

Part II: Tub Ntxhais Daim Ntawv Uas Qhia Txog Lwm Yam Kev Pab Ntxiv

*Daim ntawv (Supplemental form) no txawv tsi zoo li Daim Ntawv Cuv Npe Kawm Ntawv, daim no tsi yog ib qhov uas **yuav tsum tau ua** thiaj li yuav muab tau koj tus menuam cuv npe kawm ntawv rau hauv lub District. Txawm li ntawd los, kev uas koj muab ua kom tiav xa rov tuaj qhov no yuav pab tau lub District nrhiav kev pab rau koj tus tub ntxhais kev kawm ntawv thiab thiaj li yuav nkag tau mus rau tej kev kawm tshwjxeeb rau tus tub ntxhais.

Tamsim no koj twb ua tiav koj cov ntaub ntawv cuv npe kawm ntawv lawm, thov qhia peb ntxiv txog lwm yam uas peb yuav txhawb tau thiab muab tau koj tus menuam tso kawm nrog rau tej kev pab uas nws yuav tsum tau muaj.

KEV KAWM NTAWV UAS TAU TXAIS

Koj tus menuam tau txais cov kev pab tshwjxeeb dabtsi?

Tsi tau 504 Accommodation GATE Kev Kawm Ntawv Tshwjxeeb Rau Cov Tabtom Kawm Ntawv Askiv - Special Education English Language Development (ELD) Kawm Ntawv Los Ntawm Ob yam Ius

Thov Kawm Rau Migrant Education Tub Ntxhais (Migrant) ID: _____

Koj puas yog neeg tawg rog Yog Tsi Yog Koj puas yog ib tus uas tuaj nyob tau lub tebchaw no vim koj muaj daim (Special Immigrant Visa)? Yog Tsi Yog

Nyob rau cov nram qab no, qhov twg qhia tau tamism no txog tus menuam kev noj nyob yog licas? (Nomtsvv kom yuav tsum tau teb),

- Tsi muaj vajtse nyob (yog hais tias yog, thov qhia seb nyob qhov twg): Yog Tsi Yog
- Lub chaw nyob ib ntus xwb Hotel/Motel Nrog lwm tus nyob uake ib ntus Nyob ntawm tej kev tsi muaj chaw nyob
- Nrog niamqhuav txivqhuav nyob (yog hais tias yog, thov qhia seb nyob licas): Yog Tsi Yog
- Nrog lwm tsevneeg nyob lossis tej txheeb ze nyob Licensed Child Institution (Group Home)

KAWM PRESCHOOL

Koj tus menuam puas tau mus kawm preschool? Kawm Tsi Kawm

Yog hais tias kawm, kawm lub preschool zoo licas? EGUSD Preschool Lwm lub tsev kawm ntawv Lub tsev kawm ntawv ntiav

LWM YAM KEV NUG NTXIV (DEMOGRAPHIC)

Yug Qhovtwg: Lub Zos _____ Xeev _____ Tebchaw _____

Hnub Uas Pib Kawm Ntawv Nyob Rau Lub Techaws No: _____/_____/_____ Zos _____ Xeev _____

SAU TASNRHO COV MENUAM NPE UAS NYOB HAUV TSEVNEEG (TASNRHO COV NUB NYOOG TIBSI THIAB)

NPE TXHEEB LICAS HNUB YUG KAWM LUB TSEV KAWM NTAWV TWG NYOB HAUV TSEV

KAWM NYOB RAU QHOVTWG YAV TAS LOS

Lub tsev kawm ntawv uas kawm yav tas los _____ Hnub kawg uas
kawm _____

Chaw Nyob Zos Xeev Zip Xovtooj Fax

Lub District uas kawm yav tas los _____

Thov ua kom tiav ob nplooj ntawv

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COV NEEG UAS HU TAU RAU THAUM MUAJ XWMTXHEEJ CEEV: Cov neeg uas hu tau rau thaum muaj xwmtxheej ceev yog hu tsi tau niamtxiv lossis tus saibxyuas.

Txheeb Ze Licas _____ Npe _____ Tso cai hu tau Tau Tsi Tau

Xovtooj hauv tsev _____ Haujlwm _____ Cell _____

Txheeb Ze Licas _____ Npe _____ Tso cai hu tau Tau Tsi Tau

Xovtooj hauv tsev _____ Haujlwm _____ Cell _____

Txheeb Ze Licas _____ Npe _____ Tso cai hu tau Tau Tsi Tau

Xovtooj hauv tsev _____ Haujlwm _____ Cell _____

Chaw Zov Menyuam

(Daycare) _____

Npe

Chaw Nyob

Zos

Zip

Xovtooj hauv tsev _____ Haujlwm _____ Cell _____ Tso cai hu tau Tau Tsi Tau

LWM TUS HU TAU RAU

Kws Khomob Npe _____ Xovtooj _____ Ext _____ Hoosmaum _____

Insurance Provider _____ MED Policy # _____

Social Worker (Agency) _____ Email _____ Xovtooj _____

Social Worker (County) _____ Email _____ Xovtooj _____

Probation Officer _____ Email _____ Xovtooj _____

NTAUB NTAVV TEEV TXOG KEV NOJ QAB HAUS HAUV THOV KHIJ QHOV NO YOG TUS TUB NTXHAIS TSI MUAJ MOB DABTSI Thov khij tej uas nws muaj mob thiab tasnrho tej uas tus tub ntixhais muaj ntawm nws li keebkwm. Thov siv qhov nram qab no los sau qhia txog tus mob/ thiab tej xav kom ua

Medical Alert (unlisted condition – describe below)

- | | | | | | |
|---|--|--|---|---|---|
| <input type="checkbox"/> ADHD | <input type="checkbox"/> Asthma | <input type="checkbox"/> Concussion | <input type="checkbox"/> Mob tohau-Migraine | <input type="checkbox"/> Immunization Alert | <input type="checkbox"/> Specialized Healthcare Procedure |
| <input type="checkbox"/> Allergy – Non-food | <input type="checkbox"/> Autism | <input type="checkbox"/> Cystic Fibrosis | <input type="checkbox"/> Health Plan | <input type="checkbox"/> Intestinal Disorder | <input type="checkbox"/> Hais lus qeeb |
| <input type="checkbox"/> Allergy – Zaub mov | <input type="checkbox"/> Autoimmune Disorder | <input type="checkbox"/> Mob kaus hniv | <input type="checkbox"/> lag ntseg | <input type="checkbox"/> Orthopedic/Scoliosis | <input type="checkbox"/> Syndrome - Other |
| <input type="checkbox"/> Allergy – Noob txiv | <input type="checkbox"/> Blood Disorder | <input type="checkbox"/> Ntshav qab zib | <input type="checkbox"/> Mob plawv | <input type="checkbox"/> Pacemaker | <input type="checkbox"/> Mob ntsws |
| <input type="checkbox"/> Allergy – Txiv laus huabxeeb | <input type="checkbox"/> Cancer | <input type="checkbox"/> Eating Disorder | <input type="checkbox"/> kabmob siab | <input type="checkbox"/> Seizure Disorder | <input type="checkbox"/> Urinary Disorder |
| <input type="checkbox"/> Anxiety Disorder | <input type="checkbox"/> Celiac Disease | <input type="checkbox"/> Eczema | <input type="checkbox"/> Ntshav siab | <input type="checkbox"/> Sickle cell Anemia | <input type="checkbox"/> Qhovmuag tsi pom kev |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Cerebral Palsy | <input type="checkbox"/> Pobtxha tawg | <input type="checkbox"/> IEP Nursing Services | <input type="checkbox"/> Skin Condition – Other | <input type="checkbox"/> Weight Disorder |

Kev qhia txog tus mob/tej uas xav kom ua rau qhov uas muaj saum toj no:

Tus tub ntixhais puas noj tshuaj tamsim no? Noj Tsi Noj cov tshuaj ntawd, puas yuav tsum tau noj lub sijhawm uas nws tuaj kawm pem tsev kawm ntawv? Noj Tsi Noj

COV TSHUAJ NOJ YUAV MUAB TSI TAU PEM TSEV KAWM NTAVV TSHWJ YOG TAU DAIM NTAVV XEES LOS NTAWM TUS KWS KHOMOB THIAB NIAMTXIV. DAIM NTAVV (MEDICATION FORMS) NO MUS MUAB TAU NTAWM LUB TSEV KAWM NTAVV LUB OFFICE.

KUV TOTAUB HAIS TIAS YOG THAUM TWG MUAJ XWMTXHEEJ CEEV HU TSI TAU TUS SAIBXYUAS LOSSIS COV TIBNEEG KOM HU THAUM UAS MUAJ XWMTXHEEJ CEEV, KUV TSO CAI RAU LUB TSEV KAWM NTAVV COJ KUV TUS TUB NTXHAIS MUS RAU TUS

KWS KHOMOB NTAWM TSEVNEEG, IB TUS KWS KHOMOB UAS MUAJ LICENSED LOSSIS COJ MUS RAU IB LUB HOOSMUAM THIAB NIAMTXIV/TUS SAIBXYUAS MAM LI UA TUS THEM.

Npe ntawm tus neeg uas ua daim ntawv no (**thov sau ua tej tus ntsiaj ntawv xwb**):

Txheeb ze licas: _____

Niamtxiv/Tus Saibxyuas Xees Npe: _____ Hnub: _____
(Qhia tau hais tias tej uas hais los no yeej muaj tseeb)

Thov uas kom tiav ob nplooj ntawv

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FEEM III: COV NTAUB NTAWV CUV NPE KAWM NTAWV RAU COV TUB NTXHAIS UAS LOS TSHIAB

Cov Kev Qhia Rau Tsevneeg

Feem kawg ntawm “cov ntaub ntauv cuv npe kawm ntauv rau cov tub ntixhais uas los tshieb” feem no yog rau cov niamtxiv/ tus saibxyuas muab khaws cia. Cov kev qhia no yuav hais txog cov ntsiab lus (topics) uas yuav tsum muaj nyob thoob plaws lub district:

- Daim Ntawv Qhia Txog Cov Tshuaj Txhaj Tiv Thaiv Uas Yuav Tsum Tau Muaj
- Kev Xaiv Rau Health Care Coverage (Kev Khomob)
- Kev Qhia Txog Kev Tiv Thaiv Rau Cov Tub Ntxhais Uas Tuaj Nyob Lub Tebchaw No (Immigrant) (AB 699)
- EGUSD Kev Txwv- Tsi Pub Muaj Kev Ciav Cais thiab Title IX Guidance

Lwm yam kev qhia ntixiv rau niamtxiv mus saib tau online ntawm EGUSD Parent and Student Handbook ntawm <http://www.egusd.net/students-families/district-handbook/>.

Cov tsev kawm ntawv tej zaum lawv yuav muaj lawv kev qhia uas los ntawm lub tsev kawm ntawv los tos txais koj thiab koj tus menuam.