

REGISTRATION PACKET

Take these steps...

- 1. Complete this Registration Packet in full.
- 2. Sign up for a Registration Appointment online at TheConservatorySchool.org
 - Click on <u>KINDERGARTEN REGISTRATION</u>
 <u>APPOINTMENT SIGN UP HERE!</u> on top of the page.

Welcome to TCS!

Questions: Please call Carmen Tejada 561-494-1803

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PAQUETE DE REGISTRO

Sigue estos pasos...

- 1. Complete este paquete de registro en su totalidad.
- 2. Después regístrese para una cita en la computadora en *TheConservatorySchool.org*
 - Hacer un clic en <u>KINDERGARTEN</u>
 <u>REGISTRATION APPOINTMENT SIGN UP HERE!</u>
 En la parte superior de la página

Preguntas: Por favor llame a Carmen Tejada 561-494-1803

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PAKÈ ENSKRIPSYON

Swiv etap sa yo...

- Ranpli pake enskripsyon sa a nèt.
- 2. Apre sa, enskri pou yo n Randevou Enskripsyon sou entènèt nan:
- TheConservatorySchool.org
 Klike sou KINDERGARTEN REGISTRATION
 APPOINTMENT SIGN UP HERE! sou tèt paj la

Si ou gen kesyon souple rele Carmen Tejada 561-494-1803

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FY 2021-2022 Enrollment Checklist Parent/Guardian:

For students who are new or transferring from within PB County please submit the following forms: _____ Completed registration form (PBSD 0636) Record of Immunization - contact your child's pediatrician for this form ____ Record of physical (both sides completed) Proof of birth (birth certificate, passport, religious records Request for student records/any additional helpful documents Student housing questionnaire Release and Consent for Student Information publication The Conservatory School Email Address Form for Parent/Guardian Student Arrival and Dismissal Form Proof of residence- see details below **Proof of Residence:** Provide 2 of these documents. Upon enrollment in a school, a parent/guardian must produce two current documents dated within the last thirty days reflecting the correct residential street address. Examples of acceptable documents reflecting residential street addresses are as follows: home telephone, cellular telephone, electric (any utilities bill current in the last thirty days); ___ mortgage and/or rent receipt with the home name of tenant and landlord & contact information for all parties; home purchase contract including specific closing date, with copy of the deed to be provided within thirty days of closing date; ___ unexpired State of Florida driver's license / Florida identification card; automobile insurance policy; ___ credit card statement with name and address within the last thirty days; ____ United States Postal Service confirmation of address change: evidence of current correspondence, including a stamped, addressed. postmarked envelope delivered to the home address:

PLEASE TURN IN COMPLETE REGISTRATION PACKETS ONLY;

or Declaration of Domicile from the County Records Department

carmen.tejada@palmbeachschools.org @ / The Conservatory School @ North Palm Beach

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THE SCHOOL DISTRICT OF PALM BEACH COUNTY TEACHING AND LEARNING

New and Returning Student Registration

Student Number	School Numb	XBY Tre	naportation	Grade	EN CD	FLEID			Entry	Date	SIS Entry		ation Address Verification
200 1 - 152 121 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			n, gry i karrisania	<u> </u>	the matter of the same than property of	terining is a complete quant	, majir						
Student First Na					answered, C	orrect any pre	printed						dent each school year.
Student First Na	aine -	Mi	Last Na	ame				Sumx	Studen	it Former	' Name d	or AKA (if ap	plicable)
Student Addres	s						City			•		State	Zip Code
Social Security			udent Bi	rth Date	Gender Ma		nale	Country	of Birth		Place o	of Birth	
Student Reside In county re		i	Out	of cou	nty reside	ent	0	ut of stat	e reside	ent		Foreign ex	change student
Student Ethnic	Origin (m	ust ch	eck Yes	or No)	- · 								ed USA School
Yes, Hispa	nic or Lati	no	☐ No	, not H	ispanic o	r Latino						Date Litter	ed DSA School
Student Race (n	nust check	at lea:	st one, an	id check	all that ep	ply)							:
☐ American Ir ☐ Native Haw] Asia] Whi				Blac	ok or African	American
Student Ilves wit	h:					,				· · · · · · · · · · · · · · · · · · ·			
Parent]] Gu	ıardian			Other			F	oster Pa	rent		Group Home
Parent/guardian in Student resides we Student resides of Student resides of Is student in physics of "No", student to Does the parent/guardian that Provide the name Indicate where the Implicate where Implicate where the Implicate where the Implicate where Implicate	with a pare with a pare on federall sical custo elephone: guardian w we sibling(s es and bir	ent/guant/gu	ardian or ardian w ed Indian parent/gu a agricult olled in F res of stu	n active the lives n lands uardian ure or f raim Be udent's	duty or a s or works ? ishing? each Cour sibling(s) pplies)	on federal	millita	Yes Yes Yes	No is	the stud	ent who	is enrolling	☐ Yes ☐ No ☐ a single parent? ☐ No ☐ No ☐ Human Habitation
A. Is there a coul B. Do parents ha	rt order b a	arring		parent	from ren		stud	lent from			ماه رفق الأباهة أ		☐ Yes ☐ No
C. Does one pare			• •		-	-		•	nal dec	isions fo	or the stu	ident?	☐ Yes ☐ No
D. Is there a Ten court order t	porary R	testra	ining O mpacts a	rder, P access	ermanen to the stu	it Restrair ident by ai	ning (nyone	Order, O , includi	rder of	No Cont other pare	tact, or o		Yes No
			Provid			ith a copy					lers.		
ls a language oth	ner than Ei	nglish	used in t			NEW TO I	<u>'ALM</u>		-	<u>(TY</u> ary langu	age?		
Does the student	t have a fir	st lang	guage otl	her thar	n English?	Yes	□ N	lo Pare	nt prima	iry langua	ige?		
Does the student than English?	l most freq	uentiy	speak a	langua	ige other	Yes	□N	Ю	·	rred verba			
PRSD 0636 (Rev. 7	Ancoca and		DEC	APD A	ODV Chia	lent Cumul:	-4L F			WILL	- i iuniyuc		

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The School District of Palm Beach County | Student Legal Name (first, middle initial, last) Student ID # New and Returning Student Registration CONTACT PICKUP INFORMATION WITH THE PROPERTY OF THE PROPERTY O Parent or Guardian E-mail address (optional) Address if not the same as student (house #, street name, apartment no., city, state, zip code) Home Telephone Cell Telephone Accept automated non-emergency school, District and community related messages Phone Text ☐ Both Parent or Guardian E-mail address (optional) Address if not the same as student (house #, street name, apartment no., city, state, zip code) Home Telephone Cell Telephone Accept automated non-emergency school, District and community related messages; Phone Text Both None Provide a password that will be used when picking up the student. Provide additional persons allowed to pick up (first, middle initial, last) Relationship to student Daytime Telephone PREVIOUS EDUCATION INFORMATION Last School Attended (including preschool) City County State Country Telephone Type (check one only) Educational Plan - Provide a copy. Public / Charter Private Home Education Individual Education Plan (IEP) . 504 Grade Level Last Year | Grade Level This Year Last Date Attended Did student attend public school in Palm Beach County before? Yes □ No The student has been arrested or prosecuted for a violation of a criminal statute resulting in a charge. Yes ΠNο The student has been expelled from school. Yes No The student has a referral for mental health services associated with a school expulsion, arrest resulting in a charge, or juvenile justice action? ∏ No For Students Entering Kindergarten Only - Preschool Enrollment Information (check all program(s) attended) School District VPK School District ESE Pre-K Private Child Care Center Head Start Did not attend preschool Other HEALTH INFORMATION As scheduled in the School Health Services Plan, students will receive non-invasive health screenings, vision, hearing, scollosis, HT/ WT/BMI, pursuant to Florida Statute 381.0056(6)(e). If you DO NOT WISH your child to participate, initial the following: I DO NOT WISH TO HAVE MY CHILD PARTICIPATE IN THE SCREENINGS. Sodium Fluoride Program: This program is offered at schools without fluoride in the local water supply. I give permission for my child to participate in the sodium fluoride program to prevent tooth decay.

Yes (permission is valid through grade 5) Student health insurance (check all that apply): Medicaid Healthy Kids/Kid Care ☐ Private Mone Student has life threatening allergies? Allergy Physician Name Telephone Yes No Consent for Emergency Care: Schools may provide emergency care for students. Parents or legal guardians who do not wish to give permission for emergency care must provide the school a notarized statement declining.

List medical concerns.

Student takes medication? Yes No

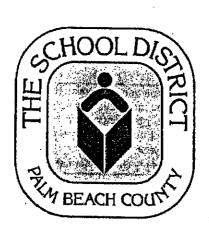
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Read the following carefully. Check available appropriate boxes below statements and sign below. Notice of Technology Acceptable Use Policy For Students: Your child may have access at school for many school continuous activities to certain District technology resources, including the Internet and the District's Intranet. Your child's school's activities to certain District technology resources, including the Internet and School Board Policy 8.125. Your child will be follow the acceptable use standards and guidelines that are stated in Policy 8.123, the referenced Manual, and the Conditions for Student Use of District Technology and be bound by their terms. There is only a limited expectation of pri extent required by law related to a student's use of these technology resources. Before your child uses these District resour will read, be read to, and/or explained these documents and will electronically acknowledge that he/she understands, and follow, them. You are invited to read this Policy, Manual and Notice. If you need assistance reading the documents, you may ask the school for assipplicy is available at: https://www.boarddocs.com/fl/palmbeach/Board.nst/Public, click Policies, under chapter 8—Policy 8.123. Notice of medical records disclosure: Your child's medical records or medical information that have been provided to the student records which are subject to the requirements of FERPA, 20 U.S.C.A. 1232g. Accordingly, that Information can be without the written consent of the parent/guardian as allowed by FERPA, Including if used by a teacher or other school official eligitimate educational interest, or if disclosure is to an appropriate party and is necessary to protect the health or sa student or other individuals. Parental consent for release of student photograph and information: I hereby give permission for the school or District of the media and good photograph, video image, writing, voice recording, name, grade level, school name, participation in officially recognize and sport, weight and height	chool-related coess to the required to be Notice of rivacy to the res, he/she ad agrees to sistance. The eschool are de disclosed cial, who has afety of the ct to use my ted activities and place of s, web sites, a interviews, a fitterviews, a potential of my
Notice of Technology Acceptable Use Policy For Students: Your child may have access at school for many sci activities to certain District technology resources, including the Internet and the District's Intranet. Your child's school's activities to certain District technology resources, including the Internet and the District's Intranet. Your child's school's activities to certain District to comply with the Children's Internet Protection Act and School Board Policy 8.125. Your child will be follow the acceptable use standards and guidelines that are stated in Policy 8.123, the referenced Manual, and the Conditions for Student Use of District Technology and be bound by their terms. There is only a limited expectation of pri extent required by law related to a student's use of these technology resources. Before your child uses these District resources will read, be read to, and/or explained these documents and will electronically acknowledge that he/she understands, and follow, them. You are invited to read this Policy, Manual and Notice. If you need assistance reading the documents, you may ask the school for assipplicy is available at: https://www.boarddocs.com/fl/palmbeach/Board.nst/Public, click Policles, under chapter 8.—Policy 8.123. Notice of medical records disclosure: Your child's medical records or medical information that have been provided to the student records which are subject to the requirements of FERPA, 20 U.S.C.A. 1232g. Accordingly, that information can be without the written consent of the parent/guardian as allowed by FERPA, including if used by a teacher or other school official eligitimate educational interest, or if disclosure is to an appropriate party and is necessary to protect the health or satudent or other individuals. Parental consent for release of student photograph and information: I hereby give permission for the school or District child's photograph, video image, writing, voice recording, name, grade level, school name, participation in officially recognize and sport, weigh	chool-related coess to the required to be Notice of rivacy to the res, he/she ad agrees to sistance. The eschool are de disclosed cial, who has afety of the ct to use my ted activities and place of s, web sites, a interviews, a fitterviews, a potential of my
Notice of medical records disclosure: Your child's medical records or medical information that have been provided to the student records which are subject to the requirements of FERPA, 20 U.S.C.A. 1232g. Accordingly, that information can be without the written consent of the parent/guardian as allowed by FERPA, including if used by a teacher or other school official elegitimate educational interest, or if disclosure is to an appropriate party and is necessary to protect the health or sat student or other individuals. Parental consent for release of student photograph and information: I hereby give permission for the school or District child's photograph, video image, writing, voice recording, name, grade level, school name, participation in officially recognized and sport, weight and height of members of athletic teams, dates of attendance, diplomas and awards received, date an birth, and most recent previous school attended, in annual yearbooks, graduation programs, playbills, school productions, social media sites, etc. and/or similar school or District sponsored publications or in school or District approved news media releases, articles, and photographs. I also provide permission for the release by the school or District to the media and go entities of my child's name, grade, school name and honors my child has received for public announcement of recogn student's accomplishments. I understand that without checking the permission box my child's name and photograph will not be included in any publications or presentation, including a school yearbook.	e school are se disclosed sial, who has afety of the ct to use my ted activities and place of s, web sites, a interviews, overnmental pitton of my
student records which are subject to the requirements of FERPA, 20 U.S.C.A. 1232g. Accordingly, that Information can be without the written consent of the parent/guardian as allowed by FERPA, including if used by a teacher or other school official legitimate educational interest, or if disclosure is to an appropriate party and is necessary to protect the health or sat student or other individuals. Parental consent for release of student photograph and information: I hereby give permission for the school or District child's photograph, video image, writing, voice recording, name, grade level, school name, participation in officially recognized and sport, weight and height of members of athletic teams, dates of attendance, diplomas and awards received, date at birth, and most recent previous school attended, in annual yearbooks, graduation programs, playbills, school productions, social media sites, etc. and/or similar school or District sponsored publications or in school or District approved news media releases, articles, and photographs. I also provide permission for the release by the school or District to the media and go entities of my child's name, grade, school name and honors my child has received for public announcement of recogn student's accomplishments. I understand that without checking the permission box my child's name and photograph will not be included in any publications or presentation, including a school yearbook.	te disclosed tial, who has afety of the ct to use my ted activities and place of s, web sites, a interviews, povermental pitton of my
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give permission I do not give permission	
ESE STUDENT ONLY: In accordance with FERPA, at 34 CFR §99.30 and IDEA requirements, I authorize the School Dist Beach County, Florida, to release and exchange my child's confidential student information to agencies of the State of Fix would allow Palm Beach County Public Schools to receive Medicaid reimbursement for health related exceptional student provides to my child while at school. I understand my consent is voluntary and may be revoked at any time. My child will receive services as per his/her IEP whether or not I give consent. In addition, I understand that I am not required to enroll in benefits or insurance program and that no out of pocket expense will be incurred for services provided as a part of FAP there is no impact to my Medicaid benefits as a result of the school district's reimbursement for services. I authorize release	lorida which at services it continue to any public
HIGH SCHOOL STUDENT ONLY - Opt-out for the release of information to military: The NCLB Act of 2001 requires districts provide military recruiters access to the names, addresses and phone numbers of high school students. Parents he opt-out from sending this information. If you do not want your child's information released to the military without parental consent, check below. Although we will accept the opt-out any time during the year, sending it the first 10 days of year will ensure that no information is sent this school year. 1 do not authorize release of my child's information to the military	have a right
By signing below, I understand and agree it is my responsibility to contact my child's school immediately to inform them of at to my contact information including name, address, home or cell phone numbers or e-mail address. If I agreed to messages on my cell phone, I understand standard messaging rates with my cellular phone provider may apply. If I o informational messages, I will continue to receive emergency phone messages from or on behalf of the School District of F County at the telephone number(s) provided on page 2, including a wireless number if applicable. If you received non-messages without consenting and/or would like to opt out of future calls, contact (855) 502-7867.	accept text opted out of Paim Beach
Under penalties of perjury, I declare that I have read the foregoing form and that the facts stated in it are true and accurate Statutes Sec. 92.525 (3) provides that whoever knowingly makes a false declaration under penalties of perjury is guilty of a tithe third degree.	te. Florida felony of
REGISTRATION IS NOT VALID WITHOUT SIGNATURE AND DATE.	

Parent/Guardian Signature (unless student is emancipated)

Date

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THE SCHOOL DISTRICT OF PALM BEACH COUNTY

TEACHING AND LEARNING

New and Returning Student Registration

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401 Anchorage Drive North Palm Beach, FL 33408 Phone: 561.494.1800

Fax: 561.494.1850

Parent Signature

Date

Records Release form

o:		
School Name		
Address		
Phone number (Include area code)	Fax number (include area	code)
Permission is granted for the reco	ords of the following stud	ent (s):
Name	Grade	Date of Birth
Release of Information to include:		
Health/Medical RecordsTesting Scores		
Report Cards		
Educational RecordsESE and/or ELL records		

Pou:	Para:
Non lekol la	Nombre de la escuela
Adrès	Dirección de la escuela
Numewò Telefòn (mete area kòd la)	Numero (ponga el codigo de area)
Numewò fax	Fax
M bay pèmision pou transmèt enfomasyon pitit mwen:	Permiso concedido para los registros del siguiente estudiante:
Non elèv la: Klas Dat fèt II: Klas Dat fèt II: Klas Dat fèt II: Klas Dat fèt II:	Nombre: Clase: Fecha de nacimiento: Clase: Fecha de nacimiento: Clase: Fecha de nacimiento: Clase: Fecha de nacimiento: Clase: C
Enfòmasyon nap transmèt	La información incluye Registros médicos y de salud Resultado de exámenes Boleta de calificaciones Registros educativo ESE/ELL informacion
Dat	Fetcha:





THE SCHOOL DISTRICT OF PALM BEACH COUNTY SUPPORT SERVICES

Student Housing Questionnaire

This form is used to determine if your children are eligible for additional educational services and support.

SIS DATA ENTRY H/CAUSE/UNAC Data Entry Completed (Print Clearly)	
Date:	
Ву:	
PX #:	

School Personnel: Forward this form to your Data Processor for SIS coding.

Fax form to Support Services (561) 494-1539. If you have any questions, contact MVP at 494-1514 or PX 81514.

Student ID#	First Name	Last Name	Birth D	ate 8	School			Grade
Check Yes o	r No to statements 1	-5 below:				YES*	NO	CODE
1. My family liv	es in an emergency or tra	ansitional shelter or FEMA housing	g.			1.20		A
2. My family is we are doub	sharing the housing of ot ling up.	hers due to loss of housing, econo	omic hardship, c	or a simila	ar reason,			B 8
a public spac	living in a car, temporary ce, abandoned building; s for human beings or a s	RV park or campground due to la substandard housing, bus or train imilar setting.	ck of alternative station, public o	accomn r private	nodations; space			D
4. My family live	es in a hotel or motel.			,		<u> </u>		was E
5. The student i	is an unaccompanied you	uth (not in the physical custody of	a parent or gua	rdian).		1		Y/N
e and Children and the		ANSWERED "NO" TO ALL STOP H y statement above, print clea	ere de la comi	West of the second	Maria ang diagrapa at c	er Paris I	istina	VOII
	ian Name (first, last)	Parent Phone			Unaccompanie			you.
Current Addre	988	City			Stat	e	Zip	
	List all children living	with you from preschool throug	h high school.	. If need	ed, use an addi	tional she	et	
Student ID	First Name	Last Name	1		School		Grade	
						······································		
								
-			<u> </u>	<u> </u>				
		1					-	
	I would	like referral assistance with	the following	/check	if annlicable):			<u>. I</u>
Information					Other:			
Medical/Den	ital 🦳 School Sup	oplies School Uniforms	☐ Senator I	 ewis Ho	meless Resourc	e Center		
Form	nore information about th <u>www.palmb</u>	educational services may be average to the Modern of the Meachschools.org/students_parents	railable for stud cKinney-Vento s/mc_kinneyv	dents un Program ento_pro	nder the McKini (MVP), visit ou ogram <u>m</u> v_p	ney-Vento website a	t: https:	<i>!!</i>
Signature of Par	rent/Guardian or Unaccomp	anied Youth	Date			_		

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FY 22 Student Arrival and Dismissal

Student's Name (Please Print):	Grade:
Student's Address:	
Teacher's Name:	SC (IMBERIA SERVICE) energy proprieta (IMA) efficience (Improposto A Investor Arthress (Opening ste
Parent's Name (Please Print):	
Daytime Telephone Contact Number:	
PLEASE FILL OUT COMPLETELY! CHECK BOXES THAT APPLY	
My child will ARRIVE to school by:	
☐ Car Driver Relationship	
☐ Walker	
☐ Bike Rider *Student will be required to wear a helmet and provide a bike lock*	•
Private Daycare Drop Off - Name of Daycare	
☐ Bus Rider – Bus Number	
My child will LEAVE school by:	
☐ Car Driver Relationship	
☐ Bus Rider – Bus Number	
☐ Walker Child walks home alone EAST or WEST (circle one	e)
Child will be met by parent EAST or WEST (circle of	-
☐ Bike Rider SAC AREA STUDENTS ONLY! *Student will be required to wear a helmet a	ind provide a bike lock*
☐ Encore Aftercare @ TCS – Student must be fully enrolled to attend	
Private Daycare Pick Up – Name of Daycare	
	- Commence of the second secon
Darent Signature	

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Name of Child/Children:

Grade:	Grade:	Grade:	Grade:				
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£	2)	3)	4)	Name of Parent:		Email Address:	

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THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Release and Consent for Student Information Publication

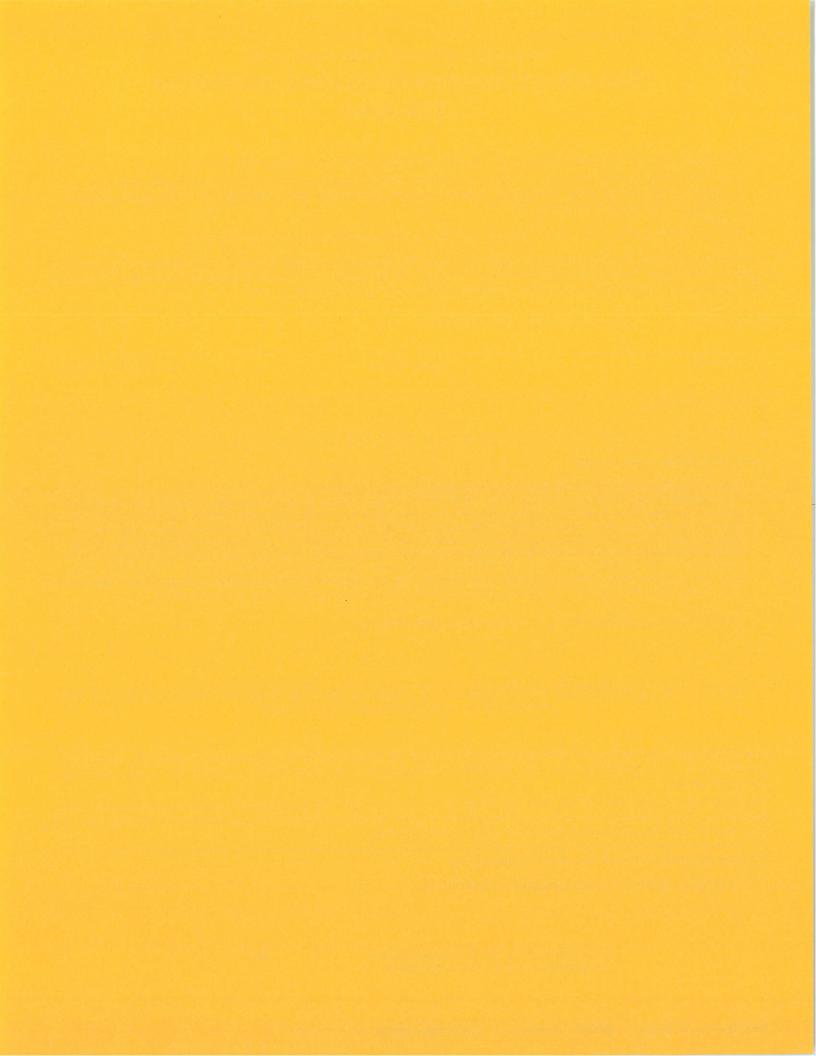
Parents (including legal guardians) are required to provide written permission to their child's school if they wish to:

- 1) allow their child to participate in school activities and the School District to publish the student's name, school name, grade level, photograph, video image, art work, writing, etc. in annual yearbooks, graduation programs, web sites, school newspapers, approved news gatherings, releases and articles, etc.

 AND
- 2) allow publication to the public of certain specified information (such as honors received) related to their child.

DIRECTIONS: If this is a blanket consent for all student publications throughout the school year, the parent will check the appropriate box and provide the school year. If a one-time release and consent for a special project is required, the parent will check the special release box and list below the name of the special project publication. The parent will sign and return to the student's school.

Student ID #	0. 1		
Student ID #	Student Name (first, middle initial,	last)	Grade
School Name		School Contact	Contact Phone Number
Parent/Guardian Name			
TYPE OF CONSENT (check	ck one only)		
blanket release and con	nsent for all student information pub	lications for school year	
I hereby give permission	on for the school or District to use my	v child's photograph video image writing voice record	ing, name, grade level,
school name, participat	tion in officially recognized activities	and sport, weight and height of members of athletic tead most recent previous school attended, in annual year	ams, dates of attendance,
programs, playbills, sch	nool productions, web sites, social m	nedia sites, etc. and/or similar school or District sponso	Jooks, graduation
school or District appro	ved news media interviews, release	es, articles, and photographs. Lalso provide permission.	for the release by the
school or District to the	media and governmental entities of	f my child's name, grade, school name and honors my	child has received for
name and photograph of	cannot and will not be included in ar	plishments. I understand that without checking the py publications or presentation, including a school year	permission box my child's
		, , , , , , , , , , , , , , , , , , , ,	Journal of the second of the s
special release and cor	nsent for the student information pub	plication listed below:	
	Manager State of the State of t		
I hereby give permissio	n for the school or District to use my	/ child's photograph, video image, writing, voice recordi	ng, name, grade level,
	school name, etc. in	the special production named above.	
I also understand the produ	ction, publication, presentation or m	naterials may be submitted for classwork, for open broa	deast by Instructional
Television (ITV), The Educ	cation Network (TEN), a film festiva	I or contest or any other display according to the broad	cast/ publication rules of
the appropriate trade.			
The School District of Palm	Beach County shall have the right t	to sell, duplicate, reproduce or make other use of such	rights transferred as The
School District of Palm Bear	ch County so desires. This agreeme	ent is given with free knowledge of the rights transferred	d to the School District of
Palm Beach County. This a	greement is made without restriction	ns or time limits.	
I give permission for t	he consent request indicated above		ASSESSMENT OF THE PARTY OF THE
	n for the consent request indicated a		
Tigo not give bennission	in for the consent request indicated a	above.	
	Signature of Parent/Guardian or Ema	ancipated Student Date	
	(including if age 18 or over - proof of		



3[™] Grade

2 Plastic solid colored folders (3 prong-2 pocket)

3 boxes of tissue

1 roll of paper towels

2 large packs of Post-It-Notes (super sticky)

2 boxes of Ziploc bags (gallon size)

1 box Ziploc bags (sandwich size)

2 packs of baby wipes

4 reams of white copy paper

1 ream of colored copy paper

6 Composition notebooks

1 roll of blue painter's tape

1 pack of Mr. Sketch/Sharpies markers

1 pack of Crayola markers (fine or bold tip)

2 packs of pencil erasers

1 pack of index cards (white or colored)

2 rolls of scotch tape

2 pump bottles of hand sanitizer

1 pump bottle of hand soap

1 pack of loose leaf paper (wide ruled)

2 packs Magic Rub erasers

6 (boxes of 12) Ticonderoga #2 pencils

6 Elmers glue stick

3 (packs of 6) EXPO dry erase markers

1 pack of pens (blue or black)

1 pack of card stock (white or colored)

1 pack of colored pencils 1 bottle of Elmers liquid glue

1 pair of headphones

Wish list: Teacher stapler with staples, class packs of playdough (set of 20+), white board erasers, rolls of clear packing tape, Sharpie markers (black or colored)

4th Grade

2 pairs of ear buds or earphones

2 rolls of painter's tape

50 Ticonderoga pencils

5 Composition notebooks (plain)

8 Elmer's glue sticks

1 pack of colored pencils

8 Expo markers

1 Crayola water color paints

1 roll of paper towels

2 boxes Ziploc bags (1 gallon/1 quart)

1 pack of 4x6 lined index cards

1 pack of dividers

2 black sharpies

2 reams of copy paper

2 plastic folders with prongs-blue & red

2 bottles of Elmer's glue

2 Magic Rub erasers

1 pack of Crayola magic markers

2 packs of Post It Notes

1 pack baby wipes

2 boxes of tissues

1 pack multi-colored highlighters

1 3-Ring binder (1 ½ inch)

No names on any materials except earbuds/headphones

Wish list: Acrylic paint, paintbrushes, multi-colored clay, Astrobright colored copy paper, colored cardstock, Watercolor paper, 11x14 white construction paper

5[±] Grade

3 rolls of Scotch tape

2 glue sticks

4 spiral notebooks

3 packs of disinfecting wipes

1 packs lined index cards 4 x 6

2 highlighter markers

2 boxes Ziploc bags (1 sandwich/1 gallon)

3 packs post-it-notes

4 boxes of tissues

3 pump bottles of hand sanitizer

1 pack permanent markers

1 bottle Elmers glue

2 packs of graph paper

3 reams of copy paper

2 plastic pocket folders with prongs

personal pencil sharpener personal headphones 1 3-ring binder 1 ½"

2 personal magic erasers

4 boxes of Ticonderoga #2 pencils (12 pack)

1 pack colored pencils

3 4-packs Expo dry erase markers

3 rolls paper towels

1 roll of painter's tape

Wish list: Colored pens, construction paper, colored copy paper, water color paint, highlighters

No penalty of any type will be imposed against the student based upon a failure to pay. No student shall be denied the right to participate for failure to pay. This request of for a voluntary payment

The Conservatory School Supply List 2021-2022

All Students need a backpack (no rolling backpacks allowed)

As an alternative, families can choose to pay a \$65.00 supply donation and avoid the lines in stores!

Checks should be made out to the Conservatory School; funds will be available to your child's teacher.

Kindergarten

3 boxes large crayons (24 count)

1 box #2 pencils (Ticonderoga), pre sharpened

2 packages baby wipes 2 bottles of hand sanitizer

3 3-prong Double Pocket folders (plastic)

2 large boxes of tissue

3 packs Crayola washable markers (8 count)

1 package assorted color construction paper

1 pack 3"x3" post-it-notes

1 pack pens, any color

All students-1 complete change of clothes in Ziploc bag!!

3 packs Dry Erase markers (2 black/1colored)

2 sets Crayola watercolor paints

1 pair Fiskar scissors

2 boxes Ziploc bags (gallon size)

8 large glue sticks (or 3 packs of small)

4 Composition notebooks

4 reams white copy paper

3 Black Sharpie markers (fine point)

1 box gallon ziploc bags 1 roll of painter's tape

Wish list: a list of things our creative K teachers would LOVE to have in their rooms, not mandatory Colored pens, colored pencils, paintbrushes, paint (watercolor or washable tempura), assorted colored construction paper, cardstock (white and/or multicolor), Play Dough, large Duplo Legos/Classic Legos, magnetic tape

1ª Grade

4 boxes crayons (24 count)

2 packages baby wipes

13-prong Double pocket folder (plastic)
2 packages colored construction paper

2 packs pens, black or blue 1 roll of painter's tape

3 Elmer's glue (washable)

3 boxes Ziploc bags (1 sandwich/2 gallon) 3 Composition notebooks (black & white)

1 packs 3x5 index cards

4 black Sharpies

2 boxes colored pencils

2 boxes #2 pencils

2 bottles liquid hand soap or sanitizer

3 large boxes of tissue

2 packs 3"x3" post-it-notes

3 packs Crayola washable markers (8 count)

3 packages Dry Erase markers (black)

6 large glue sticks

4 reams white copy paper

2 rolls of paper towels

1 pack watercolor paint

1 ream color copy paper (any color)

1 pair of headphones

Wish list: a list of things our creative 1* grade teachers would LOVE to have in their rooms, not mandatory Colored pens, color Sharpies, paintbrushes, paint (watercolor or washable tempera), additional colored construction paper, cardstock (white and/or multicolor), Play Dough, mixed Lego bricks (no sets)

2[™] Grade

4 Composition notebooks (black & white)

2 packs #2 pencils (24 count) 1 bottle hand soap or sanitizer 1 pack of Expo dry erase markers

1 pack of crayons (16 count)

2 packs of 3"x3" post-it-notes

4 jumbo glue sticks

1 bottle glue

1 roll of paper towels

1 pack of pens (blue or black)

1 packs of baby wipes

2 plastic pocket folders with prongs

1 roll clear packing tape

3 reams of copy paper

2 boxes Ziploc bags (1sandwich/1 gallon)

1 roll Scotch tape

1 roll painters tape

1 ream of bright colored copy paper

1 box of tissues

1 pack 3x5 index cards

1 pack markers (fine or bold)

1 pair of Headphones

Wish list: a list of things our creative 2nd grade teachers would LOVE to have in their rooms, not mandatory: Colored pens, Mr. Sketch chart markers, Play Dough, cardstock (white and/or multicolored), teacher stapler with staples, Sharpie markers (black or colored)