

Meadow Heights School District Student Data Sheet

ool _____ MOSIS# _____ Today's Date _____

Student's Legal Name _____ SS# _____
Last First Middle
 Birth Date ____/____/____ Gender: Male Female Birth Certificate # _____ State of Birth _____
 Ethnicity/Race: Multi-racial (if selected, check all that apply) White, not Hispanic Black, not Hispanic Hispanic Asian
 Pacific Islander American Indian or Alaskan Native
 Residence Address _____ City/State: _____ Zip: _____
 Mailing Address (if different from residence address): _____ Student Will Attend Grade: _____

Does parent need a Language Interpreter? Yes No
 Are there any language other than English spoken in the home? Yes No If yes, what language? _____
 Student's Country of Birth: _____ US Entry Date _____ Total years living in the U.S.? _____ In Missouri? _____

PARENT/GUARDIAN AND EMERGENCY CONTACT INFORMATION

List ONE person per box. Include biological parents (even those not in the home) and all parents/step-parents/guardians in the home.
First listed contact is designated as PRIMARY, Circle (1) either HOME or CELL phone number for District wide Emergency calls
 Name _____ Relationship _____ Home Phone _____
Last First Middle
 Address _____ City/State _____ Zip _____ Cell Phone _____
 Employer _____ Work Phone _____ Email _____
 Student lives with you? Yes No Legal custody? Yes No Access to student records? Yes No Allow to pick up student? Yes No

Name _____ Relationship _____ Home Phone _____
Last First Middle
 Address _____ City/State _____ Zip _____ Cell Phone _____
 Employer _____ Work Phone _____ Email _____
 Student lives with you? Yes No Legal custody? Yes No Access to student records? Yes No Allow to pick up student? Yes No

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Name _____ Relationship _____ Home Phone _____
Last First Middle
 Address _____ City/State _____ Zip _____ Cell Phone _____
 Employer _____ Work Phone _____ Email _____
 Student lives with you? Yes No Legal custody? Yes No Access to student records? Yes No Allow to pick up student? Yes No

Attach a copy of any court order related to any of the above questions checked YES. A copy must be on file in the school's office.

Is this student a foster care placement? No Yes (If YES, please complete this section)
 Biological Parent Name _____ Bio Parent Address _____
 Home School District _____ Caseworker Name _____ Caseworker Phone _____

SIBLINGS (Children under the age 20 residing in home/Meadow Heights School District list additional on separate sheet)

Name _____ School _____ Grade _____ Birth Date _____
Last First Middle
 Name _____ School _____ Grade _____ Birth Date _____
Last First Middle
 Name _____ School _____ Grade _____ Birth Date _____
Last First Middle

SCHOOL(S) PREVIOUSLY ATTENDED

All School(s) attended in previous 24 months (List additional schools on separate sheet):

- 1. School: _____ City/State: _____ School Years attended: _____
- 2. School: _____ City/State: _____ School Years attended: _____
- 3. School: _____ City/State: _____ School Years attended: _____

Please indicate the programs attended in previous school:

- Gifted & Talented Special Reading Speech Special Education 504 ELL Other (List) _____
- Is there a current IEP, 504 plan, or ELL accommodation plan on file at a previous school? NO YES (School) _____

OTHER REQUIRED INFORMATION

- 1) Are you sharing the housing of other persons due to economic hardship or similar reasons? YES NO
- 2) Do you currently reside at a motel/hotel, in a car, or at a campsite because your home has been damaged or due to economic reasons? YES NO
- 3) Are you currently residing in an emergency or transitional shelter? YES NO
- 4) Are you currently living in a temporary housing due to economic hardship? YES NO
- 5) Has the student ever been suspended for 10 or more days? YES NO
- 6) Has the student ever been expelled from school? Charged/convicted of a felony? YES NO YES NO
- 7) Have you moved in the last 3 years to seek/obtain temporary or seasonal work in farm related jobs such as planting/harvesting crops, feeding or processing poultry, beef, hogs, & dairy products, or fishing? YES NO

A) Emergency Dismissal Instructions:

- ____ 1. My child should go home on his/her regular bus
- ____ 2. My child should ride a bus to his/her neighbor's house
Name/Address/Phone of neighbor _____
- ____ 3. My child will be picked up at school immediately after early dismissal.
Name/Phone of person picking up child _____
- ____ 4. Other (be specific) _____

B) Computer/Technology Usage Policy:

I understand that a copy of the district technology usage policy is attached and is available in the school handbook. I _____ have read and discussed this policy with my student regarding safe and responsible technology usage. My student has agreed to abide by the district technology usage policy. YES NO

- Do you have a computer at Home? YES NO Do you have internet access at Home? YES NO

I grant permission for the items above checked YES and I certify that I am the legal parent/guardian of the student being enrolled and that the information listed on the student data sheet is current and accurate. Pursuant to RSMo Sec. 167.020, submitting false statements or information relating to residency is defined as a class A misdemeanor. In addition, the District may seek to recover the cost of school attendance for any pupil who it enrolled pursuant to false information received from a parent or legal guardian regarding residency.

Student Signature _____ Date _____

Parent/Legal Guardian Signature _____ Date _____

Please give detailed directions to home:

EMERGENCY DATA SHEET

Please fill out the emergency data sheet and return to your child's teacher as soon as possible.

We are looking forward to a very good year with your children. If questions arise, please feel free to call the elementary office at 866-2611.

Date _____ Bus Number _____

_____ Grade _____
Student's Name Teacher

Date of Birth _____ Social Security Number _____

Parent or Guardian Names _____
Telephone number _____

Address: _____

Where can parents be reached in not at home? (work or other)

Mother: _____ Telephone: _____

Father: _____ Telephone: _____

List two neighbors or nearby relatives who will assume temporary care of your child if you cannot be reached in case of an emergency or disaster.

1. Name: _____ Telephone: _____

2. Name: _____ Telephone: _____

List any persons who cannot pick up your child:

1. _____ 2. _____

RECORD REQUEST FORM
ATTENTION: ELEMENTARY PRINCIPAL
MEADOW HEIGHTS R-II SCHOOL DISTRICT
Rt. 2 Box 2365 PATTON, MO 63662
FAX 573-866-3719

Student's Name: _____

Grade: _____ DOB: _____ Date of Request: _____

Registrar of _____
(School last attended)

Will you please furnish us a complete transcript including the following information:

- *Permanent Records
- *Withdrawal Grades
- *Aptitude and Achievement Tests Results
- *Health Records
- *Special Education Records (Diagnostic Summary and most recent IEP)
- *Attendance Records
- *Discipline Records
- *Title Program Participation Information
- *Counseling Information
- *Notification of any Retention

Please send this information to the above address.

I hereby authorize the release of the school records of:

Student's Name

Parent

Date

Sincerely,

Donna Bristow
Elementary School Principal

(Senate Bill 182-Article 5,
Re: Privacy of Pupil Records
(Section 19047)-Parent Release
not required for transfer of
school records between schools)



Meadow Heights R-II Schools

ROUTE 5 BOX 2365

PATTON, MO 63662

STUDENT HEALTH INFORMATION 2015/16 School Year

Student's Name: _____ Sex: _____ Date of Birth: _____ Grade: _____

Child's Physician: _____ Phone: _____

Child's Dentist: _____ Phone: _____

PARENT/GUARDIAN CONTACT INFORMATION

This form is to be completed by the enrolling parent. The enrolling parent is the natural or adoptive parent or legal guardian with whom the student lives the preponderance of the school week and who enrolled the student in school.

Enrolling Parent Last:		First:		Middle:	Telephone
Number:		Street:		Apt.#:	Home:
City:		State:		Zip:	Work:
Relationship:		<input type="checkbox"/> Resides with		Language:	E-mail:
<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Legal Guardian			
<input type="checkbox"/> Foster Parent		<input type="checkbox"/> Self			

Other Parent Last:		First:		Middle:	Telephone
Number:		Street:		Apt.#:	Home:
City:		State:		Zip:	Work:
Relationship:		<input type="checkbox"/> Resides with		Language:	E-mail:

Other Parent Last:		First:		Middle:	Telephone
Number:		Street:		Apt.#:	Home:
City:		State:		Zip:	Work:
Relationship:		<input type="checkbox"/> Resides with		Language:	E-mail:

OTHER CONTACT INFORMATION

Please list at least two people we may call if the parent(s) or guardian(s) cannot be reached in the event of an emergency. These people also have your permission to pick your child up from school during the school day.

Name of Person	Relationship	Language	Telephone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

* Please remember to sign page 2.

CURRENT HEALTH CONDITIONS

Below check any current health condition that may require attention during the school day. Also complete and submit Health Information form SS/SE-71 if your child has health conditions that require attention during the school day. See below for medical alert information currently on file.

- | | |
|--|--|
| <input type="checkbox"/> allergies (be specific)
<input type="checkbox"/> foods _____
<input type="checkbox"/> medicines _____
<input type="checkbox"/> bee sting or insect bite _____
<input type="checkbox"/> other _____

<input type="checkbox"/> asthma
<input type="checkbox"/> cancer
<input type="checkbox"/> diabetes
<input type="checkbox"/> hearing problems <input type="checkbox"/> hearing aid(s)
<input type="checkbox"/> heart problems (be specific) _____ | <input type="checkbox"/> hemophilia <input type="checkbox"/> sickle cell anemia
<input type="checkbox"/> physical disability (be specific) _____

<input type="checkbox"/> respiratory (be specific) _____

<input type="checkbox"/> seizures
<input type="checkbox"/> vision problems (be specific) _____
<input type="checkbox"/> glasses <input type="checkbox"/> contacts
<input type="checkbox"/> other (be specific) _____ |
|--|--|

List all medications and dosages your child receives on a continual basis:

Other illness, injury or health problem which might affect performance at school? _____

PLEASE READ THIS CAREFULLY BEFORE SIGNING

In case of accident or serious illness of my child, I request the school to contact me. If the school is unable to reach me, I hereby, authorize the school to call the local doctor indicated above and follow his/her instructions. If the school is unable to contact the doctor, the school may make whatever arrangements seem necessary for the safety and well being of my child. It is understood that if my child has a life-threatening condition at school, the school will make transportation arrangements for my child by ambulance to the hospital specified above (Meadow Heights School is not responsible for ambulance charge). An attempt will be made to reach the parent or legal guardian. Treatment usually cannot be given to a minor child without the parent or legal guardian's consent. I give my permission for my child to receive emergency treatment considered necessary by the attending doctor. If your child has a health problem it will be shared with the appropriate staff member at Meadow Heights School.

Signed: _____ Date: _____
 (Parent/Guardian must sign for treatment to be given to a minor child)

Acetaminophen Standing Order and Protocol

Acetaminophen will be given only after the school nurse has seen and assessed the student. Acetaminophen will be administered if/for minor headache, minor pain relief, or parent request. Only a single dose will be given at school. If the student would require a second dose, they would be sent home. It will not be given for elevated temperature. If a child's temperature is above 99.9, they will be sent home. The dosage is 325 mg for a child 5-10 years of age, and 325-650 mg for a child 11 years to adult. The school will notify parents, in advance when possible, that medication is to be given so parents are aware of their child complaint.

Antibiotic Ointment Standing Order and Protocol

Antibiotic ointment will be applied to the student by the school nurse or someone appointed by her. Students will be assessed by the nurse prior to application of ointment. It will be administered for minor abrasions, cuts or minor wounds. Only a single dose will be given.

I hereby give my permission for my child to receive acetaminophen and antibiotic ointment according to the standing orders and protocols of Meadow Heights School District

Student's Name _____ Grade _____

Parent/Guardian Signature _____

Date _____

(If you do not wish your child to receive one or both of the above please specify) Please return to Patti Kamp, School Nurse

MEADOW HEIGHTS ONLINE PORTAL

The Meadow Heights school district has purchased a new program that will keep the school online with the state of Missouri and once in place will be an up-to-date web page and parent portal. We would like to bring information to each parent with emails of up-coming events, cancellations, or even emergencies. This will take some cooperation and education on our part. We expect everything to be in place by our next school year. We would like to begin with a request for email addresses.

Please take a moment and indicate your email address

Student (s) _____

Parent (1) email _____

Parent (2) email _____

Meadow Heights R-II
Notification of Rights under FERPA

The Family Educational Rights and Privacy Act (FERPA) affords parents and students over 18 years of age ("eligible students") certain rights with respect to the student's education records. These rights are:

(1) The right to inspect and review the student's education records within 45 days of the day the School receives a request for access.

Parents or eligible students should submit to the School principal [or appropriate school official] a written request that identifies the record(s) they wish to inspect. The School official will make arrangements for access and notify the parent or eligible student of the time and place where the records may be inspected.

(2) The right to request the amendment of the student's education records that the parent or eligible student believes are inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.

Parents or eligible students who wish to ask the School to amend a record should write the School principal, clearly identify the part of the record they want changed, and specify why it should be changed. If the School decides not to amend the record as requested by the parent or eligible student, the School will notify the parent or eligible student of the decision and advise them of their right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the parent or eligible student when notified of the right to a hearing.

(3) The right to privacy of personally identifiable information in the student's education records, except to the extent that FERPA authorizes disclosure without consent.

One exception, which permits disclosure without consent, is disclosure to school officials with legitimate educational interests. A school official is a person employed by the School as an administrator, supervisor, instructor, or support staff member (including health or medical staff and law enforcement unit personnel); a person serving on the School Board; a person or company with whom the School has outsourced services or functions it would otherwise use its own employees to perform (such as an attorney, auditor, medical consultant, or therapist); a parent or student serving on an official committee, such as a disciplinary or grievance committee; or a parent, student, or other volunteer assisting another school official in performing his or her tasks.

A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.

Upon request, the School discloses education records without consent to officials of another school district in which a student seeks or intends to enroll, or is already enrolled if the disclosure is for purposes of the student's enrollment or transfer.

(4) The right to file a complaint with the U.S. Department of Education concerning alleged failures by the School to comply with the requirements of FERPA. The name and address of the Office that administers FERPA are:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202-8520



Meadow Heights R-II School District

Route 1 Box 2365
Patton, MO 63662-9742

High School Office

Phone (573)866-2924
Fax (573)866-2219

Superintendent's Office

Phone (573)866-0060
Fax (573)866-3240

Elementary Office

Phone (573)866-2611
Fax (573)866-3719

Dear Parent,

In our efforts to improve communications between parents and school, Meadow Heights is instituting a telephone broadcast system that will enable school personnel to notify all households and parents by phone within minutes of an emergency or unplanned event that causes early dismissal, school cancellation or late start. The service may also be used from time-to-time to communicate general announcements or reminders. This service is provided by SchoolReach, which specializes in school-to-parent communications. Meadow Heights will continue to report school closings due to snow or weather on KFVS-TV – CAPE GIRARDEAU, K103FM – CAPE GIRARDEAU, KREI 800AM/KTJJ 98.5FM – FARMINGTON, and 104.1 FM – MARBLE HILL and will use this system as an overlay to the public announcements.

When used, the service will simultaneously call all **primary parent home and cell phone numbers** in our parent contact list and will deliver a recorded message from a Meadow Heights Administrator. The service will deliver the message to both live answer and answering machines. No answers and busies will be automatically retried twice in 15 minute intervals after the initial call

NOTE: 1) This requires NO registration by the parent on the SchoolReach website. 2). All information and contact numbers are strictly secure and confidential and are only used for the purposes described herein.

Here is some specific information you should know.

- Caller ID. The Call ID will display 573-866-2611 which is the main number for Meadow Heights.
- Live Answers: There is a short pause at the beginning of the message, usually just a few seconds. Answer your phone as you normally would "Hello" and hold for the message to begin. Multiple "Hello's"

Meadow Heights R-II Acceptable Use Policy

Introduction

Meadow Heights R-II recognizes that access to technology in school gives students greater opportunities to learn, engage, communicate, and develop skills that will prepare them for work, life, and citizenship. We are committed to helping students develop 21st-century technology and communication skills.

To that end, we provide access to technologies for student and staff use.

This Acceptable Use Policy outlines the guidelines and behaviors that users are expected to follow when using school technologies or when using personally-owned devices on the school campus.

- The Meadow Heights R-II network is intended for educational purposes.
- All activity over the network or using district technologies may be monitored and retained.
- Access to online content via the network may be restricted in accordance with our policies and federal regulations, such as the Children's Internet Protection Act (CIPA).
- Students are expected to follow the same rules for good behavior and respectful conduct online as offline.
- Misuse of school resources can result in disciplinary action.
- Meadow Heights R-II makes a reasonable effort to ensure students' safety and security online, but will not be held accountable for any harm or damages that result from use of school technologies.
- Users of the district network or other technologies are expected to alert IT staff immediately of any concerns for safety or security.

Technologies Covered

Meadow Heights R-II may provide Internet access, desktop computers, mobile computers or devices, videoconferencing capabilities, online collaboration capabilities, message boards, email, and more. As new technologies emerge, Meadow Heights R-II will attempt to provide access to them. The policies outlined in this document are intended to cover *all* available technologies, not just those specifically listed.

Usage Policies

All technologies provided by the district are intended for education purposes. All users are expected to use good judgment and to follow the specifics of this document as well as the spirit of it: be safe, appropriate, careful and kind; don't try to get around technological protection measures; use good common sense; and ask if you don't know.

Web Access

Meadow Heights R-II provides its users with access to the Internet, including web sites, resources, content, and online tools. That access will be restricted in compliance with CIPA regulations and school policies. Web browsing may be monitored and web activity records may be retained indefinitely. Users are expected to respect that the web filter is a safety precaution, and should not try to circumvent it when browsing the Web. If a site is blocked and a user believes it shouldn't be, the user should follow district protocol to alert an IT staff member or submit the site for review.

Email

Meadow Heights R-II may provide users with email accounts for the purpose of school-related communication. Availability and use may be restricted based on school policies. If users are provided with email accounts, they should be used with care. Users should not send personal information; should not attempt to open files or follow links from unknown or untrusted origin; should use appropriate language; and should only communicate with other people as allowed by the district policy or the teacher. Users are expected to communicate with the same appropriate, safe, mindful, courteous conduct online as offline. Email usage may be monitored and archived.

Social/Web 2.0 / Collaborative Content

Recognizing the benefits collaboration brings to education, Meadow Heights R-II may provide users with access to web sites or tools that allow communication, collaboration, sharing, and messaging among users. Users are expected to communicate with the same appropriate, safe, mindful, courteous conduct online as offline. Posts,

chats, sharing, and messaging may be monitored. Users should be careful not to share personally-identifying information online.

Mobile Devices Policy

Meadow Heights R-II may provide users with mobile computers or other devices to promote learning outside of the classroom. Users should abide by the same acceptable use policies when using school devices off the school network as on the school network. Users are expected to treat these devices with extreme care and caution; these are expensive devices that the school is entrusting to your care. Users should report any loss, damage, or malfunction to IT staff immediately. Users may be financially accountable for any damage resulting from negligence or misuse. Use of school-issued mobile devices off the school network is monitored.

Personally-Owned Devices Policy

Students should keep personally-owned devices (including laptops, tablets, smart phones, and cell phones) turned off and put away during school hours—unless in the event of an emergency or as instructed by a teacher or staff for educational purposes. Because of security concerns, when personally-owned mobile devices are used on campus, they should not be used over the school network without express permission from IT staff. In some cases, a separate network may be provided for personally-owned devices.

Security

Users are expected to take reasonable safeguards against the transmission of security threats over the school network. This includes not opening or distributing infected files or programs and not opening files or programs of unknown or untrusted origin. If you believe a computer or mobile device you are using might be infected with a virus, please alert IT. Do not attempt to remove the virus yourself or download any programs to help remove the virus.

Downloads

Users should not download or attempt to download or run .exe programs over the school network or onto school resources without express permission from IT staff. You may be able to download other file types, such as images or videos. For the security of our network, download such files only from reputable sites, and only for education purposes.

Netiquette

Users should always use the Internet, network resources, and online sites in a courteous and respectful manner. Users should also recognize that among the valuable content online is unverified, incorrect, or inappropriate content. Users should use trusted sources when conducting research via the Internet. Users should also remember not to post anything online that they wouldn't want parents, teachers, or future colleges or employers to see. Once something is online, it's out there—and can sometimes be shared and spread in ways you never intended.

Plagiarism

Users should not plagiarize (or use as their own, without citing the original creator) content, including words or images, from the Internet. Users should not take credit for things they didn't create themselves, or misrepresent themselves as an author or creator of something found online. Research conducted via the Internet should be appropriately cited, giving credit to the original author.

Personal Safety

Users should never share personal information, including phone number, address, social security number, birthday, or financial information, over the Internet without adult permission. Users should recognize that communicating over the Internet brings anonymity and associated risks, and should carefully safeguard the personal information of themselves and others. Users should never agree to meet someone they meet online in real life without parental permission. If you see a message, comment, image, or anything else online that makes you concerned for your personal safety, bring it to the attention of an adult (teacher or staff if you're at school; parent if you're using the device at home) immediately.

Cyberbullying

Cyberbullying will not be tolerated. Harassing, dissing, flaming, denigrating, impersonating, outing, tricking, excluding, and cyberstalking are all examples of cyberbullying. Don't be mean. Don't send emails or post comments with the intent of scaring, hurting, or intimidating someone else. Engaging in these behaviors, or any online activities intended to harm (physically or emotionally) another person, will result in severe disciplinary action and loss of privileges. In some cases, cyberbullying can be a crime. Remember that your activities are monitored and retained.

Examples of Acceptable Use

I will:

- ✓ Use school technologies for school-related activities.
- ✓ Follow the same guidelines for respectful, responsible behavior online that I am expected to follow offline.
- ✓ Treat school resources carefully, and alert staff if there is any problem with their operation.
- ✓ Encourage positive, constructive discussion if allowed to use communicative or collaborative technologies.
- ✓ Alert a teacher or other staff member if I see threatening, inappropriate, or harmful content (images, messages, posts) online.
- ✓ Use school technologies at appropriate times, in approved places, for educational pursuits.
- ✓ Cite sources when using online sites and resources for research.
- ✓ Recognize that use of school technologies is a privilege and treat it as such.
- ✓ Be cautious to protect the safety of myself and others.
- ✓ Help to protect the security of school resources.

This is not intended to be an exhaustive list. Users should use their own good judgment when using school technologies.

Examples of Unacceptable Use

I will **not**:

- ✓ Use school technologies in a way that could be personally or physically harmful.
- ✓ Attempt to find inappropriate images or content.
- ✓ Engage in cyberbullying, harassment, or disrespectful conduct toward others.
- ✓ Try to find ways to circumvent the school's safety measures and filtering tools.
- ✓ Use school technologies to send spam or chain mail.
- ✓ Plagiarize content I find online.
- ✓ Post personally-identifying information, about myself or others.
- ✓ Agree to meet someone I meet online in real life.
- ✓ Use language online that would be unacceptable in the classroom.
- ✓ Use school technologies for illegal activities or to pursue information on such activities.
- ✓ Attempt to hack or access sites, servers, or content that isn't intended for my use.
- ✓ Bring food or beverages around any computer/media equipment.

This is not intended to be an exhaustive list. Users should use their own good judgment when using school technologies.

Limitation of Liability

Meadow Heights R-II will not be responsible for damage or harm to persons, files, data, or hardware. While Meadow Heights R-II employs filtering and other safety and security mechanisms, and attempts to ensure their proper function, it makes no guarantees as to their effectiveness. Meadow Heights R-II will not be responsible, financially or otherwise, for unauthorized transactions conducted over the school network.

Violations of this Acceptable Use Policy

First Offense (per school year):

1. Written report sent to Technology Director from the teacher or lab supervisor.
2. Loss of computer/media equipment privileges for 3 class days.
3. Written report of violation submitted to the building administrator explaining violation.
4. Conference with building administrator.
5. Letter sent to parents with copies of infraction reports.

Second Offense (per school year):

1. Written report sent to Technology Director from the teacher or lab supervisor.
2. Conference with building administrator.
3. Loss of computer/media equipment privileges for 5 class days.
4. Letter sent to parents with copies of infraction reports for the first and second offenses.
5. Disciplinary consequence in accordance with the student handbook.

Third Offense (per school year):

1. Written report sent to Technology Director from the teacher or lab supervisor.
2. Dropped from computer and loss of all district computer access.
3. Letter sent to parents with copies of infraction reports for first, second and third offenses.
4. Disciplinary consequence in accordance with the student handbook.

Please keep above information and return only this sheet.

I have read and understood this Acceptable Use Policy and agree to abide by it:

(Student Printed Name)

(Student Signature)

(Date)

I have read and discussed this Acceptable Use Policy with my child:

(Parent Printed Name)

(Parent Signature)

(Date)