Pyramid Lake Junior/Senior High School (PLJSHS)
New Student Opportunity for Enrollment Packet

It is imperative that PLJSHS has the most up to date information for contacting parents/guardians and emergency contacts. Having this packet completed and the required documents on file assists with funding through Indian Education Equalization Program (ISEP) which is managed by the Bureau of Indian Education (BIE). All new and current students must complete this packet every school year your student is in attendance at PLJSHS.

New students please be aware:

1. PLJSHS endeavors to make the best decisions for current and future students and Pyramid Lake Jr/Sr High School desires to meet the need of every potential student, while keeping the needs and educational interests of current students at the forefront of each decision.

2. **All students** must complete a **registration packet**.

3. Pyramid Lake Jr/Sr High School will request a copy of all prior school information for review before rendering an enrollment decision.

4. School Administration and the school counselor will review records (including cumulative files when available) and registration packet for academic performance, behavior, attendance history, and school discipline (BOE 4.01 Enrollment).

5. New students will be contacted within 15 working days of receiving the application for enrollment forms as to the status of enrollment.

All *High School* student athletes will need to complete a physical *and* the on-line Register My Athlete (RMA) now called Aktivate, forms before practicing. https://www.registermyathlete.com

In addition to a completed registration packet, ***please provide the following documents*** (we will make copies and return all *original* documentation):

_____ **Birth Certificate**

_____ **Tribal Enrollment Card or Certificate of Indian Blood (CIB)**

_____ **Immunization Records (CURRENT/MOST RECENT)**

_____ **Social Security Card**

_____ **Guardian Documents if you are *not* listed as natural parent on Birth Certificate *(Only notarized legal documents are accepted).***

Please contact PLJSHS registrar at 1-775-574-1016 for questions and assistance about this form.

OFFICIAL NOTICE of UNIFORM POLICY

DRESS CODE

Pyramid Lake Jr./Sr. High School (PLJSHS) has adopted a uniform code of dress that includes a standardized uniform. The uniform is to be worn at school during school hours, school events, during school sponsored transportation, and anytime you are representing PLJSHS.

There may be days when Administration will allow clothing other than the school uniform. Those days will be announced by the Administration for events including field trips, game days, dances, or dress-up days. **Wearing clothing other than the designated school uniform on days that have not been approved by administration will constitute a dress code violation and appropriate progressive consequences.** It is expected that students will come to school clean, well groomed, wearing the school uniform.

The uniform consists of the following:

- Tops- the top is maroon with the official school emblem. These tops are issued by the school and consist of short/long sleeve t-shirts, polo, and ¼ zip and crew neck sweat shirts.
- Bottoms – Khaki, black or grey in color and can include pants, capris, shorts and skirts minimum length, 4" above the knee for shorts and skirts.
- Shoes - Proper footwear at all times. No house slippers.
- **Once in school Non-uniform, items must be placed in the locker.**
- An "undershirt"' maybe worn under the uniform shirt. This undershirt must be white, grey, maroon, or black in color. The undershirt needs to be tucked in at the waist with no undershirt showing between the uniform top and the uniform bottom.
- If a long sleeve shirt is worn under a short sleeve uniform no symbols, letters or graphics are allowed to be revealed on the long sleeve shirt.

Unacceptable Attire:

1. Trench, oversized coats, leg warmers, open-back dresses, tank tops, crop tops, transparent/bare-midriff apparel, torn or un-hemmed clothes, apparel with inappropriate logos, phrases or pictures are not allowed. Any clothing that is considered bizarre, illicit, or sexually suggestive (i.e., showing cleavage) in the eyes of the Administration is not acceptable. Pants may not be oversized, side seam split, or have unfinished hems. The "baggy" or “sagging” styles will not be tolerated.
2. Bandanas, (sweat or sports related) scarves, blankets, headbands, hairnets, hoods/hoodies, hats or any like adornment are expressly forbidden on campus during hours and at school-related activities. No sunglasses may be worn in the building or in the classroom. No wallet chains. No graffiti or explicit/questionable patches on backpacks.

Dress Code Violations and Consequences:

It is the right and responsibility of the Administration and faculty to regulate against un-becoming and inappropriate fads or fashions. Dress code violations are determined according to the judgment of the Faculty and Administration. It must be understood that when individuals do not comply with the dress code, all facility members have not only the right, but also the obligation to refer the student to the Administration. Students will be checked throughout the school day for dress code violations.

It is the responsibility of the Administration and faculty to enforce the PLJSHS's Uniform Dress Code as directed by the BOE. If a student is found to be habitually violating the Uniform Dress Code, the student will face serious disciplinary action, which could result in suspension or disenrollment from PLJSHS.

Because of safety concerns, the administration may restrict certain articles of clothing, jewelry, and/or footwear from being worn or brought to school. This could be done either on a temporary or permanent basis in order to protect students and staff. The Principal/Assistant Principal shall retain the authority to grant exceptions to the school dress policy for special occasions, athletics, and/or special conditions.

By completing and signing this form you and your PLJSHS student have read, discussed, understand, and agree to the PLJSHS dress code and progressive discipline as needed.

_____ _____

Parent/Guardian Signature **Date**

_____ _____

Student Signature **Date**

Technology Use Agreement

Pyramid Lake Jr./Sr. High School's (PLJSHS) Acceptable Use Policy (AUP) prevents unauthorized access and other unlawful activities by users online, prevents unauthorized disclosure of sensitive information, and complies with the Children's Internet Protection Act (CIPA). PLJSHS will use technology protection measures to block or filter, to a practical extent, access to any material which PLJSHS, in its sole discretion, believe to be unlawful, obscene, pornographic, and/or harmful to minors over the network.

Pyramid Lake reserves the right to monitor users' online activities and to access, review, copy, and/or store, delete any electronic communication or files and disclose them to other appropriate entities as PLJSHS deems necessary. Educators may use the Internet during class directed group demonstrations with or without parent consent. Users should have no expectation of privacy regarding their use of PLJSHS property, network and/or internet access, files, and/or email.

Terms and Conditions of Use:

1) **Privileges** – The use of PLJSHS computer is a privilege, not a right, and inappropriate use may result in cancellation of those privileges.
   - Inappropriate sites will initially be identified by Information Technology.
   - Access to technology may be revoked for inappropriate use.
   - Criminal actions may be pursued for illegal use of technology.
2) **Responsibilities** - Technology (including the use of the Internet) can be an exciting adventure for students. However, they must be responsible to:
   - Report to an appropriate adult (parent, teacher, or administrator) any inappropriate use of the Internet or any destruction of District property;
   - Take care of their accounts.
   - Do not let anyone else know your password.
   - Any monetary costs incurred from misuse of equipment is covered by parent/guardian.
3) **Network Etiquette** - Students are expected to abide by the federally accepted rules of network etiquette. These include (but are not limited to) the following:
   - Use appropriate language. Do not swear, use vulgarities, or any inappropriate images;
   - Do not use the Internet, e-mail, or District's network to engage in any illegal or inappropriate uses (such as to bully another student, sexually harass another student, make any racial remarks, violating copyright laws, etc.);
   - Do not attempt to bypass blocked Internet sites. If you feel a site has been blocked that you should be allowed to view, contact your teacher;
   - Do not use the network in such a way that you would disrupt the use of the network by other users (i.e. downloading video or music, without the express consent)
   - Do not print multiple copies of any document unless expressly requested by a teacher or administrator.
   - Do not tamper with the District's network;
   - Do not connect any devices into the computer without the consent of your teacher and then only under the direct supervision of your teacher. (This includes CD roms, flash drives, iPods, PDAs, etc.)
   - Do not modify or tamper with the school's computer hardware or software;
   - Do not knowingly introduce malicious code (viruses, Spyware, Trojan Horses, etc.);
   - Do not download, install, or run any program unless specifically instructed by a teacher and only under that teacher's supervision;
   - Do not reveal your personal address, phone numbers, social security number or school site;
   - Never log on under another person's name;
   - Never let anyone know your password.

☐ I have ***read and allow*** my student to use the Internet at school.

☐ I ***do not allow*** my student to use the Internet at school.

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

REVISED 01/01/2026

Attendance Philosophy (BOE 4.01)

Students achieve maximum educational benefits when they are in attendance and when they participate in every class in which they are enrolled. The School requires students to attend all classes.

Expectations: Students are required to attend 100 percent (100%) of all scheduled classes in which they are enrolled, unless otherwise excused. Students, along with legal parent(s) or guardian(s), share with the school the responsibility of adhering to the attendance laws and Board policies and administrative procedures pertaining to attendance, absences, excuses and due process.

Classification of Absences:

1. Excused Absences: medically verified absences.

2. Exempt Absences: include bereavement, verifiable and legal appointments, or exceptional circumstances approved by the Principal or designee. The legal guardian must acknowledge the absence with an oral or written excuse to the Principal or designee within three (3) days after the student returns to school and thereby assumes responsibility for the student's absence from school.

3. Unexcused Absences: Absences for reasons other than those listed above will be classified as unexcused. Examples of possible unexcused absences include, but are not limited to, babysitting, hunting trips, shopping, skiing, job interviews, driver's license exams, military testing, pow wows, non-school related sports tournaments and personal business.

4. Exempt Exceptional Circumstances: The Principal or designee shall determine on an individual basis whether there are exceptional circumstances that justify changing an excused absence to an excused absence after consultation with the legal guardian if appropriate.

5. Chronic Absenteeism: Any student who is absent for more than four (4) days, or periods in the same class, during a school quarter and who continues to be absent during subsequent quarters may, at the discretion of the Principal:

a. Be the subject of a staff/parent or legal guardian conference to determine possible causes and solutions to student's attendance problems.

b. Be considered for placement in alternative program(s), i.e., group or individual counseling, interventions, tutoring, and/or special resources, depending upon availability, and need.

c. Be recommended to attend summer school and/or participate in alternative means of earning credit.

d. 3 unexcused absences will be referred to the Pyramid Lake Paiute Tribe Juvenile Court system.

Make-Up Work: Although make-up work cannot take the place of student and teacher interaction, classroom teachers require make-up work and students are required to complete the make-up work.

1. Excused Absences: Students will be allowed to make up all absence related work. Work needs to be completed within 2 school days unless an alternative plan is agreed upon between the teachers and the students.

2. Suspension: Schoolwork missed as a result of suspension will be made up. Appointments: It is strongly recommended that medical and other appointments be scheduled outside of school time. Family vacations should not be taken when school is in session. The parent/guardian(s) must notify the school, or the absence will be considered unexcused. School-Sanctioned Activities: Students who are absent from school or classes because of a school-sanctioned activity, recognized cultural event, religious holidays, chronic illness verified by a physician, or while on suspension will not be included in either the excused, unexcused, or truancy absence totals.

Excused Absences: Parent/guardian(s) are required to communicate with the school, either orally or in writing that the absences was or illnesses, medical appointments, family bereavement, legal appointments and recognized cultural/religious observances. Excuses must be submitted within three (3) days after the student returns to school following the absence.

Parent/Guardian(s) Responsibilities:

1. Parent/guardian(s) should telephone the school to acknowledge the student's absence on the day of the absence to ensure the student's safety.

2. Parent/guardian(s) will provide an oral or written excuse within three (3) days after the student returns to school explaining the cause of the absence.

3. Parent/guardian(s) are requested to notify the school in writing of any student health problems, which have been verified by a medical professional, which may result in lengthy absences from school.

4. Parent/legal guardian(s) are required to prearrange absences whenever possible. Consequences of Absences: Any student having more than 9 accumulated absences (excused and/or unexcused) in a class in a semester may lose credit and be referred to court.

Chronic Attendance Problems: Whenever a student's lack of attendance jeopardizes his or her continued educational progress, the school administration shall contact the parent/guardian(s) and request a conference on the matter. Whenever possible, the conference shall include an administrator, counselor, the student's teacher(s), parent/guardian(s), and the student.

1. The school administration and/or counselors will continue to monitor student progress and will notify parent(s) or guardian(s) whenever necessary to improve student attendance.

2. When a student has missed four (4) days, or periods of the same class, of school per quarter because of illness, the family may be contacted to verify illness. 3. The Principal or designee may refer chronic attendance problems to the Assistant Principal for investigation and disposition

Truancy: The School handbook and The Pyramid Lake Paiute Tribe's Law and Order Code addresses truant students. Before a student may attend or otherwise participate in school activities outside the classroom during regular classroom hours, he or she must receive the approval of the teacher or Principal. A written letter to inform the legal guardian of truancy and listing such absences, are sent out weekly. The school does not suspend students from school for truancy. The Principal or designee is required by law to report to the appropriate law enforcement agency the name of any student who is a habitual truant.

Truancy Guidelines

First Truancy: Students will have a conference with the Principal (or designee) and will be assigned a consequence by the school. Parent(s) or Guardian(s) will be notified by phone and/or in writing of the truancy. Documentation regarding the truancy will be sent to the School Resource Officer or Local Law Enforcement.

Second Truancy: Students will have a conference with the Principal (or designee) and will be assigned a consequence more severe than the first occurrence. Legal Guardian(s) will be notified by phone and/or in writing of the truancy and a conference may be required. Documentation regarding the truancy will be sent to the School Resource Officer or Local Law Enforcement.

Third Truancy: Students will have a conference with the Principal (or designee) and will be assigned a consequence more severe than for the 2nd occurrence. Legal Guardian(s) will be notified in writing of the truancy. Documentation regarding the truancy will be sent to the School Resource Officer. At this time a truancy petition will be filed with the Tribal court School personnel will develop an intervention plan. Each additional truant event will result in continued referral to the court

Appeal:

1. An appeals structure will include an informal and formal hearing process and will be established so that parent(s) or guardian(s) of students may appeal a decision of the school concerning the attendance of their student.
2. A student shall be excused from the minimum attendance requirement of this administrative procedure if the parent(s) or guardian(s) submits a certificate in writing to the Principal of the school from a qualified physician, acting within his/her authorized scope of practice, stating the student is unable to attend school, the reason for such condition, and the dates for which the condition has occurred.

By signing and dating below you are agreeing to the above attendance philosophy and further understand potential dispositions/consequences (up to and including un-enrollment) if student does not attend PLJSHS 90% of the time.

Student Signature: _____ Date: _____

Parent Signature:_____ **Date**: _____

Pyramid Lake Jr./Sr. High School
Dennis Juneau, Principal
Jillian Fillmore, Assistant Principal

RECORDS REQUEST

Attention: **School Registrar** ***Pre-Acceptance*** **Date: _____**

Student Name: _____Date of Birth: _____

Last Grade Attended: _____

The student named above has applied for **POSSIBLE** enrollment at PLJSHS. Please EMAIL (patrickd@plhs.us or plhsregistrar@plhs.us) or FAX (775-574-1037) the following as soon as possible:

___ Transcript ___ All Behavior Records

___ Plausible Withdraw Grades ___ Attendance Records (Past and Current Years)

*** Please note the above student is *applying* to be enrolled and has not been approved by administration at PLJSHS. The information requested is part of the criteria for being accepted.**

*** If the student named above is approved a separate request for all records will be sent at a later date.**

Has your child ever received ***Special Education Services***? ___ Yes ___ No

Is your child currently or recently been *suspended* or *expelled*? ___ Yes ___ No

If yes, name of school_____

Are you the legal Guardian of this student? ___ Yes ___ No

Guardianship documents are ***REQUIRED*** if you are not listed as *natural parent* on Birth Certificate

Parent/Guardian Name: _____ Relationship to Student: _____
(PRINTED)

Signature: _____ Contact Number: _____

Student Physical Address: _____

Former School Attended: _____

School Mailing Address: _____

Telephone: _____ Fax: _____

Former School's registrar's email address _____

REVISED 01/01/2026

RECORDS REQUEST

Attention: School Registrar ***Accepted*** **Date: _____**

Student Name: _____

Grade: _____

Date of Birth: _____

____ The student listed above has been **approved** for enrollment at PLJSHS.

Please mail (**711 State St., P.O. Box 267 Nixon, NV 89424**) all records including the following:

___ Cumulative Folder ___ Special Education Records and IEP

___ Health Folder ___ Other _____

Are you the legal Guardian of this student? ___ Yes ___ No

Guardianship documents are ***REQUIRED*** if you are not listed as *natural parent* on Birth Certificate

Parent/Guardian Name: _____ Relationship to Student: _____
(PRINTED)

Signature: _____ Contact Number: _____

Student Physical Address: _____

Former School Attended: _____

School Mailing Address: _____

Telephone: _____ Fax: _____

Former School's Registrar's email address _____

Special Education Records Questionnaire

It is very important that all of the students that are enrolled at Pyramid Lake Jr./Sr. High School get the best education that is available to them. In order for your child to get the help and attention that he/she needs, we here at Pyramid Lake Jr./Sr. High School need to know if your child has ever, in the past received any Special Education services. If your child has attended any of the following classes or any other special needs classes, please check all that apply:

☐ **NONE**

☐ Special Education Classes
Location: _____ Year: _____

☐ Resource Classes
Location: _____ Year: _____

☐ Speech Classes
Location: _____ Year: _____

☐ Other
Location: _____ Year: _____

The above information is true and accurate to the best of my knowledge.

_____ _____
PRINTED Name (Parent/Guardian) **Parent/Guardian Signature**

_____ _____
Date **Phone #**

File SPED File

REVISED 01/01/2026

Student Information & Contact Information

NASIS #: _____ **SCHOOL YEAR:** ***SPRING 2027***

STUDENT'S:

First Name	Middle Name (Initial)	Last Name	Gender	DOB
Physical Address	City	State	Zip Code	
Mailing Address	City	State	Zip Code	
Home Phone #	Cell Phone #	Social Security Card #	Birth City, State, Country	

ETHNICITY: ☐ **HISPANIC/LATINO** ☐ ***NOT*** **HISPANIC/LATINO**

RACE: ☐ **NATIVE AMERICAN INDIAN/ALASKAN** ☐ **BLACK OR AFRICAN AMERICAN**
☐ **NATIVE HAWAIIAN OR PACIFIC ISLANDER** ☐ **ASIAN** ☐ **WHITE**

IS THE STUDENT AN ENROLLED MEMBER OF A TRIBE? ☐ **YES** ☐ **NO**

NAME OF TRIBE_____**ENROLLMENT #**_____**CENSUS#** _____

NOTE: TO RESTRICT NATURAL PARENT'S ACCESS TO CHILD AND/OR CHILD'S RECORDS, THIS SCHOOL MUST HAVE A CURRENT COPY OF TERMINATION OF PARENTAL RIGHTS, OR SPECIFIC LEGAL CUSTODY AGREEMENT ON FILE.

Parent/Guardian:

Mother/Female Guardian's Name		Have parental rights been revoked? ☐ YES ☐ NO If yes, you must supply official documentation.	
Physical Address	City	State	Zip Code
Mailing Address	City	State	Zip Code
Home Phone #	Cell #	Work #	Email Address
Father/Male Guardian's Name		Have parental rights been revoked? ☐ YES ☐ NO If yes, you must supply official documentation.	
Physical Address	City	State	Zip Code
Mailing Address	City	State	Zip Code
Home Phone #	Cell #	Work #	Email Address

EMERGENCY CONTACT INFORMATION

- IDENTIFICATION *MAY* BE REQUIRED WHEN CHECKING OUT A STUDENT.
PLEASE PROVIDE NAMES OF PEOPLE TO WHOM WE MAY RELEASE YOUR CHILD, OR ACCESS PERMISSION FOR TREATMENT, AND/OR DISCIPLINARY ACTION

Emergency Contact Name	Contact's phone #	Relationship to Student
Emergency Contact Name	Contact's phone #	Relationship to Student
Emergency Contact Name	Contact's phone #	Relationship to Student
Emergency Contact Name	Contact's phone #	Relationship to Student

***CHECKOUT LIST*- *IDENTIFICATION *IS* REQUIRED WHEN CHECKING OUT A STUDENT**

Checkout Contact Name	Contact's phone #	Relationship to Student
Checkout Contact Name	Contact's phone #	Relationship to Student
Checkout Contact Name	Contact's phone #	Relationship to Student
Checkout Contact Name	Contact's phone #	Relationship to Student

_____ _____

PARENT/GUARDIAN SIGNATURE **DATE**

ATTENTION!
PARENTS/GUARDIANS!

This is notification that Video Surveillance Equipment, with audio, is installed and in use on all Pyramid Lake Jr./Sr. High School buses, hallways and classrooms.

Pyramid Lake Jr./Sr. High School

Driving a school bus requires constant attention, excellent driving skills, and a total understanding of all bus driving rules and regulations. The bus drivers have full responsibility and authority for the safety of all students assigned to the bus from the time they board until they arrive at their destination. In order to accomplish their assignment, the following basic riding rules have been established by the PLJSHS.

SCHOOL BUS RULES OF CONDUCT

SAFETY is the primary reason for our school bus Rules of Conduct Students and parents/guardians understand the lives and safety of all students may depend on their conduct and strict observance of school bus rules. The student shall not engage in any behavior or action that would interfere with the safety of the bus or the safety of any of the passengers on the bus.
Students shall not chew gum, drink, eat, play music or use tobacco on the bus.

Students shall not bring onto the bus animals, drugs, glass containers, large instruments, alcohol, radios, weapons, or wear cleats/spikes or any other items which could interfere with passenger safety.

Students are to keep all parts of the body inside of the bus at all times and not throw any items in or out of the bus window. Students are not permitted to open windows without the bus driver's permission.

Students shall go to their seats and remain seated at all times, keep their hands to themselves and monitor their possessions, refrain from any movement that would interfere with passenger safety.

Students must be at their bus stop five (5) minutes before the scheduled departure time of the bus. Bus schedules are planned with sufficient time for pupil loading at each stop. Students who miss the bus MUST provide their own transportation as buses cannot wait upon nor return to pick up thereafter. During inclement weather/traffic buses could run from 5 to 10 minutes late.

Parents/guardians of any student who damage school property or the property of other students will be financially for the damages. All student behavior, while getting on or off the bus or while waiting at the bus stop, must be orderly and is subject to school consequences.
Whenever it is necessary for students to cross the any road after getting off the bus, the crossing must be done according to the directions of the bus driver. Students shall never cross behind the bus and shall stay away from the bus as it departs.

SAFETY-OUR COOPERATIVE GOAL

Pyramid Lake Jr,/Sr. High School is concerned with transporting students safely to and from school in an efficient manner while minimizing the length of time students must be on the bus and at the bus stop. Due to the bus schedule and the many responsibilities of the bus driver, parents/guardians wanting to talk to the bus driver are to contact the school.

Drivers will drive safely and encourage good student conduct on the bus so they may devote their attention to driving. Students are responsible for their own conduct on the bus, which will insure his/her own safety and the safety of others on the bus and the road.

Parents are requested to discuss safety and good behavior on the bus with their children, and support the efforts of the bus driver and the school to insure bus safety. The combined efforts and cooperation of parents/guardians, school personnel, and students are essential in maintaining a safe and efficient transportation program.
Your cooperation is appreciated.

Students may not change pick up and drop off points/buses unless pre-approved by the parent/guardian.

A *written note* from the parent/guardian must be submitted to the office *before* 12:00 Noon.

Phone calls will not be accepted for any bus changes.

MISCONDUCT REPORTS

PLJSHS has adopted a **progressive discipline approach** to assist in the transportation of students in all high school vehicles. The following courses of action are considered as a minimum for those students who do not follow our School Bus Rules of Conduct:

- The driver will notify the student of the infraction and complete the Misconduct Report. The Principal/Assistant Principal will meet with the bus driver and student. After the disposition of the case, copies will be distributed to the bus driver, parent/guardian(s), and student(s).
- The *first* Misconduct Report may result in a warning from the bus driver/Principal/Assistant Principal. A student may be suspended or denied transportation, depending upon the severity of the circumstances.
- The *second* Misconduct Report may result in suspension from the bus for a period up to five (5) days, and a parent/guardian conference **will** be required.
- The *third* and subsequent Misconduct Report will result in permanent suspension of transportation privileges on all school buses and vehicles.

Suspension of transportation privileges does not excuse a student from school attendance as required by Compulsory Education Laws of the State of Nevada (NRS 392.140).

Bus Route: _____

Stop: _____

Bus Driver: _____

TRANSPORTATION

To: Parents/Guardians
Please complete the *Bus/Vehicle Information* form below and return to PLJSHS.
Without completion of this form your PLJSHS student will *not* be able to ride PLJSHS buses or vehicles.

By completing and signing this form you and your PLJSHS student have read, discussed, understand, and agree to the rules of conduct and the progressive discipline approach.

Student's information:

First Name	Middle (Initial)	Last Name		DOB
Physical Address		City	State	Zip Code
Home Phone #	Cell Phone #			

Emergency Contact's information:

First Name	Middle Name (Initial)	Last Name
Home Phone #	Cell Phone #	Email:

Disorderly conduct and or persistent refusal to obey the authority of the bus driver will be sufficient reason for a student to be denied transportation provided by PLJSHS. Suspension of transportation privileges does *not* excuse a student from school attendance as required by Compulsory Education Laws of the State of Nevada (NRS 392.140).

_____ _____
Parent/Guardian Signature **Date**

_____ _____
Student Signature **Date**

For Transportation Department use

Bus Route: _____

Stop: _____

Bus Driver: _____

PRIVATE TRANSPORTATION RELEASE FORM

Transportation is to be used only within the immediate local area/s in which the student is located (i.e. Reno-Sparks, metro area, Fallon, Hungry Valley, and the Pyramid Lake Reservation (Nixon, Sutcliffe, Wadsworth). I acknowledge that I am the lawful parent/legal guardian of _____, a student, currently participating in a Pyramid Lake Jr./Sr. High School sponsored activity or activities that may include, but are not limited to field trips, mentor programs, emergency medical, athletics, band, curricular and other extra-curricular activities for PYRAMID LAKE JR/SR. HIGH SCHOOL.

It is my understanding that as a party of the above-referenced activity or activities the student referenced herein will attend numerous practices, rehearsals, meerin gs, games, and other related activities (hereafter collectively referred to as "events") for which Pyramid Lake Jr./Sr. High School may or may not provide transportation.
I hereby assume full responsibility and obligations for the private transport of said student both to and from assume such events to the extent Pyramid Lake Jr./Sr. High School does not provide transportation, or I and/or my child chose not to use District Transportation when provided, whether such events are currently scheduled, or are scheduled at some future time.

In consideration of the rights afforded herein, I HEREBY RELEASE AND FOREVER DISCHARGE THE PYRAMID LAKE JR/SR HIGH SCHOOL, ITS INSURERS, AGENTS, EMPLOYEES, REPRESENTATIVES, AND ASSIGNS FROM ANY AND ALL CAUSES OR ACTIONS, CLAIMS, DEMANDS OR EXPENSES IN ANYWAY CONNECTED VVITH, OR ARISING FROM PRIVATE TRANSPORTATION OF MY STUDENT, _____TO AND FROM ALL EVENTS REFERRED TO ABOVE.

I understand that I may rescind this release by providing the appropriate Pyramid Lake Jr./Sr. High School District Personnel with a written retraction, and that such retractions will be effective for *only* those future events specifically referenced in the retraction and shall not be effective as to any prior transportation's.
I hereby represent and warrant that in signing this release, I have been fully advised and represented by legal counsel of my own selection, or that I have had a full opportunity to do so, that I am fully familiar with all circumstances and incident hereto, that in executing this release, I rely wholly upon my own judgment and the advice of counsel of my own independent selection, or that I waived the right to rely on such advice, and that I have been in no way influenced in making this release by any representative or servant of the Pyramid Lake Jr./Sr. High School.

_____ _____

Parent/Guardian Signature **Date**

FIELD TRIP CONSENT FORM

I hereby give consent and authorization for the following student:

_____

to attend any field/activity trips to be scheduled throughout the school year. I hereby express relieve, indemnify, save and hold harmless Pyramid Lake Jr. /Sr. High School (PLJSHS), the Pyramid Lake Board of Education (PLBOE) and all other agents or employees thereof from and against all liability or claims arising from said student's acts, omissions, or conduct while on said trip. I further understand that it is my responsibility of advising my student of the risks, which are known or should be known, on such trips. I further agree to assume the responsibility of seeing that my student cooperates and conforms to the fullest extent with the instructions of the school officials in charge.

_____ _____

Parent/Guardian Signature **Date**

CONSENT TO RELEASE PHOTO/IMAGE

Dear Parent/Guardian:

During the current school year, your child's image/photograph or work may be included in a classroom or school project that could be used in one of the following ways:

- Used as a demonstration project/activity in education workshops/classes/conferences
- Used as a sample project/activity on CD's created by PLJSHS for use in education workshops and student classrooms
- Posted on the school web pages on the Internet
- Submitted as samples to program publishers or as contest entries to sponsors
- Appear on videotape made during a student presentation of their project, or in broadcasts or videotapes demonstrating computer multimedia in general
- Videotaped to appear in a school related program to be used by a local television station or school/county project
- Used in a printed publication such as a newspaper or magazine

While your child's name may accompany the photo, no last name or address will be included with your child's picture when publishing on the Web.

Please sign the release below and return this sheet to the school office. Your permission grants us approval to publicize without prior notification and remains in effect until revoked. Thanks!

Consent to Photo/Image Release Form:

_____ I/We **DO** give permission for _____'s work or image/photograph to be used as described above. We are willing to release this into the public domain and understand that no monetary compensation will be given for the use of the materials.

_____ I/We **DO NOT** give permission for _____'s or image/photograph be used as described above.

Student Name _____ Grade _____

Parent/Guardian Name. _____

Address _____

Parent Phone Number _____

Parent/Guardian Email _____

Signature of Parent/Guardian _____ **Date** _____

STUDENT HEALTH INVENTORY

Your child's learning depends upon good health. To assist in providing health services at school, please complete the following:

Student's:

Last Name	Middle Name/Initial	First Name
Mother's Name	Mother's contact #	Mother's email
Father's Name	Father's contact #	Father's email
Date of Last Physical:	Dr. Name	Insurance Carrier
Date of last Dental exam:	Dr. Name	Insurance Member #
Date of last eye exam:	Dr. Name	

DOES YOUR CHILD HAVE ANY OF THE FOLLOWING:

Allergies _____ ☐No ☐Yes Specify: _____
Anorexia/Bulimia _____ ☐No ☐Yes Specify: _____
Asthma _____ ☐No ☐Yes Specify: _____
☐Mild ☐Moderate ☐Severe
Blood Disorder _____ ☐No ☐Yes Specify: _____
Cancer _____ ☐No ☐Yes Specify: _____
Depression _____ ☐No ☐Yes Specify: _____
Diabetes _____ ☐No ☐Yes Specify: _____
Insulin _____ ☐No ☐Yes Specify: _____
Ear Infections _____ ☐No ☐Yes Date of last infection: _____
Epilepsy or Seizures _____ ☐No ☐Yes Date of last seizure: _____
Heart Condition _____ ☐No ☐Yes Specify: _____
Insect/Bee Sting Allergy _____ ☐No ☐Yes ☐ Local Reaction ☐ General Reaction
Kidney Disease _____ ☐No ☐Yes Specify: _____
Migraines _____ ☐No ☐Yes Specify: _____

HAS YOUR CHILD HAD:

Serious Illness _____ ☐No ☐Yes Specify: _____
Serious Injury _____ ☐No ☐Yes Specify: _____
Surgery (Operations) _____ ☐No ☐Yes Specify type & date: _____

DOES YOUR CHILD HAVE:

Trouble Seeing Close Work _____ ☐No ☐Yes Specify: _____
Wear Glasses _____ ☐No ☐Yes Specify: _____
Trouble seeing at distance _____ ☐No ☐Yes Specify: _____
Wear Contacts _____ ☐No ☐Yes Specify: _____
Trouble Hearing _____ ☐No ☐Yes Specify: _____
Wear Hearing Aide _____ ☐No ☐Yes Specify: _____

Will your child need to take medication during school hours? ☐No ☐Yes Specify: _____
Does your child have any medical or physical restrictions? ☐No ☐Yes Specify: _____
Does your child have a condition which prevents participation in regular P.E.? ☐No ☐Yes
Running, push-ups, contact sports, etc. ☐No ☐Yes Specify: _____
Does he/she take daily medication? ☐No ☐Yes Specify: _____

Signature of Parent/Guardian _____ **Date** _____

Medical & Insurance Form

Pyramid Lake High School will NOT act in the capacity of Parent/Guardian for *ROUTINE* *medical/dental* appointments, nor will the school provide transportation.

The Parent/Guardian will need to arrange for student check-out and arrange for private transportation to and from the facility.

Parent/Guardian consent is hereby given to Pyramid Lake Jr./Sr. High School to provide the following services to my student, _____, during the current school year.

- EMERGENCY CARE for accident or illness needing immediate attention.
- TRANSPORTATION to and from the Pyramid Lake Health Care Center or to any other Health facility for EMERGENCY Medical/Dental treatment. If not a current patient, you will be required to fill out forms provided by Pyramid Lake Heath Clinic.

SPECIAL INSTRUCTIONS: Any special medical information that the school staff will need to know

_____

_____

I understand that, **ONLY** in the case of an ***EMERGENCY***, personnel of Pyramid Lake Jr./Sr. High School shall be authorized, by my signature below, to act on my behalf should I not be able to be in attendance at the time of emergency treatment.

Signature of Parent/Guardian _____ **Date** _____

Name of Medical Insurance Company _____

Name of Dental Insurance Company _____

SCHOOL COUNSELOR REFERRAL

Please check if applicable:

☐ I would like to speak with a member of the school counseling staff, so that they will be aware of potentially significant traumatic events this student has experienced (loss of a loved one, other tragedy, etc.).

_____ _____

Parent/Guardian Signature **Date**

_____ _____

Student Signature **Date**

I am available on _____ during the week. ☐ AM ☐ PM

Medication Release

From time to time, a student will request for Tylenol or Ibuprofen for a headache, aches or pains.

Check and Initial in the appropriate area(s) of which medication your child can be given when requested:

Tylenol ☐ NO ☐ YES Initials _____

Ibuprofen ☐ NO ☐ YES Initials _____

Menstrual Medicine ☐ NO ☐ YES Initials _____

No initials will be construed as your student ***not*** being able to take any of the above.
*Medications will be limited and monitored weekly.

Pyramid Lake Board of Education requires DOCTOR and PARENT *permission for taking daily medication at school.*

Please obtain this form from the front office staff.

YONDR: STUDENT PHONE POLICY & GUIDELINES

FREQUENTLY ASKED QUESTIONS

Why has the PLJSHS decided to use the Yondr system?
We want our students to be engaged in their learning and in appropriate interpersonal social interaction throughout the day. Phones have become a distraction within the school day for many students, and for teachers who have to constantly monitor students for phone use during class and school activities. Additionally, the PLJSHS has seen an increase in discipline related to cyberbullying and the circulation of inappropriate videos and pictures. The Yondr system simply assists the PLJSHS in enforcing the policy currently in place regarding phones on campus.

What if my student is attending TMCC or on a field trip or at an athletic event?
TMCC students will be allowed to have use of his/her electronic devices to, from, and while at TMCC. When on PLJSHS campus all students are required to place electronic devices in the Yondr pouch.
Field trips and athletic events are at the description of the teacher or coach overseeing the event.

What if I want to reach my child during the school day?
We want our students to be engaged in their learning. If you need to contact your child during the school day, please contact the main office. Students are also each assigned a chrome book and have access to email throughout the day.

Will my child's phone be locked away?
Current PLJSHS policy is for a student's phone to be turned off and put away in a backpack during the school day. The Yondr pouch does not change that policy, instead, it is a tool to help enforce it. Your child will put their phone in the Yondr pouch and keep it with them, in their backpack, throughout the instructional day. When the final bell rings, students will unlock the pouch to access their phones.

Will my student's phone be safe?
Students are in possession of their phone - in their Yondr pouch - for the entire school day. We will advise students to store the pouch in their backpacks/lockers where it is completely safe. The pouch itself is made of a soft fabric padding that provides protection to the phone while stored.

I have a tracker on my child's phone, does it have to be off during the day?
Current PLJSHS policy is that a student's phone is turned off and put away in a backpack. However, as long as the phone is in the pouch and not interfering with the instructional day, a student can either turn it off, put it on airplane mode, or put it on silent.

Does this apply to smart watches and other devices like air pods/ear buds?
Students will be required to store their air pods, ear buds, watches and phones in the pouch with their phone. If a student requires air pods or headphones for instruction, those will be provided.

What if there is a school emergency?
In case of a school emergency, we direct our students to safety first, following our school emergency preparedness protocol.

- In the event of an emergency lockdown, school staff will direct students according to emergency preparedness protocol. Student cell phone use during this time has the potential to endanger the safety of the student using the phone and all students and staff within that classroom.

It is the advisement of **National School Safety and Security Services**. Specifically:

- Cell phone use during crisis management overloads telephone systems and renders them useless.
- Calls, texts, and other outside communications have the potential to alert a dangerous individual to the location of students and staff during a lockdown.
- Cell phone use accelerates the unintentional (and potentially intentional) spread of misinformation, rumors, and fear.
- Cell phone use, texting, and other outside communications by students during a crisis also have the potential to cause parents to flock to school at a time when school and public safety officials may need parents to be away from the school site due to evacuations, emergency response, and/or other tactical or safety reasons. This could actually delay or otherwise hinder timely and efficient parent-student reunification. It could also potentially put parents into a zone of harm.

STUDENT PHONE POLICY & GUIDELINES
Guardian, Student, and PLJSHS Agreement

Purpose:
The use of the Yondr system at PLJSHS is designed to foster an environment focused on learning and meaningful social interactions. This agreement outlines the responsibilities of students, guardians, and PLJSHS in supporting a phone-free educational environment.

1. Rationale for Yondr Implementation:
PLJSHS has adopted the Yondr system to:
- Minimize distractions in the classroom.
- Enhance student engagement in learning and social interactions.
- Reduce incidents of cyberbullying and the inappropriate circulation of media.
- Support the enforcement of existing phone usage policies.

2. Usage Guidelines:
- **On Campus:** All students must secure their phones in a Yondr pouch during the school day. The phone remains in the student's possession but locked within the pouch, stored in their backpack.
- **TMCC Students:** May use electronic devices while traveling to, from, and attending TMCC. Devices must be secured in the Yondr pouch when on PLJSHS campus.
- **Field Trips & Athletic Events:** Device usage is at the discretion of the supervising teacher or coach.

3. Communication During School Hours:
- Guardians needing to contact students should call the PLJSHS main office.
- Students can access their school-issued Chromebooks and email throughout the day for academic and communication purposes.

4. Device Security:
- Students are responsible for their phones, kept in Yondr pouches.
- Pouches should be stored in backpacks or lockers to ensure safety.
- The pouches provide protective padding for devices.

5. Tracking and Device Settings:
- Phones should be turned off, in airplane mode, or on silent while secured.
- Tracking apps can remain active as long as they do not disrupt learning.

6. Other Electronic Devices:
- AirPods, earbuds, smartwatches, and similar devices must also be stored in the Yondr pouch.
- Instructional headphones will be provided when necessary.

7. Emergency Protocols:
In the event of an emergency:
- Students will follow the PLJSHS emergency preparedness plan, prioritizing safety.
- Cell phone use may be restricted to prevent compromising safety, overloading communication systems, and spreading misinformation.
- Guardians are advised to await official communication before coming to the school during emergencies to avoid hindering emergency responses.

8. **Pouch Damage:** Any damage to pouch pin, exterior, alterative personalization, lost = $40 replacement

YONDR Agreement Acknowledgment:

By signing below, *we acknowledge and agree to adhere* to the PLJSHS Yondr Student Phone Policy & Guidelines.

Parent/Guardian Name: _____ **Student Name:** _____

Parent/Guardian Signature: _____ **Student Signature:** _____

Date: _____ **Date:** _____

Home Language Survey

2026-2027 School Year

**** PARENTS/GUARDIANS - PLEASE FILL & SIGN THIS SECTION ****

Student Name: _____ Entering Grade: _____

Purpose: The responses to the home language survey will assist in determining if a student's proficiency in English should be tested. This information is essential in order for the school to provide adequate instructional programs and services. As parents or guardians, your cooperation is requested in complying with these requirements.

For each question, write the name(s) of the language(s) that apply in the space provided. Please do not leave any question unanswered and answer as accurately as possible.

1. Which language did your child learn when they first began to talk?

2. Which language does your child most frequently speak at home?

3. Which language do you (the parents/guardians) use more often when speaking with your child?

4. Which language is spoken more often by other adults in the home?

5. Do you believe your child might need additional support learning the academic language for math, science, reading, or writing?

Additional Information (Optional):

Please sign and date this form in the spaces provided below, then return this form to your child's school. Thank you for your cooperation.

Signature of Parent/Guardian _____ Date _____

This questionnaire is intended to help determine eligibility for services under the federal McKinney-Vento Act. The information provided is confidential and protected by the Family Educational Rights and Privacy Act (FERPA). Information may be shared with the designated homeless liaison to determine eligibility and provision of services.

**** PARENTS/GUARDIANS - PLEASE FILL & SIGN THIS SECTION ****

School: _____ Date: _____

Student Name: _____ □ Male □ Female □ Non-binary

Last School attended: _____ Current Grade: _____

Birth Date: _____

Address of where the student slept last night: _____

Parent/Guardian/Adult Caring for Student: _____ Relationship: _____

Main Contact Phone Number: _____ Email if available: _____

Is the student's address a temporary living arrangement? □ Yes □ No

Note: If you checked "*No*," you may *STOP* here. Thank you.

If temporary, is this living arrangement due to loss of housing or economic hardship? □ Yes □ No

Please "X" all boxes below that best describes where the student sleeps at night, leave those blank that do not apply:

□ **Doubled-up** – staying with a friend or relative because of loss of housing, economic hardship or similar reason
(Ex: eviction, foreclosure, fire, flood, lost job, divorce, domestic violence, kicked out by parents, ran away from home)
□ In a **hotel**/motel (Name of hotel/motel): _____
□ In a **shelter** or transitional housing program (name of shelter or program): _____
□ In an **unsheltered** location such as: Tent, Car/Truck/Van, abandoned building, streets, campground, park, bus/train station, or another similar place.

- In a house that DOES NOT have water, or electricity, or heat, or DOES HAVE an infestation of rodents, or mold, or insects

□ With an adult that is not a parent or legal guardian, or alone without a parent.

List all other children (infants/toddlers/school-aged children through age 21) that stay in the same location; even if they are not yet in school or have withdrawn from school:

Last Name	First Name	Grade	School

The undersigned certifies that the information provided above is accurate.

_____ _____

****Signature* of Person Providing Information Date**
Parent/Legal Guardian/Caregiver/Unaccompanied Student (*Circle one*)

If student is an *unaccompanied youth*, please provide contact information for a caregiver or other adult that can be notified in the event of an emergency:

_____	_____	_____
Name	**Phone contact**	**Relationship to student**

Note: Upon enrollment, the school registrar or other designated staff is responsible for inputting required student-level data into ***NASIS*** including ***Housing Type*** (Primary Nighttime Residence).

**** PARENTS/GUARDIANS - PLEASE FILL & SIGN THIS SECTION ****

Housing type (Primary Nighttime Residence)-Check all that apply and date:

□ Doubled-up: _____ □ Sheltered: _____

□ Hotel/Motel: _____ □ Unsheltered: _____

1) Unaccompanied youth: □ Yes □ No

2) Transportation needed: □ Yes □ No

Select all that apply: □ Special Education □ English Learner □ Migrant

Resources and Services
Must be reviewed with parent/guardian/unaccompanied homeless youth in a manner and form that is understandable, including if necessary and to the extent feasible, in the native language:

□ McKinney-Vento rights reviewed (Immediate enrollment, Rights to attend school of origin, Transportation, Free school meals/fees waived)

□ Community resources available and information shared (Food and clothing, Affordable permanent housing, Emergency shelter, Mental health services, Employment, Domestic abuse resources, Medical, dental, and other health services, Seasonal/holiday)

□ School staff confidentially received student information (Food services, Registration/enrollment, Transportation department, Building school counselor or school social worker, Building principal)

Do not make copies of this form. If "yes" is checked for "Is the student's address a temporary living arrangement?" forward form to Local Homeless Liaison. A copy should not be placed in the student's cumulative file.

Local Homeless Liaison: _____ Date:_____

The undersigned certifies that the information provided above is accurate.

_____ _____

***Signature** of Person Providing Information* **Date**

Parent/Legal Guardian/Caregiver/Unaccompanied Student *(Circle one)*

If student is an *unaccompanied youth*, please provide contact information for a caregiver or other adult that can be notified in the event of an emergency:

Name	**Phone contact**	**Relationship to student**

For School Use Only

(Do Not Sign this page, Please Keep this page with the packet)

Criteria for Screening

If a language other than English is identified for any of the primary language questions, your child will be recommended for screening.

Federal Code: 25: CFR 32.3

"It's the responsibility of the federal government to provide comprehensive education programs and services for Indians and Alaska Natives."

Federal requirements direct schools to assess the English language proficiency of students. The process begins with determining the language(s) spoken in the home of each student. BIE has contracted with WIDA (World Class Instructional Design and Assessment) to provide English Learner Assessments and Supports identified in this Home Language Survey.

BIE Mission Statement:
"Provide quality education opportunities from early childhood through life in accordance with the Tribes' needs for cultural and economic well-being..."

School Mission Statement:
"Pyramid Lake Jr/Sr. High School values high quality education for every student by honoring culture, college, and career."

School Official Verification _____ Date _____