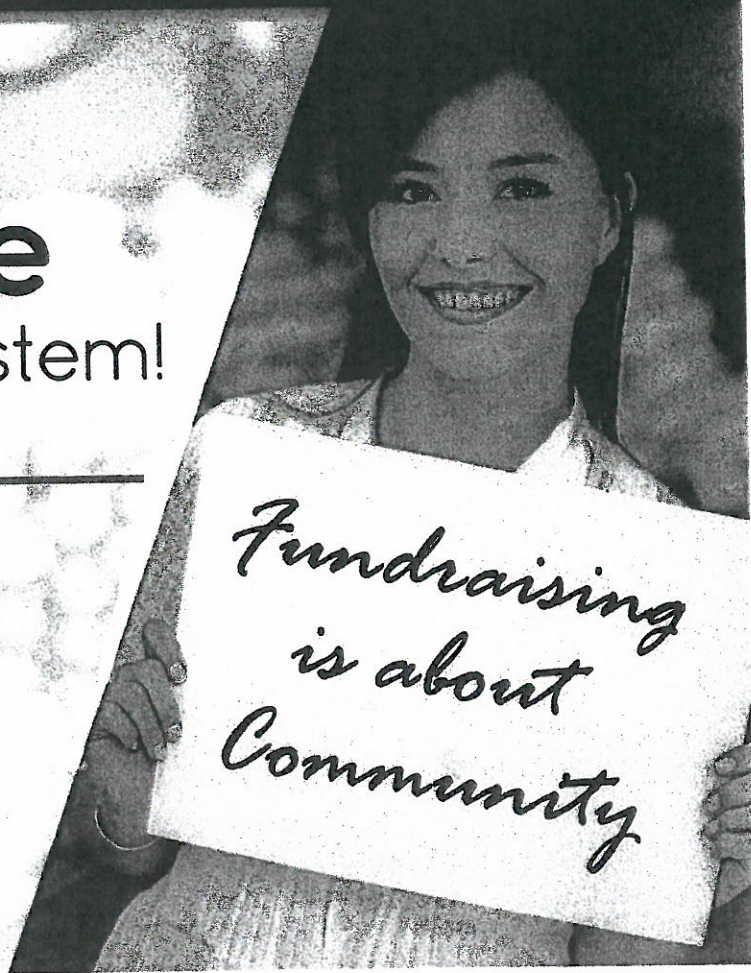


Create a **sustainable** fundraising ecosystem!

The Advershares program creates a sustainable charitable ecosystem, we're not just a short-term fundraising event. We utilize the power of **social sharing** to build **social circles** around your organization and combine that with a fun, innovative technology.

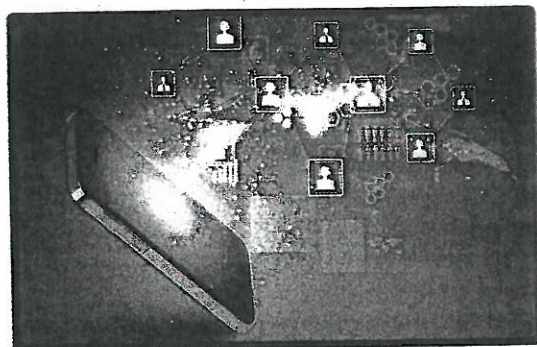
We also reward your supporters with cash-back for shopping local and online while you earn referral dollars that support your organization.



We're revolutionizing fundraising for today's economy

It's a super simple process that yields extraordinary results. Get started today!

<p>1 Sign Up at advershares.com and then invite your supporters.</p>	<p>2 We link your social circles together with your group at the center.</p>	<p>3 Your circles grow as people share, refer and shop locally.</p>	<p>SUCCESS You've built a sustainable fundraiser that WORKS!</p>
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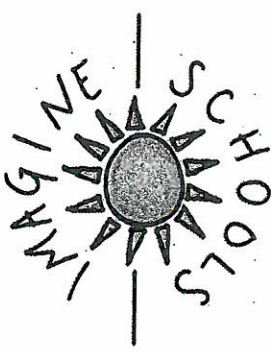
By combining your **community** with **social giving circles** - you have a **sustainable** fundraising ecosystem, not a single fundraising event.

Hyper-local marketing connects community with fundraisers

When you and your supporters join and shop in the Advershares network, you all earn cash-back while supporting your organization and the local community.

It's easy to find local merchant discounts, share with friends and build social circles with our mobile app.





Developing Character,
Enriching Minds.

School of Excellence Program Review

Imagine Palmer Ranch

Imagine Schools
School of Excellence Program Review



January 25, 2013

Dear Imagine Palmer Ranch:

We are honored to have been invited to your Imagine campus to serve this week on a School of Excellence Program Review. Thank you for your extra effort to ensure that we were not only equipped with the tools necessary to complete our review, but were also treated with great hospitality. Thank you for the warm welcome you have shown us.

We greatly appreciate the opportunity we had to listen to your areas of priority and focus, and to investigate each of the Six Measures of Excellence on your Imagine campus. We were delighted to witness the strong cooperative, supportive, and caring environment which exists amongst your teaching staff, as well as the high regard in which your parents hold your teachers.

Your commitment to excellence and integrity and your collective desire to invest in the students and families on your Imagine campus has made an impact on each of our team members.

As you review our commendations and recommendations contained in this report, we advise that you take special consideration of the following:

- Positive Atmosphere relative to increased professionalism as modeled by leadership
- Focused efforts on instructional initiatives geared toward added value for teachers and increased performance of students
- Increased opportunities for marketing the school

We wish you every success, and hope our efforts have been helpful. We look forward to working with you in the coming months to assist you in achieving success in these areas.

Sincerely,

Imagine Palmer Ranch School of Excellence Review Team



Imagine Schools
School of Excellence Program Review

School of Excellence Program Review Final Report Template

SCHOOL NAME: Imagine Palmer Ranch DATE: January 25, 2013

Imagine Schools Six Measures of Excellence	Commendations	Recommendations/Next Steps	Rating (HF/O/E/NE)
<p>Shared Values</p> <p>Team Member Lead: Jane Brunner</p>	<p>Integrity – Climate among teaching staff is positive, collaborative and supportive</p> <p>Justice – Tracking cards empower students to take ownership for their own behavior</p> <p>Fun – Six Measures Committees meet monthly with majority of staff members participating</p>	<p>Integrity – Make certain administrators are high profile in classrooms on a daily basis so teachers see tangible evidence of support</p> <p>Justice – Frequent walk-through observations, with constructive, specific feedback the next day, will equip teachers with useful ideas they can immediately implement in their classrooms</p> <p>More open communication regarding expectations for staff (including deadlines) should occur. Example: lesson plan/reflection binders are a “kind of” expectation but there is no accountability and all teachers have not been given information about how they should be completed.</p> <p>Fun – Six Measures Committees should now progress towards forming task forces for individual projects/activities with a designated Decision Maker who ensures that advice is sought from many sources, including other Imagine campuses, and the final decision should be communicated to the staff.</p>	Emerging



Imagine Schools
School of Excellence Program Review

Developing Character,
 Enriching Minds.

<p>Academic Growth Team Member Lead: Silka Cuba-Ortiz</p>	<p>Classroom management was evident in all classrooms Student engagement averaged 90% or higher in all classrooms Primary centers were exhibited during reading block on a consistent basis Anchor charts and student work were prominently displayed throughout primary classrooms</p>	<p>The establishment of professional development on all curriculum needs to be a high priority for all grade levels Academic Growth committee needs to form a task force with the purpose of creating a usable tool which has instructionally sound rationale with the advice from all grade levels. Institute a reading/math/science FCAT prep/boot camp based on the needs of the students (lowest 25% based on current data) Implement interactive word walls in all content area classrooms Personalizing classrooms to promote learning via the use of literacy-based and specific content rich visual aids that are teacher created Display non-graded student work throughout the building</p>	<p style="text-align: center;">Emerging</p>
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Developing character,
enriching minds.

Imagine Schools
School of Excellence Program Review

<p>Character Development Team Member Lead: BreAnne Kilmer</p>	<p>The creation and implementation of weekly character lessons shows a strong heart for teaching and reminding our students to be the best individuals they can.</p> <p>Consistently exhibiting smooth classroom transitions and hallway behavior with clear evidence of teacher modeling of expectations. Fostering an environment where teachers and students clearly exemplify positive interactions between each other and their peers.</p>	<p>Continue to work together to further implement the school wide weekly lesson plans.</p> <p>Increase interactive wall displays encouraging and celebrating the emphasis of character development both within the classroom and in the halls.</p>	<p>Operational</p>
<p>Parent Choice Team Member Lead: Carrie McLamar</p>	<p>Strong network for parental involvement</p> <p>Parents universally have positive support for teachers and are dedicated to the success of the school</p> <p>PTO is pro-active</p>	<p>PTO meetings should be scheduled at times that are more convenient for the majority of the parents and should be well advertised in advance</p> <p>Communication with parents regarding school events should be done in a variety of ways and expressed in a variety of mediums</p> <p>Parent Choice committee should investigate additional extra-curricular activities and to promote company partnerships and new parent interest</p>	<p>Emerging</p>
<p>Economic Sustainability Team Member Lead: Guy Platter</p>	<p>Economic Sustainability committee is diligent in finding ways to find supplemental resources for the school.</p>	<p>Economic Sustainability committee should work towards presenting information on the school's budget to the staff on a monthly basis.</p>	<p>Operational</p>



Developing Character,
Empowering Minds.

**Imagine Schools
School of Excellence Program Review**

<p>School Development Team Member Lead: Guy Platter</p>	<p>Middle School active in fundraising and demonstrating a desire to build traditions in the school. Strong relationship with local law enforcement as exhibited by streamlined dismissal process.</p>	<p>Seek advice from other campuses regarding low impact reductions in operating expenses to provide a larger projected surplus. Teachers and parents indicated a strong desire to articulate a "hook" for the school to better market to potential students and parents. Whole school focus on building traditions in all grades to generate excitement and sustained community.</p>	<p>Emerging</p>
<p>The Schools of Excellence Program Review Team recommends the following rating for Imagine Palmer Ranch: Emerging</p>			

**Imagine Schools
School of Excellence Program Review**



**Imagine Palmer Ranch – School of Excellence Team Program Review
Faculty/Staff - One-on-One Sessions**

Prompt: Faculty/Staff were asked what three things were going well at the school.

53	Staff/teams work well together
15	Parent involvement and parent communication with teachers
14	Apprentice Leader is a great resource and supportive
11	School leader
9	Character Ed program is school-wide and going well
9	Building is well maintained and clean
5	Students are happy
5	PTO fundraisers benefit school
4	Common Core implementation
4	Decision making happens more frequently/shared by more people
4	High expectations for student behavior
3	Middle School curriculum
3	New curriculum and journals
3	ESE team
3	School feels part of the community
2	Positive parents
2	Extra curricular activities/sports
2	Communication (calendar, pre-planned activities)
2	Curriculum guides from regional curriculum coach
2	Pre K program is great
2	School is growing and improving the organization
1	Creative use of time to get all assessments completed
1	Teachers go above and beyond
1	Arts are appreciated
1	Admin. discipline
1	Campus is accessible on weekends and late a night
1	Aftercare program
1	Increase of staff
1	Peer mentor program
1	Autonomy in the classroom/empowerment
1	Getting rid of Project Child
1	Reading and Writing workshops
1	Elementary and Middle School teachers cooperate/collaborate

**Imagine Schools
School of Excellence Program Review**



**Imagine Palmer Ranch – School of Excellence Team Program Review
Faculty/Staff - One-on-One Sessions**

Prompt: Faculty/Staff were asked what three things could be done to further improve the school.

24 – Support for teachers (PD) and new staff (routines, how to do email, HR, etc)
17 – Technology support
12 – Administration is not high profile in classrooms
10 – Administration unprofessionalism towards staff members
9 – Low expectations for completing reflection journals, no accountability, no teacher input into the format, last minute PD was done last Wed.
8 – Playground equipment needed for older students
6 – High elementary teacher turnover
5 – SWS team graphing is cumbersome
4– Need sports/after school activities
4 - Resources
4 – Need team meeting/common planning time
4 – General communication
4 – School leader not supportive
3 – No subs for Early Childhood staff members
3 – Concern with compliant service of students with IEPs
2 – Unclear job responsibilities and roles in the school
2- Stronger relationship within the administration
2- Dual relationships (relationship outside of school affecting in-school dynamics)
3- Vertical planning
2- Confidentiality in the front office
2 – PD needed on curriculum
1 – Tracking cards for middle school should expand to 3-5 th grades
1 – Clinic needs to be larger
1 – Small support group meetings needed for students
1 – Economic concerns
1 – Positive feedback to teachers needs to balance areas of improvement
1 – Loss of instructional time for non-educational activities
1 – Short turnaround time on some tasks (quick due dates)
1 – Decrease testing
1 – Grading consistency
1 – Tardy/absent rules not consistent for all students
1 – Need more whole school activities to help staff bond across grade levels
1 – Concerns regarding special treatment for staff children
1 – teacher burnout risk
1 – Curriculum support for upper grades is low
1 – Too many meetings after school
1 – Recess is only 15 minutes

**Imagine Schools
School of Excellence Program Review**



**Imagine Palmer Ranch – School of Excellence Team Program Review
Parents/Guardians - One-on-One Sessions**

Prompt: Parents/Guardians were asked what three things were going well at the school.

	5 - Great staff
	2 – Communication
	2 – Leadership support
	3 – Happy students
	1 – Advanced program
	1 - Guidance

**Imagine Palmer Ranch – School of Excellence Team Program Review
Parents/Guardians - One-on-One Sessions**

Prompt: Parents/Guardians were asked what three things could be done to further improve the school.

	4 – Concern with school losing staff and students due to not feeling welcome
	4 – Family volunteer opportunities have dwindled
	3 – Lunchroom noise
	3 – FCAT camp
	3– Communication is not timely and is always by email
	2 – PTO meetings not advertised or held consistently
	2 – Front desk confidentiality
	1 – Building
	1 – Celebrating student achievement
	1 – Quality of food
	1 – Playground
	1 – No longer can walk students to class
	1 – Need more electives for Middle School



Imagine Palmer Ranch School of Excellence Program Review Team

CHAIRPERSON

Guy Platter
Regional Director
Imagine Schools Indiana/Ohio Region
Guy.platter@imageschools.com

TEAM MEMBERS

Silka Cuba-Ortiz
Curriculum Specialist and Testing Coordinator
Imagine Chancellor
Silka.cuba-ortiz@imageschools.com

Carrie McLamar
Guidance Leadership Team
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BreAnne Kilmer
Middle School Team Lead/Yearbook Advisory
Imagine School at Land-O-Lakes
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Jane Brunner
Apprentice Leader/Title I Program Administrator
Imagine Life Sciences Academy East
Jane.brunner@imageschools.com



Governing Board Imagine School at Sarasota, LLC

Agenda

January 24, 2013

Location: 6220 McIntosh Road, Sarasota, FL 34238
Time: 12:00pm

1. Call to Order/Welcome
2. Notice of Public Posting of Meeting
3. Approval of Minutes from October 9, 2012 and December 10, 2012
4. New Business
 - a. Welcome Jill Gates, New Board Member
 - b. ~~Public Comment Policy~~
 - c. A+ Money
 - d. Budget Approval
5. Report from the Principal
6. Other Business
 - a. Board Training
7. Meeting Dates:
 - a. February 11, 2013
 - b. March 18, 2013
 - c. April 8, 2013
 - d. May 13, 2013

6220 McIntosh Road
Sarasota, FL 34238

(941) 923-1125 Fax, (941) 923-1124
www.ImagineSchoolsPalmerRanch.org



IMAGINE SCHOOL at Palmer Ranch



Alisa Wright, Principal

AJ Brown, Asst. Principal

8. Adjourn Meeting

6220 McIntosh Road

Sarasota, FL 34238

(941) 923-1125 Fax. (941) 923-1124

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IMAGINE SCHOOL at Palmer Ranch



Alisa Wright, Principal

AJ Brown, Asst. Principal

**Governing Board
Imagine School at Sarasota, LLC
Minutes
January 24, 2013**

Location: 6220 McIntosh Road, Sarasota, FL 34238
Time: 12:00pm

1. **Call to Order/Welcome**- Meeting was called to order by Jason Hughes and a Motion was made by Jason to start the meeting, a 2nd by Todd Menke.

2. **Notice of Public Posting of meeting** by Todd Menke, 2nd by Jason Hughes

3. Motion to approve minutes from January 24, 2013 made by Todd Menke, 2nd by Jason Hughes.

4. **New Business**
 - a. Motion to put into place Public Comment Policy made by Todd Menke, 2nd by Stephanie Kempton.

 - b. Alisa Wright gave report on A+ Money, the staff survey results requested that money would be divided amongst staff that were at ISPR year and are still employed by an Imagine School. Motion made by Jason Hughes to approve, 2nd by Todd Menke. Stephanie Kempton opposed this motion.

 - c. Budget Approval-The updated budget was presented, a motion was made by Todd Menke to approve, 2nd by Jason Hughes.

6220 McIntosh Road

Sarasota, FL 34238

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5. Report from the Principal

- a. School of Excellence visit – Alisa will review the report at the next meeting.
- b. Due to the events at Sandy Hook we have met with a Sheriff's Deputy and the following changes

- Increased staff at school opening time
- Badging all parents entering the school at arrival/dismissal
- Seeking quotes from Security Companies

- c. Re-enrollment
 - 95% of students returned forms
 - 99% of ISPR students will be returning

6. Other Business

- a. Public Comment – Stephanie Kempton reported

-ISPR Task Forces are available to parents, Karl Huber is the parent Liaison.

-Todd Menke – has a plan to help with Principal/Parent Communications

- b. Chris Watson – Goals for the School

1. Maintain School Grade – 2nd year as an "A" school would give us a 15 yr. charter.
2. Secure Economic Sustainability & Enrollment
3. More Parent Communication w/ teachers & Principals.

6220 McIntosh Road

Sarasota, FL 34238

(941) 923-1125 Fax. (941) 923-1124

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A+ Money Q&A

Who decides how the award will be used?

The legislation gives the award school's staff and school advisory council (SAC) the authority to make this decision. If a charter school does not have a SAC, the governing body of the school should participate in the council's stead, along with the staff of the school, in determining the use of funds.

What process should the school's staff and SAC use to make this decision?

The legislation does not specify a decision making process. Therefore, guidelines for determining how the decision is made by the school's staff and SAC and for resolving any conflicts in reaching the decision may be developed at the local level. Determining a step-by-step process ahead of time may help expedite making this decision.

How may the funds from this program be used?

Funds are to be used for nonrecurring bonuses to the faculty and staff, nonrecurring expenditures for educational equipment or materials, or for temporary personnel to assist the school in maintaining or improving student performance (Section 1008.36(5), F.S.). The school's staff and SAC must decide to spend these funds on one or any combination of these three purposes. If the school's staff and SAC decide to give bonuses, they determine who is to receive them and how much each person will receive. The decision on the use of funds must not conflict with any district or state policies on expenditure of funds.

Is there a deadline for the decision on the use of these funds?

Yes. Section 1008.36(4), F.S., states that if the school's staff and the school advisory council cannot reach agreement by February 1, the awards must be equally distributed to all classroom teachers currently teaching in the school.

A+ Money Final Survey

SurveyMonkey

Please choose how you would like our A+ money to be spent from the choices below. The options listed received the most votes from our original survey. Surveys must be completed by noon on Wednesday. Thank you in advance for your speedy response!

All funds should be rewarded to part time/full time staff members who were at ISPR during the 2011-2012 school year who have remained at ISPR or are currently teaching at an Imagine School.

62.5%

30

Funds should be divided among current faculty/staff at ISPR.

37.5%

18

Answered Question

48

Skipped Question

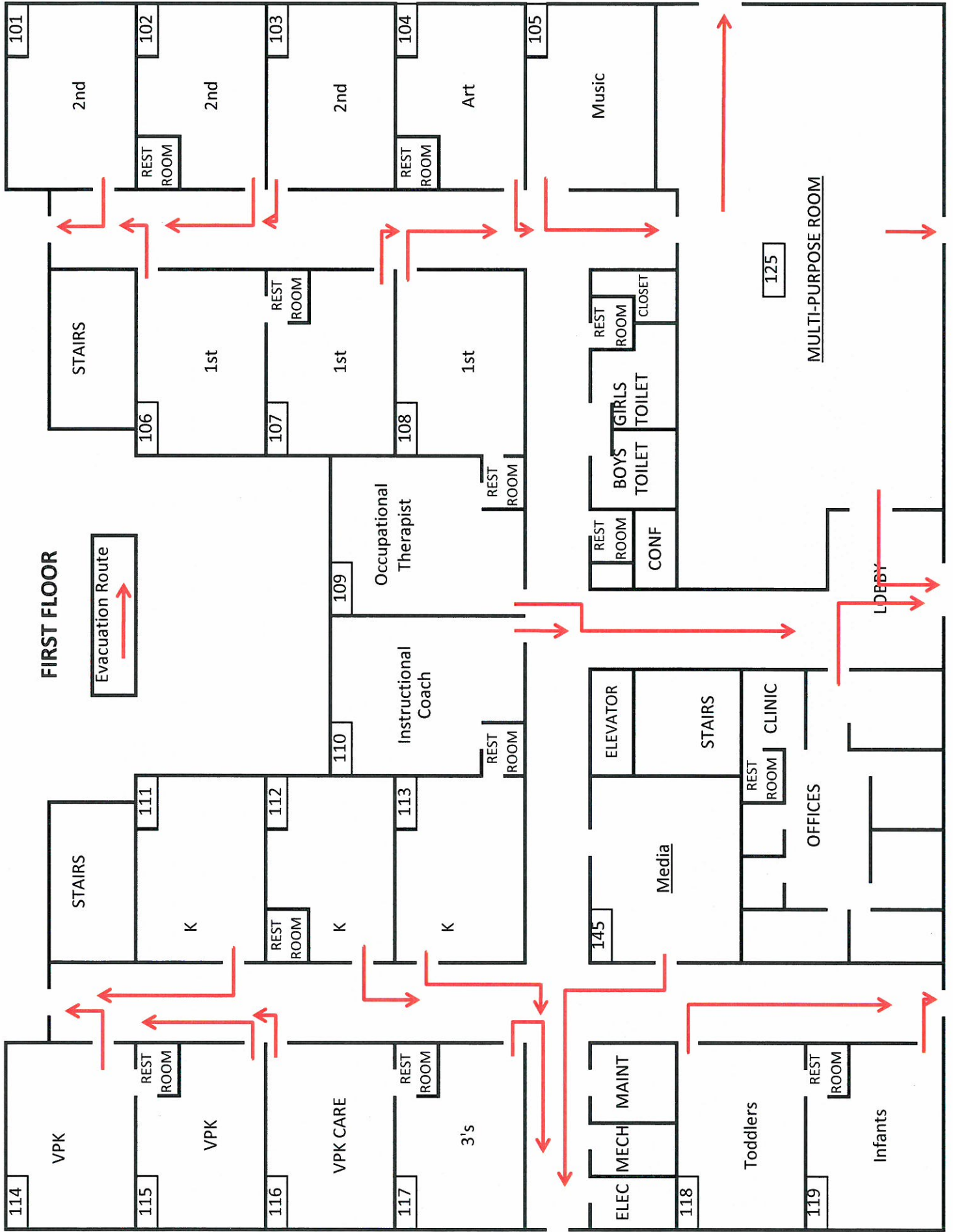
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Imagine Schools Palmer Ranch	FY2013	% of Rev
Federal, State & Local Revenue		
FEFP	3,602,064	70.9%
Charter Capital Outlay	188,747	3.7%
Misc State Revenue	785,082	15.5%
Transportation	72,081	1.4%
<i>Subtotal</i>	4,647,975	91.5%
Supplemental Fee Revenue		
VPK State	92,937	1.8%
VPK Fees	-	0.0%
Preschool Revenues	205,632	
Before & After Care	64,432	1.3%
Food Service	-	0.0%
Other Local Revenues	69,466	1.4%
<i>Subtotal</i>	\$432,467	8.5%
Grants		
Start Up Grants	-	0.0%
Other Grants	-	0.0%
<i>Subtotal</i>	-	0.0%
Total Revenues	5,080,442	100.0%
Salaries & Benefits	2,672,283	52.6%
Facility Expenses (Rent)	1,309,025	25.8%
Direct Educational Expenses		
Direct Ed K-12	101,111	2.0%
Pre K	2,847	0.1%
Before & After Care	1,555	0.0%
Food Service	-	0.0%
Other Supplies/Expenses	24,553	0.5%
Equipment Use Fee (FF&E)	57,936	1.1%
Facility Operating Expenses	142,171	2.8%
Faculty Development	4,883	0.1%
Marketing	9,623	0.2%
General & Administrative		
Interest Expense	14,987	0.3%
Depreciation Expense	-	0.0%
Insurance	49,343	1.0%
Board Expenses	12,462	0.2%
Other G&A	62,236	1.2%
Other School Services		
Travel	5,426	0.1%
Field Trips	(5,944)	-0.1%
Transportation	49,404	1.0%
PT/OT/Speech	13,380	0.3%
Other Contracted Services	111,129	2.2%
Total Direct Costs	4,638,410	91.3%
Imagine Schools Costs		
Indirect Costs	458,747	9.0%
Total Indirect Costs	458,747	9.0%
Start Up Fee Repayment	30,000	0.6%
Contingency		0.0%
Total Expenses	5,127,104	100.9%
Operating Surplus or (Loss)	(46,662)	-0.9%

PLR FY13 Final Budget 011513.xls, Annual Budget

4/24/2013

Fund Balance Prior Year - 153,297
 Projected Year End Balance - 11,627



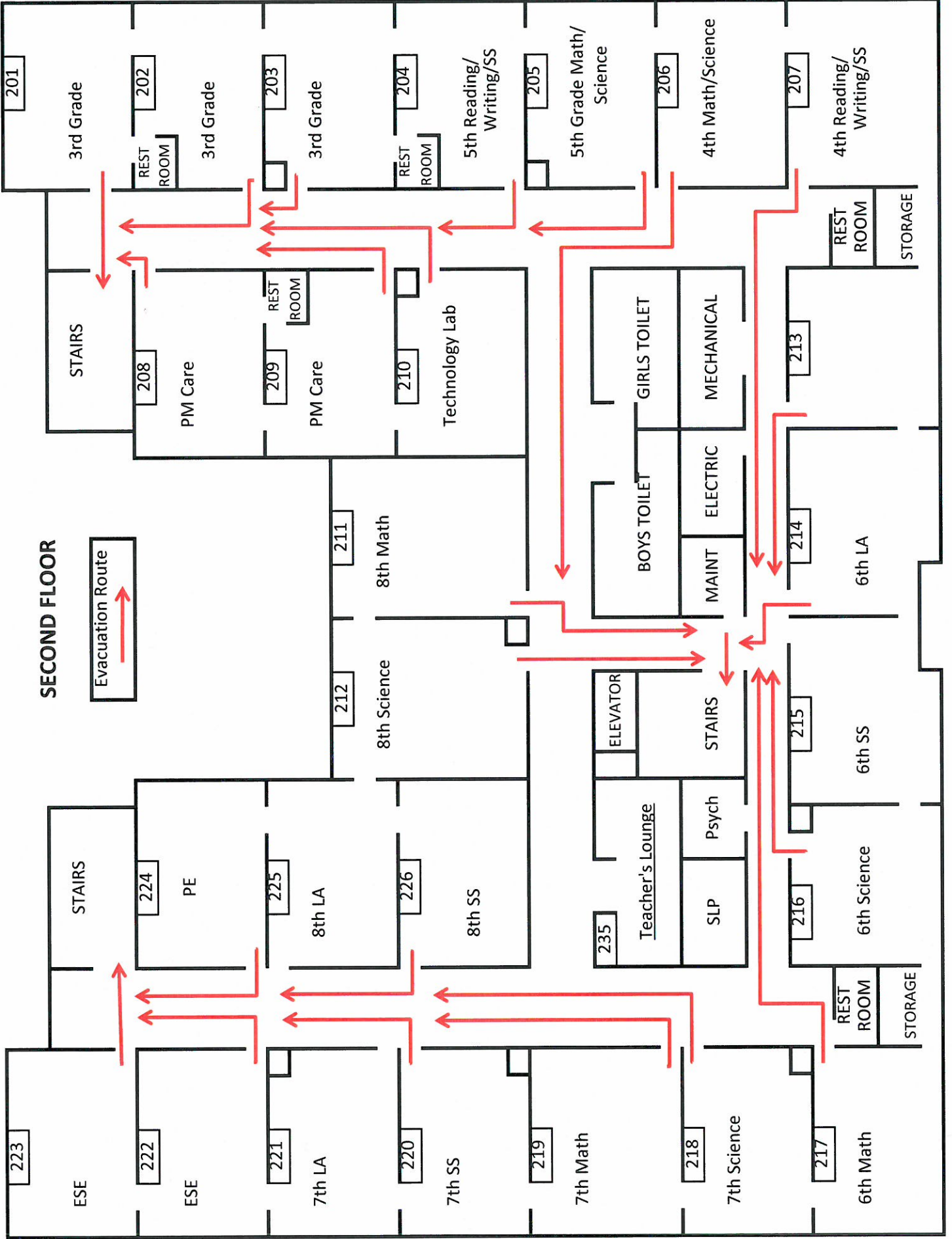
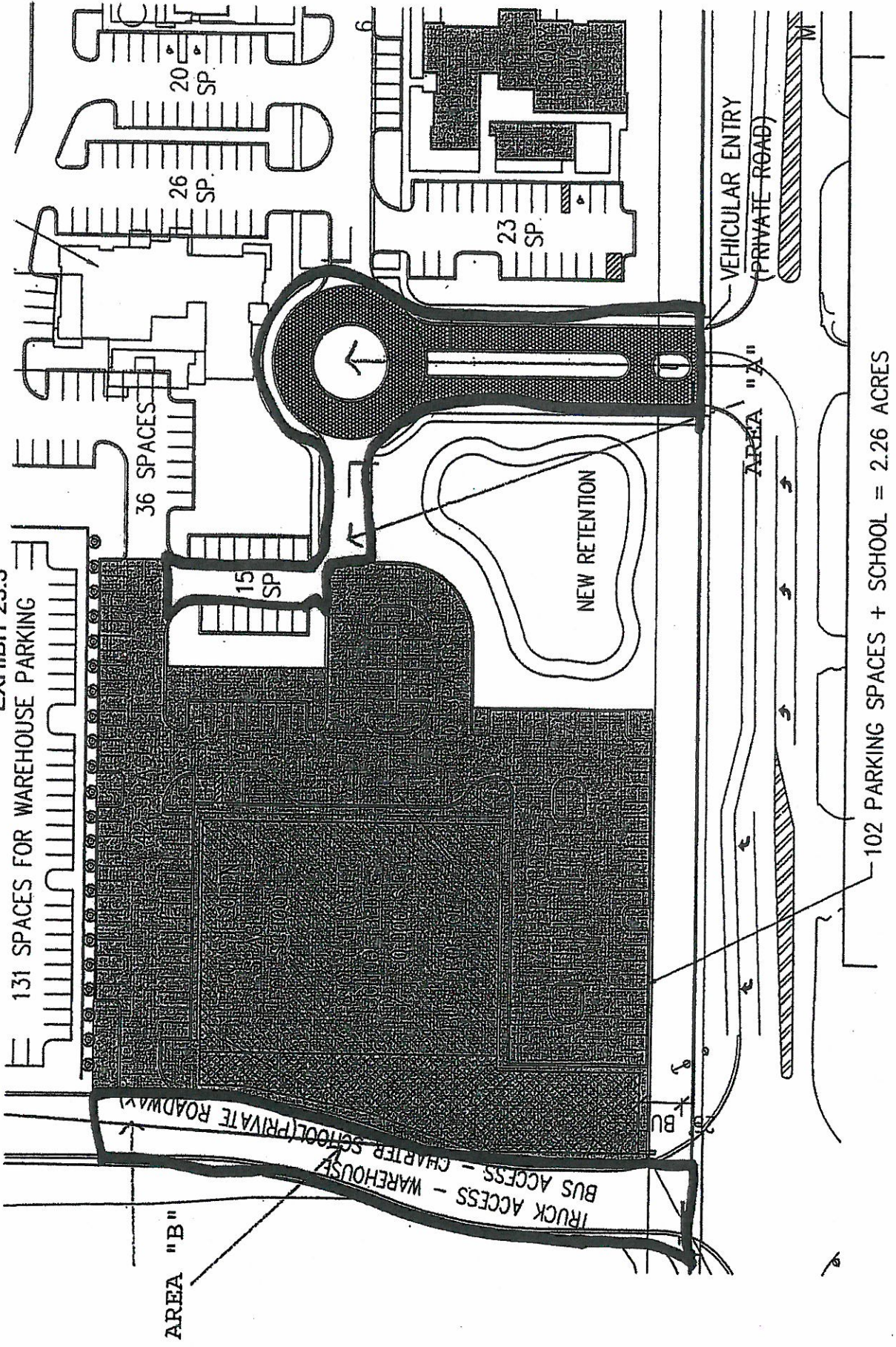


EXHIBIT 23.3



131 SPACES FOR WAREHOUSE PARKING

36 SPACES

15 SP

26 SP.

20 SP.

23 SP.

NEW RETENTION

VEHICULAR ENTRY (PRIVATE ROAD)

AREA "A"

AREA "B"

TRUCK ACCESS - WAREHOUSE
BUS ACCESS - CHARTER SCHOOL (PRIVATE ROADWAY)

102 PARKING SPACES + SCHOOL = 2.26 ACRES

LEASE AGREEMENT

THIS LEASE AGREEMENT, (this "Lease"), is dated as of August __, 2008, by and between MERIDIAN DEVELOPMENT GROUP, LLC, a Florida limited liability company, ("Landlord"), and SCHOOLHOUSE FINANCE, LLC, a Virginia limited liability company, ("Tenant").

ARTICLE 1 BASIC LEASE INFORMATION, DEFINITIONS AND EXHIBITS

The following basic lease information, definitions and exhibits are incorporated into and made a part of this Lease. Each reference in this Lease to any information, definitions and exhibits contained in this Article shall mean and refer to the information, definitions and exhibits hereinafter set forth.

- (a) **Project:** The property consisting of approximately 2.39 acres known as the Meridian Business Center at 6100 McIntosh Road, Sarasota County, Florida, together with any additional building(s), the land and any Common Areas, parking areas and other improvements thereon, which is legally described on Exhibit "A" hereto, (the "Land"), according to the Site Plan set forth on Exhibit "B" hereto.
- (b) **Phase I Premises:** The approximately 26,000 square feet of air conditioned space on the first floor of the building at 6220 McIntosh Road, Sarasota, Florida 34239, which Landlord will build, as part of Landlord's Work (as hereinafter defined) a school building of approximately 26,000 square feet, including no less than 21 classrooms, a media center of approximately 1500 square feet, a multipurpose room/cafe/tertia with serving area of approximately 4,000 square feet, administrative offices, necessary restrooms and other improvements, to be completed on or before July 31, 2009, the boundaries and location of said Premises being more particularly highlighted and outlined on the Site Plan and the Floor Plan/Diagram Showing Premises attached hereto and made a part hereof as Exhibit "C" and as described on the Scope and Specifications (including, among other things, Tenant specifications, equipment and finishes) that form Schedule 1 to Exhibit "D" hereto.
- (c) **Phase II Premises:** The approximately 26,000 square feet of air conditioned space on the second floor of the building at 6220 McIntosh Road, Sarasota, Florida 34239, which Landlord will build out and complete, as part of Landlord's Work (as hereinafter defined) to be fully integrated with the Phase I Premises into a completed school building of approximately 52,000 square feet. Phase II Premises will include at least 24 additional classrooms, an additional approximately 1,400 square foot multipurpose room and necessary restrooms, to be completed on or before July 31, 2010, said Premises being more particularly highlighted and outlined on the Floor Plan/Diagram Showing Premises to be attached hereto and made a part hereof as Exhibit "C" and as described on the Scope and Specifications (including, among other things, Tenant specifications, equipment and finishes) that form Schedule 1 to Exhibit "D" hereto. Phase I and Phase II Premises together referred to herein as the "Premises".
- (d) **Tenant Allowance:** As part of delivery of the Premises to Tenant, on or before Rent Commencement Date for Phase I and Phase II respectively, Landlord shall include the payment to Tenant of an allowance for Tenant improvements of Ten Dollars and (\$10.00) per square foot of Premises (Two Hundred Sixty Thousand Dollars (\$260,000.00) each for Phase I and Phase II) for Tenant's use preparing the Premises for start up and operations, including, but not limited to, the purchase and installation of fixtures, equipment and technology. In the event Landlord fails to make the Tenant Allowance payment to Tenant on or before the Rent Commencement Date for Phase I or Phase II, as the case may be, then notwithstanding anything to the contrary herein, Tenant shall have the right, without notice or demand, of offset against the next installments of Rent due until such time as the balance of the Tenant Allowance is paid to Tenant or the full Tenant Allowance has been offset.
- (e) **Common Areas:** Any existing or future improvements, equipment, areas and/or spaces designated by Landlord from time to time for the non-exclusive, common and joint use or benefit of Landlord, Tenant and other tenants, occupants and users of the Project, if any, all as set forth on the Site Plan.
- (f) **Lease Term:** The Original Lease Term and, if the option(s) contained herein, if any, is (are) properly exercised by Tenant, the Option Term(s)
- (g) **Original Lease Term:** Fifteen (15) Lease Years commencing on the Rent Commencement Date.
- (h) **Effective Date:** August __, 2008.
- (i) **Rent Commencement Date:** August 1, 2009 or The Completion Date (as hereinafter defined).

**SCHEDULE 1
TO EXHIBIT "D"**

**SPECIFICATIONS FOR PHASE I AND PHASE II OF IMAGINE SCHOOL AT Palmer
Ranch**

**Landlord Work specification, scope and equipment by area as clarified and defined by the
Site Plan and Floor Plan/Diagram attached to the Lease as Exhibit "B" and Exhibit "C"
respectively.**

**A. Specifications for Typical Classroom (at least 45 total classrooms of approx. 700
sq.ft. as per Plan)**

1. Ceilings – 2' x 4' Suspended with lay-in tile.
2. Walls – Drywall painted with texture finish
3. Flooring – VCT with 4" vinyl base.
4. Interior Doors – Painted hollow metal frame with clear finish wood door and narrow vision window.
5. Exterior Doors - Painted hollow metal frame door and narrow vision window or doors consistent with originally designed doors.
6. Lighting – 2' x 4' fluorescent fixtures with Acrylic lens with dual switching to regulate lights.
7. Sills – Plastic Laminate
8. Outlets – 2 duplex receptacles per wall.
9. Fire alarm system to comply with code
10. Circuitry to handle small refrigerators and microwave oven
11. Data / Communication – 6 data rough-in location (teacher and 5 student stations)(number of jacks to be determined) Project CHLD requires six computers per classroom.
12. Install wiring for telecommunications and data to support 6 computers (teacher plus 5 student stations) or alternatively provide wireless system reasonably acceptable to Tenant including all routers and other required equipment needed in lieu of hard wired system.
13. Classrooms will have phone/intercom systems
14. Storage Cabinets – Provide three (3) 84" high melamine laminated storage cabinets, 2 cabinets @ 24"W and 1 cabinet at 30"W. Cabinets shall have adjustable shelves with metal brackets.
15. Cubbies-Classrooms (K-3, 1st floor classrooms) to receive 20 standard set-up installed 36" AFF (see attached diagram)
16. Cubbies-Classrooms (4-8, 2nd floor classrooms) to receive 24 standard set-up installed 48" AFF (see Cubby Diagram attached hereto as Attachment 1 of this Schedule 1)
17. Wood blocking in wall for T.V. monitor brackets with power/data outlets adjacent
18. Tack Boards –2 Each 48" x 48"(location within room to be determined) and 20 L.F. of tack strip above marker and tack Boards
19. White Boards -2 Each 48" x 96" (location within room to be determined)
20. Prep wall (not ceiling) for Smart Boards
21. Classrooms lay-out in clusters (grouping of grades i.e. K, 1st, & 2nd and 3-5) for Project CHLD program with connecting doors in first floor classrooms
22. Classrooms 1, 2, 4, 5, 7, 8, 10, 11, 13, 14, 16 and 17 will share small restrooms as per Plans (Pre-K classrooms will also share a restroom as per Plans)
23. Classroom size of approx. 650 square feet pursuant to the Plans

B. Office Area

1. Ceilings – 2' x 4' Suspended with lay-in tile
2. Walls – Drywall painted with texture finish
3. Flooring – Carpet with 4" vinyl base
4. Hallway Doors – Painted hollow metal frame with clear finish wood door and narrow vision window.
5. Lighting – 2' x 4' fluorescent fixtures with Acrylic lens.
6. Sills – Plastic Laminate
7. Outlets – 2 duplex receptacles per wall.
8. Data / Communication – 2 data locations (number of jacks to be determined)
9. Phone/intercom systems.
10. Tack Boards –2 each 48" x 48,
11. 1: 4x4 marker boards.
12. Provide wiring and jacks for data and telecommunication for at least two computers in each office and the reception area. Tenant will furnish and install all necessary data and telecommunications equipment. Provided however, if wireless system for data is installed, then Landlord will provide all routers and wireless equipment needed to replace a hard wired system
13. Office area size approx. 1000 square feet pursuant to the Plans

C. Media Center/Library

1. Ceilings – 2' x 4' Suspended with lay-in tile.
2. Walls – Drywall painted with texture finish
3. Flooring – VCT with 4" vinyl base.
4. Hallway Doors – Painted hollow metal frame with clear finish wood door and narrow vision window.
5. Lighting – 2' x 4' fluorescent fixtures with Acrylic lens with dual switching to regulate lights.
6. Sills – Plastic Laminate
7. Outlets – 2 duplex receptacles per wall.
8. Fire alarm system to comply with code
9. Circuitry to handle small refrigerators and microwave oven
10. Data / Communication – 6 data rough-in location (number of jacks to be determined)
11. Install wiring for telecommunications and data to support 6 computers or alternatively provide wireless system reasonably acceptable to Tenant including all routers and other required equipment needed in lieu of hard wired system.
12. Install phone/intercom systems
13. Storage Cabinets – Provide three (3) 84" high melamine laminated storage cabinets, 2 cabinets @ 24"W and 1 cabinet at 30"W. Cabinets shall have adjustable shelves with metal brackets.
14. Wood blocking in wall for T.V. monitor brackets with power/data outlets adjacent
15. Tack Boards –2 Each 48" x 48", (location within room to be determined) and 20 L.F. of tack strip above marker and tack Boards
16. White Boards –2 Each 48" x 96" (location within room to be determined)
17. Prep wall (not ceiling) for Smart Boards
18. Room size approx. 1000 square feet pursuant to the Plans attached hereto

D. Corridors/Classroom Entries

1. Ceilings – if interior then 2' x 4' Suspended with lay-in tile.

2. Walls – if exterior then existing finish, if interior then Drywall Painted textured finish.
3. Flooring – if exterior then existing concrete, if interior then VCT with 4" vinyl base.
4. Hallway Doors – Painted hollow metal frame with clear finish wood door and narrow vision window.
5. Lighting – 2' x 4' fluorescent with Acrylic lens.
6. Tack-strips location to be determined by lay-out
7. Drinking fountains near each entry to restrooms.
8. One 48x48" tack board located outside each classroom

E. Restrooms (1 restroom per 2 classrooms in at lease 16 first-floor classrooms)

1. Ceilings – drywall painted smooth finish
2. Walls – Drywall painted smooth finish.
3. FRP panels on wet walls(walls with plumbing fixtures)
4. Flooring – Vinyl composition tile with 4" vinyl base.
5. Hallway Doors – Painted hollow metal frames with clear finish wood door.
6. Lighting – 2' x 4' fluorescent with Acrylic lens.
7. Accessories – (1) Paper towel dispensers, (2) soap dispensers, (2) 2' x 3' mirrors, metal modesty partition stalls, grab bars, toilet paper holders.
8. Plumbing Fixtures – water closets and urinals with electronic sensors; sinks with timed push type valve.
9. Electric hand dryers in student and faculty restrooms. Faculty restrooms will have paper towel dispensers provided by Tenant vendor.
10. Soap dispensers will be foam type.
11. Toilet paper dispenser will be large type with four standard rolls provided by Tenant vendor.
12. Sanitary products in grades 4-8.
13. Sink/counter height adjust for small children in K-2nd grade restrooms.

F. Multi-Purpose Room

1. Ceilings – Tectum (or similar) fastened to bottom of trusses.
2. Walls – Drywall painted texture finish.
3. Flooring – VCT with 4"vinyl base.
4. Storage room for physical education equipment
5. Theatre lighting bar and power/technology infrastructure prep in ceiling
6. Portable stage.
7. Projection screen above portable stage
8. Storage room for physical education equipment and portable stage
9. Install interior protective screens over windows
10. Room size approx. 2800 square feet pursuant to the Plans attached hereto

G. Food Service Room and Equipment (adjacent to multi-purpose room)

1. Ceilings – 2' x 4' Suspended with lay-in tile with vinyl finish.
2. Walls – Drywall painted smooth finish.
3. Flooring – VCT with 4"vinyl base
5. Hallway Doors – Painted hollow metal frames with clear finish wood door.
6. Lighting – 2' x 4' fluorescent with Acrylic lens.
7. Serving counters per Plans with formica tops.
8. Refrigerator/Chiller - 2 door Reach In - 54" W 36" W 83" H; 115 V – Cut sheets and pricing to be provided by Tenant for Landlord approval.
9. Sandwich Prep Table - 27"W 29 1/4 D 41 1/2H; 115 V – Cut sheets and pricing to be provided by Tenant for Landlord approval.

10. Heated Holding Cabinets (2) - 70" H 28" W 33 " D ; 120 V – Cut sheets and pricing to be provided by Tenant for Landlord approval.
11. Design criteria: Sneeze guard on steam tables (the tables are built or prepared properly when guard is ordered at the same time as table). – Cut sheets and pricing to be provided by Tenant for Landlord approval.
12. Kitchen style dual stainless steel sink with count and lever/handles and NOT timed handles
13. Room size approx. 150 square feet pursuant to the Plans attached hereto

Note: An allowance of \$15,000 will be provided by Landlord for Items 8, 9, 10, and 11 as described below.

H. Mechanical/Storage Room

1. Plumbing – Service sink with FRP wall protection at janitor's area.
2. Ceilings – gypsum board attached to roof trusses.
3. Walls – Drywall painted texture finish.
4. Flooring – VCT with 4" vinyl base.
5. Hallway Doors – Painted hollow metal doors & frames.
6. Lighting – 2' x 4' fluorescent with Acrylic lens.

I. Mechanical System

1. Existing Systems upgraded/replaced/repared as necessary to meet code.
2. Control will be by zones – "banks of classrooms"; using thermostats and averaging sensors
3. Computer room will have a split system, supply air from two separate units
4. Supply air will be ducted into spaces
5. Return air will be plenum

J. Exterior Building Shell

1. Building enclosure material, as per construction plans for the project to be provided by Landlord (the "Construction Plans"), attached hereto as Attachment 2 of this Schedule 1
2. Windows – as per Attachment 2 of this Schedule 1
3. Exterior Doors – as per Attachment 2 of this Schedule 1
4. Roof- as per Attachment 2 of this Schedule 1
4. Hose bibs on all building elevations

K. Site Improvements

1. Includes complete development and construction of site utilities (storm sewer, sanitary sewer, water, gas), parking areas, play area and drives as per Site Plan.
2. Allowances included for all landscaping and site lighting.
3. Allowance for signs as per N. below
4. Allowance for Perimeter Fencing as set forth in Site Plan
5. Dumpster enclosure included.
6. Site lighting timers
7. Flagpoles- three (3) (Imagine, Federal and State)

M. Play Areas

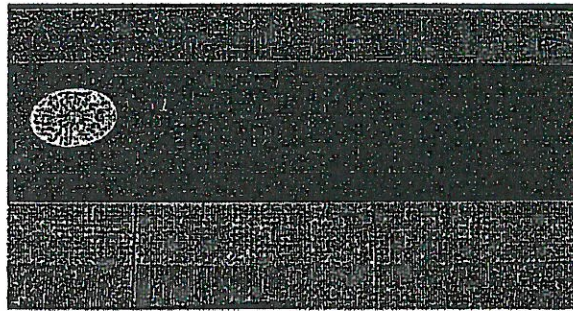
1. No athletic fields
2. Fenced play area with appropriate ground cover as per Site Plan

3. Allowance included for soft surface base of play area (approximately 2,500 square feet) as per Site Plan
4. New playground equipment, allowance of \$35,000

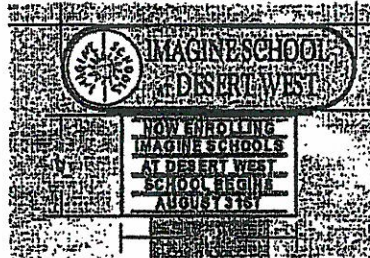
N. Signage (subject to regulatory approval)

1. Large Sign on the Building will include the Name of School and Imagine Logo along the roof line above the awning with lights situated to illuminate it at night. The sign will contain the Imagine School "sun" logo and contain the following words on one line in large block caps: "IMAGINE SCHOOL AT Palmer Ranch"

The photo below is for exemplary purposes only



2. At the entrance of the School driveway an internally lit marquee that will permit the school to change the letters to provide updated information about the school. Sign will include the Imagine Logo and Name: "Imagine SCHOOL AT Palmer Ranch" logo and 4 to 5 lines for removable letters. Preferred marquee dimensions would be similar to the sample below.



3. At the entrance to the Development Tenant's sign will occupy the Tenant's Proportionate Share (as defined herein) of the Landlord's sign for the Development and will include the name "Imagine School at Palmer Ranch" along with the Imagine logo if possible.

O. Change Order Costs. Any additional cost caused by the net result of all change orders to the scope and specifications herein which are approved by Tenant shall be paid as specified in this section. Any increased cost up to the amount of One Hundred Eighty Thousand Dollars (\$180,000) shall be paid by Landlord, but the annual Base Rent

otherwise payable as of the Rent Commencement Date shall be increased by the sum that is nine percent (9%) of said increased cost. If the net change order cost increases for the Premises exceeds One Hundred Eighty Thousand Dollars (\$180,000), the amount of such excess between One Hundred Eighty Thousand Dollars (\$180,000) and Three Hundred Sixty Thousand Dollars (\$360,000) shall be deducted from the Tenant Allowance provided for in the Lease and any amount of such change order costs in excess of Three Hundred Sixty Thousand Dollars (\$360,000) shall be paid by Tenant in cash within thirty (30) days after Rent Commencement. Any amounts added to Base Rent pursuant to this section shall escalate at the same time and by the same percentage as the remainder of the Base Rent. For the avoidance of doubt any amounts in excess of the allowances described above shall be treated as additional costs generated by change orders.

Imagine School at Palmer Ranch

New Student Document Checklist

This registration packet includes the following documents for your information:

- Information about ordering school uniforms

The following documents **must be completed** and returned to the school for each student registering:

- Student Registration Form
- Imagine School at Palmer Ranch Student Application
- Copy of Birth Certificate (original birth certificate must be reviewed by the school)
- Florida Certificate of Immunization (blue DH form 680)
- Physical dated within the last 12 months, signed by the doctor
- Health History Card
- Emergency Card (signed & dated)
- Home Language Survey
- Proof of Address, if moved recently (utility bill, lease or notarized from person family is living)
- Copy of Individual Education Plan (IEP), if applicable
- Authorization for Release of Student Records (if student is transferring from another school)
- School Registration Disclosure Form
- Student Residency Questionnaire
- Media Release Form

If custody conditions exist:

- Court Ordered documents of custody if child does not live with both parents
OR
- Non-marital Status Form if child live with only one natural parent who never married other parent
OR
- Signed note from parent stating he/she is custodial parent

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
STUDENT REGISTRATION FORM - PLEASE PRINT



Student ID #	School				
Entry Date	Grade	Teacher/Team	Appt/Reg Date	Time	
<input type="checkbox"/> Address verification	<input type="checkbox"/> Birth certificate	<input type="checkbox"/> Language survey	<input type="checkbox"/> Bus number		
<input type="checkbox"/> Custody/work location	<input type="checkbox"/> Immunizations	<input type="checkbox"/> Reassignment	<input type="checkbox"/> Car/Walk/Bike		
<input type="checkbox"/> Custody letter	<input type="checkbox"/> Physical	<input type="checkbox"/> Bin number	<input type="checkbox"/> After-school care		

Special custody/health problems we should be aware of

Student legal name - Last	Jr., III, Etc.	First	Middle	Entering Grade
Home phone		Unlisted <input type="checkbox"/> YES <input type="checkbox"/> NO	AKA/Nickname	
Street address - Apt. no.		Mailing address - Apt. no. - if different		
City/State/Zip		City/State/Zip		
Student social security number	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Birth place - City and state or country	Born in the U.S. ? <input type="checkbox"/> YES <input type="checkbox"/> NO
Ethnicity: Hispanic/Latino Origin? <input type="checkbox"/> Yes <input type="checkbox"/> No (Explanation on back of form)		Number of full years in U.S. schools		If NO, date entered the U.S.
Race - Please check all that apply				
<input type="checkbox"/> American Indian or Alaska native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White				

Student lives with Both parents Mother only Father only Parent and step parent Other

Name	Name
Relationship	Relationship
Phone Home _____ Cell _____	Phone Home _____ Cell _____
Work _____	Work _____
Email	Email

Emergency contacts and phone - Other than parent/guardian

<u>Name</u>	<u>Relationship</u>	<u>Home Phone</u>	<u>Cell Phone</u>	<u>Work Phone</u>	<u>Pick-up Y or N</u>

Name of Last School or Pre-School Attended	This school was a	Was student ever retained? <input type="checkbox"/> YES <input type="checkbox"/> NO
Address	<input type="checkbox"/> Sarasota County Public School	
City	<input type="checkbox"/> Public school outside Sarasota County	If YES, what grade level _____
State/Territory	<input type="checkbox"/> Private school within USA	Was student ever enrolled in Sarasota County? <input type="checkbox"/> YES <input type="checkbox"/> NO
Country	<input type="checkbox"/> Home Ed.	
Zip Code	<input type="checkbox"/> Never enrolled/Out of country	

Has student been in any special program? YES NO **If YES, please check the appropriate program(s) Is placement current?** YES NO

<input type="checkbox"/> Specific Learning Disability	<input type="checkbox"/> Other Health Impairment	<input type="checkbox"/> Deaf or Hearing Impairment	<input type="checkbox"/> Visual Impairment	<input type="checkbox"/> ESOL
<input type="checkbox"/> Speech or Language Impairment	<input type="checkbox"/> Autism	<input type="checkbox"/> Orthopedic Impairment	<input type="checkbox"/> Gifted	<input type="checkbox"/> Dropout
<input type="checkbox"/> Emotional Disturbance	<input type="checkbox"/> Mental Retardation	<input type="checkbox"/> Traumatic Brain Injury	<input type="checkbox"/> Other	

Participation prior to Kindergarten - (check one)

<input type="checkbox"/> (C) Title 1 Prekindergarten	<input type="checkbox"/> (F) Fee for Service	<input type="checkbox"/> (L) Readiness Program Operated by Local Coalition	<input type="checkbox"/> (T) Teenage Parent Program
<input type="checkbox"/> (D) Prekindergarten Program for Children with Disabilities	<input type="checkbox"/> (H) Head Start	<input type="checkbox"/> (M) Migrant Prekindergarten	<input type="checkbox"/> (V) Voluntary Pre-K
		<input type="checkbox"/> (N) None (did not participate in Prekindergarten program)	<input type="checkbox"/> (Z) Not Applicable (student is not a Kindergarten student)
		<input type="checkbox"/> (P) Private Prekindergarten Program	

Other children in family - Name	Age	Sex	Name of School	Grade Level

Parents are responsible for familiarizing themselves with the information in the district Student and Family Handbook. The handbook is available on-line at www.sarasotacountysschools.net. Printed copies of the handbook also are available by request at all school offices.

Release Information - Please see back of this form for explanations of each of the items below. Then indicate your wishes for your child.

- Directory Information** [for all grades]
Do you authorize the District to release Directory Information? YES NO
- Media Release** [for all grades]
Do you grant permission for this child to participate in media activities? YES NO
- Anonymous Survey** [for grades 6-12 ONLY]
Do you authorize the District to administer anonymous surveys to this child? YES NO
- Military Access for Recruiting** [for grades 9-12 ONLY]
Do you authorize release of information for military recruiting purposes? YES NO

Please indicate your choice. I would like report cards sent to my home in English and Spanish

Have parents/guardians moved within the last three years from another county/state due to working in agriculture, processing, packing, fishing, or dairy activities?
 YES NO

Florida Statutes 837.06 provides that whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her official duty shall be guilty of a misdemeanor of the second degree.

Parent/Guardian Signature _____

Date _____

Ethnicity and Race Data Collection

Schools are required by federal law to gather information about student race and ethnicity. For each student one ethnicity code and one or more race codes on the front of this form must be selected.

Ethnicity – Check “Yes” or “No” to indicate whether the student is Hispanic or Latino based on the following description: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Race – Check one or more of the racial groups below that apply to the student:

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

Asian: A person 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.

Black or African American: A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Permission to Release Student Information

Parents or guardians must grant permission for schools to release some classes of student information. Schools may release other classes of information unless parents request that it not be released. Please read each section below carefully to be certain you understand your choices and check the appropriate boxes in the Release Information section on the front of this form. Ask the school registrar if you have any questions or concerns about the permissions you are granting.

Directory Information: (All Grades)

Although student files are confidential, state law and district policy permit schools to publish the following “directory information” unless parents or guardians request that it not be released: **Name; address; participation in officially recognized activities and sports; weight and height, if an athletic team member; name of the most recent previous school or program attended; dates of attendance at schools in the district; grade level; diplomas and certifications received.**

If you permit your student’s directory information to be released, please check the “Yes” box on the front of this form.

If you do **not** permit your student’s directory information to be released, please check the “No” box on the front of this form or otherwise notify your school principal in writing within 30 days of the beginning of the school year.

If neither box is checked, the school will be authorized to release directory information about your student.

Media Release: (All Grades)

Reporters and photographers from news outlets such as newspapers and television stations may visit schools to photograph, videotape and/or interview students for stories about schools. School staff or volunteers also may photograph, videotape or interview students for school newsletters or websites. Images of students also may be transmitted during interactive video classroom instruction. Those images may be widely distributed by public or school media through the Internet.

Permission to publish a student’s photograph or interview also includes permission to identify the student by name, school, grade level or age and to describe the school activity in which the student was engaged when the image or comment was recorded.

Because school publications such as newsletters, yearbooks and athletic programs are routinely posted on websites, parent permission also must be granted for students to appear in those publications.

If you permit your student to be photographed, interviewed and identified in public and school media, check the “Yes” box on the front of this form.

If you do not permit your student to be photographed, interviewed or identified in public or school media, check the “No” box on the front of this form.

If neither box is checked, your student will not be permitted to be photographed or interviewed for publication.

Anonymous Student Behavior Surveys (Grades 6-12)

Annual surveys are administered in middle schools and high schools regarding high-risk behaviors among students. The information collected in the surveys is used to help improve programs to reduce high-risk behavior. Participation is voluntary. Individual students or classrooms are not identified on the surveys or in the published results.

Surveys may inquire about one or more of the following areas:

1. Political affiliations or beliefs of the student or student’s parent
2. Mental or psychological problems of the student or the student’s family
3. Sexual behavior or attitudes
4. Illegal, anti-social, self-incriminating or demeaning behavior
5. Critical appraisals of others with whom respondents have close family relationships
6. Legally recognized privileged relationships such as with lawyers, doctors or ministers
7. Religious practices, affiliations or beliefs of the student or parents
8. Income, other than as required by law to determine program eligibility

Parent permission is required for students to participate in anonymous student behavior surveys.

If you permit your student to participate in anonymous student behavior surveys, check the “Yes” box on the front of this form.

If you do not permit your student to participate in anonymous student behavior surveys, check the “No” box on the front of this form.

If neither box is checked, your student will not be permitted to participate in anonymous student behavior surveys.

Military Recruiting Information: (Grades 9-12)

Federal law requires schools to provide military recruiters access to high school students’ contact information, including their name, address and phone number, unless parents or guardians request that their student’s contact information not be released to military recruiters. Denying permission for contact information to be released to military recruiters will not block the release of directory information to other interested parties such as prospective employers, colleges or scholarship providers.

If you permit your student’s contact information to be released to military recruiters, please check the “Yes” box on the front of this form.

If you do not permit your student’s contact information to be released to military recruiters, please check the “No” box on the front of this form.

If neither box is checked, the district will be authorized to release your student’s contact information to military recruiters.



IMAGINE SCHOOL at Palmer Ranch



ENROLLMENT APPLICATION

(Please complete a separate form for each child attending)

STUDENT INFORMATION:

Student Name: _____ Today's Date: _____

Birthdate: _____ Gender: M F Date wishing to start classes: _____
mm/dd/yyyy

Grade Level Upon Entering Imagine (circle one): Infants 2's 3's PK KG 1st 2nd 3rd 4th 5th 6th 7th 8th

Current School of Attendance: _____

Sarasota County Districted School: _____

Are there other siblings planning to attend: Yes No

Please list all siblings planning to attend:

Name: _____ Grade: _____ Name: _____ Grade: _____

Name: _____ Grade: _____ Name: _____ Grade: _____

Is your child involved in any of the following programs (please check all that apply):

ESOL: Yes No

Individualized Education Plan (IEP): Yes No (Current IEP or ESE evaluation must accompany this application)

Honors or Gifted Classes: Yes No

Student lives with: Both Parents Mother only Father only Other

PARENT INFORMATION:

Parent Name: _____ Relationship: _____
Last First Mother, Father, Grandparent, Guardian, Other

Address: _____ City/State/Zip: _____

Home Number: _____ Cell Number: _____

Email address (for school correspondence & newsletters) _____

Parent Name: _____ Relationship: _____
Last First Mother, Father, Grandparent, Guardian, Other

Address: _____ City/State/Zip: _____

Home Number: _____ Cell Number: _____

Email address (for school correspondence & newsletters) _____

Parent Signature Date

Failure to provide accurate information may result in the applicant being denied admittance to Imagine School Palmer Ranch.

6220 McIntosh Road
Sarasota, FL 34238
(941) 923-1125 Fax: (941) 923-1124
www.ImagineSchoolsPalmerRanch.org

Student Name _____ **DOB** _____ **Sex** _____
 Last First Middle Home Phone _____
 Mailing Address (if different from home address) _____
 Current School _____ Grade (2013-2014 school year) _____ Teacher _____
Do not complete the shaded area – school personnel will fill in
 Previous School _____ City _____ State _____
 Mother/Guardian Name _____ Home Phone _____ Cell Phone _____
 Work Hours: from _____ to _____ Work Phone _____ Email Address _____
 Father/Guardian Name _____ Home Phone _____ Cell Phone _____
 Work Hours: from _____ to _____ Work Phone _____ Email Address _____
 Primary language spoken at home _____

Provide the information below for 3 persons you give permission to transport your child (identification will be required):

	<u>Name</u>	<u>Relationship</u>	<u>Home Phone</u>	<u>Day Work Phone</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Family Physician _____ Phone _____
 Family Dentist _____ Phone _____
 Is child enrolled in Medicaid? Children Medical Services? Other? _____

Allergies (please specify) _____ Wears Glasses Wears Contacts

Other Health Concerns / Special Instructions / Required Medications, etc. _____

Custody Alert _____

Health Emergency Card

(PLEASE FILL OUT BOTH SIDES OF THIS CARD)

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
HEALTH EMERGENCY INFORMATION CARD 2013-2014 PARENTAL CONSENT

The Health Services Plan makes provision for health record, nursing consultation, emergency care treatment and non-invasive screening (i.e., hearing, vision, scoliosis, height & weight measurement). Any parent wishing to opt their child out of a screening must do so in writing. Temperature screening will be done if deemed necessary. A limited number of topical medications, as have been approved by school district policy and listed in the School Health Services Manual, may be used in the health room. Parent/guardian has the responsibility of listing any allergies on the reverse side of this card.

In case of serious illness or injury where immediate care is needed, the school or its representative has my permission to contact the appropriate emergency medical service. The emergency medical service has my consent to provide necessary treatment or transportation for my child. I then request that I be notified of the situation. The undersigned will be responsible for emergency treatment cost.

In the case of an accident or illness where immediate treatment of my child is not indicated, but where (s)he is unable to remain at school, I request that the school contact me or my designee to arrange transportation for my child. If the school is unable to contact me, I request that one of the other persons listed on this card be contacted and requested to care for my child. In the event no person designated on this card is available, emergency medical services may be contacted for further assessment and possible transport and treatment. I understand that I must notify the school if there are any changes in this health emergency information.

I understand that certain educational records of my child will be shared with the District's health care partners as needed to provide and evaluate health services to students. I also understand and agree that my child's medical treatment records created by health care personnel at school may be shared with school officials who have a legitimate educational purpose for accessing such records.

Date _____ **Parent/Guardian Signature** _____

(PLEASE FILL OUT BOTH SIDES OF THIS CARD)

The School Board of Sarasota County, Florida, complies with State Statutes on Veteran's Preference and Federal Statute on non-discrimination on the basis of race, color, sex, religion, national origin, age, handicap, disabilities, marital status, or sexual orientation.

**THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA and SARASOTA COUNTY HEALTH DEPARTMENT
SCHOOL HEALTH SERVICES
Health History Form 2013/2014**

INSTRUCTIONS: Complete this form and return it to the school office.

Student Name _____ Phone _____
 DOB _____ Sex _____ School _____ Grade _____

Check next to any condition or illness that applies to your child. Note: For medication questions, mark the "yes" box only if child is taking medication now. Use the "Comments" section at the bottom of the page for explanations.		(Office Use Only) Code Number
1	Allergies <input type="checkbox"/> Food _____ <input type="checkbox"/> Medicine _____ <input type="checkbox"/> Ants <input type="checkbox"/> Wasps <input type="checkbox"/> Bee stings <input type="checkbox"/> Environmental allergies List _____ <input type="checkbox"/> Other allergies List _____ Specify reaction to allergy or allergen <input type="checkbox"/> Rash <input type="checkbox"/> Swelling <input type="checkbox"/> Hives <input type="checkbox"/> Trouble Breathing <input type="checkbox"/> Vomiting <input type="checkbox"/> Diarrhea <input type="checkbox"/> Local Reaction <input type="checkbox"/> Takes medication for any allergies List medication(s) _____ Does child need a special diet? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, school requires a prescription from a doctor.)	ALF ALM ALI ALE ALO
2	<input type="checkbox"/> Arthritis Describe _____	ARTH
3	<input type="checkbox"/> Asthma List triggers _____ Diagnosed at age _____ <input type="checkbox"/> Takes medication List medication(s) _____ Under doctor's care now <input type="checkbox"/> Yes <input type="checkbox"/> No	AS
4	<input type="checkbox"/> Other frequent Respiratory Conditions Describe _____	RC
5	<input type="checkbox"/> Attention Deficit/Hyperactivity Disorder (ADD/ADHD) <input type="checkbox"/> Takes medication List medication(s) _____	AD
6	<input type="checkbox"/> Blood disorder <input type="checkbox"/> Sickle cell anemia Specify _____	BD SI
7	<input type="checkbox"/> Cancer Explain _____	CA
8	<input type="checkbox"/> Chickenpox-illness At age _____	CX
9	<input type="checkbox"/> Cystic Fibrosis <input type="checkbox"/> Takes medication List medication(s) _____	CF
10	<input type="checkbox"/> Dermatological/Skin Condition Describe _____	DERM
11	<input type="checkbox"/> Developmental Delay Explain _____	DEVD
12	<input type="checkbox"/> Diabetes (high blood sugar) <input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Hypoglycemia (low blood sugar)	DB1 DB2 HY
13	<input type="checkbox"/> Digestive disorders Explain _____	BBC GI
14	<input type="checkbox"/> Eating Disorder Explain _____	EATD
15	<input type="checkbox"/> Endocrine Explain _____	ENDO
16	<input type="checkbox"/> Gynecological Problems Explain _____	GYN
17	<input type="checkbox"/> Headaches <input type="checkbox"/> Migraines Under doctor's care for this condition <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Takes medication List medication(s) _____	HEAD - MI
18	<input type="checkbox"/> Head injury/Concussion Month/Year _____ Explain _____	HIN
19	<input type="checkbox"/> Trouble hearing <input type="checkbox"/> Uses hearing aid _____	HI
20	<input type="checkbox"/> Heart condition Explain _____ Under doctor's care for this condition <input type="checkbox"/> Yes <input type="checkbox"/> No Physical restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain _____	HC
21	<input type="checkbox"/> Heat Sensitivity/Heat Exhaustion Explain _____	HEAT
22	<input type="checkbox"/> High blood pressure (Hypertension)	HP
23	<input type="checkbox"/> Kidney or bladder disorder Explain _____	KB
24	<input type="checkbox"/> Muscle/bone/mobility disorder Explain _____ Physical restrictions <input type="checkbox"/> No <input type="checkbox"/> Yes Explain _____ Need a doctor note yearly.	MBM
25	<input type="checkbox"/> Neurological Condition Explain _____	NEUR
26	<input type="checkbox"/> Nosebleeds	BN
27	<input type="checkbox"/> Psychiatric diagnosis _____ <input type="checkbox"/> Takes medication List medication(s) _____	PD
28	<input type="checkbox"/> Seizure Disorder How long ago was the last one? _____ <input type="checkbox"/> Takes medication List medication(s) _____	SEIZ
29	<input type="checkbox"/> Sinus Problems Explain _____	SINU
30	<input type="checkbox"/> Surgery Explain _____ Date _____	SG
31	<input type="checkbox"/> Vision problems Explain _____ <input type="checkbox"/> Glasses <input type="checkbox"/> Contacts	VI
32	<input type="checkbox"/> Other Explain _____	OC MISC
33	<input type="checkbox"/> My child does not have any of the listed conditions or illnesses.	

Comments or other health information _____

Parent/Guardian Signature _____ Date _____

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LA JUNTA ESCOLAR DEL CONDADO DE SARASOTA y EL DEPARTAMENTO DE SALUD DEL CONDADO DE SARASOTA SERVICIOS DE SALUD ESCOLAR
Historial de Salud 2013-2014

INSTRUCCIONES: Complete esta planilla y devuélvala a la oficina de la escuela.

Nombre completo del Estudiante _____ Teléfono _____
Fecha de Nacimiento _____ Sexo _____ Escuela _____ Grado _____

Marque la casilla que indique la condición o enfermedad que padezca su niño(a).		(Sólo para Uso de la Oficina)
<p>Nota: Para preguntas sobre medicamentos, por favor marque 'SI', sólo si él/ella toma medicamentos <u>actualmente</u>. Use la sección de "Comentarios" al final de la página para explicaciones.</p>		
1	<input type="checkbox"/> Alergias a <input type="checkbox"/> Alimentos _____ <input type="checkbox"/> Medicina _____ <input type="checkbox"/> Hormigas <input type="checkbox"/> Avispas <input type="checkbox"/> Picaduras de abejas <input type="checkbox"/> Alergias al Ambiente? Liste _____ <input type="checkbox"/> Otras alergias Liste _____ Especifique la reacción a la alergia o alérgeno <input type="checkbox"/> Salpullido <input type="checkbox"/> Hinchazón <input type="checkbox"/> Urticarias/ronchas <input type="checkbox"/> Problemas al respirar <input type="checkbox"/> Vómito <input type="checkbox"/> Diarrea <input type="checkbox"/> Reacción local <input type="checkbox"/> Toma medicamento Liste medicamento(s) _____ ¿Necesita el niño(a) una dieta especial? <input type="checkbox"/> Sí <input type="checkbox"/> No (Si contesta, Sí, la escuela requiere una receta de un médico.)	ALF ALM ALI ALE ALO
2	<input type="checkbox"/> Artritis Describa _____	ARTH
3	<input type="checkbox"/> Asma Liste lo que la provoca _____ Diagnosticado a la edad de _____ <input type="checkbox"/> Toma medicamento Liste medicamento(s) _____ ¿Se encuentra actualmente bajo cuidado de un médico? <input type="checkbox"/> Sí <input type="checkbox"/> No	AS
4	<input type="checkbox"/> Otra Condición Respiratoria frecuente Describa _____	RC
5	<input type="checkbox"/> Trastorno de Déficit de Atención/Trastorno de Hiperactividad (ADD/ADHD) <input type="checkbox"/> Toma medicamento Liste medicamento(s) _____	AD
6	<input type="checkbox"/> Desórdenes de la Sangre <input type="checkbox"/> Anemia Falciforme 'SickleCell' <input type="checkbox"/> Condición de Sangrado Especifique _____	BD SI
7	<input type="checkbox"/> Cáncer Explique _____	CA
8	<input type="checkbox"/> Enfermedad de Varicela 'Chickenpox' A la edad de _____	CX
9	<input type="checkbox"/> Fibrosis Quística <input type="checkbox"/> Toma medicamento Liste medicamento(s) _____	CF
10	<input type="checkbox"/> Condición dermatológica/de la piel Describa _____	DERM
11	<input type="checkbox"/> Retraso en el desarrollo Explique _____	DEVD
12	<input type="checkbox"/> Diabetes (alto nivel de azúcar en la sangre) <input type="checkbox"/> Tipo 1 <input type="checkbox"/> Tipo 2 <input type="checkbox"/> Hipoglucemia (bajo nivel de azúcar en la sangre)	DB1 DB2 HY
13	<input type="checkbox"/> Desordenes Digestivos Explique _____	BBC GI
14	<input type="checkbox"/> Desordenes de Alimentación Explique _____	EATD
15	<input type="checkbox"/> Endocrino Explique _____	ENDO
16	<input type="checkbox"/> Problemas Ginecológicos Explique _____	GYN
17	<input type="checkbox"/> Dolor de cabeza <input type="checkbox"/> Migrañas ¿Se encuentra bajo cuidado médico para esta condición? <input type="checkbox"/> Sí <input type="checkbox"/> No <input type="checkbox"/> Toma medicamento(s) Liste medicamento(s) _____	HEAD -MI
18	<input type="checkbox"/> Lesión en la cabeza/Concusión Mes/Año _____ Explique _____	HIN
19	<input type="checkbox"/> Dificultad Auditiva <input type="checkbox"/> Usa un aparato del oído _____	HI
20	<input type="checkbox"/> Condición del Corazón Explique _____ ¿Se encuentra bajo cuidado de un médico para esta condición? <input type="checkbox"/> Sí <input type="checkbox"/> No ¿Alguna restricción física? <input type="checkbox"/> Sí <input type="checkbox"/> No Si contesta, Sí, explique _____	HC
21	<input type="checkbox"/> Sensibilidad/Agotamiento por calor Explique _____	HEAT
22	<input type="checkbox"/> Alta Presión (Hipertensión)	HP
23	<input type="checkbox"/> Enfermedades del riñón o de la vejiga Explique _____	KB
24	<input type="checkbox"/> Enfermedad de los músculos/huesos/movilidad Explique _____ Restricciones físicas <input type="checkbox"/> No <input type="checkbox"/> Si Explique _____ Nota médica anual es necesaria	MBM
25	<input type="checkbox"/> Condición Neurológica Explique _____	NEUR
26	<input type="checkbox"/> Hemorragias nasales	BN
27	<input type="checkbox"/> Diagnóstico Psiquiátrico _____ <input type="checkbox"/> Toma medicamento(s) Liste medicamento(s) _____	PD
28	<input type="checkbox"/> Trastorno de Convulsiones ¿Cuándo sucedió la última? _____ <input type="checkbox"/> Toma medicamento(s) Liste medicamento(s) _____	SEIZ
29	<input type="checkbox"/> Problemas de Sinusitis Explique _____	SINU
30	<input type="checkbox"/> ¿Ha tenido alguna cirugía? Explique _____ Fecha _____	SG
31	<input type="checkbox"/> Problemas de la visión Explique _____ <input type="checkbox"/> Espejuelos <input type="checkbox"/> Lentes de contacto	VI
32	<input type="checkbox"/> Otra condición médica no mencionada en la lista Explique _____	OC MISC
33	<input type="checkbox"/> Mi hijo(a) no tiene ninguna de las condiciones médicas/enfermedades de la lista.	
Comentarios u otra información acerca de la salud del estudiante _____		
Firma del Padre/Guardián _____		Fecha _____

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
RECORD RETENTION

REQUEST FOR CUMULATIVE SCHOOL RECORDS

Date _____

Previous School Attended _____

Address _____
Street City State Zip

Phone _____ Fax _____

The student named below has enrolled in our school and we request that you forward to us all school records which may include the following:

Report Cards/Transcripts	Scholastic Grades	Standardized Test Scores
Psychological Reports	Social Histories	Current IEP
ESE Staffing Reports/Tests/Data	Health Records	Immunizations
Anecdotal Records	Attendance Records	Dates of Entry/Withdrawal
SSAT Records/Reports	Language/Speech Tests	Discipline
Previous Schools Attended	Birth Certificate	ESOL

Other (specify) _____

Student Name _____
Last First Middle

DOB _____ Student No. _____ Grade _____

Forward all records to the Registrar at:

Current School Attending IMAGINE SCHOOL PALMER RANCH

Address 6220 McIntosh Road Sarasota FL 34238
Street City State Zip

Phone 941-923-1125 Fax 941-923-1124

Per Federal Regulation, Vol. 41, Sec. 99.31, parent/guardian signature is not required for disclosure of student records by one educational institution to another educational institution.

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RET: Master, PERM, GS7 90
Dupl., OSA

005-90-DIS-BUS
Rev. 5-23-2013

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
STUDENT SUPPORT SERVICES

SCHOOL REGISTRATION DISCLOSURE FORM

Florida Statute 1006.07(1)(b) requires the disclosure of previous school expulsions, arrests resulting in a charge, and juvenile justice actions. Failure to provide accurate information can result in denial of educational participation.

Student Name Last First Middle DOB XXX-XX- SS No.

Street Address City State Zip Code

Phone - Home Phone - Cell Parent / Guardian Name

Has the above named student ever been expelled from a school or school system? Yes No

If yes, complete the following section:

Approximate Date Began	Approximate Date Ended	Location of School	Reason for Expulsion

Has the above named student ever been arrested and charged with a juvenile or adult crime?
Yes No

If yes, complete the following section: (three most recent events)

Approximate Date	Arrest	Charge	Juvenile	Adult	Reason

Has the above named student ever been involved with Juvenile Justice? Yes No

If yes, complete the following section:

Approximate Date	Approximate Date Ended	Status

The above information is correct and true.

Student Signature Parent/Guardian Signature Date

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THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
STUDENT SUPPORT SERVICES
STUDENT RESIDENCY QUESTIONNAIRE

Instructions: This questionnaire is intended to address the McKinney-Vento Act. The answers to this residency information help determine the services the student may be eligible to receive.

School Name _____

Student Name _____
Last First Middle

DOB ____/____/____ Age _____ Sex Male Female
Month Day Year

1. Is your current address a temporary living arrangement? _____ Yes _____ No
2. Is this temporary living arrangement due to loss of housing or economic hardship? _____ Yes _____ No
3. Are you an unaccompanied youth (not in the physical custody of a parent or legal guardian)? _____ Yes _____ No

**If you answered YES to one of the above questions, complete the remainder of this form.
If you answered NO, you may stop here.**

Where is the student presently living? (Check one box.)

- In a motel
- In an emergency or transitional shelter
- With more than one family in a house or apartment
- Moving from place to place
- In a place not designed for ordinary sleeping accommodations such as in a vehicle, park, abandoned building or "on the streets"
- Awaiting foster care placement

If you marked "yes" to any of the above temporary residences your student has the following rights:

- ✓ Child must be immediately enrolled in school even if you lack a permanent residence.
- ✓ Child's enrollment may not be delayed due to lack of proof of residency or other documents.
- ✓ Continued enrollment in the child's school that he/she attended before becoming homeless, or the school for which you are currently zoned.
- ✓ Child can attend classes while the new school secures previous school records.
- ✓ If enrollment dispute is made, child can continue to attend classes while dispute is being heard and resolved.
- ✓ Parent can request assistance with transportation to school.
- ✓ Child can participate in school programs with children who are not homeless.
- ✓ Child is eligible to receive free lunch.
- ✓ Schoolhouse Link can provide you with detailed information on your child's rights and assist you in accessing school and community services.

Parent(s)/Legal Guardian(s) Name _____

Address _____
Street City State Zip

Phone _____

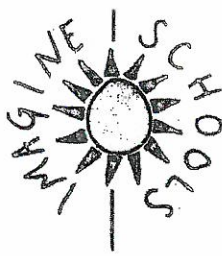
My signature below indicates that I have read this information and all answers I have given are correct.

Parent/Guardian Signature _____ Date _____

School staff only: Fax this form to the Schoolhouse Link Office immediately (fax 941-923-6112)

Check missing documentation: Physical Immunization Birth Certificate

Check if these materials were provided: Program Brochure Backpack



MEDIA RELEASE

Dear Imagine Family,

We do not currently have a media release on file for your child. A media release permits the school to include your child in all forms of media, including school publications (e.g., yearbooks), television, radio, newspapers, magazines, websites, etc.

You have the right to consent or object to the use of your child's name, picture or voice in these productions and may do so by checking your preference on the form below and returning it to the school office or your child's homeroom teacher. If you have any questions, please contact me at (941) 923-1125.

Regards,

Veronika Karey
Registrar
veronika.karey@imagineschools.com

Student's Name: _____ Grade: _____

Do you consent to a media release for your child?

_____ Yes, I consent

_____ No, I object

Parent's Name: _____ Date: _____

Parent's Signature: _____

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA (SPANISH)
 ESOL PROGRAM
HOME LANGUAGE SURVEY

_____ Previous School Attended _____ Previous Sarasota County School _____

Instructions: Original Home Language Survey for all students must be filed in the cumulative records. **Do not remove from the cumulative folder.** If a language other than English is indicated, send a copy to the ESOL DISTRICT OFFICE.

State Statute (6A-6.0902) requires schools to determine the language(s) spoken at home by each student. This information is essential in order for schools to provide meaningful instruction for all students and will be used to determine the need for screening for language support services. Your cooperation in helping us meet this important requirement is requested. **Please answer the following:**

Date/Fecha _____ School/Escuela _____ Student No./Social Security/Número de Estudiante/Seguro Social _____ Country of National Origin/Pais de Origen _____
 Name of Student/ Nombre del Estudiante _____ Last/Apellido _____ First/Nombre _____ Middle/Segundo Nombre _____ Grade/Grado _____ Date of Birth/Fecha de Nacimiento _____
 Address/Dirección _____ Telephone/Teléfono _____

1. (B2a) ¿Is a language other than English used in the home? Yes _____ No _____ Which language? _____
2. (B2b) Did the student have a first language other than English? Yes _____ No _____ Which language? _____
3. (B2c) Does the student most frequently speak a language other than English? Yes _____ No _____ Which language? _____

SPANISH/ESPAÑOL

El Estatuto del Estado (6A-6.0902) de la Florida requiere que las escuelas determinen el idioma que cada estudiante habla en su casa. Esta información es importante para que la escuela pueda proveer la mejor instrucción a todos los estudiantes, y será utilizada para determinar la necesidad de evaluar al estudiante para servicios de apoyo en cuanto al idioma. Su cooperación es importante para que podamos cumplir con este requisito. **Favor de marcar la respuesta apropiada para cada una de las siguientes preguntas:**

1. (B2a) ¿Se usa en la casa u hogar un idioma distinto del inglés? Sí _____ No _____ ¿Cuál idioma? _____
2. (B2b) ¿Tuvo el estudiante una lengua materna distinta del inglés? Sí _____ No _____ ¿Cuál idioma? _____
3. (B2c) ¿Habla el estudiante con mayor frecuencia un idioma distinto del inglés? Sí _____ No _____ ¿Cuál idioma? _____

Signature of person completing this form/Firma de la persona completando este formulario _____ Date/fecha _____ Translator/Traductor _____

Relationship to the student/Parentesco al estudiante _____

Distribution: Original-Cum _____ Yellow-ESOL Liaison/Teacher _____ Pink-ESOL District Office _____

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Imagine School at Palmer Ranch



FAMILY HANDBOOK

2013-2014

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ABOUT THE SCHOOL

MISSION

The mission of the Imagine School at Palmer Ranch is to work in partnership with parents and guardians to educate their children through a challenging program of study and strong character development within a nurturing and orderly learning environment. The Imagine School at Palmer Ranch's use of an innovative instructional model contributes to its mission by providing an educational program that meets the needs of all children and creates a learning community of achievement and hope. We strive to position youth for success in and beyond the classroom.

VISION

Imagine School at Palmer Ranch's vision is to cultivate a learning community of students, teachers, and families united in inspiring young minds to become creative, compassionate and visionary leaders of tomorrow through academic rigor and the shared values of justice, integrity, and fun.

HISTORY AND PHILOSOPHY

Imagine School at Palmer Ranch was established by a group of parents, educators, and business people who desired to expand school choice opportunities in the Sarasota County School District. The governing board of the school chose to partner with Imagine School and become part of a national family of charter schools that are tuition-free public schools of choice. In August of 2009, Imagine School at Palmer Ranch opened its doors with Grades K through 6, with the phase-in of grades 7 and 8 at years two and three.

Founded in 2004 by social entrepreneurs Dennis and Eileen Bakke, Imagine Schools is a full-service charter school management organization. As a member of the Imagine Schools' family, Imagine School at Palmer Ranch shares the mission of enhancing student achievement through a strong emphasis in reading and mathematics supported by data driven decision-making and assessment. All Imagine Schools also share a common culture based on the values of Integrity, Justice, and Fun, as well as Six Measures of Excellence. Imagine Schools' staff is committed to accountability and continual improvement.

At the Imagine School at Palmer Ranch, we take a rigorous approach to facilitating learning. Teachers at ISPR provide a curriculum aligned with the Sunshine State Standards and Common Core State Standards. We utilize an instructional delivery system that includes looping, individualized instruction, teaming, learning centers and classroom-based technology. Our instructional model employs subject area experts, teamwork, technology, and hands-on active learning, along with more traditional methods such as textbooks and paper and pencil work. The school's use of innovative learning methods provides an educational program that meets the needs of all children and will position our youth to achieve their greatest potential.

A NOTE FROM THE PRINCIPAL:

Imagine School at Palmer Ranch offers wonderful opportunities to students, parents, teachers and staff! I encourage you to be active participants in your child's education both at school and at home. Our knowledgeable faculty is here to help ensure that each child becomes a life-long learner and thinker. I know this school year will provide your child with wonderful learning opportunities.

Imagine School at Palmer Ranch focuses on enriching each child's life intellectually, physically, emotionally, and socially. Curriculum is individualized to meet the developmental needs of our students. This is accomplished through the collaborative efforts of students, parents, and faculty. We offer an atmosphere different from many schools, focusing on truly knowing each child in a family-like environment that seeks to develop each child to his or her fullest potential.

Please use this handbook as a guide to understand our policies and procedures. Refer back to it as questions arise throughout the year. I am here to assist you and your child through their journey at Imagine School at Palmer Ranch. I welcome your input and respectful participation in your child's education and our school community.

Welcome to Imagine School at Palmer Ranch!

Alisa Wright, M. Ed.

HOURS OF OPERATION

Office Hours: 8:00 A.M. – 4:00 P.M.

School Hours: 8:15 A.M. – 3:15 P.M.

Doors Open for Students: 8:00 A.M.

On early dismissal days, school ends at 1:00. Students who normally attend an after school program off campus can attend ISPR's CARE Program in the afternoons at no additional charge.

CONTACT INFORMATION

6220 McIntosh Rd., Sarasota, FL 34238

Phone: (941) 923-1125

Fax: (941) 923-1124

www.ImagineSchoolsPalmerRanch.com

FACULTY and STAFF

Administration

Principal – Alisa Wright, M.Ed.

alisa.wright@imageschools.com

Administrative Staff

Registrar ----- Veronika Karey
veronika.karey@imageschools.com

Business Manager/Human Resources - Clara Black
clara.black@imageschools.com

Receptionist/EC Director ----- Melissa Dill
melissa.dill@imageschools.com

Receptionist/Health Assistant ----- April Bell
april.bell@imageschools.com

Receptionist ----- Jaime Baker
jaime.baker@imageschools.com

Faculty

Early Childhood Program

Infant/Toddler Room

Lead Teacher ----- Farah Ambs
----- farah.ambs@imageschools.com

2-Year-Old Room

Lead Teacher ----- Brook Rich
brook.rich@imageschools.com

3-Year-Old Room

Lead Teacher ----- Jessica Raffert
jessica.raffert@imageschools.com

4-Year-Old Rooms

Lead Teacher ----- Pam Koch
pam.koch@imageschools.com

Lead Teacher ----- Melissa Dill
Melissa.dill@imageschools.com

Elementary School

Kindergarten Team

Elizabeth Coradi ----- elizabeth.coradi@imageschools.com
Christa Robertson.....christa.robertson@imageschools.com
Jennifer Robertson.....jennifer.roberston@imageschools.com

First Grade Team

Tarah Hart ----- tarah.hart@imageschools.com
Jessica Teed----- jessica.lee@imageschools.com
Sarah Walsh ----- sarah.walsh@imageschools.com

Second Grade Team

Jill Marsh ----- jill.marsh@imageschools.com
Suzanne Perry----- suzanne.perry@imageschools.com
Lacy Schneider----- lacy.schneider@imageschools.com

Third Grade Team

Laurel Horst ----- laurel.horst@imageschools.com
Katie Kephart ----- katherine.kephart@imageschools.com
Katrina Reynolds.....katrina.reynolds@imageschools.com

Fourth Grade Team

Kate Iorli ----- kate.iorli@imageschools.com
Megan Hodge----- megan.hodge@imageschools.com

Fifth Grade Team

Kristie Lorman ----- kristine.lorman@imageschools.com
Stephanie Balcita.....Stephanie.balcita@imageschools.com

Middle School

Sixth Grade

Language Arts-----	Carol Pelletier carol.pelletier@imagineschools.com
Mathematics-----	Jane Clancy jane.clancy@imagineschools.com
Science-----	Kimberly Cain kimberly.cain@imagineschools.com

Seventh Grade

Language Arts-----	Lana Smith lane.smith@imagineschools.com
Social Studies-----	Lauri Solla lauri.solla@imagineschools.com
Mathematics-----	Scott Klingensmith scott.klingensmith@imagineschools.com
Science-----	Ashley Moody ashley.moody@imagineschools.com

Eighth Grade

Language Arts-----	Alyssa Raffaele alyssa.raffaele@imagineschools.com
Social Studies-----	Susan Venum susan.vennum@imagineschools.com
Mathematics-----	Barbara Carico barb.carico@imagineschools.com
Science-----	Laura Munson laura.munson@imagineschools.com

Specials

Art -----	Melissa Gurcan melissa.gurcan@imageschools.com
Music-----	Aleksandra Borodina aleksandra.borodina@imageschools.com
Physical Education -----	Chuck Antczak chuck.antczak@imageschools.com
Physical Education/Athletic Director --	Vince Paine vincent.paine@imageschools.com

Student Support Services

ESE Liaison/ESE Teacher-----	Corry Tyle corry.tyle@imageschools.com
ESE Teacher-----	Michelle Morris michelle.morris@imageschools.com
ESE/Guidance/ESOL-----	Carla Harding carla.harding@imageschools.com
Speech/Language -----	Thyra Schwab thyra.schwab@imageschools.com
Occupational Therapist -----	Lori Palmer (contracted)
School Psychologist -----	Sarah Cottrez (contracted)