

Lester Prairie Public School Enrollment Form

Legal Name: _____
Last First Middle

Date of Birth: _____ Age: _____ Boy Girl

Grade: _____ Resident of Lester Prairie District 424? Yes No

If not a resident of the Lester Prairie School District, please list your resident district:

Name and Address of Previous School: _____

Ethnicity:

- | | |
|--|--|
| <input type="checkbox"/> American Indian | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black, not of Hispanic origin | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Native Hawaiian or Pacific Islander | <input type="checkbox"/> Two or more races |
| <input type="checkbox"/> White, not of Hispanic origin | |

Date of enrollment: _____

Does your child have an IEP (Individual Education Plan)? Yes No

Does your child have a 504 Plan Yes No

Is your child currently in the Title Program? Yes No

Does your child attend daycare? If so, where? _____

If entering kindergarten:
Did your child complete Preschool Screening Yes No

Date of Screening: _____ Location of Screening: _____



Lester Prairie Public School
Health & Emergency Form

LAST NAME _____

MOTHER/GUARDIAN

Name _____

Address/Po Box _____

City _____ St _____ Zip _____

Home Phone _____

Cell Phone _____

Email _____

Employer _____

Employer Phone Number _____

Primary Language:

English Spanish Other _____

Check all that apply:

- Lives with
- Contact Allowed
- Ed Rights
- Has Custody
- Mailings Allowed
- Enrolling Parent
- Release to
- Financial Responsibility

FATHER/GUARDIAN

Name _____

Address/Po Box _____

City _____ St _____ Zip _____

Home Phone _____

Cell Phone _____

Email _____

Employer _____

Employer Phone Number _____

Primary Language:

English Spanish Other _____

Check all that apply:

- Lives with
- Contact Allowed
- Ed Rights
- Has Custody
- Mailings Allowed
- Enrolling Parent
- Release to
- Financial Responsibility

Additional Emergency Contact:

Name _____ Relationship _____

Home Phone _____ Cell Phone _____

Primary Language: English Spanish Other _____

- Lives with
- Contact Allowed
- Ed Rights
- Has Custody
- Mailings Allowed
- Enrolling Parent
- Release to
- Financial Responsibility

Names of children in school	Gender	Grade	Date of Birth	Student Cell Number
	M or F			
	M or F			
	M or F			
	M or F			
	M or F			



Lester Prairie Public School
 Health & Emergency Form

Health Information

Student Name	Health Conditions/Allergies/Surgery or Injuries in past 12 months

Clinic/Doctor

Clinic/Doctor	City	Phone Number

I, the undersigned parent/guardian, give my consent for the above-named children to be released to me or my spouse or to the friend/relative I have so designated and/or to be taken to the nearest hospital in case of emergency.
 I understand that Lester Prairie #0424 does not provide accident medical/dental coverage for students for injuries/illnesses occurring at school.
 I further acknowledge that I am financially responsible for medical, dental, ambulance, or other health care expenses or transportation of my child home, which might occur as a result of such illness or injury.

Signature Parent/Guardian_____	Date_____
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*****If you have a change of address, phone number, email address, etc. please contact the office at 320-395-2521***

Ethnic and Racial Demographic Designation Form

Student's First Name: _____ Middle Name/Initial: _____ Last Name: _____
 Date of Birth: _____ District: _____ School: _____

Schools are required to report ethnicity and race to the state and to the U.S. Department of Education. Because of recent changes to Minnesota state law, Minnesota disaggregates each category into detailed groups to further represent our student populations. Parents or guardians are not required to answer the federal questions (**in bold**) for their children. If you choose not to answer the federal questions (**in bold**), federal law requires schools to choose for you. This is a last resort—we prefer if parents or guardians complete the form. State questions are labeled as "Optional" and schools will not fill in this information for you.

This information helps improve teaching and learning for everyone and helps us accurately identify and advocate for students currently underserved. The information this form collects is considered private information. You can review the privacy notice to learn more about the purpose of collecting this information, how it will be used and not used, and how the detailed groups were identified. The privacy notice can be found in our Frequently Asked Questions: Ethnic and Racial Designation Form.

Is the student Hispanic/Latino as defined by the federal government? The federal definition includes persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.¹

[You must select "yes" or "no" to this question.]

Yes *[If yes, go to Question A.]*

No *[If no, go to Question 1.]*

Optional Question A: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | | |
|--|---------------------------------------|--|--|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Guatemalan | <input type="checkbox"/> Salvadoran | <input type="checkbox"/> Other Hispanic/Latino |
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Mexican | <input type="checkbox"/> Spaniard/Spanish/
Spanish-American | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Ecuadorian | <input type="checkbox"/> Puerto Rican | | |

Go to Question 1.

[Select "yes" to at least one of the Questions (1-6) below.]

Question 1: Does the student identify as American Indian or Alaska Native as defined by the state of Minnesota? The state of Minnesota definition includes persons having origins in any of the original peoples of North America who maintain cultural identification through tribal affiliation or community recognition. [This question is needed to calculate state aid/funding.]

Yes *[If yes, go to Question 1a.]*

No *[If no, go to Question 2.]*

Optional Question 1a: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | |
|--|--|---|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Cherokee | <input type="checkbox"/> Other North American Indian Tribal Affiliation |
| <input type="checkbox"/> Anishinaabe/Ojibwe | <input type="checkbox"/> Dakota/Lakota | <input type="checkbox"/> Unknown |

Go to Question 2.

¹Federal Register, Vol. 72, No. 202/Friday, October 19, 2007/Notices/59274

Question 2. Is the student American Indian from South or Central America?

Yes [Go to Question 3.]

No [Go to Question 3.]

Question 3. Is the student Asian as defined by the federal government? The federal definition includes persons 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.¹

Yes [If yes, go to Question 3a.]

No [If no, go to Question 4.]

Optional Question 3a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

Decline to indicate

Chinese

Karen

Other Asian

Asian Indian

Filipino

Korean

Unknown

Burmese

Hmong

Vietnamese

Go to Question 4.

Question 4. Is the student black or African American as defined by the federal government? The federal definition includes persons having origins in any of the black racial groups of Africa.¹

Yes [If yes, go to Question 4a.]

No [If no, go to Question 5.]

Optional Question 4a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

Decline to indicate

Ethiopian-Other

Somali

African-American

Liberian

Other black

Ethiopian-Oromo

Nigerian

Unknown

Go to Question 5.

Question 5. Is the student Native Hawaiian or Other Pacific Islander as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.¹

Yes [Go to Question 6.]

No [Go to Question 6.]

Question 6. Is the student white as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.¹

Yes

No

Parent(s)/Guardian Name _____ Date _____

Parent(s)/Guardian Signature _____

Instructions

Please fill in the following information based on how you use electronic devices to complete schoolwork at your home. This survey uses the primary address you provide as your "home." **You should answer the questions below based only on the conditions at this address.** There is an opportunity at the end of the survey to say more about additional places you live and do homework.

Student Information

First name: _____

Last name: _____

Grade: _____

Student Primary Address: _____

Digital Device Access

1. Does the student use an electronic device like a computer, tablet or smart phone to complete homework?

No (skip to question 2)

Yes (continue to 1a)

a. If yes, what type of electronic device does the student usually use to complete homework?

(select ONLY one)

- Desktop or Laptop
- Tablet
- Chromebook
- Smart phone
- Other

b. Is the electronic device (from 1a) provided by the school?

- Yes
- No

c. Is the electronic device shared with anyone else in the home?

- Yes
- No

Internet Access

2. Can the student access the Internet on their electronic device at home?

- No – Internet is **not** available at home (skip to end of survey)
- No – Internet is **not** affordable at home (skip to end of survey)
- No – Other (skip to end of survey)
- Yes (continue to 2a)

a. If yes, what kind of Internet service do you have at home?

- Residential broadband (e.g. Cable, Fiber, DSL)
- Cellular network
- School-provided hotspot
- Satellite
- Dial-up
- Other
- I am not sure.

b. Can the student stream a video on their electronic device without pauses?

- Yes – with **no** pauses or buffering
- Yes – with **some** pauses or buffering
- No – streaming doesn't work

Instructions to District

You may include additional questions that would become part of your local data. These are not included in the digital equity Ed-Fi data elements and are not reported to MDE but may be useful to your local digital inclusion efforts. Examples: Include the results from MN Broadband Speedtest if known: _____Mbps Upload, _____Mbps Download; What else would you like us to know about Internet or device access at this or another place?

Minnesota Language Survey

Minnesota is home to speakers of more than 100 different languages. The ability to speak and understand multiple languages is valued. The information you provide will be used by the school district to see if your student is multilingual. In Minnesota, students who are multilingual may qualify for a Multilingual Seal upon further assessment. Additionally, the information you provide will determine if your student should take an English proficiency test. Based upon the results of the test, your student may be entitled to English language development instruction. Access to instruction is required by federal and state law. As a parent or guardian, you have the right to decline English Learner instruction at any time. Every enrolling student must be provided with the Minnesota Language Survey during enrollment. Information requested on this form is important to us to be able to serve your student. Your assistance in completing the Minnesota Language Survey is greatly appreciated.

Student Information	
Student's Full Name: (Last, First, Middle)	Birthdate or Student ID:

	Check the phrase that best describes your student:	Indicate the language(s) other than English in space provided:
1. My student first learned:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	
2. My student speaks:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	
3. My student understands:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	
4. My student has consistent interaction in:	<input type="checkbox"/> language(s) other than English. <input type="checkbox"/> English and language(s) other than English. <input type="checkbox"/> only English.	

Language use alone does not identify your student as an English learner. If a language other than English is indicated, your student will be screened for English language proficiency.

Parent/ Guardian Information	
Parent/Guardian Name (printed):	
Parent/Guardian Signature:	Date:

* All data on this form is private. It will only be shared with district staff who need the information to best serve your student and for legally required reporting about home language and service eligibility to the Minnesota Department of Education. At the district and at the Minnesota Department of Education, this information will not be shared with other individuals or entities, except if they are authorized by state or federal law to access the information. Compliance with this request for information is voluntary.

Lester Prairie Schools ISD 424 Student Health Inventory

Student Name: _____

Date of Birth: _____ Gender: _____ Age: _____

This information is needed to help keep your child safe at school. If your child has a life threatening health condition it is the parent/guardian's responsibility to notify the school prior to the child's first day so that a plan of care can be developed. If your child has been diagnosed by a healthcare provider with any of the following, Please check YES and explain. Note that concerns that are starred require an Individual Health Plan.

Health Concern	Yes	Health Concern	Yes	Health Concern	Yes
Asthma**		Head Injury		Bladder/Kidney	
Severe Allergies**		Heart/Blood		Stomach/Bowels	
Diabetes**		Muscles/Bones		Immune	
Seizures**		Skin		Developmental	
Dietary Restrictions		Emotional/ Behavioral		Other	

Please explain: _____

Does your child	Yes	Circle
Wear glasses?		Distance Reading
Wear contacts?		Distance Reading
Wear hearing aids?		Left Ear Right Ear

Has your child had?	Yes	Has your child had?	Yes
Serious Illness?		Mental Health Treatment?	
Surgery?		Chemical Health Treatment?	
Other disabilities or limiting conditions?		Other disabilities or limiting conditions?	

Please explain: _____

Does your child currently take any medications? YES NO If yes, please complete.

Medication	Dose	Time(s)	Reason	Side Effects	Prescribing Physician

ISD 424 requires written authorization from a licensed health care provider and parent before medication may be taken at school. *See health office for forms.*

I understand that the information provided above will be shared in a confidential manner with appropriate staff members who need to know in order to provide for the health and safety needs of my student. I will keep the school informed of any changes. Information provided on this form is true and accurate.

Parent/Guardian Printed Name: _____ Date: _____

Parent/Guardian Signature: _____

LESTER PRAIRIE SCHOOL
SCHOOL SUPPLY LIST – 2025-2026
(Please label with students' first & last name)

PRESCHOOL:

- Backpack, big enough to fit folder
- Extra set of clothes, (socks, underwear, shorts/pants, shirt)
- Folder, labeled with first and last name
- Pencil Box labeled with first & last name
- Scissors, make sure your child can open & close the scissors on their own
- 2-3 Glue Sticks
- 1 Spiral Bound Notebook, labeled with first and last name
- 1 Box of 24 count crayons, label the box
- M/W/F morning class – 1 roll of paper towels
- M/W/F afternoon class – Box of Kleenex
- T/Th morning class - Box of Kleenex

KINDERGARTEN:

- School Bag, big enough to fit 1 inch binder
- 2 Boxes regular size CRAYOLA crayons
- Large old shirt to protect your clothes from paint
- 2 Boxes CRAYOLA broad-tip washable markers
- 2 plastic/poly folders with 3 hole punches
- 1 Bottles liquid glue
- 4-6 Glue sticks (not scented)
- 1 Child's Fiskars scissors (blunt end)
- 1 Box quart zip top baggies (Last name A-L)
- 1 Package of baby wipes (Last name M-Z)
- 1 Pencil case
- 1 Wide-lined ruled spiral notebook (8 ½" x 10 ½")
- 1 Package black low odor dry erase markers
- 2 Boxes of tissues
- 1 Pair of headphones with a cord
- 1 Pair of P.E.tennis shoes (to keep at school)
- 1 Box CRAYOLA colored pencils
- 1 Canister of disinfectant wipes
- 1" three-ring binder with a clear pocket on the front and the back
- 1 extra set of clothes in a gallon baggie (to keep at school)
- 1 Pink eraser

GRADE 1:

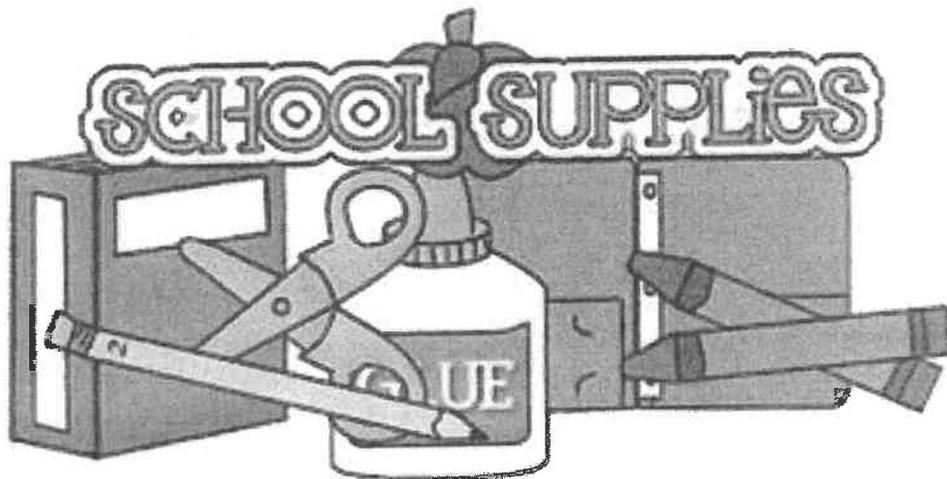
- School Bag
- 1 box of 24 Crayola crayons
- 1 Box of broad-tip washable markers in **CLASSIC** colors
- Small pencil box (about 5"x 8")
- A box of pencils (sharpened would be great!)
- 1 Large Eraser
- 3 Wide-lined spiral notebooks (regular size, one subject, no composition books)
- 1 Pack of 4-6 glue sticks
- 1 Four oz. bottle of white Elmer's glue
- Headphones, must be wired (not earbuds) in a labeled gallon-size baggie
- 2 Highlighters
- 3 Sturdy pocket folders with pocket on bottom (not sides) and ONE needs to be three-hole punched to be put in a binder (no prongs)
- 1 Pack of skinny dry-erase markers
- 1 Box of colored pencils (sharpened would be great!)
- A child's scissors
- Tennis shoes for Phy. Ed.
- Paint shirt (optional)
- 1" Clear view 3 ring binder (we'll put a paper in the clear sleeve for a cover)
- 1 Box of tissues (Last name A-L)
- One canister of disinfectant wipes (Last name M-Z)
- Filled water bottle with your child's name on it each day

GRADE 2:

- Backpack
- 2 Boxes of 24 Count CRAYOLA Crayons
- Box **classic color** broad-tip washable markers
- Child's Fiskar's scissors
- 1 Bottle of white glue (4 oz.)
- 2 **wide-lined** spiral notebooks
- 1" Clear view 3 ring binder
- Pencil box (approximately 5" x 8")
- Water Bottle
- 4-6 Glue sticks
- 1 Composition Notebook
- 1 Pack skinny dry erase markers
- 1 Box of Pencils (already sharpened would be great!)
- Hand held pencil sharpener with shavings catcher
- Erasers
- Tennis shoes for P.E.
- Box of colored pencils
- Headphones in a Ziploc baggie with name
- 1 Box of Tissues
- 1 Container of disinfectant wipes

GRADE 3:

- Backpack
- 1 box of 24 count Crayola crayons
- 2 large erasers
- 1 set of small scissors
- 1 Box of 12 yellow #2 pencils (bring sharpened)
- 2 large glue sticks
- Headphones (no ear buds, please!)
- 1 Box of classic color washable markers
- 1 container of disinfectant wipes
- 2 large chisel tip dry-erase markers
- 1 Pencil box (5" x 8")
- 1 red folder, 1 blue folder, 1 yellow folder, 1 green folder (3 pronged)
- 1 one inch 3-ring binder
- 1 red spiral notebook, 1 blue spiral notebook, 1 choice color/design spiral notebook
- 1 Composition Notebook
- At least 1 box of tissues
- Tennis shoes



GRADE 4:

- 24 count Ticonderoga #2 pencils
- 2 Pens (1 red, 1 black)
- Erasers
- Colored Pencils
- 2 Large wide-lined spiral notebooks (red, blue)
- 4 folders - Red, Green, Blue and one of your choice. All with 3 holes and NO prongs
- Scissor
- Kleenex Box
- 1 composition notebook, wide-lined
- Shoes for gym
- Pencil box or pouch
- One 2" three ring binder with a clear cover insert
- 4 pack primary colored whiteboard markers
- Whiteboard eraser **OR** a clean sock
- 24 count crayons
- Wired Headphones or earbuds in a **labeled** bag
- 2 Glue Sticks
- Hand Sanitizer
- 1 Container of disinfecting wipes

GRADE 5:

- 3 Wide Ruled Spiral Notebooks
- 12 Pencils
- Colored Pencils
- 4 Pack whiteboard markers
- Zippered pencil pouch
- 1 pair of Scissors
- 2 glue sticks
- Wired Headphones
- Last Name A-L: Box of Kleenex
- Last Name M-Z: Clorox Wipes
- 4 Folders
- 2 or 3 inch Binder

GRADE 6:

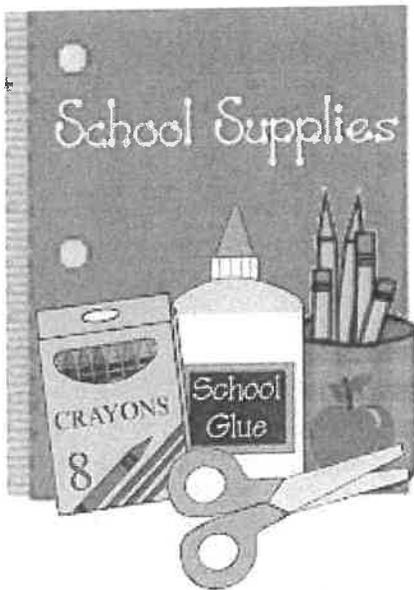
- Wired Earbuds
- 1 Pack Colored Pencils
- 1 Pack of Pencils
- 2 Highlighters
- 4 Whiteboard Markers
- 1 Scissors
- 5 Different Colored Folders
- 3 Notebooks
- Tennis shoes to be used in PE
- Pencil Box/Case for Supplies
- Last name A-L: Box of Kleenex
- Last name M-Z: Clorox Wipes
- 2 Glue Sticks
- 1 Pack of Markers

GRADES 7 & 8:

- Wired Headphones
- Big pack of pencils
- Change of clothes and tennis shoes to be used only in gym class and kept at school
- Pack of glue sticks for Mrs. Smith's math classes
- 1 Subject notebook (one for each class)
- Jumbo Size Book Covers (not needed for math class)
- 2-pocket folders (one for each class)
- Mrs. A. Smith's math students need an additional composition notebook for math, along with a 1 Subject notebook

GRADES 9-12:

- Pencils
- Mr. Wawrzniak's math students need 3-ring binder for notes & notebook or loose leaf paper
- Math students need a scientific calculator - You do not need to purchase a graphing calculator. Graphing calculators are good investments if you plan to take future math classes at a post-secondary institution but they are not required.
- 1 Subject notebook (one for each class)
- Folders
- Book covers (One for each class that has a textbook.)
- 2-pocket folders (one for each class)
- Change of clothes and tennis shoes to be used only in gym class and kept at school



Lester Prairie School District #424

2025-2026 Calendar

Board Approved
2/10/2025

August 2025						
Su	Mo	Tu	We	Th	Fr	Sa
					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						

September 2025						
Su	Mo	Tu	We	Th	Fr	Sa
		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			

October 2025						
Su	Mo	Tu	We	Th	Fr	Sa
			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	

November 2025						
Su	Mo	Tu	We	Th	Fr	Sa
						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						

December 2025						
Su	Mo	Tu	We	Th	Fr	Sa
	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			

January 2026						
Su	Mo	Tu	We	Th	Fr	Sa
				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

Aug. 12 New Teacher Workshop Day
Aug. 14 Paraprofessional Conference

Aug 25-28 Staff Development Teacher Days
Aug. 26 TUESDAY—OPEN HOUSE 4-7pm
Sept. 1 Labor Day—No School
Sept. 2 First Day of School—Grades 1-12
Sept. 2 & 3 Kindergarten Listening Conferences
Sept. 4 First Day of School—Kindergarten

Oct. 2 & 6 Parent Teacher Conf. 3:30-7:30
Oct. 3 K-6 Early Dismissal 11:30 (READ Act)
Oct. 16-17 MEA Break—No School

Oct. 31 End of 1st Quarter
11:30 Dismissal—half day Staff Development
K-6 Early Dismissal 11:30 (READ Act)
Nov. 21 Thanksgiving Break—No School
Nov. 27-28

Dec. 12 K-6 Early Dismissal 11:30 (READ Act)
Dec. 24-Jan. 4 Winter Break—No School

Jan. 5 First Day back from Break
Jan. 16 Last day 2nd Quarter—End of Semester
11:30 Dismissal—half day Staff Development

Feb. 5 & 9 Parent Teacher Conf. 3:30-7:30
Feb. 13 Staff Development—No School
Feb. 16 President's Day—No School

March 20 End of 3rd Quarter
11:30 Dismissal—half day Staff Development

April 3-6 Spring Break—No School
April 17 K-6 Early Dismissal 11:30 (READ Act)

May 15 Graduation
May 22 Last Day for Students
May 25 Memorial Day
May 26 No School—Staff Development Teachers

Student Days	
QTR 1	41.5 (K-6: 41)
QTR 2	44.5 (K-6: 43.5)
QTR 3	42.5 (K-6: 42.5)
QTR 4	43.0 (K-6: 42.5)
TOTAL:	171.5 (K-6: 169.5)

Staff Days Total: 181 Days	
Aug. 12	New Teacher WS (0)
Aug. 25	Staff Dev. (1)
Aug. 26	Staff Dev. (1.5)
Aug. 27	Staff Dev. (1)
Aug. 28	Staff Dev. (0.5)
Oct. 2 & 6	Conferences (1)
Oct. 31	Staff Dev. (0.5)
Jan. 16	Staff Dev. (0.5)
Feb. 5 & 9	Conferences (1)
Feb. 13	Staff Dev. (1)
March 20	Staff Dev. (0.5)
May 26	Staff Dev. (1)

-  New Teacher Workshop
-  NO School/Prof Development Day
-  First Day of Classes
-  Regular School Day—Evening Conferences 3:30 –7:30
-  Graduation
-  Holiday/No School Days
-  End of Quarter
-  K-6 Early Dismissal 11:30
-  Paraprofessional Conference



READ Act
Staff Training:

- Oct. 3
- Oct. 31
- Nov. 21
- Dec. 12
- Jan. 16
- Feb. 13
- March 20
- April 17

February 2026						
Su	Mo	Tu	We	Th	Fr	Sa
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

March 2026						
Su	Mo	Tu	We	Th	Fr	Sa
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				

April 2026						
Su	Mo	Tu	We	Th	Fr	Sa
			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		

May 2026						
Su	Mo	Tu	We	Th	Fr	Sa
					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						

June 2026						
Su	Mo	Tu	We	Th	Fr	Sa
	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				

July 2026						
Su	Mo	Tu	We	Th	Fr	Sa
			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	



General Statewide Enrollment Options Application for K-12 and Early Childhood Special Education

The *General Statewide Enrollment Options Application for K-12 and Early Childhood Special Education* is the required application for all Minnesota school districts. Please use this application for inter-district K-12 open enrollment and inter-district enrollment in Early Childhood Special Education (ECSE). Please use the *Statewide Enrollment Options Application for State-funded Voluntary Pre-Kindergarten and School Readiness Plus* for voluntary pre-kindergarten or school readiness plus open enrollment.

IMPORTANT NOTE: Do not disclose other information to the non-resident district until a seat is offered in writing. At that point, the district will request information such as special needs, birth date, race, ethnicity, academic and other records.

Section 1: To be Completed by One or Both of the Student's Parents or Guardians

Student Information

Student Last Name: _____

First: _____

Full Middle: _____

Will the student be at least age 5 and under age 21 by September 1 of the enrollment year or be applying for ECSE?

Yes No*

*If No, please read information in the Statewide Enrollment Options Instructions before proceeding.

Student's current grade level (If applying for ECSE, write EC): _____

Grade Level Desired: _____

Student Resident District Information

Resident District Name: _____

District Number: _____

City: _____

District of Choice (non-resident school district)

District of Choice Name: Lester Prairie Public School

District Number: 0424

City: Lester Prairie, MN 55354

Identify the reason for the request to enroll in a nonresident district:

Site or Program Preferences

If the non-resident school district has multiple sites/programs that serve your child's needs, you may rank sites/programs in order of preference (add more preferences if desired).

1. _____

2. _____

3. _____

Enrollment Timeline

When are you seeking to enroll your child?

- Immediately
- Not immediately, but sometime during the current school year
- Next school year.

Special Situations

Please check all that apply.

- Sibling preference: student has a sibling currently open-enrolled in this non-resident district.
- Employee child preference: Student has parent or legal guardian who is a Minnesota resident who is an employee of the non-resident district.

- Family move: The student's resident district changed after December 1 prior to the school year requested, waiving deadlines.
- Student is a resident of City of Edina but the resident school district for the student's Edina home is not Edina Public Schools. Student seeks enrollment in Edina Public Schools.
- Student is requesting a move into and/or a move out of a district that receives Achievement and Integration Revenue, waiving deadlines. You can check here if you do not know the answer to this:
- Student is currently expelled under Minnesota Statutes, section 121A.45 for a reason listed in Minnesota Statutes, section 124D.03, Subdivision 1, which allows but does not require the non-resident district to deny the application.

Parent/Legal Guardian Information

The student must live with at least one parent/guardian who lives in Minnesota.

Minnesota Parent/Guardian 1

Last Name: _____

First Name: _____

MI: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail: _____

Street Address: _____

City: _____

State: _____

ZIP: _____

Parent/Guardian 2:

Last Name: _____

First Name: _____

MI: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail: _____

Street Address: _____

City: _____

State: _____

ZIP: _____

Physical Signature of at Least One Parent/Guardian is Required

I hereby verify that the above information is true and correct to the best of my knowledge.

Signature of parent/legal guardian 1: _____

Date: _____

Signature of parent/legal guardian 2 (optional): _____

Date: _____

Submission Information

For priority consideration, please complete this application and send it to the Superintendent's Office in the non-resident District by **January 15** before the first fall enrollment. Please do not send this application to the Minnesota Department of Education. Use one application per student per requested district.

Applications received by the non-resident district after the January 15 deadline may qualify for exceptions to deadline or, if not, districts may voluntarily agree to allow enrollment through a voluntary School District Non-resident Agreement for Inter-district Enrollment.

Section 2: To be Completed by the Non-resident District

Non-resident District: Notify parents/guardians of application approval or disapproval in writing by **February 15 or no more than 90 days after receiving applications** that come later through an Achievement and Integration School Choice Program. If rejected, you must let families know legal reason for denial. Reminder: ECSE open enrollment applications cannot be denied solely due to lack of capacity to provide special education services. (See Minn. Stat. § 124D.03, subd. 6).

Please expedite any requests for open enrollment into Early Childhood Special Education Services.

Families must accept or decline the offer by **March 1 or 45 days after notification that their application has been approved**. After receiving the commitment to attend, the non-resident district must notify the resident district by March 15 (or 30 days after initial receipt if form filed after January 15) of the student's intent to enroll. Districts must report all counts of rejected applications and reasons to the Minnesota Department of Education by July 15 or each year.

Date Application Received: _____

District Name: Lester Prairie Public School

District Number: #0424

District Contact Name: Dr. Melissa Radeke

Title: Superintendent

Phone: 320-395-3001

Email Address: radeke@lp.k12.mn.us

Does the January 15 deadline apply?

- Yes, the deadline applies and it was met.
- Yes, but it was not met. If this is the case, contact the superintendent's office in the resident district immediately regarding Section 3 of this form to determine whether the resident district and your district will agree to a Non-resident Agreement to serve the student prior to open enrollment becoming available.
- No, one or both districts receive Achievement and Integration funding from MDE.
- No, family moved to resident district on December 1 or later.
- No, the commissioner of education and commissioner of human rights have determined the resident district's policies, procedures or practices are in violation of Title IV of the Civil Rights Act (Minn. Stat. §124D.03, subd.7).

Will the student have priority in a lottery? No Yes, based on:

- Sibling of currently open-enrolled student in this district.
- MDE-approved Achievement and Integration with specific school choice plan involving the districts.
- Child of Minnesota resident who is a district employee.
- City of Edina resident whose resident school district is not Edina Public Schools, seeking entry to the district.

Approval/Disapproval of Open Enrollment Application

- APPROVED
- APPROVED BUT WITH A NON-RESIDENT AGREEMENT for upcoming year that is mutually agreed upon by both districts. Enrollment will continue in subsequent years as open enrollment provided that a lottery is not needed for the student's grade level in the first fall enrollment or the grade level has not been closed by board action. Students will be entered into lottery if one is held. (Non-resident district: keep documentation of the agreement. Districts may document agreement using Section 3 or another format of their choosing.)

STUDENT ASSIGNMENT SITE/PROGRAM: On the basis of information provided in the above application, and with respect to district policies and procedures, the above student will be assigned to:

School Building Name: Lester Prairie Public School

Starting Date: _____

Grade Level: _____

NOT APPROVED

The non-resident district has denied the request for open enrollment because of the following reason(s) allowed in Minnesota Statutes, section 124D.03. Reminder: ECSE open enrollment applications cannot be denied based on special education program capacity. Check all that apply:

- The January 15 deadline applies and was not met; situations that would have waived the deadline are not present. See Statewide Enrollment Options Instructions or Minnesota Statutes, section 124D.03, subdivision 3.
- Statutory enrollment cap has been reached for open enrollment. (Minn. Stat. § 124D.03, subd.2)
- Grade is closed district-wide by board action. (Minn. Stat. § 124D.03, subd. 2 and subd.6)
- District has denied the application because of specific expulsion reasons allowed in law. (Minn. Stat. § 124D.03, subd.1)

NOTIFICATION TO RESIDENT DISTRICT

Non-resident district must notify resident district or last district of attendance by March 15 or 30 days later of the pupil's intent to enroll in the non-resident district. The same procedures apply to a pupil who applies to transfer from one participating non-resident district to another participating non-resident district.

Name of Superintendent/Responsible Authority: _____

Signature: _____

Date: _____

Please Note: districts may not modify this form, add data fields or create alternative formats.



Lester Prairie Public Schools
School District #424
131 Hickory Street North
Lester Prairie, MN 55354
(320) 395-2521



Dr. Melissa Radeke

radeke@lp.k12.mn.us

Superintendent

Mr. Mike Lee

lee@lp.k12.mn.us

K-12 Principal

Dear Parent/Guardian:

Our school offers healthy meals each day. All students can get one breakfast and one lunch free of charge each day at school. Although no application is required to receive this free meal benefit, filling out the Application for Educational Benefits is still important! Your application may help the school qualify for education funds.

To apply, complete the enclosed Application for Educational Benefits and return it to:

Lester Prairie School
Attn: Kim Dye
131 Hickory Street N
Lester Prairie, MN 55354

Who should complete this application? Children in households participating in the Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP) or Food Distribution Program on Indian Reservations (FDPIR), and foster, homeless, migrant and runaway children qualify without reporting household income. Alternatively, children can qualify if their household income is within the maximum income shown for their household size on the instructions.

COMMON QUESTIONS:

I get WIC or Medical Assistance. Can my children qualify? Children in households participating in WIC or Medical Assistance do not automatically qualify. Children may be eligible depending on other household financial information. Please fill out an application.

Who should I include as household members? Include yourself and all other people living in the household, related or not (such as grandparents, other relatives, or friends).

May I apply if someone in my household is not a U.S. citizen? Yes. You or your children do not have to be U.S. citizens for you to complete an application.

What if my income is not always the same? List the amount that you normally get. If you normally get overtime, include it, but not if you get overtime only sometimes. For seasonal work, write in the total annual income.

Will the income information or case number I give be checked? It may be. We may also ask you to send written proof.

How will the information be kept? Information you provide on the form, and your child's approval, will be protected as private data. For more information, see the back page of the Application for Educational Benefits.

If I don't qualify now, may I apply later? Yes. Please complete an application at any time if your income goes down, your household size goes up, or you start getting SNAP, MFIP or FDPIR benefits.

If you have other questions or need help, call 320-395-2521

Sincerely,

Kim Dye

How to Complete the Application for Educational Benefits

Complete the Application for Educational Benefits form for school year 2025–26 if any of the following applies to your household:

- Any household member currently participates in the Minnesota Family Investment Program (MFIP), the Supplemental Nutrition Assistance Program (SNAP), or the Food Distribution Program on Indian Reservations (FDPIR) or
- The household includes one or more foster children (a welfare agency or court has legal responsibility for the child) or
- The total income of household members is within the guidelines shown below (**gross earnings before deductions**, not take-home pay). Do not include as income: foster care payments, federal education benefits, MFIP payments, or value of assistance received from SNAP, WIC, or FDPIR. Military: Do not include combat pay or assistance from the Military Privatized Housing Initiative. The income guidelines are effective from July 1, 2025 through June 30, 2026.

Maximum Total Income

Household size	\$ Per Year	\$ Per Month	\$ Twice Per Month	\$ Per 2 Weeks	\$ Per Week
1	28,953	2,413	1,207	1,114	557
2	39,128	3,261	1,631	1,505	753
3	49,303	4,109	2,055	1,897	949
4	59,478	4,957	2,479	2,288	1,144
5	69,653	5,805	2,903	2,679	1,340
6	79,828	6,653	3,327	3,071	1,536
7	90,003	7,501	3,751	3,462	1,731
8	100,178	8,349	4,175	3,853	1,927
Add for each additional person	10,175	848	424	392	196

Step 1: Children

List all infants and children in the household, their school and grade if applicable, and birthdate. Attach an additional page if needed to list all children. Check the box if a child is in foster care (a welfare agency or court has legal responsibility for the child).

Step 2: Case Number

If any household member currently participates in SNAP, MFIP or FDPIR, write in the case number and then go to Step 4. If you do not participate in any of these programs, leave Step 2 blank and continue to Step 3.

Step 3: Adult and Child Incomes / Last 4 Digits of Social Security Number

- **Social Security Number/Total Household Members.** An adult household member must provide the last four digits of their Social Security number or check the box if they do not have a Social Security number. Report the total number of household members and ensure all household members are listed individually on the application in the child or adult section as applicable.
- **Child Income.** If any children in the household have regular income, such as SSI or part-time jobs, list the total amount of regular incomes received by all children, and check the box for the frequency: weekly, bi-weekly, twice a month, or monthly. Do not include occasional earnings like babysitting or lawn mowing.
- **Adult income.** Report the names of adult household members and income in this section.
 - List all adults living in the household not listed in Step 1, whether related or not, such as grandparents, relatives, or friends.
 - **Gross Earnings from Work.** This is usually the money received from working at jobs where a paycheck is received. For each income, check the box to show how often the income is received: weekly, bi-weekly, twice per month, or monthly.
 - List gross incomes before deductions, not take-home pay. Do not list an hourly wage rate. For adults with no income to report, enter a '0' or leave the section blank. For seasonal work, write in the total annual income.
 - **Are you Self-Employed or a Farmer?** List the net income per month or year after business expenses. Do not list the same income twice on the application. A loss from farm or self-employment must be listed as 0 income and does not reduce other income.
 - **Any Other Gross Income.** List gross incomes before deductions from all other sources, such as SSI, unemployment, child support, public assistance, social security, rental income or annuities.

Step 4: Signature and Contact Information An adult household member must sign the form. If you do not want your information to be shared with Minnesota Health Care Programs, check the "Don't share" box in Step 4.

Optional: Please provide the information on ethnicity and race that is requested on the second page of the form. This information is not required and does not affect eligibility. The information helps to ensure we are meeting civil rights requirements and fully serving our community.

OPTIONAL: Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility. Respond to both Step One, *Ethnicity* and Step Two, *Race*.

Step One: Ethnicity (check one): Hispanic or Latino Not Hispanic or Latino

Step Two: Race (check one or more): American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

INSTRUCTIONS: Sources of Income

Sources of Income for Children

Sources of Child Income	Examples
<ul style="list-style-type: none"> Earnings from work Social Security <ul style="list-style-type: none"> Disability payments Survivor's benefits Income from person outside the household Income from any other source 	<ul style="list-style-type: none"> A child has a regular full or part-time job where they earn a salary or wages A child is blind or disabled and receives Social Security A parent is disabled, retired, or deceased, and their child receives Social Security benefits A friend or extended family member regularly gives a child spending money A child receives regular income from a private pension fund, annuity, or trust

Sources of Income for Adults

Earnings from Work	Public Assistance / Alimony / Child Support	All Other Income
<ul style="list-style-type: none"> Salary, wages, cash bonuses (before deductions or taxes) Net income from self-employment (farm or business) <ul style="list-style-type: none"> If you are in the U.S. Military: <ul style="list-style-type: none"> Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) Allowances for off-base housing, food and clothing 	<ul style="list-style-type: none"> Cash Assistance from State or local government Supplemental Security Income Unemployment benefits Worker's compensation Alimony payments Child support payments Veteran's benefits Strike benefits 	<ul style="list-style-type: none"> Social Security Disability benefits Regular income from trusts or estates Annuities Investment income Rental income Regular cash payments from outside household

The Richard B. Russell National School Lunch Act requires that we use information from this application to see who qualifies for free or reduced price meals. We can only approve complete forms. We may share your eligibility information with education, health, and nutrition programs to help them deliver program benefits to your household. Inspectors and law enforcement may also use your information to make sure that program rules are met. Please be sure to provide the last four numbers of the Social Security number of the adult household member who signs the application. If the adult does not have one, 'Check if no Social Security Number.' Applications for a foster child do not need to list a Social Security number. Applications for children in households receiving Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF) or Food Distribution Program on Indian Reservations (FDPIR) do not need to list a Social Security number. Some children qualify for free meals without an application. Please contact your school to get free meals for a foster child, and children who are homeless, migrant, or runaway.

At public school districts and charter schools, each student's eligibility status also is recorded on a statewide computer system used to report student data to MDE as required by state law.

Nondiscrimination statement: In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; or (2) fax: (833) 256-1665 or (202) 690-7442; or (3) email: program.intake@usda.gov

This institution is an equal opportunity provider.



Chromebook/Chrome Tablet Handbook and Policy Manual 2025-26

Lester Prairie School Mission Statement

"To develop every learner to the learner's maximum potential, to succeed and continue to learn in a changing world."

Lester Prairie Schools has implemented a 1:1 K-12 technology program.

Students in grades 2nd-12th will be issued their own Chromebook. Students in Kindergarten and 1st grade will be issued a Chrome Tablet. Before receiving the device, students and parents must sign a user agreement and pay the Required User Insurance Fee.

- Students in grades 4-12 will be expected to take their Chromebook home daily.
- Students in grades K-3 may be required to take home their Chromebook/Chrome Tablet occasionally during the school year.

These devices are not replacing textbooks or other educational materials, but are meant to supplement and enhance the student's learning experience.

Lester Prairie Schools Chromebook/Chrome Tablet 1:1 Program

The Chromebook/Chrome Tablet 1:1 Program facilitates:

- Access to digital educational resources
- Availability beyond the school day
- Individual learning
- Creativity and innovation
- Critical thinking and problem solving
- Communication and collaboration
- Technology literacy skills
- College and career readiness

The information within this document applies to the 1:1 Chromebook/Chrome Tablet Program for students that attend Lester Prairie Schools. Please note that teachers may set additional requirements for use in their classrooms.

Throughout the handbook when the word Chromebook is used, it refers to both a Chromebook and Chrome Tablet.

Chromebook Title

At all times, the legal title to the Chromebook is maintained by Lester Prairie Schools. A student's right to possession and use is limited to and conditioned upon full and complete compliance with the Lester Prairie Chromebook Handbook, Chromebook Use Agreement, Student Handbook, and the Internet Acceptable Use and Safety Policy #524.

Chromebooks are for educational purposes only. Lester Prairie Schools has the right to inspect Chromebooks at any time. Chromebooks will only work with an @lp.k12.mn.us user account. Chromebooks include Internet filters to block inappropriate websites when connected to the WiFi network at school.

Students will be issued a specific Chromebook which will remain theirs throughout their time at Lester Prairie Schools or until the Chromebook is updated (every 3-4 years). At the end of every school year, the Chromebook will be returned to the school before the last student day for routine maintenance and storage over the summer break. The same Chromebook will be re-issued to the student at the beginning of the next school year.

Chromebook Required User Insurance Fee

Lester Prairie Schools require that a signed copy of both the Student-Parent Agreement and payment of the Required User Insurance Fee are received.

Required User Insurance Fee	\$35.00 per school year
Family maximum	\$80.00 per school year
Free/Reduced Price (FRP) Fee	\$20.00 per school year
Free/Reduced (FRP) Family maximum	\$45.00 per school year

Students and parents must comply at all times with the Lester Prairie Schools' Student Handbook and the Internet Acceptable Use and Safety Policy #524. Failure to comply may result in the termination of the student's rights of possession immediately and Lester Prairie Schools may repossess the loaned property with no Required User Insurance Fee refund.

There is a \$55 deductible repair fee for each repair that needs to be sent to Trafera.

Insurance does not cover repairs to the Chromebook due to neglect, misuse, and/or intentional damage. The student and parents of the assigned device are responsible for the entire amount of the repair or replacement of the Chromebook.

If the power adapter is damaged or lost the student and parents are responsible for the replacement cost.

Chromebook Power Adapter Replacement	\$35.00
Chrome Tablet Case Replacement	\$30.00
Chromebook Case Replacement	\$20.00
Chromebook Replacement (lost/negligent or intentional damage)	\$319.00
Chrome Tablet Replacement (lost/negligent or intentional damage)	\$265.00

Theft or Loss

All Chromebooks are monitored. If a Chromebook is lost, the student must report the loss immediately to the Tech Department to potentially track and recover the device. A police theft report is required for the replacement of the Chromebook. If a student has a Chromebook stolen and does not file a theft report, the full replacement cost will be required.

Repair and Liability

Students and parents are responsible for district-owned technology property that is issued to them. If the Chromebook is damaged, it must be reported to the Technology Department as soon as possible. Students will be issued a "loaner" Chromebook until the repairs are completed upon receipt of the deductible repair fee. Students and parents of the assigned device are responsible for the deductible repair fee as required by the Student-Parent Chromebook Use Agreement. If the Chromebook is damaged by an intentional or purposeful act, the student and parents will be responsible for the entire amount to repair or replace the Chromebook.

Terms of Agreement

The right to use and possess the Chromebook terminates no later than the last day of the school year. Rights may be terminated earlier by Lester Prairie Schools or upon withdrawal from the district. The failure to return the Chromebook in a timely manner will be considered unlawful appropriation of Lester Prairie Schools property and appropriate legal action will be taken.

Chromebook Use

Chromebooks are intended for use at school each day. In addition to teacher expectations of Chromebook use, school messages, announcements, calendars, and schedules may be accessed using the Chromebook. Students are responsible for bringing their Chromebooks to all classes unless specifically instructed not to do so by the teacher.

Each student will be issued a power adapter for charging his or her Chromebook. **It is the student's responsibility to bring their Chromebook fully charged to school each day.**

If a student leaves his/her Chromebook at home, the student is responsible for getting the coursework completed as if the Chromebook were present.

General Use

- Chromebooks are to be used for educational purposes only.
- Only use your Lester Prairie-issued user account with the Chromebook:
.....@lp.k12.mn.us
- **Keep your user account login and password secure.**
- Do not share/lend/borrow Chromebook to others.
- Use caution when eating or drinking near the Chromebook.
- Cords, cables, and removable storage devices must be inserted carefully into the Chromebook to prevent damage.
- Do not stack any books, heavy materials, etc. on top of the Chromebook in your locker or backpack.
- Do not close the Chromebook with anything inside it. This may damage the screen or hinges.
- Do not expose the Chromebook to extreme temperatures or direct sunlight for extended periods of time.
- Chromebooks should not be left unattended during school unless securely locked up in your locker or in a teacher-designated area.
- Chromebooks should be taken home every night to be fully charged.
- Chargers should be left at home.

Chromebook Camera and Microphone

Chromebooks come equipped with audio and video recording capabilities through a built-in microphone and camera. All electronic recordings created with the device must comply with district policies and state and federal laws. District policy prohibits the use of electronic devices in a manner that compromises the privacy interests of other individuals (#524). District policy prohibits harassment and bullying (#514). Students are required to use the Chromebook in a manner that complies with these and other district policies. Use of the Chromebook in a manner that violates district policies may result in revocation of the device and/or further disciplinary consequences.

Use of the Chromebook and any other devices with audio and video recording capabilities during instructional time is at the discretion of the teacher and the student must obtain prior approval to use the device for such purposes. Any electronic recordings obtained with the recording device are for instructional/educational purposes and individual use only. Electronic recordings obtained with the Chromebook may not be shared, published, or re-broadcasted for any reason by the student without permission from all parties involved.

Chromebook users should be aware that state and federal laws in many instances prohibit secret or surreptitious recording undertaken without the knowledge and consent of the person or persons being recorded. Violations of state and federal recording laws may be reported to the proper authorities and may result in criminal prosecution.

Media, Sound, and Games

All Photos (including desktop backgrounds) and videos must follow district policies and guidelines. Media that violates Lester Prairie Chromebook Handbook, Chromebook Use Agreement, Student Handbook, and Internet Acceptable Use and Safety Policy (guns, weapons, pornographic materials, inappropriate language, alcohol, drug, gang-related symbols, etc.) will result in disciplinary actions and may result in the loss of Chromebook privileges.

Managing Files and Saving Work

Students may save documents to their Google Drive found on their "@lp.k12.mn.us" account. Saving to Google Drive will make the file accessible from any computer with Internet access. Students using Google Drive to work on their documents will not need to save their work, as Drive will save each keystroke as the work is being completed. It is the responsibility of the student to maintain the integrity of his/her files and keep proper backups.

Home Internet Access

Students are allowed to set up access to home wireless networks on their Chromebooks. This will allow students to access resources needed to complete schoolwork. Contact your Internet provider if you have trouble connecting to your home network.

Chromebooks are content filtered (blocked from pornography, hate, violence, most social media) on the school's network. Any student who attempts to bypass the content filter is in violation of the Acceptable Use Agreement and subject to disciplinary action.

Students who do not have home Internet access: documents, worksheets, videos, and content needed for homework can be downloaded to Google Drive and can be accessed offline without access to the internet. For information about working on Google Drive files offline on your Chromebook, go to:

<http://support.google.com/chromebook/answers/2809731>

Chromebook Care

The Chromebook checks for updates automatically every time the device is connected to the Internet. Restart weekly to ensure the Chromebook is updated and functions properly. If the Chromebook does not appear to be working correctly, is running slow, or has trouble connecting to the school's network, turn it into the Tech Department for maintenance. You will receive a "loaner" while yours is repaired.

While the cost of the Chromebooks are significantly less than those of many laptops and tablets, we encourage students to properly care for them to avoid unnecessary replacement costs.

- Do not carry Chromebooks while the screen is open.

- Do not place Chromebooks on uneven surfaces where they might be subject to an accidental fall.
- For optimal performance, do not block airflow when the device is on. Do not leave it on top of blankets, beds, sofas, pillows, etc. while on and in use.
- Avoid eating or drinking near Chromebooks.
- Avoid exposure to extreme temperatures - below freezing or above 90 degrees
- Avoid placing or dropping heavy objects on top of the Chromebook.
- School-owned case must be used.
- Chromebooks and Chromebook Cases must remain free of any decorative writing, drawing, stickers, paint, tape, or labels that are not property of Lester Prairie Schools.

Chromebook Cleaning

Never use any product containing alcohol, ammonia, or other strong solvents to clean the Chromebook.

- Create a gentle cleaning solution composed of 75% water and 25% white vinegar or just water.
- Disconnect the Chromebook from power and ensure it is off.
- Apply the solution to a cotton cloth, lint free, microfiber, chamois, or some other very soft cloth. New use paper towels or tissues. **Never apply the solution directly on the Chromebook.**
- Wipe the cloth against the screen of the Chromebook in a circular and consistent motion. Rapid circular movements tend to eliminate streaking. Ensure that you apply even pressure to the cloth, but not so much as to cause damage to the screen.
- Repeat these steps for cleaning the outer case and keyboard of the Chromebook.

Parent/Guardian Guide

Talk to your child about values and proper conduct he/she should follow while using the Internet.

Be an active participant in your child's digital life. Have your child show you what sites he/she is navigating, apps used, and current assignments/projects/research.

The following resources will assist in promoting positive conversation(s) between you and your child regarding digital citizenship.

NetSmartz: <http://www.net-smartz.org/Parents>

Common Sense Media: <http://www.commonsensemedia.org/>

All policies and handbooks referred to in this document can be found on the Lester Prairie Schools' website.

INTERNET USE AGREEMENT - STUDENT

STUDENT

I have read and do understand the school district policies relating to safety and acceptable use of the school district computer system and the Internet and agree to abide by them. I understand if I use Google's Additional Services (such as YouTube, Google Maps, Google Earth, and Blogger) through their school-managed Google Workspace for Education account it is for educational purposes only. I further understand that should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action may be taken.

User's Full Name (please print): _____

User Signature: _____

Date: _____

PARENT OR GUARDIAN

As the parent or guardian of this student, I have read the school district policies relating to safety and acceptable use of the school district computer system and the Internet. I understand that this access is designed for educational purposes. The school district has taken precautions to eliminate controversial material. However, I also recognize it is impossible for the school district to restrict access to all controversial materials and I will not hold the school district or its employees or agents responsible for materials acquired on the Internet. Further, I accept full responsibility for supervision if and when my child's use is not in a school setting. I hereby give permission to issue an account for my child and certify that the information contained on this form is correct. In addition: I give permission for my child to use Google's Additional Services (such as YouTube, Google Maps, Google Earth, and Blogger) through their school-managed Google Workspace for Education account. I understand that these services are not part of the core Google Workspace for Education tools and may collect and use student data in ways that differ from the core services.

Parent or Guardian's Name (please print): _____

Parent or Guardian Signature: _____

Date: _____