

NEW ENROLLMENT APPLICATION



Rainbow Dreams Academy

950W. Lake Mead Blvd. | Las Vegas, NV 89106 | P 702.638.0222 | F 702.638.0220 | www.rainbowdreamsacademy.com

APPLICATIONS MUST BE HAND-DELIVERED TO THE MAIN OFFICE

Rainbow Dreams Academy is a Nevada state approved, K-8, public charter school. All students have an equal opportunity to attend RDA: the school does not discriminate in its enrollment based upon the race, gender, religion, ethnicity, or disability of a pupil.

RDA's charter is dedicated to providing educational opportunities to students who are at risk. In order to serve this population, our application for admissions and determination of enrollment, are governed by NRS 386.580 and SB 391.

Enrollment Process for the 2018-2019 School Year

*Please note: To complete enrollment at RDA, you must both register with CCSD online **AND** complete the paper enrollment process at RDA as specified below.*

STEP 1: Nevada State Online Registration

Online registration is now required for **all** students enrolling in Nevada public schools. Online registration **Opens on April 16th** for all students entering kindergarten through 12th grade next school year.

Please note that CCSD does not provide transportation for students to or from RDA. All transportation must be arranged or provided by the parents or guardians of RDA students.

Families New to the Clark County School District:

Register from home on the CCSD website at register.ccsd.net. Parents registering from home must have an active personal email account. If you do not have a personal email account, or if you have questions regarding the online registration process, please contact us for assistance at 702-638-0222.

STEP 2: RDA Enrollment

RDA is currently accepting applications for enrollment for the 2018 – 2019 school year and maintains Open Enrollment for the 2017-2018 school year. We are now accepting applications for grades K-8. An application does not mean acceptance of enrollment. Upon acceptance the parent/guardian will be provided with an "Intent to Enroll" Packet to complete in order to obtain enrollment at RDA.

While considering enrolling your student at RDA, please review our Discipline, Attendance, and Dress Code policies which are stricter than local school district policies. Attendance at RDA is a high priority and is closely monitored by administration.

Enrollment at the charter school is conducted as follows:

- Placement priority is given to students currently enrolled in the charter school.
- At the conclusion of this process we will open enrollment to the public by filling any openings on a first come first served basis.
- Applications economically disadvantaged with siblings attending Rainbow Dreams Academy, during the school year, and living within a two mile radius of RDA
- Applicants economically disadvantaged and living within a two mile radius of RDA
- Applicants with siblings attending Rainbow Dreams Academy during the school year and living within a two mile radius of RDA
- Applicants living within a two mile radius of RDA
- Applicants with sibling attending RDA during the school year
- Applicants economically disadvantaged and living beyond a two mile radius of RDA
- All remaining applicants

If more students are enrolled who meet the above criteria than there are spaces available, the school will enroll students based upon lottery system established and conducted in accordance with NRS 386.580 and SB 391, using the same criteria as outlined above for enrollment.

Additional Documentation Required for Enrollment:

- Photo ID of a Parent or Guardian
- 2 Proofs of Residence (Gas, Water, Electric, Lease or Mortgage Agreement) or Residential Affidavit
- Student's Original Birth Certificate
- Copy of Students Current Grades or Report Card
- Copy of Students Immunization Records
- If Applicable:
- Copy of 504
- Individual Education Plan (IEP)

Infinite Campus Registration is required

ALL DOCUMENTS MUST ACCOMPANY THIS APPLICATION TO BE CONSIDERED.

Incomplete Applications WILL NOT be accepted

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For Office Use Only: Date Received: _____ Received By: _____ IC App Number: _____
Immunizations: _____ Application Approved: _____ Notification Letter Sent: _____
Enrollment Packet Received: _____ Enrolled: _____ Schedule Complete: _____ HR Teacher: _____

Who can we thank for letting you know about RDA? _____

STUDENT INFORMATION

STUDENT MUST BE ENROLLED BY LEGAL NAME (As per birth certificate or other legal document) (PLEASE PRINT)

Last Name First Name MI Age Date of Birth

Grade (2017-2018) Last 4 digits Social Security Number: _____

Male Female

LANGUAGE SURVEY (Parent or Guardian Must Complete)

1. First language learned by student? _____ English _____ Other _____
2. Language spoken by student with friends? _____ English _____ Other _____
3. Language used in home? _____ English _____ Other _____

PARENT/GUARDIAN (please print legibly)

Parent/Guardian Last Name First Name MI Relationship to child

Address City State Zip Code

() ()
Home Phone Number Cell Phone Number E-Mail Address

Occupation Employer Name Work Phone Number

Parent/Guardian Last Name First Name MI Relationship to child

Address City State Zip Code

() ()
Home Phone Number Cell Phone Number E-Mail Address

Occupation Employer Name Work Phone Number

Emergency Contact Name/Relationship Emergency Contact Phone Number(s)

If Guardian, do you have legal custody? _____ Yes (Please submit court document)
_____ No (Please explain on separate page)



PARENT RESPONSIBILITY PAGE

PARENT RESPONSIBILITY

____ Initial I/We agree to support my/our child(ren) in all aspects of his or her education because I/we have no higher responsibility as a parent(s).

____ Initial I/We agree to be active in my/our child(ren)'s education by attending school events and volunteering because my/our presence is a very tangible sign of support for my child and the school.

____ Initial I/We agree to enforce the School's Code of Conduct/Behavior Policy: RDA has a zero tolerance discipline policy. Guidelines are established and in place to correct inappropriate behavior. If inappropriate behaviors continue, a student may be suspended or removed from Rainbow Dreams Academy Charter School. A student **must then attend** their zoned school or apply at another choice school.

____ Initial I/We agree to adhere to the Rainbow Dreams Academy mandatory student dress and appearance policy. All students must wear the official Rainbow Dreams Academy uniform. All RDA Uniforms **MUST** be purchased from LAS VEGAS UNIFORMS DIRECT.

I certify that all answers given in this enrollment application are accurate and complete. I understand that if my child is enrolled, my having given false or misleading information in any of my application forms, residency forms, or having omitted significant information there from, may result in the discharge of my child from the school.

Student's Name

Grade

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date



2018-2019 DREAM CARE PARTICIPANT INFORMATION FORM

Program/School Rainbow Dreams Academy		Grade		Date of Birth	
Student Name				Age	
Address		Apt. #	Zip Code		Phone
Parent/Guardian *1			Cell Phone		
Work Location			Work Phone		
Parent/Guardian *2			Cell Phone		
Work Location			Work Phone		
E-Mail Address					

EMERGENCY CONTACT (someone other than parent/guardian):

I understand that it is my responsibility to provide current phone numbers and addresses.

_____ Relationship: _____ Phone: _____

_____ Relationship: _____ Phone: _____

MY CHILD MAY BE PICKED UP BY (someone other than parent/guardian):

_____ Relationship: _____ Phone: _____

_____ Relationship: _____ Phone: _____

MEDICATION: **NO** **YES** (If yes, please fill out additional medication form and attach photo.)

ALLERGIES OR SPECIAL NEEDS: _____

FEES: I understand that Dream Care is NOT a free service. Dream Care is \$3 for the morning, \$8 for the afternoon; or \$11 for the day. I understand that all fees/payments must be made by Friday for the following week. Daily rates will apply if making payments for week of service. Payment may be made in cash or money order or paid online. Payments will only be accepted from adults listed on this form.

LATE PICK-UP FEE: I understand that if my child is not picked up by 6 p.m., a late fee of \$1.00 per minute per family will be charged beginning at 6:01 p.m. _____ Initial

ABSENTEEISM: I understand that no refund is given when a child is absent from the program. _____ Initial

SIGN-IN/SIGN-OUT: I understand that each child must be signed in and/or out daily. The only person(s) authorized to pick up the child are those listed on this form and a photo ID must be shown. _____ Initial

_____ Initial

Waiver of Claim

For ourselves, and/or on behalf of our child named above, our heirs, executors, and administrators, we hereby do expressly and forever waive and release the RAINBOW DREAMS ACADEMY DREAM CARE and all of their respective officers, employees, agents, or representatives from any and all liability for personal injury or damages, sustained, incurred, arising from, or connected with travel to, return from any and all classes, tournaments, and/or special events, and all activities related to, or in connection with said activity by ourselves or by our child. During Rainbow-sponsored programs and events Rainbow (RDA) staff may take photos of participants that may be used in professionally-designed Rainbow (RDA) publications and promotional materials.

Signature of Parent/Guardian

Date