

# **ENROLLMENT CHECKLIST**

## **PIMA UNIFIED SCHOOL DISTRICT**

- 1. Birth Certificate:** required by law, ARS 15-872
- 2. Immunization Records:** required by law, ARS 15-828
- 3. Residency Form & Verification of Residence, ARS 15-802** {New students or returning students that have moved since last year} (A Notary is only required if you cannot provide verification of residency).
- 4. Open Enrollment form:** if you do not live in the Pima Unified School District boundaries.
- 5. Transfer students** should have a copy of your withdrawal slip from previous school, including withdrawal grades & transcript from the previous school.

### **Other possible items needed:**

**If parents are divorced or separated,** documents with the most current child custody information. In addition a notarized letter from the non-residential parent stating they are aware the student is being enrolled in the school.

**If the student lives with someone other than a parent or guardian,** documents of power of attorney or other legal documentation.

**If the student attended a private school,** accreditation information is needed.

**If the student has been home schooled,** proof of immunizations must be provided prior to the student's start date. Testing may be required, please contact counselors office.

# **Pima Unified School District Student Technology Acceptable Use Policy**

This Acceptable Use Policy (AUP) will outline some cautions, provide direction for the use of the technology resources, and you will affirm your commitment to comply with this AUP.

- 1.** You agree to act responsibly and with good behavior on any computer or communications system using Pima School District's wired or wireless network services. The user agrees to follow all School and District rules for behavior and communications. Access is a privilege-not a right.
- 2.** The primary purpose of the District network (including but not limited to the Internet, printers, laptops, etc.) is to allow users to conduct School business.
- 3.** Do not waste school resources by printing excessively. Use of district printers will be limited to school-related activities.
- 4.** You agree not to tamper with or attempt to illegally access or "hack" any Pima School District computer or other network resources. Intentional damage or misuse of computers or computer networks will not be tolerated. Intentional creation or spreading of a computer virus will not be tolerated.
- 5.** It is your responsibility to protect your privacy; keep your password to yourself. Sharing a password, or logging in for someone else or using someone else's password, is strictly forbidden. If you know of a security problem with your account or someone else's, inform the school administration immediately.
- 6.** You agree to abide by the generally accepted rules of "netiquette" and conduct yourself in a responsible, ethical, and polite manner while using any Pima School District technology resource.
- 7.** The Pima School District makes no warranties of any kind, whether expressed or implied, for the supervision and service it is providing. By signing below you agree that the Pima School District assumes no responsibility or liability for any loss of data. Use of any information obtained via the Internet is at your own risk. The Pima School District specifically denies any responsibility for the accuracy or quality of information obtained through its services. YOU are ultimately responsible for backing up your files.
- 8.** All technological devices brought onto a Pima School District campus are subject to search and seizure.
- 9.** Liquids, even water, will cause corrosion on the electrical parts inside. You are responsible for damage to district technological resources, whether the damage is a broken screen, a corroded electrical part, or a broken keyboard.

**10.** Do not load or execute non-approved programs from flash-drives, CD's or other portable media onto a district-owned device without expressed permission of the school tech staff. Ask before you do so and every time you do so.

**11.** You are the person responsible for what happens to your assigned device. You are also responsible for any content on your device regardless of how it originated.

**12.** Help us to help you by reporting any vandalism or misuse of any school resources to the proper school personnel. Taking apart or attempting to repair your computer is considered vandalism. In addition to the items above the following activities are not permitted:

- ● Sending or displaying offensive messages or pictures
- ● Using obscene language
- ● Giving personal information, such as complete name, phone number, address or identifiable photo, without permission from teacher and parent or guardian
- ● Harassing, insulting, cyber bullying, or attacking others
- ● Damaging or modifying computers, computer systems or computer networks
- ● Violating copyright laws
- ● Using others' passwords
- ● Trespassing in others' folders, work or files
- ● Intentionally wasting resources
- ● Employing the network for commercial purposes, financial gain, or fraud

Violations may result in a loss of access as well as other disciplinary or legal action, per student handbook and/or board policy.

## **Discipline**

Should the need arise for discipline regarding the use, or misuse, of your device, your school's administration will determine the appropriate action. The administration will follow the school's code of conduct and Pima School Board policies, but there may be additional consequences for misuse of technology with possible disciplinary outcomes that could include: suspension, reduced application permissions, loss of access, or contact with appropriate legal entities such as law enforcement for possible misdemeanor or felony charges. In the event there is an allegation of misuse or violation of the AUP, you will be notified of the alleged violation and have an opportunity to present an explanation. These are your Due Process rights. Access to the Pima School District network is a privilege, not a right.

## **Filter:**

The Pima School District does filter the Internet in an effort to block material that is inappropriate. Remember, even the best filter available will not stop someone who is intent on visiting inappropriate sites.

## **Some Do's and Don'ts:**

- 1.** Remember that a district-provided device is not yours. It belongs to the school district. Keep nothing on it that is so private that you wouldn't share it with a teacher, the principal, the tech department, or your parents. Assume that your device can keep no secrets, because it can't. Any device will be treated like a backpack-it can be searched. Files stored on your device will not be private. You also agree to allow authorized Pima School District personnel the ability to review any and all files, data, messages, and email at any time with or without notice. You understand and agree that your own personal electronic hardware (such as a different laptop computer) used on district property falls under this AUP.
- 2.** Do not reveal identifying information about yourself or others through email or the Internet. That information includes name, age, address, phone number, photographs, or family member names. Check with your teacher if something requires this information. It is better to be safe and guard your information. Identity theft is a growing problem.
- 3.** Don't attempt to override the Internet filtering software or other network configurations. You also agree not to disrupt your school's computer systems and network, or log in as an administrator for the purpose of bypassing or changing restrictions or settings. Attempting to override the filter, use or access proxies, or access the internal portion of the device will result in disciplinary action, which can include the possibility of felony charges.
- 4.** Don't access, send, create, or forward any materials, communications, files, or images that are defamatory, obscene, pornographic, harassing, threatening, or illegal. If you receive any of those items, report it to a school administrator. This includes creating a website or webpage (this includes blogs or sites such as MySpace.com), or adding to an existing website or webpage in order to "bully", intimidate, denigrate, or harass another student or staff member even if you did not use district resources to create, modify, or access the site as this will be considered an interruption of the educational process at school.
- 5.** Don't use your device to gain access to the school's or other computer systems for any illegal activities, or go beyond their authorized access. This includes trying to login as another user or use another's account. This behavior is related to trespassing and will be treated as such.
- 6.** Don't use your device or the network for commercial, political, or other private purposes. District devices are for schoolwork.

## **Email**

Some students will be provided a district sponsored Gmail account. It is very important that you keep your password secret! Someone else logging into your email and sending inappropriate messages will get you into trouble.

**Email etiquette:**

1. Keep your communications school-appropriate.
2. Do not engage in personal attacks or harassment.
3. Use clear, concise, and appropriate language. Think about what you have to say and how you say it. Email does not show sarcasm or wit as well as you might think.
4. Respect privacy (yours and everyone else's). Do not re-post a message without the permission of the person who sent it. Do not share personal information.
5. Your district email can be monitored and reviewed. Please use email appropriately.

**Copyright Infringement and Plagiarism**

You must respect the rights of copyright owners. Copyright infringement happens when you inappropriately copy someone else's work that is protected by copyright. If you are unsure if something can be legally copied or not, request permission to copy from the copyright holder. You and/or your parents are responsible for any copyright penalties that you commit while using your device. You agree to abide by all patent, trademark, trade name, and copyright laws.

Plagiarism is when you take someone else's work and present it as if it were your own. Plagiarism is not acceptable and is not tolerated. All sources must be cited.

**Miscellaneous**

From time to time the tech department may need to update your device. District devices can be remotely watched or even controlled.

Files lost are not the responsibility of the school. If you can not bear to lose a file, then you should back it up yourself. Flash drives are an easy way to do this and are widely available.

The Pima School District is not responsible for replacing lost files or reimbursing for the time and money necessary to replace those files, whether they are purchased music or important documents.

Re-imaging erases a device. Be sure to keep files backed up. All files maybe erased during upgrades or due to hardware/software failures.

Should the need arise, the Acceptable Use Policy may be modified by the Pima School District, preferably with notice.

# **Pima School District High School Student Technology Acceptable Use Policy**

By signing below, we accept and agree to the above Acceptable Use Policy.

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

# PIMA UNIFIED SCHOOL DISTRICT REGISTRATION FORM

**SCHOOL STUDENT WILL ATTEND:**

- PIMA ELEMENTARY
- PIMA JR. HIGH
- PIMA HIGH SCHOOL
- GV LEARNING CENTER

OFFICE USE ONLY	SAIS #: _____
	STUDENT ID: _____
	ENTRY CODE: _____
	ENTRY DATE: _____
	GRADE: _____

STUDENT NAME: \_\_\_\_\_ SEX: M / F  
(Last) (First) (middle)

LAST SCHOOL ATTENDED, IF NOT IN PIMA: \_\_\_\_\_

MOTHER/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

FATHER/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
City Zip Code  
City Zip Code

BIRTHDAY: \_\_\_\_\_ PARENT EMAIL: \_\_\_\_\_

**PIMA UNIFIED SCHOOL DISTRICT USES POWER ANNOUNCEMENTS TO CONTACT PARENTS ABOUT ABSENCES AND OTHER IMPORTANT INFORMATION. PLEASE SELECT HOW YOU WOULD LIKE TO RECEIVE YOUR NOTIFICATIONS:**  
Voice message    Text    Email    Some of this information is also available on your PowerSchool account for your student.

WILL THE STUDENT BE RIDING THE BUS?  NO  YES ➡ PLEASE CIRCLE THE AREA IN WHICH YOU LIVE:  
ALDER LANE    ASHCREEK ACRES    BRYCE/EDEN    CLUFF RANCH RD    COTTONWOOD WASH    GLENBAR    TIDY ACRES

WHO DOES THE STUDENT LIVE WITH?  BOTH PARENTS     MOM     DAD     GUARDIAN  
**PLEASE NOTE:** IF STUDENT IS LIVING WITH A GUARDIAN AND IS UNDER 18 YEARS, GUARDIANSHIP PAPERS MUST BE PRESENTED AT THE TIME OF ENROLLMENT.

ARE THERE ANY CUSTODIAL ISSUES WE NEED TO BE AWARE OF:  NO  YES, court documentation required

WHAT IS THE PRIMARY LANGUAGE USED IN THE HOME REGARDLESS OF THE LANGUAGE SPOKEN BY THE STUDENT?

WHAT IS THE LANGUAGE MOST OFTEN SPOKEN BY THE STUDENT? \_\_\_\_\_

WHAT IS THE LANGUAGE THAT THE STUDENT FIRST ACQUIRED? \_\_\_\_\_

**ETHNICITY:**  NO, NOT HISPANIC OR LATINO     YES, HISPANIC OR LATINO (A PERSON OF MEXICAN, PUERTO RICAN, CUBAN, SOUTH OR CENTRAL AMERICAN, OR OTHER SPANISH CULTURE OR ORIGIN, REGARDLESS OF RACE.)  
**RACE:**  AMERICAN INDIAN/ALASKAN NATIVE     ASIAN/PACIFIC ISLANDER     BLACK/AFRICAN AMERICAN  
 WHITE/CAUCASIAN (SELECT ALL THAT APPLY)

IN CASE OF EMERGENCY & YOU CAN'T BE REACHED, LIST THOSE YOU WISH US TO CONTACT.  
**THESE ARE THE ONLY PEOPLE, OTHER THAN A PARENT, THAT YOUR STUDENT WILL BE RELEASE TO.**

- |                         |                  |
|-------------------------|------------------|
| NAME/RELATIONSHIP _____ | HOME/WORK# _____ |
| CELL# _____             |                  |
| NAME/RELATIONSHIP _____ | HOME/WORK# _____ |
| CELL# _____             |                  |
| NAME/RELATIONSHIP _____ | HOME/WORK# _____ |
| CELL# _____             |                  |

# OVER-THE-COUNTER MEDICATION CONSENT

## PIMA UNIFIED SCHOOL DISTRICT

Please check the medications you want your child to receive if the need arises during the school day. If your child needs prescription medication at school, the parent must bring it to the nurse in the original container, and a different form needs to be completed.

\_\_\_\_\_ Acetaminophen (Tylenol) tablets                      \_\_\_\_\_ Chlortab for allergies  
\_\_\_\_\_ Psuedoephedrine (Sudafed) decongestant tablets                      \_\_\_\_\_ Throat lozenge  
\_\_\_\_\_ Antacid (Mylanta) chewable tablets or caplets  
\_\_\_\_\_ Topical medication (orajel for sore gums, triple antibiotic ointment for minor scrapes and cuts, caladryl lotion for relief of itching skin, and waterjel burn spray for pain relief of minor burns.)

Student's Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_ Teacher \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home # \_\_\_\_\_ Work/Cell# \_\_\_\_\_

Father's Name \_\_\_\_\_ Home # \_\_\_\_\_ Work/Cell# \_\_\_\_\_

Child lives with \_\_\_\_\_  
Home mailing address \_\_\_\_\_

List three individuals that the school may contact if unable to reach you in case of any illness or emergency. Please be aware that under any circumstance your child may only be released to these individuals unless notified by the parent/guardian.

1. \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship to child \_\_\_\_\_

2. \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship to child \_\_\_\_\_

3. \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship to child \_\_\_\_\_

Your current family doctor \_\_\_\_\_ Dentist \_\_\_\_\_

### Consent for Emergency Care

I give permission to the Pima school nurse, qualified school officials, medical physician or hospital my consent and authorization to render medical aide or treatment to the above named student in the case of an emergency occurring during the school day or during a school sponsored activity. I also understand and acknowledge that every attempt possible will be made to notify myself and the above listed emergency contacts should such an emergency arise.

Date \_\_\_\_\_ Signature of parent or legal guardian \_\_\_\_\_

**Please fill out health information on back.**



# MEDICAL HISTORY

## PIMA UNIFIED SCHOOL DISTRICT

Please answer yes or no as it pertains to your child. If answering "yes" please fill in the date the problem started.

YES	NO	MEDICAL CONDITION	DATE	FAMILY HISTORY	COMMENTS
		Allergies: Seasonal, Food, Medication, Other			
		Asthma			
		Diabetes			
		Seizure Disorder			
		Heart Condition			
		Tuberculosis			
		Valley Fever			
		Birth Defects			
		Kidney Disease			
		Attention Deficit Disorder/ Hyperactivity			
		Chicken Pox (Must list month/ year)			
		Glasses/Contacts			
		Hearing Impairment			
		Other:			

Please list any medications that your child takes for any of the above conditions or for anything else.

---



---

If your child should have any significant health changes please notify the school nurse.

**STUDENT RECORDS**  
**DESIGNATION OF DIRECTORY INFORMATION**  
**PIMA UNIFIED SCHOOL DISTRICT**

During the school year, District staff members compile the non-confidential directory information specified below. According to state and federal law the designated directory information may be publicly released to educational, occupational or military recruiting representatives without your permission. If the Governing Board permits (J-7061) the release of the designated directory information to persons or organizations who inform students of educational or occupational opportunities, by law the District is required to provide the same access on the same basis to official military recruiting representatives for the purpose of informing students of educational and occupational available to them, unless you request in writing not to release the student's information without prior written consent. *If you do not opt out of releasing any and/or all of the designated information, then the District must provide military recruiters, upon request, directory information containing the student's name, addresses and telephone listings.*

If you **do not** want any or all of the below-designated information about your son or daughter to be released to any person or organization without your prior written consent, you must notify the District in writing by **checking off** any or all of the rejected information, signing the form at the bottom of this page and returning it to the Principal within two (2) weeks of receiving this form. If the school district does not receive this notification from you within the prescribed time, it will be assumed that your permission is given to release your son or daughter designated directory information.

**ANY INFORMATION RELEASED WILL BE USED FOR EDUCATION PURPOSES ONLY**

---

TO: Principal

I **do not** want the information I have checked below concerning \_\_\_\_\_  
Student's name  
designated as directory information and released to any person or organization without my prior written consent:

Name

Date & place of birth

Grade level

Photograph/Video

Address

**initial to allow** photo/video for  
yearbook purposes **ONLY**

Phone number

**HS/JH ONLY**

Dates of attendance

Weight & height of members  
of athletic teams

Email address

Honors & awards received

Participation in officially recognized  
activities and sports

Enrollment status (part-time, full)

**initial to allow** release of ALL  
information for scholarship, college  
and university purposes **ONLY**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# STUDENT DRIVER'S

## GILA VALLEY LEARNING CENTER

All students who will be driving need to complete the following:

Name \_\_\_\_\_  
Vehicle Make and Model \_\_\_\_\_  
Vehicle Color \_\_\_\_\_  
License Number \_\_\_\_\_

I have read the Roughrider Handbook policy concerning driving and parking, and agree to follow the policy.

Student's Signature \_\_\_\_\_

Parent's/Guardian's Signature \_\_\_\_\_

### STUDENT DRIVING/PARKING

Students who drive to school are to demonstrate responsible driving. Streets adjacent to the school are under the jurisdiction of the Town of Pima and are therefore, regulated by local statutes and laws. The parking lot at the new gym and other areas are under the jurisdiction of the school.

Students who violate driving rules may have to answer to either city or school or both. Any violation of traffic rules around the school streets will result in referral to law enforcement authorities. Speeding, reckless driving, endangering pedestrians, and other irresponsible driving will bring immediate consequences.

Once they have arrived for classes, ***students are not to leave campus or reenter their vehicle until lunch or end of the school day.*** **ANY** student leaving campus for any reason must first check-out through the attendance office. Students who leave without doing so will be considered ditching.

Penalties for driving/parking violations: Students may be referred to law enforcement authorities for violations on the streets adjoining campus. Other violations may result in loss of privilege of driving/parking on campus, conference, suspension, or other consequences that are appropriate.

**Gila Valley Learning Center students are to park in front of the learning center.** Any vehicle parked anywhere else without specific permission is subject to being cited by law enforcement and/or towed at the owner's expense.

# STUDENT RECORD TRANSMITTAL REQUEST

PIMA UNIFIED SCHOOL DISTRICT  
P.O. BOX 429 PIMA, ARIZONA 85543

Information to be released from:

\_\_\_\_\_  
School or Agency

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
FAX #

Information to be released to:

- Pima Elementary  
Fax: 928-387-8022
- Pima Junior High  
Fax: 928-387-8021
- Pima High School  
Fax: 928-387-8023
- Gila Valley Learning Center  
Fax: 928-387-8020

**STUDENT'S NAME**

**BIRTHDATE**

**GRADE**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please forward copies of the following items:

- Transcripts of Grades
- Special Education Notice/IEP
- Withdrawal of Grades
- Social History
- Medical Evaluations
- Other: \_\_\_\_\_
- Attendance Record
- Psychological Records
- Reports
- Achievement Test Scores
- Health Information
- ECAP

**PLEASE NOTE:** The student information requested will be made available for inspection to parents/guardians/eligible students since it will be considered an **education record** as defined in Public Law 93-380, Section 99:3.

Written consent **IS REQUIRED** of a parent/guardian/eligible student when a request for student records involves **NON SCHOOL** individuals, agencies, or institutions.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Official Signature

\_\_\_\_\_  
Date

# Gila Valley Learning Center

## Expectations & Behavior Contract

### Statement of Education Equality

The Gila Valley Learning Center's Philosophy of Education, in support of the District Philosophy, is to extend to all students equally. The GVLC does not discriminate on the basis of race, color, national origin, sex, sexual orientation, age or disability in admission or access to, or treatment or employment in, its programs or activities. It is through the cooperative effort of the administration, faculty, students, and community that relevant, rigorous, education growth for student becomes a reality.

### Acknowledgement of Expectations

Please initial each of the following statements.

\_\_\_\_\_ I understand that I am enrolling my child in the GVLC that he/she is expected to meet all attendance requirements to maintain enrollment as outlined in the GVLC Handbook.

\_\_\_\_\_ I understand that student progress is an expected part of the GVLC program in addition to the attendance hours logged. The director will review progress and consider other factors including parental input, when making student advancement decisions.

\_\_\_\_\_ I understand that public school enrollment includes participation in the required state testing program.

\_\_\_\_\_ I verify that all of the information contained in the application documents is complete and factually correct.

\_\_\_\_\_ I acknowledge that Gila Valley Learning Center students are not to be on any other Pima Schools campuses from 7 am to 4 pm. The police will be called for any violation of this policy.

School administration can authorize a single use pass for a student to be on campus as deemed appropriate. Students must follow all Pima Unified School District visitor protocol.

The Pima Schools cafeteria is available to GVLC students from 12:20 to 12:50 pm. GVLC students are not allowed to be on any other part of Pima Schools campuses.

\_\_\_\_\_ I understand that if my student enrolls, both my student and I will abide by the GVLC Student Handbook.

Please accept this signed and completed document to enroll my student.

\_\_\_\_\_ in the Gila Valley Learning Center.

(students name)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
GVLC Representative

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



**Arizona Department of Education  
Arizona Residency Documentation Form**

Student \_\_\_\_\_ School \_\_\_\_\_

School District or Charter Holder \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_

As the Parent/Legal Guardian of the Student, I attest that I am a resident of the State of Arizona and submit in support of this attestation a copy of the following document that displays my name and residential address or physical description of the property where the student resides:

- \_\_\_ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- \_\_\_ Valid U.S. passport
- \_\_\_ Real estate deed or mortgage documents
- \_\_\_ Property tax bill
- \_\_\_ Residential lease or rental agreement
- \_\_\_ Water, electric, gas, cable, or phone bill
- \_\_\_ Bank or credit card statement
- \_\_\_ W-2 wage statement
- \_\_\_ Payroll stub
- \_\_\_ Certificate of tribal enrollment or other identification issued by a recognized Indian tribe that contains an Arizona address.
- \_\_\_ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
  
- \_\_\_ I am currently unable to provide any of the foregoing documents. Therefore, I have provided an original affidavit signed and notarized by an Arizona resident who attests that I have established residence in Arizona with the person signing the affidavit.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date



**State of Arizona**  
**Affidavit of Shared Residence**

I swear or affirm that I am a resident of the State of Arizona and that the persons listed below reside with me at my residence, described as follows:

Persons who reside with me:

---

---

Location of my residence:

---

I submit in support of this attestation a copy of the following document that displays my name and current residence address or physical description of my property:

- Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- Valid U.S. passport
- Real estate deed or mortgage documents
- Property tax bill
- Residential lease or rental agreement
- Water, electric, gas, cable, or phone bill
- Bank or credit card statement
- W-2 wage statement
- Payroll stub
- Certificate of tribal enrollment or other identification issued by a recognized Indian tribe.
- Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)

Printed Name of Affiant: \_\_\_\_\_

Signature of Affiant: \_\_\_\_\_