GRANDMA'S HOUSE – A VISION OF HOPE

226 South Blackstone - Tulare, California (559) 631-4200 or (559) 687-0925

EMERGENCY INFORMATION

| Name: | _School: | Teacher: | Phone |
|------------------------------|---------------------------|-----------------------|--------------------------|
| 1. Emergency Contact Perso | | | |
| (Name) | (relationship to | child) (Phone Number) | |
| 2. My child is allergic to: | | | |
| 3. My child's doctor: | 4. Doctor's phone Number: | | |
| (Parent's Signature) | (Phone Number) | | |
| Parents' Email: | | | |
| | AFTER | SCHOOL TUTORING | 3 |
| | | | |
| () I will pick my child up. | | () | My child will walk home. |
| Additional Information: | | | |
| | | | |
| | | | |
| | | | |

GRANDMA'S HOUSE – A VISION OF HOPE

226 South Blackstone Ave. – Tulare, California 93274
www.grandmas-house.org
Facebook

January 1, 2022

Dear Parents,

We are excited about being able to provide additional support to our students and assisting them in getting caught up academically, if they are behind, or just need a little additional support. We provide tutoring in reading, math, language arts and homework help Tuesday – Thursday. Our students arrive as soon as they are released from school which is 2:40p.m., for the kindergarten – sixth grade. The middle school students are released from school around 3:00p.m. As a partner in your child's education, it is important for your child to be at tutoring every day, unless he/she is ill. Students will be dropped if they have three unexcused absences, without a doctor's note.

When we receive the referral from you or the teacher, the first thing we will do is look at the information received from the teacher as to where the child is functioning academically and what support is needed, based upon his/her grade level. This information will assist us in providing the support your child needs.

The application packet consists of the following:

<u>The referral form</u> – for your child to attend tutoring at Grandma's House. There is a section for you to fill out. The teacher will fill out the rest. This is important.

<u>Exchange of information form</u> – you will need to sign it. It gives the teacher and the district permission to share academic needs and assessment information about your child, with Grandma's House

Emergency Card - you must fill this out and leave it with the packet.

<u>Photographing/videotaping of students</u> - as the parent, you will need to read and sign this form. It gives us permission to include your child's picture in the newspaper or in various video presentations we do for Grandma's House.

<u>Family Information Form</u> – this form provides information about you and your family that will assist us when applying for grants and other funding.

<u>Total packet</u>, whether initiated by the parent, principal or the classroom teacher, once it is completed, return it to Grandma's House.

Sincerely yours,

Flora A. Johnson

Ms. Flora A. Johnson Founder/Director



FAMILY INFORMATION



Grandma's House is a 501 (c) (3) non-profit corporation. We run our program through grants and donations from organizations, businesses and individuals. Many of the grants require the following information. It is this funding that allows us an opportunity to offer this program free to any student. Please assist us by answering the questions below.

| Student's Name: | | Date: | |
|--|---|---|--|
| Ethnicity: | | | |
| () Caucasian () Latino () Other: | ` ' | () Native American () Pacific Islander | |
| Parent's Level of Educati | ion: | | |
| () No schooling() High School GED() MastersFamily Type: | () K – 8th grade () Some college () Doctorate | | |
| () Single mom responsi () Single father respons () Multi-generations: th () Joint/Shared Custody () Kinship Care: care of | | | |

All students in Tulare City Schools receive (X) Free

Students School Lunch:

Tulare City School District

Authorization to Release Student Record Information

| I (parent or legal g | uardian) | | , hereb | y | |
|---|--|-----------------|-----------------|-----------------------------|------------|
| authorize Tulare City Sc the following student rec | hool District, its offic | ers, agents and | d employees, | to release and | furnish |
| 2. Test scores (3. Behavioral is | mance Level or Asse classroom) or any ac ssues that have impa ically Disadvantage | cademic infor | mation need | ed | |
| which pertain to my chile student enrolled in, or fo records are to be released | rmerly enrolled in Tu | lare City Scho | ool District. T | , Grade: The above stude | a ent |
| Grandma's House (Name) | 226 S Blackstone (Address) | | | 93274 (Zip Code) | |
| for the purpose of provio | ling academic suppo | <u>ort</u> | | | |
| In giving this authori confidentiality of such st so as to the above-named without my written conse | udent record informa l persons; however, the | tion pursuant t | o law, or to a | ssert any privi | lege to do |
| Date | | or Legal Guar | | | |

A Core Theme for Grandma's House "It Takes a Village to Raise a Child."



Distrito Escolar de La Ciudad de Tulare

Autorización para Liberar Información de Registro del Estudiante

| Yo (padre o guardian legal | .) | | , dppor este medio | |
|---|-----------------------|--------------|---------------------------------------|-----------|
| autorizó al Distrito Escolar de la | | | | ì |
| liberar y suministrar lo siguiente | | | , , , , , , , , , , , , , , , , , , , | |
| nocial y summistral to significate | s registros der estad | anc. | | |
| 1 Ni-1 J 1: | | | | |
| 1. Nivel de rendimient | | _ | | |
| _ | | - | información académica n | ıecesaria |
| 3. Problemas de condu | icta que han afectad | do el apreno | lizaje | |
| 4. Estado de Desventaj | ias socioeconómicas | S | | |
| U | , | | | |
| Que pertenece a mi niño (nombre | A) | | un estudiante | |
| matriculado adentro, o matricula | | | | |
| | | | e la Ciudad de Tulare. Los | |
| registros de los estudiante por en | icima son para ser ia | nzado a: | | |
| | | | | |
| Grandma's House 226 S. Bl | ackstone St. Tulare, | CA | 93274 | |
| (Nombre) (Dirección) | (Ciudad) | (Estado) | (Código postal) | |
| | | | | |
| Para el propósito de proveer apo | ovo académico | | | |
| and of proposito de proveer up | syo ucudemico | | | |
| | | | | |
| | | | | |
| En dar esta autorización es | • | | 1 1 | |
| para mantener la confidencialida | d de tal información | de registro | del estudiante conforme a | ley, o |
| afirmar cualquier privilegio de h | acerlo a las personas | s mencionad | as anteriormente. Este | |
| información no se puede transmi | - | | | |
| | | , | o por eservo. | |
| | | | | |
| | | | | |
| | | | | |
| Fecha | Firma | | | |
| | | (Padre o | Guardián Legal) | |
| | | , | 5 , | |

GRANDMA'S HOUSE – A VISION OF HOPE PHOTOGRAPHING AND VIDEO TAPING STUDENTS AT GRANDMA'S HOUSE

On occasion, students may be spontaneously photographed or videotaped by the news media or staff at Grandma's House while learning or in the special events we participate in (i.e., fairs and /or Christmas parades).

Our director is often called upon to give various presentations to local organizations and businesses about the program at Grandma's House. This presentation often consists of a PowerPoint that provides a virtual tour of Grandma's House, students learning and staff members delivering instruction.

Below, please check the areas that reflect your desire as it relates to your child being pictured in various activities and events held at and by Grandma's House.

| () you have my per Grandma's House. | mission to use any pictures taken by th | e staff or the media at |
|--------------------------------------|---|-------------------------|
| () I would prefer th website. | at my child's picture not be shown in p | presentations or |
| Parent's Name: | Student's Name: | Date: |

SAFTEY PROTOCAL WILL BE ENFORCED

Mask wearing with effective ventilation Hand washing and sanitizing Social Distancing, Daily temperature and health screening.











of breath

How to stop it spreading



hands regularly



Cover your coughs and sneezes



Stav home if you're unwell