

# Welcome to South Elementary School



**We are committed to  
Loving, leading, and  
lifelong learning**

**#togetherwelead  
#togetherwerise**



# Eldon South Elementary

Michele Herbert, Principal  
Kari Hinds, Assistant Principal  
1210 South Maple Eldon, Missouri 65026  
Phone 573.392.8030 Fax 573.392.9152



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Date: 01/03/2024

To: Parents/Guardians

Subject: Enrollment Requirements for your Child

Dear Parents/Guardians:

When enrolling your child at Eldon South Elementary School you will need the following information:

- Parent/Guardian Picture I.D, Proof of residence, (a utility bill, water, gas, electric, or phone with the name and address printed on it).
- A rent receipt with the same information will also be accepted.
- If you are living with someone who already resides in the district, this person must write a letter stating the relationship to the adult wishing to enroll the student(s), along with the student(s) name(s), and the address at which they are living. The note must be signed by the person writing the letter.

For the student(s) we will need:

- A copy of their state-issued Birth Certificate
- A copy of their updated immunization records
- Any court approved custody agreements or guardianship papers

Thank you

South Elementary Office Staff

ELDON R-I SCHOOLS ENROLLMENT INFORMATION  
2024-2025

Date \_\_\_\_\_

Race: (please check) White \_\_\_ Black \_\_\_ Hispanic \_\_\_ Indian \_\_\_ Asian \_\_\_ Other \_\_\_

Student's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code \_\_\_\_\_

IF PO BOX is used, please list actual street address above: PO BOX # \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Grade \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Parent/Guardian (in home) or whom you are living: \_\_\_\_\_ Are you a registered voter? YES NO

Parent 1 Information: \_\_\_\_\_ Relation: \_\_\_\_\_

Employer: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Parent/Guardian 2 Information \_\_\_\_\_ Relation: \_\_\_\_\_

Employer: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Parent/Guardian E-mail Address: \_\_\_\_\_

Please list all siblings in Eldon Schools and their ages: \_\_\_\_\_

Are there currently any court orders dealing with custody or visitation? YES NO

IF YES, please provide the school with a copy. We CANNOT honor without documentation.

Emergency Contacts:

1.Name \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell: \_\_\_\_\_

2.Name \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell: \_\_\_\_\_

Name of Parent out of the home (if applicable): \_\_\_\_\_ Relation: \_\_\_\_\_ Home #: \_\_\_\_\_

Employer: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Would this parent like a grade card sent to them? YES NO If yes please provide address

Previous school attended (name of school in what State): \_\_\_\_\_

Previous school address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Circle the county in which you live: MILLER MORGAN MONITEAU

Circle the district in which you live: ELDON R-I HIGH POINT OTHER

Does the student use a language other than English? YES NO If YES, what language? \_\_\_\_\_

Is a language other than English used in the home? YES NO If YES, what language? \_\_\_\_\_

Are you or an immediate family member in the Military? (circle one) Active Duty National Guard or Reserve Unknown

Are you currently living in a temporary residence because your home has been damaged or economic hardship? (e.g. motel, hotel, car, campsite, shelter)? YES NO

Are you currently living with another family (doubled up) due to loss of housing, economic hardship, or a similar reason? Explain if it is a similar reason. YES NO Explain: \_\_\_\_\_

Has your family moved within the past 3 years to seek or obtain temporary or seasonal agricultural or food processing work? YES NO

\_\_\_\_ My signature below signifies I give permission for my child to go on school or classroom trips during the elementary school years. I will be responsible to notify the school, in writing, if I want to change my position on my child attending field trips during his/her elementary years.

\_\_\_\_ I give permission for any local newspaper staff or school district to photograph my child and/or to publish his/her work to social media.

\_\_\_\_ My signature below signifies if I cannot be reached in the event of an emergency, I give consent for the school to obtain, through a physician or hospital of its choice, such medical care as is reasonably necessary for the student. I will not hold the school district financially responsible for the emergency care and/or transportation for said child.

\_\_\_\_ May take over the counter medications (generic Tylenol, cough drops, antacid, oral care, basic first aid).

Is child involved in (check all that applies): Special Ed. classes \_\_\_ Speech \_\_\_ Title I Reading \_\_\_ Gifted \_\_\_ 504 Plan \_\_\_

I VERIFY THAT ALL ENROLLMENT INFORMATION IS CORRECT.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Two sided please turn over

# Eldon R-1 School District – Health Services

## Student Health Information 2024-2025

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

### Regular or Emergency Medications Your Child Is Taking

(at home) \_\_\_\_\_

(at school) \_\_\_\_\_

I request that you give over the counter medication to my child during the school year in accordance with the Board Policy. I authorize the school nurse or designee to give my child medication. I will not hold the school staff responsible for any undesired reaction that may occur from the medication. (Examples of non-prescription medication to be given with parent permission are: non-aspirin pain relievers including Acetaminophen, Ibuprofen, Tylenol, sore throat spray, antacid, antibiotic ointment, hydrocortisone cream, calamine lotion, throat lozenges, topical anti-sting treatments and generic substitutes.

### Please initial below for over the counter medications:

\_\_\_\_\_ Yes

\_\_\_\_\_ No

I hereby give my permission for the Eldon Schools to obtain or send my students immunization record to Physician of choice.

### Please initial below:

\_\_\_\_\_ Yes

\_\_\_\_\_ No

Please mark below if your child has any of the following:

\_\_\_ Asthma

\_\_\_ Diabetes

\_\_\_ Seizures

\_\_\_ Severe Allergies

\_\_\_ Heart Condition

\_\_\_ ADHD

\_\_\_ ADD

\_\_\_ Hearing problem

\_\_\_ Vision problem

\_\_\_ Seasonal Allergies

\_\_\_ Other Medical Condition

EXPLAIN

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List All Child's Medication Allergies \_\_\_\_\_

List All Child's Food Allergies and provide Doctors note:

Students Physician \_\_\_\_\_

1. Any medication that is sent to school with a student must be in the original container with the student's name on it.
2. Medication sent to school with a student must be accompanied by a signed and dated note from the parent/guardian requesting the medication to be given.
3. It is recommended that a small container of medication be sent to school.
4. All medications must be given to the school nurse as soon as the student arrives at school.
5. Please make sure the medication is age appropriate.

**It is my understanding that my signature allows all of the above information and treatment to be administered to my student.**

Parent Cell Phone \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

# BUS TRANSPORTATION

Dear Parents/Guardians:

1. All requests must be completed and given to the student's Building Official for review prior to their approval. **THREE SCHOOL DAYS NOTICE IS REQUIRED BEFORE A REQUEST MAY BE GRANTED.**
2. Final approval of request must be made by the Transportation Department prior to the student being placed on a transfer bus to ensure that all parties involved (parent/guardian, teacher, building official, Transportation Department and bus driver) are informed and the student's safe transportation is assured.
3. Transfer students must present a bus pass to the driver, given to them by the Principal's Office, to ride their new bus to their new location. The transfer stop should be written on the bus pass given to the new driver.

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Please complete this form and return to the Building Office.

Grade: \_\_\_\_\_ Current Teacher: \_\_\_\_\_

Student's name \_\_\_\_\_

Address: \_\_\_\_\_

My student will load the bus in the *morning* at the following *designated* bus stop:

\_\_\_\_\_ AM Bus#: \_\_\_\_\_

My student will ride the bus in the *afternoon* to the following *designated* bus stop:

\_\_\_\_\_ PM Bus#: \_\_\_\_\_

My child does NOT require bus transportation: \_\_\_\_\_

My child is enrolled in the afternoon LEAP program: YES \_\_\_\_\_ NO \_\_\_\_\_

**No Bus Discipline Warnings:** If a student does not follow the bus driver's rules, they will lose their bus privilege immediately. The bus driver will document discipline issues and submit them to the transportation director promptly. Immediate action will take place. The six bus rules must be followed at all times in order to keep not only all students safe, but also the other motorists on the road.

## Discipline Guidelines for Buses

1. Obey the driver promptly
2. Stay seated until the bus comes to a complete stop
3. Keep hands, feet and items to yourself at all times and no throwing objects
4. No offensive language or disruptive behavior
5. No food, candy, gum, or beverages on the bus
6. No large equipment, animals, skateboards or other equipment on the bus

Parent/Guardian Signature

Phone Number

Date

\*\*\*\*\*  
(OFFICE USE ONLY)

Bldg Approval: \_\_\_\_\_ Date: \_\_\_\_\_ (Must be approved prior to request from transportation)

\*\*\*\*\*  
(TRANSPORTATION DEPARTMENT)

AM Bus # \_\_\_\_\_ AM Bus Stop \_\_\_\_\_ AM P/U Time: \_\_\_\_\_

PM Bus # \_\_\_\_\_ PM Bus Stop \_\_\_\_\_ PM D/O Time: \_\_\_\_\_

Effective Date: : \_\_\_\_\_ Date (Parent/Guardian/Teacher) notified: \_\_\_\_\_

Transportation Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Eldon South Elementary School  
Eldon R-1 School District  
1210 South Maple Street  
Eldon, MO 65026**

Dear Parent/Guardian:

We would like to welcome you to South Elementary School. In order to provide the best education possible, please check any of the following special programs that your child received at their previous school:

\_\_\_\_\_ Reading Assistance:  
(Reading Tutoring, Remedial Reading  
or pull-out reading services)

\_\_\_\_\_ Services for Learning Disabilities

\_\_\_\_\_ Math Assistance:  
(Math Tutoring, Remedial Math,  
or pull-out math services)

\_\_\_\_\_ Services for Educable Mentally Handicapped

\_\_\_\_\_ Speech or Language Therapy

\_\_\_\_\_ Services for Behavior Disorders

\_\_\_\_\_ Assistance for Hearing Impaired

\_\_\_\_\_ Other (please specify)

\_\_\_\_\_ Assistance for Visually Impaired

\_\_\_\_\_

\_\_\_\_\_ My child did NOT receive any of the special services listed above.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

ELDON R-1 SCHOOL DISTRICT

Please complete and return this questionnaire to the school office. Any changes that occur during the school year should be brought to the attention of the school office and if necessary a new form filled out. In the case of separation/divorce parents it is the custodial parent's responsibility to inform the school of any changes in the custody and/or visitation rights.

Name of Student \_\_\_\_\_

Custodial Parent's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Name of Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Present Status: married divorce separation custody dispute support dispute restraining order (circle one)  
Other \_\_\_\_\_

Is there a Court Order dealing with custody/visitation? \_\_\_\_\_

Is there a Joint Custody Order? \_\_\_\_\_

Are there any court orders curtailing or restricting the rights and privileges of your current or former spouse with respect to his/her right to be kept informed of the student's school progress and activities or participate in those activities? \_\_\_\_\_

Does the most recent Court order affecting your action expressly permit the student to be released from school to the non-custodial parent with visiting rights? \_\_\_\_\_

Name of other Parent of Student. \_\_\_\_\_

Please attach a Certified Copy of the applicable Portion of any Court Order.

The following people have my permission to pick my child up from school at any time (example if they are sick and I or my spouse is unavailable). These people are also considered emergency contacts.

\_\_\_\_\_ relationship \_\_\_\_\_ phone #: \_\_\_\_\_

\_\_\_\_\_ relationship \_\_\_\_\_ phone #: \_\_\_\_\_

\_\_\_\_\_ relationship \_\_\_\_\_ phone #: \_\_\_\_\_

\_\_\_\_\_ relationship \_\_\_\_\_ phone #: \_\_\_\_\_

\_\_\_\_\_ relationship \_\_\_\_\_ phone #: \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**ENROLLMENT AFFIRMATION FOR PARENT  
OR COURT-APPOINTED GUARDIAN  
(Resident Student with No Prior Expulsions)**

Under penalty of law, I affirm that I am the parent or court-appointed legal guardian of the minor student, \_\_\_\_\_, that I reside within the boundaries of the **ELDON R-1 School District** and the student resides within the boundaries of such district, and that any information or documentation that I have provided as proof of residency is true and correct to the best of my knowledge, information and belief. I further affirm that the student, \_\_\_\_\_, has not been expelled from school attendance at any other school in the state or in any other state for an offense in violation of school policies related to weapons, alcohol or drugs, or the willful infliction of injury to another person, and that the other information that I have provided to the school district is true and correct to the best of my knowledge, information and belief. I understand that this statement will be maintained as part of the student's scholastic record.

**I understand that it is a criminal violation to make a materially false statement or affirmation, or to provide false information to establish residency, and that if I have provided false information for such purpose, the school district may file a civil action against me to recover cost of educating the student.**

\_\_\_\_\_  
Signature of parent or court-appointed guardian

Subscribed and affirmed before me this \_\_\_\_\_ day of

\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public and Official Seal

Grade: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

Last School Enrolled in:

Bus # \_\_\_\_\_

School Phone No:



Eldon R-1 School District  
Voluntary Student Demographic Information

The Eldon R-1 School District is requesting that this form be completed by the student or the student's parent. **Completion of this form is voluntary.** The district is required to submit an aggregate report on the ethnicity and race of all students in the district. The most accurate information comes from you. If this form is not completed, the district will be forced to assign each student to an ethnicity and race category based on whatever information the district has available, including visual observation.

Collection of this information is authorized by federal law, and the information collected will be used to satisfy federal and state reporting requirements and better serve the students of our district. All information provided will be kept confidential in accordance with law.

STUDENT NAME: \_\_\_\_\_

Is the student Hispanic or Latino?

\_\_\_\_ Yes, Hispanic or Latino (a person of Cuban, Mexican, Puerto Rican, South American, Central American or other Spanish culture of origin, regardless of race)

\_\_\_\_ No, not Hispanic or Latino

What is the student's race?

\_\_\_\_ American Indian or Alaska Native (a person having origins in any of the original peoples of North America or South America, including Central America, and who maintains tribal affiliation or community attachment)

\_\_\_\_ Asian (a person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam)

\_\_\_\_ Black or African American (a person having origins in any of the black racial groups of Africa)

\_\_\_\_ Native Hawaiian or Other Pacific Islander (a person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands)

\_\_\_\_ White (a person having origins in any of the original peoples of Europe, the Middle East or North Africa)

**ELDON SOUTH ELEMENTARY SCHOOL  
1210 SOUTH MAPLE  
ELDON, MO 65026  
(573) 392-8030**

Parent Portal

Through this web-based system, Parent Portal, parents will be able to view their child's attendance history, and lunch account balances.

Information for your child is available only with a password. All passwords are distributed through email. It will be your responsibility to keep this password private. We cannot issue any passwords via phone conversation. Passwords will not be issued to the student. You must have an email address to view your child's records in PARENT LINK.

Please provide the email address that you would like used for student information notifications. You may use only one email address, for example, home or work, but email cannot be sent to both. Please fill in the correct email address on the line provided. This form must be submitted each school year for you to have access.

**PLEASE PRINT BELOW**

Student Name \_\_\_\_\_

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Email Address –Home or Work (circle one)

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Email Address – Home or Work (circle one)

\_\_\_\_ I would like to be able to access my student's information over the Internet by using a password.

\_\_\_\_ I do not want access to my student's information available over the Internet.

I understand that it is my responsibility to protect my PARENT LINK password. I should not share my password with my children. I understand that the PARENT LINK system may not be available 24 hours a day due to maintenance on the school network, weather related interruptions, etc.

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent Printed Name

Please return this letter to the school office in person. Please bring a picture ID with you (not necessary for last year's Parent Portal user.)

Mrs. Michele Herbert, Principal  
Mrs. Kari Hinds, Assistant Principal  
(573) 392-8030

Cheyenne Uptergrove  
SIS Coordinator  
(573) 392-8000

**Eldon R-1 School District  
Student/Teacher Use Contract  
MORENet/Internet Use  
South Elementary School**

**Agreement:**

**I have read the MORENet/Internet User Agreement. I understand and will abide by the stated conditions and guidelines for MORENet/Internet use.**

**I further understand that violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access may be revoked; school disciplinary action may be taken and/or appropriate legal action.**

**Student Name – Please print**

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**Teacher Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

# Eldon R-1 School District MORENet/Internet Access User Agreement

MORENet access is now available to students and staff in the Eldon R-1 District. We are pleased to bring this access to Eldon Public Schools and believe this access offers vast, diverse and unique resources to both students and teachers. Our goal is providing this service to teachers and students is to promote educational excellence in Eldon Schools by facilitating resource sharing, innovation, and communication.

MORENet is an electronic network which accesses the Missouri Department of Education, library systems, and the Internet. The Internet is an electronic highway connecting thousands of computers all over the world and millions of individual subscribers. Through classroom activities, teachers and librarians will provide students with access to:

- Electronic mail communication
- Information and news from NASA and other research institutions and organizations
- Public domain and shareware of all types
- Discussion groups on a wide range of topics
- Access to many library services; university library catalogs; the Library of Congress; ERIC; and periodical databases

With access to computers and people all over the world also comes the availability of materials that may not be considered to be of educational value in the context of the school setting. Search strategies and supervised access will be utilized as precautions to restrict access to controversial materials. Student access to electronic mail and chat rooms will be under direct teacher supervision. We (Eldon R-1 Schools) believe that the valuable information and interaction available far outweighs the possibility that users may procure material that is not consistent with the educational goals of Eldon R-1.

The Eldon R-1 School District is responsible for securing its network and computing systems in a reasonable and economically feasible degree against unauthorized access and/or abuse, while making them accessible for authorized and legitimate users. This responsibility includes informing users of expected standards of conduct and the punitive measures for not adhering to them. Any attempt to violate the provisions of this policy will result in cancellation of user privileges and disciplinary action, regardless of the success or failure of the attempt. A user is required to use network resources in an efficient, ethical, and legal manner. Your signature on the attached contract is legally binding and indicates that you have read the terms and conditions carefully and understand their significance.

## Guidelines and Conditions:

- 1) **Acceptable Use:** The purpose of MORENet, which is the backbone network to our Internet access, is to support research and education in and among academic institutions in the U.S. providing access to unique resources and the opportunity for collaborative work. The use of your access must be in support of education/research and consistent with the educational objectives of the Eldon R-1 District. Transmission of any material in violation of any U.S. or state regulation is prohibited. This includes, but is not limited to: copyrighted material, threatening or obscene material, or material protected by trade secret. Use for private/commercial activities by for-profit institutions is generally not acceptable. Use for product advertisement or political lobbying is also prohibited. Illegal activities are strictly prohibited.
- 2) **Privileges:** The use of MORENet access is a privilege, not a right, and inappropriate use will result in a cancellation of these privileges. Based upon the acceptable use guidelines outlined in this document, the system administrator may deny access at any time as required. The administrators, faculty and staff of the Eldon R-1 District may request the system administrator to deny, revoke or suspend specific user access.

- 3) **Netiquette:** You are expected to abide by the generally accepted rules or network etiquette. These include, but are not limited to, the following:
- 3.1 Be polite. Do not write or send abusive messages to others.
  - 3.2 Use appropriate language. Do not swear, use vulgarities or any other inappropriate language.
  - 3.3 Note that electronic mail is (E-Mail) is not guaranteed to be private. People who operate the system do have access to all mail. Messages relating to or in support of illegal activities may be reported to the authorities.
  - 3.4 Do not use the network in such a way that you would disturb the use of the network by the other users (e.g. downloading huge files during prime time; sending mass e-mail messages; annoying other users).
  - 3.5 All communications and information accessible via the network should be assumed to be private property.
- 4) **Implied:** The Eldon R-1 District will not be responsible for any damages you suffer. This includes loss of data resulting from delays, non-deliveries, mis-deliveries, or service interruptions caused by negligence, errors, or omissions. Use of any information obtained via MORENet/Internet is at your own risk. While efforts are made to guarantee accuracy in informational databases, we do not guarantee accuracy of all material or agree with every opinion.
- 5) **Security:** Security of any computer system is of high priority. Attempts to log into the system as any other user will result in cancellation of user privileges. Any user identified as a security risk or having a history of problems with computer systems may be denied access to the MORENet system.
- 6) **Electronic Mail:** Whenever you send electronic mail, your name and user id are included in each mail message. Student use of electronic mail requires direct teacher supervision during individual and group use. Therefore:
- 6.1 Forgery (or attempted forgery) of electronic mail messages is prohibited.
  - 6.2 Attempts to read, delete, copy, or modify the electronic mail of other users are prohibited.
  - 6.3 Attempts at sending harassing, obscene and/or threatening E-Mail to another user are prohibited.
  - 6.4 Attempts at sending unsolicited junk mail "for profit" messages or chain letters are prohibited.
- 7) **Network Security:**
- 7.1 Use of systems and/or networks in attempts to gain unauthorized access to remote systems is prohibited.
  - 7.2 Use of systems and/or networks to connect to other systems in evasion of the physical limitations of the remote/local system is prohibited.
  - 7.3 Decryption of system or user passwords is prohibited.
  - 7.4 The copying of system files or any software is prohibited.
  - 7.5 The copying of copyrighted materials, such as third party software, without the express written permission of the owner or the proper license, is prohibited.
  - 7.6 International attempts to "crash" Network systems or programs are punishable disciplinary offenses.
  - 7.7 Any attempts to secure a higher level of privilege on Network systems are punishable disciplinary offenses.
  - 7.8 The willful introduction of computer "viruses" or other disruptive/destructive programs into the organization network or into external networks is prohibited.
- 8) **Vandalism:** Vandalism will result in cancellation of privileges. Vandalism is defined as any malicious attempt to harm or destroy data of another user, damage to equipment or software, and interference with MORENet and local network services.

# 2024-2025 PK/K Federal Criteria

**Preschool** is for children who will have their 4<sup>th</sup> birthday on or before July 31, 2024.

**Kindergarten** is for children who will have their 5<sup>th</sup> birthday before July 31, 2024.

Parents do have the choice of waiting until their child is 6 years of age to start Kindergarten.

Eldon R-1 PreK Student Selection Criteria:

1. Children who are considered “one-year prior” to kindergarten according to age requirements.
2. Developmentally appropriate measures of child development as determined by the DIAL -4(Developmental Indicators for the Assessment of Learning).
3. Homeless preschool-age children; and those that are in a local institution for neglected or delinquent children and youth or attending a community-day program for these children.
4. Parental information gleaned from Parental Portion of the DIAL-4, as well as the screening “exit” meeting held with parent(s).

I have read and understand the Title 1 Preschool/Kindergarten Federal Criteria.

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(Parent Signature)

# Eldon South Elementary



Michele Herbert, Principal  
Kari Hinds, Assistant Principal  
1210 South Maple Eldon, Missouri 65026  
Phone 573.392.8030 Fax 573.392.9152



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## ELDON R-1 SCHOOLS

For the past several years, Eldon R-1 Schools has been pleased to be able to provide Eldon parents with automated phone notifications of important events such as upcoming events, notice of information sent home with students, inclement weather school closings and similar information. We will continue to provide this information as a service for our parents.

Parents who do not wish to continue to receive non-emergency information must opt-out to not receive calls. Only emergency calls will be received.

By signing this form, you are indicating that we should remove you from all non-emergency calls sent out by the district.

\_\_\_\_\_ I **DO** give my permission to receive non-emergency calls from Eldon R-1 Schools using automatic dialing equipment at the telephone numbers submitted during the registration process.

\_\_\_\_\_ I **DO NOT** give my permission to receive non-emergency calls from Eldon R-1 Schools using automatic dialing equipment at the telephone numbers submitted during the registration process.

Student Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# South Elementary School Classroom Parties



**Fall Party** – ECSE AM Class - Friday, October 25 – 9:45-10:45 AM  
ECSE PM Class/PK -2nd Grade - Friday, October 25 - 2:00 - 3:00 PM



**Christmas Party** – ECSE AM Class - Friday, December 13 - 9:45-10:45 AM  
ECSE PM Class/PK-2nd Grade- Friday, December 13 - 2:00-3:00 PM



**Valentine's Party** – ECSE AM Class - Friday, February 14 – 9:45-10:45 AM  
ECSE PM Class/PK - 2nd Grade - Friday, February 14 - 2:00 - 3:00 PM



Due to our updated procedures, students will be able to participate in holiday parties as in years past, but outside guests will not be allowed to attend. If you are able to send in supplies for your child's classroom, please indicate which party and what type of help you would like to offer. Return this form to your child's teacher. The teacher will contact parents with details of exactly what is needed closer to the party date. Thank you for your help!

-----remove and return to school-----

**I am able to offer assistance at the following party:**

\_\_\_\_\_ **Fall Party**

- \_\_\_ I am able to send supplies for a game
- \_\_\_ I am able to send food/drink items
- \_\_\_ I am able to send paper products

\_\_\_\_\_ **Christmas Party**

- \_\_\_ I am able to send supplies for a game
- \_\_\_ I am able to send food/drink items
- \_\_\_ I am able to send paper products

\_\_\_\_\_ **Valentine's Party**

- \_\_\_ I am able to send supplies for a game
- \_\_\_ I am able to send food/drink items
- \_\_\_ I am able to send paper products

---

Parent Name

Phone Number

---

Parent Email

---

Student Name

---

Teacher Name



# SIGNATURE REQUIRED ON BACK

## Eldon South Elementary SCHOOL-PARENT-STUDENT COMPACT 2024-2025

South Elementary, and the parents of students participating in Title I.A activities, services, and programs, agree that this compact outlines how the entire school staff, the parents, and the students will share the responsibility for improved student academic achievement.

### School Responsibilities

South Elementary and its staff will:

- Provide high-quality curriculum and instruction in a supportive and effective learning environment that enables participating children to meet the state standards as follows -
  1. Retain highly qualified principals and teachers,
  2. Provide instruction, materials, and high quality professional development which incorporates the latest research, and
  3. Maintain a safe and positive school climate.
  
- Hold annual parent-teacher conferences to -
  1. Discuss the child's progress/grades during the first quarter,
  2. Discuss this compact as it relates to the child's achievement, and
  3. Examine the child's achievement and any pending options at the end of the third quarter.
  
- Provide parents with frequent reports on their child's progress as follows -
  1. Weekly communication from the classroom teacher,
  2. Quarterly grade cards/reports sent home by the school.
  
- Be accessible to parents through -
  1. Phone calls or person-to-person meetings,
  2. Scheduled consultation before, during, or after school, and
  3. Scheduled school or home visits.

**Parent Responsibilities**

I, as a parent, will support my child's learning in the following ways:

1. Make sure they are in school every day possible.
2. Check that homework is completed.
3. Monitor the amount of television watched.
4. Be aware of my child's extracurricular time and activities.
5. Stay informed about my child's education by reading all communications from the school and responding appropriately.

**Student Responsibilities**

I, as a student, will share the responsibility to improve my academic performance to meet the state standards and will -

1. Attend school every day possible,
2. Be respectful toward others,
3. Do my homework every day and ask for help when I need it,
4. Read at least 20 minutes every day outside of school time, and
5. Give all notes and information from my school to my parent/guardian daily.

Michelle Herbert  
Principal

8-1-24  
Date

\_\_\_\_\_  
Teacher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

# Eldon-South-Elementary-



## South-School-is-the-Beginning

This is where we set the foundation that instills your child's love of learning. When Parents, Students, and Teachers work together **Great Things Happen!**

## Contact-Information

Eldon South Elementary  
1210 South Maple Street Eldon, MO 65026  
Phone: 573-392-8030  
Fax: 573-392-9152

Website: [eldonmustangs.org/eldon-south-elementary](http://eldonmustangs.org/eldon-south-elementary)

## School-Hours

### *South Elementary*

### *2024-2025 Building Schedule*

**AM LEAP – Register with LEAP office at 392-6364 Ext. 7**

8:00 a.m. South School Office Opens

8:00-8:30 a.m. Breakfast served in classrooms

**8:30 a.m. School Starts – Tardy Bell**

3:20 p.m. Dismiss students who are being picked up

3:30 p.m. Dismiss students to busses

4:00 p.m. South School Office Closes

**\*Please note that we dismiss at 2:20 p.m. every Wednesday.**

## Transportation-

All students riding a bus to and from school or any school activity are subject to rules of the Eldon R-I School Board, Department of Elementary and Secondary Education and the laws of the State of Missouri.

### Bus Permits

Students will only be allowed to ride one bus to one destination, either home or to their baby-sitter. This is important because drivers and other school personnel cannot keep up with the high volume of daily changes in home destinations and because some buses are already filled to near capacity.

**Transportation Services Phone Number: 573-392-8046**

**Hours: 1:00-5:00 pm**

# Breakfast/Lunch.

## Lunch Prices

Breakfast- Free    Lunch- \$1.95    Reduced- \$0.40

\*\*Additional Milk \$0.40

Lunch menus will be sent home monthly.

Menus can also be viewed on the school's website at [eldonmustangs.org/faq/menus](http://eldonmustangs.org/faq/menus)

For the safety of our students and staff, outside lunch guests will not be permitted in the building.

## Drop Off and Pick Up Procedures.

We are excited to begin the school year with such a remarkable group of students, parents, and staff! Our school believes that communication is the key to success for our students and families.

Parents that plan to drop off their student(s) at school, please note the main doors will not open until 8:00 a.m. Parents will pull into the parking lot on the south side of the school off of 15th Street and proceed down the right hand lane only. As parents approach the front door, they will see a sign stating where to drop off students. Two cars will unload at a time to help make the process faster. Only have your student(s) exit the car when you are pulled up to the designated drop-off points. There will be staff and administration outside to help with students exiting the car safely and to answer additional questions. Parents that plan on dropping their student(s) off for AM LEAP need to register with the LEAP office.

For safety reasons, parents will not be permitted past the front doors. We assure you that we will have adequate staff available to walk students to their correct locations within the building.

Parents that plan on picking up their student(s) from school at dismissal, **please note the doors will open at precisely 3:20 p.m. Monday, Tuesday, Thursday, and Friday. On Wednesday, the doors will open at 2:20 p.m. for early dismissal.** Parents will park in the front parking lot or across the street in the gravel. The gymnasium doors will open at the designated times and students will be sitting in lines according to their last name by alphabetical order. For their safety, students may not get up from their line until a parent has signed them out.

Please be patient with South Elementary staff the first few weeks of school, as we will be working with parents to master the procedure of dropping off and picking up students.





**ELDON R-I SCHOOL DISTRICT  
LEAP CALENDAR  
2024-2025**



**Afterschool Works: Keeping Kids Safe & Healthy, Helping Working Families, Inspiring Learning**

Version: 5/16/2024

| AUGUST |    |    |    |    |    |    |
|--------|----|----|----|----|----|----|
| S      | M  | T  | W  | TH | F  | S  |
|        |    |    |    | 1  | 2  | 3  |
| 4      | 5  | 6  | 7  | 8  | 9  | 10 |
| 11     | 12 | 13 | 14 | 15 | 16 | 17 |
| 18     | 19 | 20 | 21 | 22 | 23 | 24 |
| 25     | 26 | 27 | 28 | 29 | 30 | 31 |

8 LEAP Days

| SEPTEMBER |    |    |    |    |    |    |
|-----------|----|----|----|----|----|----|
| S         | M  | T  | W  | TH | F  | S  |
| 1         | 2  | 3  | 4  | 5  | 6  | 7  |
| 8         | 9  | 10 | 11 | 12 | 13 | 14 |
| 15        | 16 | 17 | 18 | 19 | 20 | 21 |
| 22        | 23 | 24 | 25 | 26 | 27 | 28 |
| 29        | 30 |    |    |    |    |    |

15 LEAP Days

| OCTOBER |    |    |    |    |    |    |
|---------|----|----|----|----|----|----|
| S       | M  | T  | W  | TH | F  | S  |
|         |    |    | 2  | 3  | 4  | 5  |
| 6       | 7  | 8  | 9  | 10 | 11 | 12 |
| 13      | 14 | 15 | 16 | 17 | 18 | 19 |
| 20      | 21 | 22 | 23 | 24 | 25 | 26 |
| 27      | 28 | 29 | 30 | 31 |    |    |

16 LEAP days

| NOVEMBER |    |    |    |    |    |    |
|----------|----|----|----|----|----|----|
| S        | M  | T  | W  | TH | F  | S  |
|          |    |    |    |    | 1  | 2  |
| 3        | 4  | 5  | 6  | 7  | 8  | 9  |
| 10       | 11 | 12 | 13 | 14 | 15 | 16 |
| 17       | 18 | 19 | 20 | 21 | 22 | 23 |
| 24       | 25 | 26 | 27 | 28 | 29 | 30 |

10 LEAP Days

| DECEMBER |    |    |    |    |    |    |
|----------|----|----|----|----|----|----|
| S        | M  | T  | W  | TH | F  | S  |
| 1        | 2  | 3  | 4  | 5  | 6  | 7  |
| 8        | 9  | 10 | 11 | 12 | 13 | 14 |
| 15       | 16 | 17 | 18 | 19 | 20 | 21 |
| 22       | 23 | 24 | 25 | 26 | 27 | 28 |
| 29       | 30 | 31 |    |    |    |    |

12 LEAP Days

| JANUARY |    |    |    |    |    |    |
|---------|----|----|----|----|----|----|
| S       | M  | T  | W  | TH | F  | S  |
|         |    |    | 1  | 2  | 3  | 4  |
| 5       | 6  | 7  | 8  | 9  | 10 | 11 |
| 12      | 13 | 14 | 15 | 16 | 17 | 18 |
| 19      | 20 | 21 | 22 | 23 | 24 | 25 |
| 26      | 27 | 28 | 29 | 30 | 31 |    |

15 LEAP Days

| FEBRUARY |    |    |    |    |    |    |
|----------|----|----|----|----|----|----|
| S        | M  | T  | W  | TH | F  | S  |
|          |    |    |    |    |    | 1  |
| 2        | 3  | 4  | 5  | 6  | 7  | 8  |
| 9        | 10 | 11 | 12 | 13 | 14 | 15 |
| 16       | 17 | 18 | 19 | 20 | 21 | 22 |
| 23       | 24 | 25 | 26 | 27 | 28 |    |

15 LEAP Days

| MARCH |    |    |    |    |    |    |
|-------|----|----|----|----|----|----|
| S     | M  | T  | W  | TH | F  | S  |
|       |    |    |    |    |    | 1  |
| 2     | 3  | 4  | 5  | 6  | 7  | 8  |
| 9     | 10 | 11 | 12 | 13 | 14 | 15 |
| 16    | 17 | 18 | 19 | 20 | 21 | 22 |
| 23    | 24 | 25 | 26 | 27 | 28 | 29 |
| 30    | 31 |    |    |    |    |    |

11 LEAP Days

| APRIL |    |    |    |    |    |    |
|-------|----|----|----|----|----|----|
| S     | M  | T  | W  | TH | F  | S  |
|       |    |    | 2  | 3  | 4  | 5  |
| 6     | 7  | 8  | 9  | 10 | 11 | 12 |
| 13    | 14 | 15 | 16 | 17 | 18 | 19 |
| 20    | 21 | 22 | 23 | 24 | 25 | 26 |
| 27    | 28 | 29 | 30 |    |    |    |

16 LEAP Days


| MAY |    |    |    |    |    |    |
|-----|----|----|----|----|----|----|
| S   | M  | T  | W  | TH | F  | S  |
|     |    |    |    | 1  | 2  | 3  |
| 4   | 5  | 6  | 7  | 8  | 9  | 10 |
| 11  | 12 | 13 | 14 | 15 | 16 | 17 |
| 18  | 19 | 20 | 21 | 22 | 23 | 24 |
| 25  | 26 | 27 | 28 | 29 | 30 | 31 |

8 LEAP Days



Any days missed due to inclement weather may extend the school year beyond May

\*Possible makeup days are marked with an asterisk

\*- Snow Make Up Days

 = Days for PM LEAP 3:15-5:45pm      126 PM LEAP Days

AM LEAP is held every day school is in session. Doors open 6:45am

 = Students Do Not Attend       = Students Dismissed Early

**DATES TO REMEMBER:**

- |                         |                          |                         |                                  |
|-------------------------|--------------------------|-------------------------|----------------------------------|
| August 5,6              | LEAP Training Days       | December 23 - January 3 | Christmas Break                  |
| August 19               | First Day for AM/PM LEAP | January 3               | P.D Day                          |
| September 2             | Labor Day                | January 20              | No School MLK Day                |
| September 27            | Homecoming No PM LEAP    | February 17             | No School President's Day        |
| October 14              | Change LEAP Rooms        | March 10                | Change LEAP Rooms                |
| October 29              | No PM LEAP               | March 20 & 21           | No PM LEAP - Parent/Teacher Conf |
| October 29 & 30         | Parent Teach Conferences | March 24 - March 28     | Spring Break                     |
| October 31 - November 4 | No School                | April 18                | No School                        |
| November 4              | P.D Day                  | May 9                   | 8th Grade Promotion              |
| November 22             | No PM LEAP - MOSAC Conf  | May 11                  | High School Graduation           |
| November 25 & 26        | No PM LEAP               | May 13                  | Last Day for PM LEAP             |
| November 27 - 29        | Thanksgiving Break       | May 16 (Early Out)      | Last Day of School               |