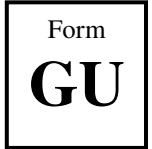




Texas City Independent School District
1700 Ninth Avenue North, P.O. Box 1150, Texas City, TX 77592-1150

**APPLICATION FOR NONRESIDENT PARENT GIVING
EDUCATIONAL *GUARDIANSHIP* TO A TCISD RESIDENT**



PLEASE READ THE FOLLOWING: THIS FORM IS ONLY FOR STUDENTS MEETING THE FOLLOWING CRITERIA:

A minor student who will reside in the District but whose parent, guardian, or other person having lawful control under a court order does not reside in the District shall present a Power of Attorney assigning responsibility for the student in all school-related matters to an adult resident of the District.

**GUARDIANSHIP INSTRUCTIONS
Forms Must Be Renewed Each School Year**

1. Applicant for guardianship must read and sign memo relating to “guardianship responsibilities.” (Form #1)
2. Complete the Application for Guardianship. All signatures must be in place and be the original signature; no stamped or Xeroxed signatures will be accepted. (Form #2)
3. Complete the Power of Attorney and Disposition of Document. (Form #3)
4. Have the completed Power of Attorney/Disposition of Document notarized. Once notarized, make a copy of the Power of Attorney/Disposition of Document.
5. The District advises you to take the original notarized Power of Attorney/Disposition of Document and \$20 (cash) processing fee to:

Galveston County Courthouse
County Clerk Office, 2nd Floor
600 59th Street
Galveston, Texas 77551
Phone (409)766-2200
Monday-Friday 8 a.m. – 5 p.m.

Further, the District advises you to obtain a receipt from the courthouse. Form 1, Form 2, and the notarized copy of the Power of Attorney/Disposition of Document (Form # 3) must be returned to the administrator, or administrative designee of the campus.

6. After Steps 1-5 have been completed, schedule an appointment with the campus principal or administrative designee in order that the application may be reviewed and approved. **Important: The parent and the person assuming guardianship must be present at the meeting.**

If approved, the Student Admission Approval Form (Form #4) will be signed by the approving administrator, the parent, and the person assuming guardianship. Admissions may be revoked if, during the course of the school year, the student fails to meet admissions requirements. [Admissions Requirements: Board Policy FD(Legal)]



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FORM #1
Revised 5-2-12

TO: PERSON TO ASSUME TEMPORARY GUARDIANSHIP
OF A TEXAS CITY ISD STUDENT

FROM: ASST. SUPERINTENDENT FOR SUPPORT SERVICES

ARE YOU AWARE OF THE RESPONSIBILITIES OF GUARDIANSHIP WITH POWER OF ATTORNEY?

- Provide for physical and financial needs of the child
- Maintain all health records of the child
- Accept responsibility for emergency care of the child
- Ensure required daily attendance of child or pay financial cost incurred for excessive absences
- Teach child to comply with school rules and expectations
- Participate in all disciplinary actions for non-compliance with student code of conduct
- Ensure attendance at required tutorials
- Assist in studies at home
- Participate in school conferences to discuss child's progress and educational programming
- Control child and pay for property damage caused by child
- Maintain up-to-date home, work, and emergency telephone numbers at school office

I have read and understand the responsibilities stated above, and I am ready to commit to the guardianship.

Signature of Person Assuming Guardianship

Date



Texas City Independent School District

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APPLICATION FOR GUARDIANSHIP(S)

FORM #2
Revised 5-2-12

Student's Name _____ Date _____

All parties applying for a guardianship permit within the Texas City Independent School District are requested to read the following sections of the Texas Education Code 25.001:

FALSE INFORMATION: When accepting a child for enrollment, the District shall inform the parent or the other enrolling person(s) enrolling the child that presenting false information or false records for identification is a criminal offense under Penal Code 37.10 and that enrolling the child under false documents makes the person liable for tuition or other costs as provided below. Education Code 25.002 (d)

A person who knowingly falsifies information of a form required for a student's enrollment in the District shall be liable to the District if the student is not eligible for enrollment, but is enrolled on the basis of false information. For the period during which the ineligible student is enrolled, the person is liable for the maximum tuition fee the District may charge (see FDB) or the amount the District has budgeted per student as maintenance and operating expense, whichever is greater. Education Code 25.001 (h)

Additionally, presenting false information or false records is a criminal offense. Penalties for tampering with a governmental record is a Class B misdemeanor. Penal Code 37.10

STATEMENT: I have read and understand the implications stated above. I am over 18 years of age and am legally competent to make this statement. All signatures below indicate that the child listed above resides at the above address twenty-four (24) hours each day and five (5) days each week (Sunday evening through Friday school day) during the school year. Any change in the residential status of the child under my guardianship will be reported immediately to the principal of the school in which my child is enrolled while attending Texas City Independent School District. I understand that Texas City ISD will continue to conduct periodic residency checks throughout the school year. If, at any time, it is determined that information on this form has been falsified based on a residency check, your child may be withdrawn immediately and legal action could be taken.

The child is is not currently under an order for placement in an alternative education program or under an expulsion order.

The child has has not been under an order for placement in an alternative education program or under an expulsion order during the preceding school year.

The child has has not engaged in delinquent conduct or "conduct in need of supervision" and is is not on probation or other conditional release for that conduct.

The child has has not been convicted of a criminal offense and is is not on probation or other conditional release.

Printed Name of Parent

Printed Name of Person Assuming Guardianship

Signature of Parent

Signature of Person Assuming Guardianship

Address

Address

City, State Phone #

City, State Phone



Texas City Independent School District
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FORM #3
Revised 5-2-12

SPECIAL POWER OF ATTORNEY

THE STATE OF _____ §

COUNTY OF _____ §

I, _____, of _____
Name Address and City

_____ hereby make, constitute, and appoint _____
County Name
_____ of _____
Address and City

As my true and lawful attorney and agent to make any and all educational and health care decisions for my
_____, _____, _____
Relationship Child's name Birth date
except to the extent I state otherwise in this document.

This special Power of Attorney shall specifically give my lawful attorney and agent the following rights, privileges, duties, and powers, including but not limited to:

- a. the right of access to medical, dental, psychological, and educational records of _____;
Print or type child's full name
b. the right to consult with school officials concerning _____
welfare and educational status, including school activities; Print or type child's full name
c. the right to attend school activities;
d. the right to be designated on _____ records as a
Print or type child's full name
person to be notified in case of emergency;
e. the right to make decisions concerning the health education and welfare of
_____;
Print or type child's full name
f. the power to consent to medical and surgical treatment during an emergency involving
an immediate danger to the health and safety of _____;
Print or type child's full name
g. the right to consent for _____ to receive medical
Print or type child's full name
and dental care not involving an invasive procedure;
h. the right to consult with any treating physician or dentist of _____; and
Print or type child's full name
i. any other rights, privileges, duties and powers existing between parent and child.



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Disposition of Document

The original of this document is kept at the residence of _____
Name of Natural Parent/Guardian

Address, City, and Zip Code of Natural Parent/Guardian

The following individuals have signed copies of this document:

1. Name _____
Address _____

2. Name _____
Address _____

Duration of Power

The duration of this power shall be no longer than one school year (August to July). Unless I establish a shorter time or revoke this Special Power of Attorney, this Special Power of Attorney is granted from August, 2012 to July, 2013.

This Special Power of Attorney, while in effect, shall be valid throughout the entire United States of America.

I sign my name to this Special Power of Attorney on the _____ day of _____
20_____, at _____
City and State

Signature

Print Name

THE STATE OF _____ §

COUNTY OF _____ §

SUBSCRIBED AND SWORN TO BEFORE ME, the undersigned authority, by _____
_____, on the _____ day of _____, 20____
to certify which witness my hand and official seal.

Notary Public in and For The State of _____ my commission expires _____.



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STUDENT ADMISSION APPROVAL FORM

FORM #4
Revised 5-2-12

Administrator Instructions: This form shall only be used after the application has been reviewed and if admissions will be granted. The parent and the person assuming guardianship must be present to sign the Student Admission Approval Form. A copy of this form should be forwarded to Lisa Campbell, Director of Student Records/PEIMS.

Date: _____

Parent Name: _____ Guardian Name: _____

Student Name: _____ Campus: _____

Student Identification Number: _____

The student listed above has/have been approved to enroll at your campus. The temporary guardian (s) as named above and in the attached Power of Attorney Form understands their home address may be monitored to ensure the student(s) remains living at the address listed on the affidavit of residence. The temporary guardian(s) and the parent(s) are aware of the consequences of immediate withdrawal, should it be determined during an investigation that the student is not residing in your school's attendance zone or upon revocation of guardianship.

Parent's Signature Date

Temporary Guardian's Signature Date

Campus Principal or Administrative Designee Date