



WELCOME A.R. Johnson Health Science and Engineering Magnet School

Congratulations on Your Acceptance!

Forms to print, complete, scan, and email:

It is very important to complete ALL information on each form as any missing information or signatures can delay formal registration.

- 1) Student Information Form - Use legal name
- 2) Consent for Student Records
- 3) Home Language Survey & Parent Occupational Survey
- 4) School Transportation Form
- 5) Magnet Program Agreement
- 6) Panther Prep Registration (Rising 6th Graders Only)

Required Identification Documents

- 1) Proof of Residency- Required each year and must be current (within 30 days)
- 2) Student's Birth Certificate - The state of GA requires the use of the LEGAL name on the Birth Certificate. If there is an error on the Birth Certificate, it must be corrected and provided to us.
- 3) Social Security Card or Written Statement to Exempt - Names on SSN and Birth Certificate must match
- 4) Legal Guardianship Papers (if applicable) - If the student does not reside with the legal parent, please provide a copy of any court documents signed by a judge which specify guardianship. Military Affidavits due to a deployment are acceptable. A notarized letter between two individuals is not acceptable.
- 5) Immunization Documents- Please submit to ARJ by June 15.

What is an accepted Proof of Residency?

One of the following with the name and address of the enrolling parent/guardian:
(Documentation must be dated within 30 days of the enrollment date.)

Current Lease/rental agreement
Most recent income tax return
Current paycheck stub
Current Medicaid card
Current residential property tax statement or bill
Current warranty or quick claim deed
Current home purchase agreement
Current homeowners's insurance policy
Current utility bill (Water, Gas, or Electric) We can NOT accept cable or cell phone bill

If the student's family is residing in the home or apartment of another individual, the person with whom the family is living and whose name matches the proof of residence must present these documents for enrollment:

Notarized third-person affidavit of residency
Photo ID of person with whom the family is residing
Proof of Residency matching the name and address of person with whom the family is residing
Inclusion of person with whom the family is residing as a contact on the registration form

What is NOT an accepted Proof of Residency?

Cell Phone Bill
Bank Statement (or any other communication from a financial institution)
Credit Card Bill
Medical Bill
Cable Bill
Car Tag Receipt/Bill
Insurance Statement (Car, Medical, Life, Home)
Unsolicited Mail

A. R. Johnson Health Science and Engineering Magnet School

Student Information Form

Please print and complete entire form legibly. Write student's **LEGAL** name as it appears on Birth Certificate.

Student's Name _____
LAST Suffix (Jr, II, III) FIRST FULL MIDDLE NAME

Grade Entering: _____ Date of Birth ____/____/____ Name or Nickname Used: _____

Gender: Male Female Hispanic: Yes No Student's Cell Phone Number _____

Ethnic Code: 1: Native American/Alaskan Native 2: Asian 3: Black or African American

4: Nat Hawaiian/Other Pac Islander 5: White

Current School _____ City _____ State _____

Last Richmond County School Attended: _____ Last Year Attended: _____ Grade(s) _____

FAMILY INFORMATION

Student lives with: Mother Father Both Other _____ (relationship to student)

Home Address _____ City _____ Zip _____

Home Phone Number _____

Name and contact information for the student's parent/guardians:

Name _____ Email Address _____

Relationship to the student: _____ Cell Phone _____

Work Phone _____ Other Phone _____

Name _____ Email Address _____

Relationship to the student: _____ Cell Phone _____

Work Phone _____ Other Phone _____

EMERGENCY CONTACT The following persons have permission to pick up my child **without** the school contacting me.

Name _____ Relationship to Student _____

Cell Phone _____ Home _____ Other _____

Name _____ Relationship to Student _____

Cell Phone _____ Home _____ Other _____

Notice: The Richmond County School System is currently operating under Federal Court Order requiring adherence to strict attendance zones. To be enrolled, a student must reside with a parent of LEGAL GUARDIAN in Richmond County. The Federal Court's interpretation of legal guardian for the purpose of the court order means legal adoption.

I certify that the above information is true and correct. This form has been completed by a parent or legal guardian of above named student.

Signature of Parent/Guardian: _____ Date _____ Relationship _____



AUGUSTUS R. JOHNSON
HEALTH SCIENCE & ENGINEERING MAGNET SCHOOL
"A National Magnet School of Distinction"

1324 Laney-Walker Boulevard
Augusta, Georgia 30901
Phone: (706) 823-6933 Fax: (706) 823-6931



Mr. Travis Wiggins, M. Ed.
Assistant Principal

Mr. Charlie Tudor, III, Ed. S.
Principal

Mrs. Angela Key, Ed. S.
Assistant Principal

Request for Student Records and Materials

To the Records Department of (last school attended):

School _____

Address, City, State and Zip Code _____

School Fax Number _____ School Phone Number _____

I hereby authorize you to release the permanent record, cumulative folder, health record, and any other materials, including the results of any psychological evaluation, tests, current IEP, discipline records or any other applicable information that pertains to the student listed below, who has enrolled in this school.

Student Name _____ Date of Birth _____

Grade level at withdrawal _____

Parent or Guardian Signature _____ Date _____

Please Note: Under the provisions of the PRIVACY RIGHTS OF PARENTS AND STUDENTS ACT, page 1213, Subpart D, 99 30(B), it is not necessary to have the written consent of the parents to release records "to officials of other schools or school system in which the student seeks or intends to enroll."

Please forward record to:

A. R. Johnson Health Science
and Engineering Magnet School
Attn: Karon Salter, Registrar
1324 Laney Walker Blvd.
Augusta, GA 30901
Phone: 706-823-6933 ext. 3
Fax: 706-823-6931
Email: salterka@rcboe.org

Required Home Language Survey

Dear Parent or Guardian:

In order to provide your child with the best possible education, we need to determine how well he or she speaks and understands English. This survey assists school personnel in deciding whether your child may be a candidate for additional English language support. Final qualification for language support is based on the results of an English language assessment.

Thank You

Student Name (required information):

Language Background (required information):

1. Which language does your child best understand and speak?

2. Which language does your child most frequently speak at home?

3. Which language do adults in your home most frequently use when speaking with your child?

Language for School Communication (not required):

4. In which language would you prefer to receive all school information?

Signature of Parent/Guardian/Other

Date

School District: _____

Date: _____

Parent Occupational Survey

Please complete this form to determine if your child(ren) qualify to receive supplemental services under Title I, Part C

Name of Student(s)	Name of School	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Has anyone in your household moved in order to work in another city, county, or state, in the last three (3) years? ☐ Yes ☐ No
- Has anyone in your household been involved in one of the following occupations, either full or part-time or temporarily during the last three (3) years? ☐ Yes ☐ No

If you answer "yes", check all that applies:

- ☐ 1) Planting/Picking vegetables (tomatoes, squash, onions, etc.) or fruits (grapes, strawberries, blueberries, etc.)
- ☐ 2) Planting, growing, cutting, processing trees (pulpwood), or raking pine straw
- ☐ 3) Processing/Packing agricultural products
- ☐ 4) Dairy/Poultry/Livestock
- ☐ 5) Packing/Processing meats (beef, poultry, or seafood)
- ☐ 6) Commercial fishing or fish farms
- ☐ 7) Other (Please specify occupation): _____

Names of Parent(s) or Legal Guardian(s) _____

Current Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Thank You! Please return this form to the school

Please maintain original copy in your files.

MEP funded school/district: Please give this form to the migrant liaison or migrant contact for your school/district.

Non-MEP funded (consortium) school/districts: When at least one "yes" and one or more of the boxes from 1 to 7 is/are checked, districts should fax occupational surveys to the Regional Migrant Education Program Office serving your district. For additional questions regarding this form, please call the MEP office serving your district:

GaDOE Region 1 MEP, 201 West Lee Street, Brooklet, GA 30415
Toll Free (800) 621-5217 Fax (912) 842-5440

GaDOE Region 2 MEP, 221 N. Robinson Street, Lenox, GA 31637
Toll Free (866) 505-3182 Fax (229) 546-3251

Family Contacted/Attempt Date: _____

Sent to Regional Office on: _____

1854 Twin Towers East • 205 Jesse Hill Jr. Drive • Atlanta, GA 30334 • www.gadoe.org

Richard Woods, Georgia's School Superintendent

An Equal Opportunity Employer



A.R. Johnson Transportation Form

This form is to assist the RCSS transportation department in assessing transportation needs for next year. Please complete the information below as accurately so that we can effectively prepare for next school year. Thank you.

STUDENT NAME: Last _____ First _____

Grade Entering ARJ: _____

PHYSICAL ADDRESS: _____ Zip Code: _____

Mailing Address (if different) _____ Zip Code: _____

My student is expected to be a car rider only: YES NO

My student may be both a car rider and/or a bus rider during the year: YES NO

My student is expected to be a bus rider only: YES NO

Magnet school students are picked up at zone school bus stops and ride shuttle buses from zoned high schools in the morning. Magnet students are shuttled to zoned middle schools in the afternoon and ride zone school buses home. If you expect your child to ride the bus next year, please complete the information below.

IF YOU EXPECT YOUR STUDENT TO RIDE A BUS

Circle your **ZONED HIGH SCHOOL** (if you know it):

ARC	HEPHZIBAH HS
BUTLER	JOSEY
CROSS CREEK	LANEY
GLENN HILLS HS	WESTSIDE

Circle your **ZONED MIDDLE SCHOOL** (if you know it):

BELAIR K-8	FREEDOM PARK K-8
GLENN HILLS MS	HEPHZIBAH MS
HORNSBY 4-8	LANGFORD MS
MORGAN RD MS	MURPHEY MS
PINE HILL MS	SEGO MS
SPIRIT CREEK MS	TUTT MS



Mrs. Angela Key, Ed. S.
Assistant Principal

AUGUSTUS R. JOHNSON
HEALTH SCIENCE & ENGINEERING MAGNET SCHOOL

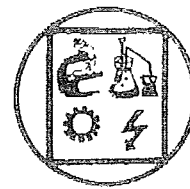
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Magnet School and Magnet Program Agreement of Understanding 2020/2021

By signing my name below, I indicate that I have read the Agreement of Understanding and I acknowledge the conditions of acceptance. The privilege of attending this school rests upon the personal responsibility of the child and parent. This contract will be renewed each year.

All Magnet School and Magnet Program Students:

1. I understand my child is expected to attend school daily, to arrive promptly, and to remain throughout the scheduled hours.
2. I understand my child is to cooperate and conduct himself or herself with teachers, other adults, and classmates in a manner showing respect to all persons.
3. I understand my child is to complete all required work, including homework and work missed.
4. In order to remain enrolled in a magnet school or program, I understand that, in grades K-3, it is my child's responsibility to maintain an overall rating of a 2 in language arts and math. In grades 4-8 it is my child's responsibility to maintain an overall 75 average in academic subjects (language arts, math, science, and social studies) and not have a yearly average below a 70 in any subject. In grades 9-12, it is my child's responsibility to pass each subject with a 70 or above. Students in grades K-3 having a yearly rating below a 2 in ELA and Math or in grades 4-8 having a yearly average below 70 in any class or having a cumulative average below 75 in the core classes will be required to return to the student's zoned school at the end of the year. Students in grade 9-12 having an end-of-course average below 70 are required to attend summer school in order to remain on track for graduation.
5. I understand my child is to respect and care for all equipment, supplies, and school property he/she uses.
6. I understand that if I choose to remove my child, or if I am asked to remove my child from the school, my child may not re-enter unless there are rare and extenuating circumstances as approved by the Assistant Superintendent or determined by the Board of Education. [Note: Students who withdraw due to military transfers may apply for re-admission through the annual magnet application process.]
7. I understand my child must adhere to all school policies and Richmond County Board of Education policies.
8. I understand if either the student or parent/guardian, or both, ceases to be a resident of Richmond County, the school shall be promptly notified, to allow a prompt determination as to whether the student remains eligible to attend the selected school.
9. I understand that my child will be enrolled as a full-time student at the school of acceptance for the entire 2020/2021 academic year. My child must demonstrate acceptable performance in order to remain in the magnet school or magnet program.
 - a. Students must enroll and complete one pathway in Health Science or Engineering.
 - b. Health Science Students must complete 5 Science Courses. Engineering Students must complete 5 Maths.

Conditional Early Acceptance Additional Requirements:

10. I understand my child must maintain an 80 final average in all core subjects (math, reading/ELA, science, social studies and conduct (grade 1-6)) for the 2018-2019 school year. Failure to maintain an 80 final average for 2019/2020 will result in a withdrawal of your admissions offer.
11. I understand if I fail to provide appropriate proof of residency documents and a birth certificate during on-site registration in March, my spot will be forfeited and offered to the next person on the waiting list.

I promise my child will be in regular attendance, cooperative, respectful of people, and studious in order to remain enrolled. The student hereby agrees to work with the parents and staff in compliance with the above responsibilities.

Signature of Parent/Guardian

Date

Signature of Student

Date

A. R. Johnson Health Science and Engineering Magnet School

Frequently Asked Questions

1. **What are the school hours?** Instruction begins at 8:15 to 3:25 daily. Students may enter the building as early as 7:45 and go to the commons area.
2. **When are students tardy?** If a student enters a classroom after the bell rings, they are considered tardy. Leaving school for unauthorized purposes before the end of the day will be counted as a tardy. Parents should not pick up students before the end of the school day except where there is a legitimate emergency.
3. **Where do I drop-off and pick-up my student?** Drop-off is held at the Laney Walker Blvd. entrance. Pick-up is held at the Mauge St. (back entrance).
4. **Can students bring outside food for breakfast, lunch, or have it in the classroom?** For nutritional purposes and the overall cleanliness of the building, students are not allowed to bring in or order outside food. Lunches from home are permitted.
5. **How do I get in touch with my student during the day?** If there is an emergency and you need to get a message to your student, please call the office (706-823-6933) and speak with the Front Office Secretary. We will make every effort to get them to the phone. Please do not text or call your student during the day, as doing this will force them to violate the technology policy (not using phone except for instructional purposes).
6. **Who can sign my student out of school?** Only those listed in the Student Information System will be allowed to remove your student from school. If you want your student to leave early (driving), you need to send a note to the office so that we can verify with you to release your student.
7. **Can my student come to the office to call me?** Instructional time is very important at A. R. Johnson. We believe that every minute in the classroom matters. If a student comes to the office to use the phone, they must have a pass from a teacher. Requests to let a child leave early will not be taken over the phone by the secretary.
8. **Who are the administrators?** Mr. Tudor, Principal; Ms. Key, Assistant Principal; Mr. Wiggins, Assistant Principal