

Wingate Elementary School
Residential Program

Parental Permission for Student Check-out

School Year: 2023 - 2024 Grade: _____

Student Name: _____ Date of Birth: _____

Description: Height: _____ Weight: _____ Build: _____ Eye Color: _____

Hair color _____ Noticeable identification marks: _____

I hereby authorize the persons listed below to check my child(ren) out of the Residential Program for weekends, appointments or illnesses. It is understood that the Residential Program Staff may decline the check out if the best interest and safety of my child(ren) may be compromised. I understand that Wingate Elementary School reserves the right to request identification.

List of persons who may check my child(ren) out of school. I understand that the individuals listed below MUST BE 25 YEARS OR OLDER

Authorized Person (print)	Relationship	Phone No.	Physical Address

Parents: _____ Emergency contact name: _____

Work #: _____ Emergency phone #: _____

Cell #: _____ Emergency Physical address: _____

Parent physical address: _____

Special health or social concerns: _____

Signature of Parent/ Guardian

Date

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
INDIAN HEALTH SERVICE

CONSENT OF PARENT OR LEGAL GUARDIAN OR OTHER PERSON
WHO HAS PRIMARY RESPONSIBILITY FOR THE CARE OF THE CHILD

(Before completing this form, please read information on reverse side.)

Name of student _____ Birth Date _____ Chart Number _____

I (We), _____

have read the Consent Form for the Indian Health to arrange for or to provide the following health services for this child:

- 1 Health care including medical examinations, routine laboratory studies, x-ray procedures, and skin tests.
- 2 Dental care including dental examinations, preventive use of fluorides and necessary emergency dental care.
- 3 Mental health services including evaluation and treatment as necessary
- 4 Emergency health care for accidents or illness.
- 5 Transportation of the child to and/or from another health facility for these services.

I hereby give consent for all of the above services.

Exceptions or Special instructions: _____

Signed _____

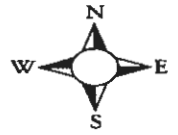
Address _____

Relationship _____

Date _____ Valid Until: S.Y. 2023-2024

PLEASE RETURN THIS FORM TO THE WINGATE ELEMENTARY SCHOOL
RESIDENTIAL PROGRAM

Wingate Elementary School
Residential Program
SY 2023 - 2024 Home Map



Student Name: _____
Physical Address: _____
Phone Number: _____
Parent/ Guardian: _____

Grade: _____
Date: _____

Additional notes: _____



IN REPLY REFER TO:

United States Department of the Interior

BUREAU OF INDIAN AFFAIRS
OFFICE OF INDIAN EDUCATION PROGRAMS
NEW MEXICO NAVAJO SOUTH



Success for All

Wingate Elementary School
P.O. Box 1
Fort Wingate, New Mexico 87316
(505) 488-6300/6351/6355

School Year 2023 - 2024

Residential Program Attendance and Behavior Expectations

Student Name: _____

Date: _____

Time: _____

SIGNATURES

STUDENT

PARENT/ GUARDIAN

RESIDENTIAL REPRESENTATIVE

The above student agrees to the following conditions:

- * I will return to the Residential Program by 7:45 PM the day before the regular instructional day begins.
- * Note: Gate closes at 8:00 PM every evening.
 - * This will achieve the W.E.S. attendance goal of a minimum of 171 days of school.
- * I will follow the BIE District Discipline Policies and Procedures.
- * I will not destroy school property.
- * I will follow the Parent/ Student/ Residential Program/ Transportation Agreement.

If I do not meet these conditions, the following consequences will result:

- * *The BIE District Discipline Policies and Procedures will be implemented*





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U.S. Department of the Interior
Success for All

School Year 2023-2024

Recommended Healthy Snacks

Why are Smart Snacks important?

- More than a quarter of kids' daily calories may come from snacks.
- Kids who have healthy eating patterns are more likely to perform better academically.
- Kids consume more healthy foods and beverages during the school day.
- The Residential Program provides daily healthy snacks for students. However, below is a recommended list of healthy snacks should parents choose to *occasionally* provide their child(ren) snacks from home. Please do not bring large quantities of snacks.

Snack List:

- Fruit bars – Granola bars, Assorted breakfast bars
- Trail mix/ Chex Mix - assorted nuts, peanuts, cashews, etc.
- Fresh fruit, fresh vegetables and dried fruit
- Yogurt/ frozen fruit bars
- Popcorn/ pop tarts

Drinks:

- Bottle water (assorted flavors)
- 100 % fruit drinks (assorted flavors)

Please do not bring the following snacks items:

- Chips – Hot Cheetos, Doritos, Potato chips, etc.
 - Cookies
 - Soda
 - Gum and candy
 - Seeds – pinon, sunflower and pumpkin
 - Energy drinks
 - Ramen Noodles
-



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NEW MEXICO NAVAJO SOUTH AGENCY



"SUCCESS FOR ALL"

Wingate Elementary School Residential Program
P.O. Box 1
Fort Wingate, New Mexico 87316
(505) 488-6351

School Year 2023-2024

Dear Parents/ Guardians,

Welcome to the Wingate Elementary School Residential Program. We are excited and looking forward to a new school year with your child(ren). We have prepared a list of items that your child(ren) should and should not bring to the Residential Program.

The students will need to bring the following items:

- Three (3) sets of clothing (follow dress code policies) – mid schoolers
 - Khaki Pants
 - Polo shirts (No Red, Blue or Black)
 - socks
 - underwear
- Pajamas or night wear
- Bed slippers
- flip flops (required)
- Towel/ washcloth/ loofa
- Shampoo/ conditioner
- Body wash
- Toothpaste and toothbrush with case
- Hairbrush/ comb
- Body lotion

The students are NOT allowed to bring the following items:

- Electronic gadgets (games, I pods, DVD players, cell phones, head phones, radios and alarms)
 - *The Residential Program will not be responsible for loss or theft of electronic gadgets.*
- Nail polish/ Remover
- Aerosol Hair Sprays
- Aerosol Body Sprays
- Blankets, Pillows or Stuffed Animals
- Large amounts of money

The above items are subject to change as needed. Your understanding and cooperation is greatly appreciated. Again, we welcome you and look forward to serving your child(ren) in the Residential Program.

Travis Martin, Residential Life Manager



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School Year 2023-2024

Parent Transportation Agreement

Initial

- _____ Students will always follow the Transportation bus safety rules.
- _____ The BIE Discipline Policy and Procedures will be followed for any and all violations.

Initial

Friday pick up

- _____ **The Residential Dorm Program closes at 3:00 p.m. Therefore, all students must be picked up by 3:00 p.m.**
- _____ Check-out requests via telephone, telefax or email will not be approved except in situations where a family emergency has occurred due to serious illness or there has been a death of an immediate family member.
- _____ Parents will be at the designated bus stop ten (10) minutes prior to the scheduled student pick up. Drivers will only wait ten (10) minutes at the designated stop.
- _____ Parents will walk up to the bus to check out their child(ren) at the bus stop. Only person(s) listed on the check-out cards will be allowed to check out students.
- _____ Impaired/ intoxicated persons will NOT be allowed to check out students. The authorities will be contacted.
- _____ **No child(ren) will be released to individuals under the age of 25 years old. All staff reserve the right to ask for Identification.**
- _____ Parents will keep contact numbers current with the Residential Program.

Initial

Sunday pick up

- _____ Students must be on time to their designated pick up points. The bus will wait for 10 minutes.
- _____ **If students miss the bus, the parent/ Guardian is responsible to deliver their child(ren) back to the dorm.**
- _____ **Parents will walk child(ren) back into their dorm wings and sign them in. Please refrain from dropping students off without contact with Residential staff.**
- _____ All students must return to W.E.S. between 4:00 PM and 7:45 PM.

Campus gates will be closed at 8:00 PM daily.

Parent/Guardian: _____ Date: _____

Leonard Sam, Transportation Supervisor: _____

Travis Martin, Residential Manager: _____