



2504 Columbus Avenue
Minneapolis MN 55404
Ph. 612-333-1614
Fax 612-339-2229

www.afa.tc

August 12, 2016

Dear Parents, Guardians and Students:

Welcome to the 2016-2017 academic year! As the new Executive Director of Augsburg Fairview Academy, I am honored to continue to serve and educate students and families throughout the metro area. As I begin my tenth year at Augsburg Fairview Academy, I welcome you all to the new school year and invite you to stop in and visit!

AFA is a special place where students are welcomed with open arms and the staff do all they can do eliminate educational barriers. We know that our students face challenges on a daily basis and we will work with each student to get them to school and keep them in school. A high school diploma is more than just "getting the credits". Our students are challenged to gain the knowledge that will build the foundation to their future. Our students will learn to work hard, think critically, read for fun and write to express their passions. When our students have mastered these four key area, they have earned much more than a diploma. They have earned the habits of mind needed to find success for the rest of their lives. Knowledge is power, not a piece of paper.

Many diverse learning experiences will take place for our students this year. Our goal is to challenge our students intellectually, grow them socially, and guide them toward independent thinking and problem solving. As we strive to promote healthy development in all aspects of each student's life we also strive to develop a student body of good character; students who make good choices and decisions resulting in successful and healthy outcomes. We encourage students to demonstrate the best of themselves every moment of everyday and to make positive contributions to the groups and organizations to which they belong. We strive to instill within our student body a sense of personal pride as well as collective pride and love of and for our school.

Your input and involvement is the key to the success of your student. Ways to be involved are:

- **Parent/Guardian Advisory Team:** New this year, AFA will hold monthly information sessions for AFA parents and guardians. At these information sessions, we will discuss topics that are relevant to both you and your students such as college readiness and skills needed to find success in a future career. We will also build a network of support and fellowship. You are not alone on this journey with your student.
- **AFA Indian Education Parent Committee:** The Augsburg Fairview Academy Indian Education Parent Committee provides students, families and community members with the opportunity to express their views concerning all aspects of American Indian Education and the educational needs of the American Indian students enrolled at Augsburg Fairview Academy.
- **School Board Parent Representative:** The AFA Board of Directors is seeking at least one parent to join the school board. This is a great way to make school-wide systems change and share your perspective. This is about a 5-hour per month commitment.
- **Volunteering:** AFA is seeking parent/guardian volunteers who are available during the school day or after school. Volunteer areas are monitoring the cafeteria during lunch, classroom assistants, office help, after school program tutor.
- **Title 1 Parent Involvement Team:** This team will meet quarterly to plan and evaluate the AFA Title 1 program. The first meeting will take place on Tuesday, September 27 at 5pm.

Your feedback is crucial to your student's success and the success of our school. Please take time to complete the Parent/Guardian Involvement Survey at: <https://goo.gl/forms/xrbX4DfAq2uuiIn23> or complete and return the copy in this mailing. Please call, email, or stop in to see me at any time. My door is always open. I look forward to working with you all this school year!

Happy School Year!

Heidi E. Anderson
Executive Director
612-245-1844
heidi.anderson@afa.tc



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Dear Augsburg Fairview Academy Families and Community,

As Lead Teacher, I am very excited to be welcoming all returning and new students to another fantastic year at AFA! We are all looking forward to reconnecting with current students and getting to know new students and families. We cannot wait for the building to come alive again as students bring all their energy and excitement! Belonging is a core operating value of AFA and it is a pleasure working with all students in an individualized and supportive way to cultivate a strong school-wide sense of community.

We have a fantastic group of staff all ready to meet students where they are at and work tirelessly towards our school vision of students achieving not only academic success but the habits of mind and body that will give students happiness, satisfaction, and wellness for the rest of their lives.

I am also happy to introduce our newest staff members. In the Special Education Department we have recently hired a new Teacher, Eric Robinson, and a new Paraprofessional, Laquinieisha Stevenson (AFA Alumni!). Our new Promise Fellows are Emma Shrum and Kaela Schweisthal. Teaching Visual Arts, we have Michael Gaughan, and in the Science Department we have a returning teacher you may remember, Kim Wolfe. Nikki Tait and Angela Gaitas will be our new school social workers this year.

Please come by and meet some of the new faces, chat with some of the more familiar ones, and share some fantastic food at our upcoming Open House on August 20th. We have enclosed a flyer with more details. Once again, we are so excited to be working with everyone and cannot wait for the school year to come!

Have a fantastic rest of your summer and we look forward to seeing you soon!

All the best,


Max Clark-Vail

Lead Teacher
(612) 351-9192
max.clark-vail@afa.tc



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August 11, 2016

I would like to introduce myself and tell you a little about our Indian Education Program. My name is Elizabeth "Liz" Saunby, I am of Blackfoot Lakota, Irish & German heritage. This is my 5th year at Augsburg Fairview Academy, where I am the Indian Education Coordinator, Indian Home School Liaison, Records Specialist and Recruitment Coordinator. Before coming to AFA I worked for 5 years at Four Directions Charter School, and have also worked with the St. Paul Indian Education Program as a Classroom Aide, Elementary School Tutor and Intern. While in school I was actively involved with the Indian Education Programs in St. Paul Public Schools & Anoka-Hennepin where I served on the Indian Education Parent Committee.

Augsburg Fairview Academy is committed to providing the Native youth of the Twin Cities with a school that will meet their unique educational and culturally related academic needs, while preparing them to attend post-secondary education and become our future leaders. We look forward to collaborating with community members on the best ways to serve our students.

Our Indian Education Coordinator, Dakhóta Studies & Ojibwe Studies Teachers work closely with our teachers to meet state standards and to incorporate Native American history, culture and achievements into all classes. Students and staff are able to check-out a variety of books, curriculum, DVDs and music from the Native American Resource Library for classwork or personal growth.

All students at Augsburg Fairview Academy have access to our classes and events held throughout the year, including our Native American Presenter Series, Native American Family Day, Native American College Fair and culturally relevant field trips.

This year we are offering American Indian History & Culture, Dakhóta Studies and Ojibwe Studies Level 1 classes for one period Monday – Thursday; we also offer Ojibwe Studies Level 2 for one class period on Friday. All of our classes are open to all students regardless of race.

On October 13th, 3:30 - 7:30, we will be collaborating with the Minneapolis and St. Paul Indian Education Programs on the Native American College Fair. Representatives from colleges and training programs from throughout the Midwest will be present. We will also be serving a health meal for the first 300 attendees.

If you have any questions, comments or know a student who would like to enroll, please feel free to contact me at (612) 294-1016 or liz.saunby@afa.tc.

Sincerely,

Elizabeth Saunby



Dear Parent or Guardian:

We are pleased to inform you that Augsburg Fairview Academy will be implementing a new provision available to schools participating in the National School Lunch and School Breakfast Programs called the Community Eligibility Provision (CEP) for School Year 2016-2017.

What does this mean for you and your children attending the school(s) identified above?
Great news for you and your students! All enrolled students of Augsburg Fairview Academy are eligible to receive a healthy breakfast and lunch at school at **no charge** to your household each day of the 2016-2017 school year. Your child(ren) will be able to participate in these meal programs without having to pay a fee. All you need to do is complete the Application for Educational Benefits, which is in this mailing.

Please note that our school is eligible to receive additional state and federal funds based on the number and/or percentage of students enrolled who reside in households that meet established federal income guidelines. For this reason, you are asked to complete an Application for Educational Benefits. The application helps Augsburg Fairview Academy qualify for education funds and discounts. If you receive an application, please help our school by completing and submitting the form.

If your child(ren) transfers to a school within our district that is not participating in the CEP, and you have not submitted a household Application for Educational Benefits or received a direct certification notice, you will need to complete an Application for Educational Benefits to apply for free/reduced-price meals.

If we can be of any further assistance, please contact Mike Pepin by email at mike.pepin@afa.tc or by phone at 612.333.1614.

Sincerely,
Mike Pepin

Food Service Director, Augsburg Fairview Academy

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

USDA is an equal opportunity provider and employer.

District Parent Involvement Plan Draft

Augsburg Fairview Academy

Title I Parent Involvement Plan Draft

2016/2017

District Mission Statement emphasizing Parental Involvement

Augsburg Fairview Academy is committed to the goal of providing quality education for every child in this district. To this end, we want to establish partnerships with parents and with the community. Everyone gains if school and home work together to promote high achievement by our children. Neither home nor school can do the job alone. Parents play an extremely important role as children's first teachers. Their support for their children and for the school is critical to their children's success at every step along the way.

Part I. District Expectations

Each school district must establish the district's expectations for parent involvement. [Section 1118(a)(2), ESEA.]

Augsburg Fairview Academy agrees to implement the following requirements:

Augsburg Fairview Academy will put into operation programs, activities, and procedures for the involvement of parents in all of its schools with Title I programs. Those programs, activities, and procedures will be planned and operated with meaningful consultation with parents of participating children.

Augsburg Fairview Academy will work to ensure that the required school-level Parent Involvement Plan meets the Title I requirements, and include, as a component, a school-parent compact.

Augsburg Fairview Academy will incorporate this district-wide Parent Involvement Plan into its district plan.

In carrying out the Title I parent involvement requirements, to the extent practicable, Augsburg Fairview Academy will provide full opportunities for the participation of parents of children with limited English proficiency, parents of children with disabilities, and parents of migratory children, including providing information and school reports in an understandable and uniform format, including alternative formats upon request, and, to the extent practicable, in a language parents can understand.

If Augsburg Fairview Academy's plan for Title I is not satisfactory to the parents of participating children, the school district will submit any parent comments with the plan when the school district submits the plan to Minnesota Department of Education.

If applicable, Augsburg Fairview Academy will involve the parents of children served in Title I schools in decisions about how the one percent of Title I funds reserved for parent involvement is spent, and will ensure that not less than 95 percent of the one percent reserved goes directly to the schools.

Part II. District Parent Involvement Plan Required Components

Augsburg Fairview Academy will take the following actions to involve parents in the joint development/revision of its district parent involvement plan.

1. How will parents be included in development/revising the parent involvement plan?

– Parents will be invited to attend a parent involvement plan development meeting scheduled for September 14, 2016. Parents will receive an invitation in the mail and the invitation will be posted on the school website and Facebook page.

- September 14, 2016
- Heidi E. Anderson
- 6122451844

Augsburg Fairview Academy will involve parents in the joint development of the district plan, review and improvement [i.e. district plan, section 1112, schoolwide section 1114, and/or school improvement section 1116].

2. How will the district involve parents in the joint development of the Title I plan?

- Parents will be invited to attend the parent involvement plan development meeting scheduled for September 14, 2016. Parents will receive an invitation in the mail and the invitation will be posted on the school website and Facebook page.

- September 14, 2016
- Heidi E. Anderson
- 6122451844

3. How will the district inform parents of the school report card?

- Parents will be invited to attend the parent involvement plan development meeting scheduled for September 14, 2016. Parents will receive an invitation in the mail and the invitation will be posted on the school website and Facebook page. At this meeting, our 2016 school report card will be reviewed and evaluated.

- September 14, 2016
- Heidi E. Anderson
- 6122451844

4. How will the district notify the parents if the district has been identified that it needs improvement?

- Parents will be invited to attend the parent involvement plan development meeting scheduled for September 14, 2016. Parents will receive an invitation in the mail and the invitation will be posted on the school website and Facebook page.

- September 14, 2016
- Heidi E. Anderson
- 6122451844

5. How will the district consult with parents about the district plan for improvement?

- Parents will be invited to attend the parent involvement plan development meeting scheduled for September 14, 2016. Parents will receive an invitation in the mail and the invitation will be posted on the school website and Facebook page. Parents will receive a survey that will seek input on ideas parents have to include in the district plan for improvement.

- September 14, 2016
- Heidi E. Anderson
- 6122451844

6. How will the district conduct staff development for implementing effective strategies for parental involvement?

- Staff will receive training on how to communicate with culturally and racially diverse families. Each culture has specific norms and these will be reviewed and practiced.

- August 31, 2016
- Heidi E. Anderson
- 6122451844

7. Augsburg Fairview Academy will provide the following necessary coordination, technical assistance, and other support to assist Title I schools in planning and implementing effective parent involvement activities to improve student academic achievement and school performance, through the following activities specifically described below.

- Staff will receive training on how to use their office phones, set up voice mail, check voice mail and how to professionally communicate via social media. Each culture has specific norms and these will be reviewed and practiced.

- August 31, 2016
- Heidi E. Anderson
- 6122451844

8. Augsburg Fairview Academy will build the schools' and parents' capacity for strong parent involvement, in order to ensure effective involvement of parents and to support a partnership among the school involved, parents, and the community to improve student academic achievement, through the following activities specifically described below.

- Back to School Open House, Family Night, Indian Education Parent Committee Meetings, Academic Conferences, Career and College Fairs.

- To Be Determined
- Heidi E. Anderson
- 6122451844

9. Augsburg Fairview Academy will provide assistance to parents of children served by the school district or school, as appropriate, in understanding topics such as the following:

- the state's academic content standards
- the state's student academic achievement standards,
- the state and local academic assessments including alternate assessments,
- the requirements of Title I,
- how to monitor their child's progress, and
- how to work with educators

10. Augsburg Fairview Academy will provide materials and training to help parents work with their children to improve their children's academic achievement, such as literacy training and using technology, as appropriate, to foster parent involvement.

- Back to School Open House, Family Night, Indian Education Parent Committee Meetings, Academic Conferences, Career and College Fairs.

- To Be Determined
- Heidi E. Anderson
- 6122451844

11. Augsburg Fairview Academy will educate its teachers, pupil services personnel, principals and other staff, in how to reach out to, communicate with, and work with parents as equal partners, in the value and utility of contributions of parents, and in how to implement and coordinate parent programs and build ties between parents and schools.

- Staff will receive training on how to communicate with culturally and racially diverse families. Each culture has specific norms and these will be reviewed and practiced.

- August 31, 2016
- Heidi E. Anderson
- 6122451844

13. Augsburg Fairview Academy will take the following actions to ensure that Title I information related to the school and parent programs, meetings, and other activities, is sent to the parents of participating children in an understandable and uniform format, including alternative formats upon request, and, to the extent practicable, in a language the parents can understand.

- Staff will receive training on how to communicate with culturally and racially diverse families. Each culture has specific norms and these will be reviewed and practiced.

- August 31, 2016
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- 6122451844

14. Augsburg Fairview Academy will take the following actions to conduct, with the involvement of parents, an annual evaluation of the content and effectiveness of this parent involvement plan in improving the quality of its Title I schools. The evaluation will include identifying barriers to greater participation by parents in parent involvement activities (with particular attention to parents who are economically disadvantaged, are disabled, have limited English proficiency, have limited literacy, or are of any racial or ethnic minority background). The school district will use the findings of the evaluation about its parent involvement plan and activities to design strategies for more effective parent involvement, and to revise, if necessary (and with the involvement of parents) its parent involvement plan.

List actions, such as describing how the evaluation will be conducted, identifying who will be responsible for conducting it and explaining what role parents will play.

- Staff will receive training on how to communicate with culturally and racially diverse families. Each culture has specific norms and these will be reviewed and practiced.

- August 31, 2016
- Heidi E. Anderson
- 6122451844

15. Augsburg Fairview Academy will involve parents in the decisions regarding how funds reserved for parent involvement activities will be allocated:

- Parents will be invited to attend the parent involvement plan development meeting scheduled for September 14, 2016. Parents will receive an invitation in the mail and the invitation will be posted on the school website and Facebook page. Parents will receive a survey that will seek input on ideas parents have to include in the district plan for improvement.

- September 14, 2016

- Heidi E. Anderson
- 6122451844

Part III. Discretionary District Parent Involvement Plan Components

Augsburg Fairview Academy's Parent Involvement Plan may include additional paragraphs listing and describing other discretionary activities that the school district, in consultation with its parents, chooses to undertake to build parents' capacity for involvement in the school and school system to support their children's academic achievement, such as the following:

- Involve parents in the development of training for teachers, principals, and other educators to improve the effectiveness of that training.
- Provide necessary literacy training for parents from Title I, Part A funds, if the school district has exhausted all other reasonably available sources of funding for that training.
- Pay reasonable and necessary expenses associated with parent involvement activities, including transportation and child care costs, to enable parents to participate in school-related meetings and training sessions.
- Train parents to enhance the involvement of other parents.
- In order to maximize parent involvement and participation in their children's education, arrange school meetings at a variety of times, or conduct in-home conferences between teachers or other educators, who work directly with participating children, with parents who are unable to attend those conferences at school.
- Adopt and implement model approaches to improving parent involvement.
- Establish a district parent advisory council to provide advice on all matters related to parent involvement in Title I, Part A programs.
- Develop appropriate roles for community-based organizations and businesses, including faith-based organizations, in parent involvement activities.
- Provide other reasonable support for parent involvement activities under section 1118 as parents may request.

Part IV. Adoption

Augsburg Fairview Academy's Parental Involvement Plan has been developed/revised jointly with, and agreed on with, parents of children participating in Title I programs, as evidenced by meeting minutes.

This Parent Involvement Plan was revised on 6/9/16 and will be in effect for the 2016/2017 school year. Augsburg Fairview Academy will distribute this plan to all parents of participating Title I children on or before October 31, 2016.

Signature of Title I Authorized Representative:

These parents were involved with the development of this document:



COMPLETE AND RETURN AS SOON AS POSSIBLE

AFA Parent/Guardian Involvement Survey

Please complete this survey to help determine family event topics, event times, and other programming that parents and guardians would like offered during the 2016/2017 school year.

The best day for me to attend events or meetings at AFA is: (Circle all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

The best time of day for me to attend events or meetings at AFA is: (Circle all that apply)

- ☐ Morning between 8am and 11:30am
- ☐ Lunch time between 11am and 1pm
- ☐ Early afternoon between 1pm and 4pm
- ☐ After school between 4pm and 6pm
- ☐ Evenings between 5pm and 8pm
- ☐ Other:

I am interested in attending the following types of events at AFA: (Circle all that apply)

- ☐ Family Nights
- ☐ Parental Involvement Committee
- ☐ Academic Conferences
- ☐ Community Meals
- ☐ Service Projects
- ☐ School Board meetings
- ☐ Educational events where I learn something that helps my family
- ☐ American Indian Parent Committee
- ☐ Race and Equity Team

The language I prefer written materials and translation services is:

I am interested in learning more about the AFA School Board. (Circle One)

Yes

No

I am interested in volunteering at AFA in the following way:

Topics that I am interested in learning about at AFA events are: (Circle all that apply)

- ☐ Improving my students reading comprehension
- ☐ Improving my students math skills
- ☐ Picking a college and the application process
- ☐ Resume building and interview skills
- ☐ Financial Aid for college
- ☐ Community services available to families
- ☐ Service projects for the AFA community
- ☐ Healthy cooking and family nutrition
- ☐ Financial literacy and budgeting
- ☐ Community building and fellowship
- ☐ Race and equity in education and the greater community
- ☐ Family arts initiatives
- ☐ Cultural heritage events
- ☐ Other:

Please provide the following accommodations at AFA events: (Circle all that apply)

- ☐ Gender neutral bathrooms
- ☐ Translation services in my native language
- ☐ Child care
- ☐ Wheelchair accessibility
- ☐ Vegan meal options
- ☐ Halal or Kosher meal options
- ☐ Private prayer, meditation and reflection spaces
- ☐ Other:



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Parent/Guardian Contact Information and Preference Form

Dear Parent or Guardian,

At Augsburg Fairview Academy, we believe that communication between parent/guardian and school personnel is important for student success. Please take a few minutes to let us know about your schedule, means of contact and preferences. This information will be used to update your PowerSchool contact information.

➡ May we call you? _____

If yes, what is the best time to call? _____

➡ May we call you on your cell phone? _____

If yes, what is the best number? _____

➡ May we call you at work? _____

If yes, what is the best time to call? _____

If yes, what is the phone number (and extension)? _____

➡ May we contact you by text message? _____

If yes, what is the best number? _____

➡ May we contact you by e-mail? _____

If yes, what is the address? _____

Work or home e-mail? _____ How often do you check it? _____

➡ May we contact you by mail? _____

If yes, what is the best address? _____

➡ May we contact you through social media? _____

If yes, what is the best way? _____

PLEASE RETURN BY OCTOBER 1, 2016

COMPLETE AND RETURN BY OCTOBER 1, 2016

How to Complete the Application for Educational Benefits

Complete the *Application for Educational Benefits* form for school year 2016-17 if any of the following applies to your household:

- Any household member currently participates in the Minnesota Family Investment Program (MFIP), or 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, 2016 through June 30, 2017.

Maximum Total Income

| Household Size | \$ Per Year | \$ Per Month | \$ Twice Per Month | \$ Per 2 Weeks | \$ Per Week |
|--------------------------------|-------------|--------------|--------------------|----------------|-------------|
| 1 | 21,978 | 1,832 | 916 | 846 | 423 |
| 2 | 29,637 | 2,470 | 1,235 | 1,140 | 570 |
| 3 | 37,296 | 3,108 | 1,554 | 1,435 | 718 |
| 4 | 44,955 | 3,747 | 1,874 | 1,730 | 865 |
| 5 | 52,614 | 4,385 | 2,193 | 2,024 | 1,012 |
| 6 | 60,273 | 5,023 | 2,512 | 2,319 | 1,160 |
| 7 | 67,951 | 5,663 | 2,832 | 2,614 | 1,307 |
| 8 | 75,647 | 6,304 | 3,152 | 2,910 | 1,455 |
| Add for each additional person | 7,696 | 642 | 321 | 296 | 148 |

Step 1 Children

List all infants and children in the household, their birthdate and, if applicable, their grade and school. Attach an additional page if needed to list all children. Fill in the circle if a child is in foster care (a welfare agency or court has legal responsibility for the child). Please provide the requested information on ethnicity and race for each child. This information is not required and does not affect approval for school meal benefits. The information helps to make sure we are meeting civil rights requirements and fully serving our community.

Step 2 Case Number Circle Yes or No to show whether any household member currently participates in any of the three assistance programs listed in Step 2. If you answer Yes, write in the case number and go to Step 4 (skip Step 3). If you answer No, continue on to Step 3. WIC and Medical Assistance (M.A.) do not qualify for this purpose.

Step 3 Adults / Incomes / Last 4 Digits of Social Security Number

- List all adults living in the household (everyone not listed in Step 1) whether related or not, such as grandparents, other relatives, or friends. Include any adult who is temporarily away from home, like a student away at college. Attach another page if necessary.
- 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. This is your certification (promise) that there is no income to report for these adults.
- For each income, fill in a circle to show how often the income is received: each week, every other week, twice per month, or monthly.
- For farm or self-employment income only, list the net income per year or month after business expenses. A loss from farm or self-employment must be listed as 0 income and does not reduce other income.
- Last four digits of Social Security number – The adult household member signing the application must provide the last four digits of their Social Security number or check the box if they do not have a Social Security number.
- Regular incomes to children – 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. Do not include occasional earnings like babysitting or lawn mowing.

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.

Application for Educational Benefits – School Year 2016-17
School Meals • State and Federally Funded Programs

Step 1 List all infants, children and students through grade 12 in the household, even if they are not related. If more space is needed, attach another sheet.

| Child's First Name | MI | Child's Last Name | Birthdate | School | Grade | Foster Child? (An agency or court has legal responsibility for the child.) If yes, fill in the circle. | Optional - Is the child Hispanic / Latino? If yes, fill in the circle. | Optional - Racial Identity * Fill in one or more circles for each child. | | | | | | |
|--------------------|----|-------------------|-----------|--------|-------|---|--|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | | | | | | | | American Indian | Asian | African American | Pacific Islander | White | | |
| | | | | | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| | | | | | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| | | | | | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

* The full names of the racial categories are: American Indian or Alaskan Native, Asian, Black or African American, Native Hawaiian or other Pacific Islander and White.

Step 2 Do any Household Members, including yourself, currently participate in any of the following assistance programs: SNAP, MFIP or FDIIP? Circle one: **Yes** **No**
Medical Assistance and WIC do not qualify. If No > Go to STEP 3. If Yes > Write in the CASE NUMBER here: _____ then go to STEP 4.

Step 3 A. List ALL Adult Household Members including yourself and report all incomes. (Skip STEP 3 if you answered "yes" to STEP 2 or if all participants are foster children.)

| Adults - Full Name <small>For the purpose of school meal benefits, the members of your household are "Anyone who is living with you and shares income and expenses, even if not related." List the full name of each household member not listed in Step 1 and their income(s) in whole dollars. If a person has no income, write in 0 or leave the section blank. This is your certification (promise) of no income to report. Include any college students temporarily away from home.</small> | Gross Pay from Work <small>Do not write in an hourly wage.</small> | | | Farm or Self-Employment <small>Net Income after business expenses. State if annual or monthly.</small> | Public Assistance, Child Support, Alimony <small>Payments received.</small> | | | All Other Incomes <small>Pension, retirement, disability, unemployment, Veterans benefits, etc.</small> | | | | |
|---|---|--------|-----------|---|--|--------|-----------|--|--------|-----------|---------|--|
| | Gross pay before deductions (not take-home pay). | Weekly | Bi-Weekly | | Monthly | Weekly | Bi-Weekly | Monthly | Weekly | Bi-Weekly | Monthly | |
| | | | | | | | | | | | | |
| | \$ | | | | | | | | | | | |
| | \$ | | | | | | | | | | | |
| | \$ | | | | | | | | | | | |
| | \$ | | | | | | | | | | | |

B. Last four digits of signer's Social Security Number (SSN) or no SSN (required): C. Do any of the children listed in Step 1 receive regular incomes such as SSI or wages?

☒ X X X - X X - ☐ or ☐ I don't have a Social Security Number.
 TOTAL regular incomes of children, if any: \$ _____

Step 4 I certify (promise) that all information on this application is true and correct and all household members and incomes are reported. I understand that this information is given in connection with receipt of federal and state funds and that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose benefits and I may be prosecuted under applicable federal and state laws. The information I provide may be shared with Minnesota Health Care Programs as allowed by state law, unless I have checked this box: ☐ Do not share my information with Minnesota Health Care Programs.

Signature of Adult Household Member (required) _____ **Print Name:** _____ **Date:** _____
Address: _____ **City:** _____ **Zip:** _____ **Home Phone:** _____ **Work Phone:** _____

Office Use Only Total Household Size: _____ Total Income: \$ _____ per _____ Approved: ☐ Case Number – Free ☐ Foster – Free ☐ Income – Free
☐ Income – Reduced-Price Denied: ☐ Incomplete ☐ Income Too High Signature of Determining Official: _____ Date: _____

Is this form required?

This form must be completed to apply for free or reduced-price school meals, unless:

- (1) Your school provides free school meals to all students without applications from households (*Community Eligibility Provision, Provision 2 or Provision 3*) or
- (2) You were notified that your children have been directly certified for school meal benefits based on foster care status or participation in the Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP) or Food Distribution Program on Indian Reservations (FDPIR).

Privacy Act Statement / How Information Is Used

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give this information, but if you do not we cannot approve your child for free or reduced-price school meals. You must include the last four digits of the Social Security number of the adult household member who signs the application. The last four digits of the Social Security number are not required when you apply on behalf of a foster child, or you provide an MFIP, SNAP or FDPIR assistance number, or you indicate that the adult household member signing the application does not have a Social Security number.

Only authorized officials will have access to the information that you provide on this form. We will use your information to determine if your child qualifies for free school meals, and for administration and enforcement of the school meal programs. We may share your information with other education, health, and nutrition programs to help them evaluate, fund or determine benefits for their programs, with auditors for program reviews, and with law enforcement officials to help them look into violations of program rules. We require written consent from you before sharing information for other purposes.

Please provide the requested information about children's race and ethnic identity. This information is not required and does not affect approval for program benefits. We use the percentages of participants in each racial/ethnic category to check that our program is operated in a nondiscriminatory manner in compliance with federal civil rights laws

At public school districts, each student's school meal status also is recorded on a statewide computer system used to report student data to the Minnesota Department of Education (MDE) as required by state law. MDE uses this information to: (1) Administer state and federal programs, (2) Calculate compensatory revenue for public schools, and (3) Judge the quality of the state's educational program.

Information provided on this form may be shared with Minnesota Health Care Programs, unless the person completing this form has checked the box in Step 4 to not share information for that purpose.

Nondiscrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the *USDA Program Discrimination Complaint Form (AD-3027)* found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail to 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 to (202) 690-7442; or (3) email to program.intake@usda.gov. This institution is an equal opportunity provider.

Office Use Only: Verification

Date Verification Sent: _____ Response Due: _____ 2nd Notice: _____

Result: ☐ No Change ☐ Free to Reduced-Price ☐ Free to Paid ☐ Reduced-Price to Free ☐ Reduced-Price to Paid

Reason for Change: ☐ Income ☐ Case number not verified ☐ Foster not verified ☐ Refused Cooperation ☐ Other: _____

Signature of Confirming Official: _____ Date: _____ Signature of Verifying Official: _____ Date: _____

Student Immunization Form

Student Name _____

Birthdate _____ Student Number _____

Minnesota law requires children enrolled in school to be immunized against certain diseases or file a legal medical or conscientious exemption.

FOR SCHOOL USE ONLY

() Complete; booster required in _____
 () In process; 8 mos. expires _____
 () Medical exemption for _____
 () Conscientious objection for _____
 () Parental/guardian consent _____

Parent/Guardian:

You may attach a copy of the child's immunization history to this form OR enter the MONTH, DAY, and YEAR for all vaccines your child received. Enter MED to indicate vaccines that are medically contraindicated including a history of disease, or laboratory evidence of immunity and CO for vaccines that are contrary to parent or guardian's conscientiously held beliefs.

Sign or obtain appropriate signatures on reverse. Complete section 1A or 1B to certify immunization status and section 2A to document medical exemptions (including a history of varicella disease) and 2B to document a conscientious exemption.

Additionally, if a parent or guardian would like to give permission to the school to share their child's immunization record with Minnesota's immunization information system, they may sign section 3 (optional).

For updated copies of your child's vaccination history, talk to your doctor or call the Minnesota Immunization Information Connection (MIIC) at 651-201-5503 or 800-657-3970.

School Personnel: Be sure to initial and date any new information that you add to this form after the parent/guardian submits it. Also, record combination vaccines (e.g., DTaP+HepB+IPV, Hib+HepB) in each applicable space.

| Type of Vaccine | DO NOT USE (✓) or (✕) | 1st Dose Mo/Day/Yr | 2nd Dose Mo/Day/Yr | 3rd Dose Mo/Day/Yr | 4th Dose Mo/Day/Yr | 5th Dose Mo/Day/Yr |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Required (The shaded boxes indicate doses that are not routinely given; however, if your child has received them, please write the date in the shaded box.) | | | | | | |
| Diphtheria, Tetanus, and Pertussis (DTaP, DTP, DT) • for children age 6 years and younger • final dose on or after age 4 years | | | | | | |
| Tetanus and Diphtheria (Td) • for children age 7 years and older • 3 doses of Td required for children not up to date with DTaP, DTP, or DT series above | | | | | | |
| Tetanus, Diphtheria and Pertussis (Tdap) • for children in 7th - 12th grade | | | | | | |
| Polio (IPV, OPV) • final dose on or after age 4 years | | | | | | |
| Measles, Mumps, and Rubella (MMR) • minimum age: on or after 1st birthday | | | | | | |
| Hepatitis B (hep B) | | | | | | |
| Varicella (chickenpox) • minimum age: on or after 1st birthday • vaccine or disease history required | | | | | | |
| Meningococcal (MCV, MPSV) • for children in 7th - 12th grade • booster given at age 16 years | | | | | | |
| Recommended | | | | | | |
| Human Papillomavirus (HPV) | | | | | | |
| Hepatitis A (hep A) | | | | | | |
| Influenza (annually for children 6 months and older) | | | | | | |

Additional exemptions:

- **Children 7 years of age and older:** A history of 3 doses of DTaP/DTP/DT/Td/Tdap and 3 doses of polio vaccine meets the minimum requirements of the law.
- **Students in grades 7-12:** A Tdap at age 11 years or later is required for students in grades 7-12. If a child received Tdap at age 7-10 years another dose is not needed at age 11-12 years. However, if it was only a Td, a Tdap dose at age 11-12 years is required.
- **Students 11-15 years of age:** A 3rd dose of hepatitis B vaccine is not required for students who provide documentation of the alternative 2-dose schedule.
- **Students 18 years of age or older:** Do not need polio vaccine.

Instructions, please complete:

Box 1 to certify the child's immunization status

Box 2 to file an exemption (medical or conscientious)

Box 3 to provide consent to share immunization information (optional)

1. Certify Immunization Status. Complete A or B to indicate child's immunization status.**A. Received all required immunizations:**

I certify that this student has received all immunizations required by law.

Signature of Parent / Guardian OR Physician / Public Clinic

Date

B. Will complete required immunizations within the next 8 months:

I certify that this student has received at least one dose of vaccine for diphtheria, tetanus, and pertussis (if age-appropriate), polio, hepatitis B, varicella, measles, mumps, and rubella and will complete his/her diphtheria, tetanus, pertussis, hepatitis B, and/or polio vaccine series within the next 8 months.

The dates on which the remaining doses are to be given are:

Signature of Physician / Public Clinic

Date

2. Exemptions to School Immunization Law. Complete A and/or B to indicate type of exemption.**A. Medical exemption:**

No student is required to receive an immunization if they have a medical contraindication, history of disease, or laboratory evidence of immunity. For a student to receive a medical exemption, a physician, nurse practitioner, or physician assistant must sign this statement:

I certify the immunization(s) listed below are contraindicated for medical reasons, laboratory evidence of immunity, or that adequate immunity exists due to a history of disease that was laboratory confirmed (for varicella disease see * below). List exempted immunization(s):

Signature of physician/nurse practitioner/physician assistant

Date

*History of varicella disease only. In the case of varicella disease, it was medically diagnosed or adequately described to me by the parent to indicate past varicella infection in _____ (year)

Signature of physician/nurse practitioner/physician assistant (If disease occurred before September 2010, a parent can sign.)

B. Conscientious exemption:

No student is required to have an immunization that is contrary to the conscientiously held beliefs of his/her parent or guardian. However, not following vaccine recommendations may endanger the health or life of the student or others they come in contact with. In a disease outbreak schools may exclude children who are not vaccinated in order to protect them and others. To receive an exemption to vaccination, a parent or legal guardian must complete and sign the following statement and have it notarized:

I certify by notarization that it is contrary to my conscientiously held beliefs for my child to receive the following vaccine(s):

Signature of parent or legal guardian

Date

Subscribed and sworn to before me this:

_____ day of _____ 20____

Signature of notary

3. Parental/Guardian Consent to Share Immunization Information (optional):

Your child's school is asking your permission to share your child's immunization documentation with MIIC, Minnesota's immunization information system, to help better protect students from disease and allow easier access for you to retrieve your child's immunization record. You are not required to sign this consent; it is voluntary. In addition, all the information you provide is legally classified as private data and can only be released to those legally authorized to receive it under Minnesota law.

I agree to allow school personnel to share my student's immunization documentation with Minnesota's immunization information system:

Signature of parent or legal guardian

Date

Augsburg Fairview Academy | 2016-2017 STUDENT CALENDAR

Key:

Full School Day 

8:30am-3:27pm

Half School Day 

10:00am-3:00pm

Weekend 

Holiday/Break 

| AUGUST 2016 | | | | | | |
|-------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | 31 | | | |

29

| SEPTEMBER 2016 | | | | | | |
|----------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | |

5 Labor Day

6 **First Day of School**

9 Full School Day

29 Family Night (5-7pm)

| OCTOBER 2016 | | | | | | |
|--------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

7 Mid-Quarter

20-23 Fall Break

24 School Resumes

27 Academic Conferences

| NOVEMBER 2016 | | | | | | |
|---------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

4 End of Quarter 1

7 Quarter 2 Begins

17 Family Night (5-7pm)

23-25 Thanksgiving Break

28 School Resumes

| DECEMBER 2016 | | | | | | |
|---------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | | | | |
| 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 |

9 Mid-Quarter

19 Winter Break Begins

2 School Resumes

14-16 MLK Break

17 School Resumes

20 Full School Day

26 Family Night (5-7pm)

27 End of Quarter 2

30 Quarter 3 Begins

| JANUARY 2017 | | | | | | |
|--------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | 31 | | | | |

18-20 **Presidents' Weekend**

21 School Resumes

23 Academic Conferences

24 Full School Day & Mid-Quarter

| FEBRUARY 2017 | | | | | | |
|---------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | | |

23 Family Night

30 End of Quarter 3

31 No School – Staff Only

| MARCH 2017 | | | | | | |
|------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | |

3 Spring Break Begins

10 School Resumes & Quarter 4 Begins

27 Family Night (5-7pm)

29 Possible Prom

| APRIL 2017 | | | | | | |
|------------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |

25 All School Celebration

27-29 Memorial Day Break

30 School Resumes

| MAY 2017 | | | | | | |
|----------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | 31 | | | |

8 Graduation

9 Last Day of School

16 Final Grades Mailed Home

| JUNE 2017 | | | | | | |
|-----------|----|----|----|----|----|----|
| S | M | T | W | Th | F | S |
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | |

Augsburg Fairview Academy Daily Schedule

Monday – Thursday

| Period | Start Time | End Time | Minutes |
|--------------|------------|----------|---------|
| 1 | 8:30 | 9:27 | 57 |
| 2 | 9:30 | 10:27 | 57 |
| 3 | 10:30 | 11:27 | 57 |
| Advisory (4) | 11:30 | 12:00 | 30 |
| LUNCH | 12:00 | 12:25 | 25 |
| 5 | 12:30 | 1:27 | 57 |
| 6 | 1:30 | 2:27 | 57 |
| 7 | 2:30 | 3:27 | 57 |

Friday

| Period | Start Time | End Time | Minutes |
|----------|------------|----------|---------|
| 1 | 10:00 | 12:00 | 120 |
| LUNCH | 12:00 | 12:30 | 30 |
| Advisory | 12:30 | 1:00 | 30 |
| 2 | 1:00 | 3:00 | 120 |

Suggested School Supply List

backpack

folders for each class (5-7)

notebooks/paper for each class (5-7)

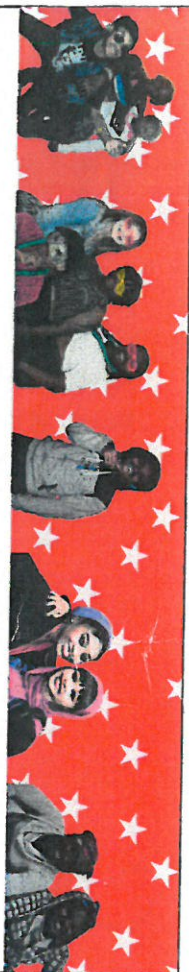
pencils or pens

highlighters

color pencils

box of facial tissue (for student's locker)

hand sanitizer (for student's locker)



Open House

Saturday, August 20th

1:00—5:00

Meet Students
& Staff

Games

Enroll

Enrolling Grades 9—12

Meal catered by La Loma Tamales &
Holy Land Deli

Dunk Tank

Tours

Students vs Staff
Kickball

2504 Columbus Avenue • Minneapolis, MN 55404 • www.augsburg.edu • info@aug.edu • (612) 333-1014



Augsburg Fairview
Academy



Get Paid to Recruit Your Friends

**\$354.50 per New Student, No limit on the number of
students you can recruit**

**\$1.75 for each school day the new student is enrolled
x 174 school days = \$304.50**

\$50 bonus if New Student is enrolled the entire year



See Liz for Details

Native American College Fair

Thursday, October 13, 2016

3:30pm—7:30pm

5:00—6:00

A light, healthy meal will
be served for the first
300 attendees

Door Prizes

East Phillips Park Cultural
& Community Center

2307 17th Ave S, Minneapolis, MN 55404

Free & Open to the Public,
Everyone is Welcome

Speak with representatives from a variety of post-
secondary institutions, job training and community
programs, and learn about college life, courses, ad-
mission & financial aid requirements.



Augsburg Fairview Academy Indian Education Program
Liz Saunby
(612) 294-1016 liz.saunby@afa.tc



Minneapolis Public Schools Indian Education Program
Tami Johnson
(612) 668-0617 tami.johnson@mpls.k12.mn.us



St. Paul Public Schools Indian Education Program
Kerrie Troseth
(651) 744-3388 kerrie.troseth@spps.org