------|--|--------------------------|--|--|
| in household              |       | household (Include all income sources listed above, before taxes.)           |                          |  |  |
| □ 1 —                     | -     | <b>□</b> \$0 - \$21,775  | ☐ At or Above \$21,776   |  |  |
| <b>2</b>                  | -     | <b>□</b> \$0 - \$29,471  | ☐ At or Above \$29,472   |  |  |
| <b>□</b> 3 —              | -     | <b>□</b> \$0 - \$37,167  | ☐ At or Above \$37,168   |  |  |
| <b>4</b> —                | -     | <b>4</b> \$0 - \$44,863  | ☐ At or Above \$44,864   |  |  |
| □ 5 —                     | -     | <b>□</b> \$0 - \$52,559  | ☐ At or Above \$52,560   |  |  |
| □ 6 —                     | -     | <b>□</b> \$0 - \$60,255  | ☐ At or Above \$60,256   |  |  |
| <b>a</b> 7 —              | -     | □ \$0 - \$67,951   | ☐ At or Above \$67,952   |  |  |
| □ 8 —                     | -     | <b>□</b> \$0 - \$75,647  | ☐ At or Above \$75,648   |  |  |
| <b>9</b> —                | -     | <b>□</b> \$0 - \$83,343  | ☐ At or Above \$83,344   |  |  |
| <b>1</b> 0 —              | -     | <b>□</b> \$0 - \$91,039  | ☐ At or Above \$91,040   |  |  |
| □ 11 —                    | -     | <b>□</b> \$0 - \$98,735  | ☐ At or Above \$98,736   |  |  |
| □ 12 —                    | -     | □ \$0 - \$106,431  | ☐ At or Above \$106,432  |  |  |
| If household size is more | e tha | n 12, list the household size and to   | tal annual income below. |  |  |
| ☐ Size:                   | ۱     | ncome:   |                          |  |  |

**List all students in the household.** If any child you are applying for is a foster child; homeless, migrant, runaway; or attends Head Start, please check the appropriate box.

| Student's First Name | Student's Last Name | Grade<br>Level | School Child Attends | Foster | Homeless, Migrant,<br>Runaway | Head Start |
|----------------------|---------------------|----------------|----------------------|--------|-------------------------------|------------|
|                      |                     |                |                      |        |                               |            |
|                      |                     |                |                      |        |                               |            |
|                      |                     |                |                      |        |                               |            |
|                      |                     |                |                      |        |                               |            |
|                      |                     |                |                      |        |                               |            |

| Contact information and adult signature "I certify (promise) that all information on this ap                      | plication is true and tha | t all income is re  | eported."                 |
|---|---------------------------|---------------------|---------------------------|
| Name of Adult Completing the Form (printed)   |                           |                     |                           |
| <mark>Signature</mark>  | Today's                   | s Date              |                           |
| Street Address (if available), Apt #  | City                      | <mark>State</mark>  | Zip Code                  |
| ( <u>)</u> Daytime Phone (optional)   | <u>Email</u>              |                     |                           |
| CHECKLIST  Have you included all your children as have you have hold size and total have you signed the form?     |                           |                     | cked?                     |
| DO NOT FILL OUT THIS P  | ART. THIS IS FOR SC       | HOOL USE ON         | LY.                       |
| Economic Status: Economically Disadvantaged (free/re<br>Non-Economically Disadvantaged (pa                        |                           |                     |                           |
| I have reviewed the above and have concluded that it is   | properly and completely   | filled out to the Ł | pest of my knowledge.     |
| Signature (of school or district staff):  |                           |                     |                           |
| Print Name:   |                           |                     |                           |
| Date:   |                           |                     |                           |
| Reminder: All costs associated with distributing, collect with funds outside of the nonprofit school food service |                           | household incom     | ne forms must be paid for |



### Formulario de ingreso alterno 2015-2016 Sólo 1 formulario por familia

Su escuela es una escuela Elegible de la Comunidad, lo que significa que <u>todos</u> los estudiantes califican para recibir comidas gratis. Sin embargo, para determinar la elegibilidad para recibir beneficios <u>adicionales</u> además de las comidas gratis para sus hijos y la escuela, llene un formulario de ingreso familiar. Entregue el formulario a: **La secretaria de su escuela, a más tardar el 11 de septiembre.** 

- 1. Seleccione el número total de personas en su casa. Asegúrese de incluir a todos los niños y adultos, que estén emparentados o no con usted, que vivan en la misma residencia y compartan el ingreso y los gastos.
- 2. Seleccione la casilla que representa el rango del ingreso familiar anual. Asegúrese de incluir las siguientes fuentes de ingreso: trabajo, asistencia social, manutención infantil, pensión alimenticia, pensiones, jubilación, Seguro Social, SSI, beneficios de veteranos VA, ingreso infantil y/o cualquier otro ingreso. El monto debe ser antes de cualquier deducción de impuestos, seguro, gastos médicos, de manutención infantil, etc.

| 1. Total de personas       | 2. Seleccione el rango apropiado         | o de ingreso anual combinado para todas  |  |  |  |
|----------------------------|--|--|--|--|--|
| en la vivienda             | las personas en la casa (Incluya todos l | las personas en la casa (Incluya todos los ingresos indicados arriba, antes de impuestos). |  |  |  |
| □ 1 —                      | <b>→</b> □ \$0 - \$21,775                | ☐ Igual o mayor que \$21,776   |  |  |  |
| <b>2</b>                   | <b>→</b> □ \$0 - \$29,471                | ☐ Igual o mayor que \$29,472   |  |  |  |
| <b>3</b> —                 | <b>→</b> □ \$0 - \$37,167                | ☐ Igual o mayor que \$37,168   |  |  |  |
| <b>4</b> —                 | <b>→</b>                                 | ☐ Igual o mayor que \$44,864   |  |  |  |
| <b>5</b> —                 | → □ \$0 - \$52,559                       | ☐ Igual o mayor que \$52,560   |  |  |  |
| <b>□</b> 6 —               | <b>→</b> \$0 - \$60,255                  | ☐ Igual o mayor que \$60,256   |  |  |  |
| <b>7</b> —                 | → □ \$0 - \$67,951                       | ☐ Igual o mayor que \$67,952   |  |  |  |
| □ 8 —                      | <b>→</b> □ \$0 - \$75,647                | ☐ Igual o mayor que \$75,648   |  |  |  |
| <b>9</b> —                 | <b>→</b> □ \$0 - \$83,343                | ☐ Igual o mayor que \$83,344   |  |  |  |
| <b>1</b> 0 —               | <b>→</b> □ \$0 - \$91,039                | ☐ Igual o mayor que \$91,040   |  |  |  |
| □ 11 —                     | <b>→</b> \$0 - \$98,735                  | ☐ Igual o mayor que \$98,736   |  |  |  |
| □ 12 <del></del>           | <b>→</b> □ \$0 - \$106,431               | ☐ Igual o mayor que \$106,432  |  |  |  |
| Si el tamaño familiar es i | más de 12, indique el tamaño familiar y  | el ingreso total más abajo.  |  |  |  |
| ☐ Tamaño:                  | ☐ Ingreso:                               |  |  |  |  |

**Liste a todos los estudiantes en el hogar.** Si cualquiera de los niños para quien presenta la solicitud es un niño en hogar de acogida, sin hogar, migratorio, se ha fugado de casa o asiste a Head Start, marque la casilla apropiada.

| Nombre del estudiante | Apellido del estudiante | Grado | Escuela a la que asiste | De acogida | Sin hogar, migratorio,<br>fugado de casa | Head Start |
|-----------------------|-------------------------|-------|-------------------------|------------|--|------------|
|                       |                         |       |                         |            |  |            |
|                       |                         |       |                         |            |  |            |
|                       |                         |       |                         |            |  |            |
|                       |                         |       |                         |            |  |            |
|                       |                         |       |                         |            |  |            |

| Nombre del adulto que completa el formulario (  | en letra de imprenta)  |                      |                      |
|---|--|----------------------|----------------------|
| nombre dei adano que compreta el formalario (   | en letta de imprentaj  |                      |                      |
| Firma   | Fecha de   | hoy                  |                      |
| Dirección (si está disponible), Apto. #   | Ciudad   | Estado               | Código postal        |
| ()  |  |                      |                      |
| Teléfono  | Email (opcional)   |                      |                      |
| ISTA DE CHEQUEO  □ ¿Incluyó usted a todos los niños com   | o miembros de la familia   | 1?                   |                      |
|   |  |                      |                      |
| □ ¿Marcó <u>ambas</u> casillas para el tamañ<br>□ ¿Firmó usted el formulario?<br>NO LLENE ESTA PAR  |  | amiliar?             |                      |
| □ ¿Incluyó usted a todos los niños como ¿Marcó <u>ambas</u> casillas para el tamañ □ ¿Firmó usted el formulario?  NO LLENE ESTA PAR DO NOT FILL OUT THIS  | to y el rango de ingreso f<br>RTE. PARA USO ESCOLAR<br>S PART. THIS IS FOR SCH | amiliar?             |                      |
| □ ¿Incluyó usted a todos los niños come □ ¿Marcó <u>ambas</u> casillas para el tamañ □ ¿Firmó usted el formulario?  NO LLENE ESTA PAR DO NOT FILL OUT THIS  Economic Status: Economically Disadvantaged (free/ Non-Economically Disadvantaged ( | TE. PARA USO ESCOLAR S PART. THIS IS FOR SCH                                   | SOLAMENTE            | LY.                  |
| Use a local los niños come a local los niños come a local los los niños come a local los los niños come a local los los los niños come a local los los los los los los los los los lo   | TE. PARA USO ESCOLAR S PART. THIS IS FOR SCH  (reduced) (paid)                 | SOLAMENTE OOL USE ON | LY.                  |
| □ ¿Incluyó usted a todos los niños come □ ¿Marcó <u>ambas</u> casillas para el tamañ □ ¿Firmó usted el formulario?  NO LLENE ESTA PAR DO NOT FILL OUT THIS  | TE. PARA USO ESCOLAR S PART. THIS IS FOR SCH  (reduced) (paid)                 | SOLAMENTE OOL USE ON | est of my knowledge. |



### MILWAUKEE PUBLIC SCHOOLS

Calendar dates may change due to inclement weather, etc. Please stay in touch with your school for updates.

Schools may have additional important dates that do not appear on this district calendar. Dates for distributing report cards vary.

STAFF: Refer to staff calendars for details on non-student attendance days.

### 2015-2016 School Year

### Traditional Calendar

| July 1–28        | Summer Extended Learning<br>Opportunities                       |
|------------------|---|
| Aug 3-26         | Summer Extended Learning  |
| Aug 27           | Opportunities  No student attendance – Organization             |
| Aug 28,31        | No student attendance – Teacher PD                              |
| Sept 1<br>Sept 7 | Classes begin<br>Schools closed – Labor Day                     |
| Oct 9            | No student attendance – Parent/<br>teacher conferences          |
| Nov 23           | No student attendance – Record Day/<br>Professional Development |
| Nov 24-25        | No student attendance – Teacher PD                              |
| Nov 26-27        | Schools closed –Thanksgiving recess                             |
| Dec 21-31        | Schools closed – Winter recess                                  |

|   | Jan 1     | Schools closed – Winter recess                                 |
|---|-----------|--|
| ı | Jan 4     | Classes resume   |
| ı | Jan 18    | Schools closed – MLK Day                                       |
| ı | Jan 19-21 | High school final exams  |
| l | Jan 22    | No student attendance – Teacher PD/ Record/ staff planning day |
| ı | Feb 1     | No student attendance - Teacher PD                             |
| ı | Feb 15    | Schools closed - Mid-semester break                            |
| ı | Mar 4     | No student attendance - Parent/teacher conferences             |
| ı | Mar 18    | No student attendance – Teacher PD                             |
| ı | Mar 25-31 | Schools closed – Spring recess                                 |
| ı | Apr 1     | Schools closed – Spring recess                                 |
| ı | May 30    | Schools closed – Memorial Day                                  |
| ı | June 9-10 | High school final exams  |
| ı | June 13   | High school final exams  |
|   | June 14   | No student attendance – Teacher record day                     |
|   | June 15   | Emergency make-up/Teacher PD day                               |
|   |           |  |

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Note: shaded days are non-student attendance days.

June 20-30 Summer Extended Learning Opportunities

June 16-17 Reserve days

### **July 2015**

| S  | M  | Т  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 28 | 29 | 30 | 1  | 2  | 3  | 4  |
| 5  | 6  | 7  | 8  | 9  | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | 1  |

### August 2015

| S     | М     | Т  | W  | Th | F  | S  |
|-------|-------|----|----|----|----|----|
| 26    | 27    | 28 | 29 | 30 | 31 | 1  |
| 2     | 3     | 4  | 5  | 6  | 7  | 8  |
| 9     | 10    | 11 | 12 | 13 | 14 | 15 |
| 16    | 17    | 18 | 19 | 20 | 21 | 22 |
| 23/30 | 24/31 | 25 | 26 | 27 | 28 | 29 |

### September 2015

| S  | М  | Т  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 30 | 31 | 1  | 2  | 3  | 4  | 5  |
| 6  | 7  | 8  | 9  | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 1  | 2  | 3  |

### October 2015

| S  | M  | T  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 27 | 28 | 29 | 30 | 1  | 2  | 3  |
| 4  | 5  | 6  | 7  | 8  | 9  | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 |

### November 2015

| S  | М  | Т  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 1  | 2  | 3  | 4  | 5  | 6  | 7  |
| 8  | 9  | 10 | 11 | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | 1  | 2  | 3  | 4  | 5  |

### December 2015

| S  | М  | Т  | w  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 29 | 30 | 1  | 2  | 3  | 4  | 5  |
| 6  | 7  | 8  | 9  | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | 1  | 2  |

### January 2016

| S     | М  | Т  | w  | Th | F  | S  |
|-------|----|----|----|----|----|----|
| 27    | 28 | 29 | 30 | 31 | 1  | 2  |
| 3     | 4  | 5  | 6  | 7  | 8  | 9  |
| 10    | 11 | 12 | 13 | 14 | 15 | 16 |
| 17    | 18 | 19 | 20 | 21 | 22 | 23 |
| 24/31 | 25 | 26 | 27 | 28 | 29 | 30 |

### February 2016

| S  | М  | Т  | w  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 31 | 1  | 2  | 3  | 4  | 5  | 6  |
| 7  | 8  | 9  | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 1  | 2  | 3  | 4  | 5  |

### March 2016

| S  | М  | T  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 28 | 29 | 1  | 2  | 3  | 4  | 5  |
| 6  | 7  | 8  | 9  | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | 1  | 2  |

### **April 2016**

| S  | М  | Т  | w  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 27 | 28 | 29 | 30 | 31 | 1  | 2  |
| 3  | 4  | 5  | 6  | 7  | 8  | 9  |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |

### May 2016

| S  | М  | Т  | W  | Th | F  | S  |  |
|----|----|----|----|----|----|----|--|
| 1  | 2  | 3  | 4  | 5  | 6  | 7  |  |
| 8  | 9  | 10 | 11 | 12 | 13 | 14 |  |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |  |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |  |
| 29 | 30 | 31 | 1  | 2  | 3  | 4  |  |

### June 2016

| S  | М  | Т  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
| 29 | 30 | 31 | 1  | 2  | 3  | 4  |
| 5  | 6  | 7  | 8  | 9  | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 1  | 2  |