Attention, Parents!

2017-18

Complete packet of important information

Thank you,

Ms. Rosemary Dougherty
CEO/Campus Principal
CCCS

## STUDENT EMERGENCY INFORMATION SHEET

Name of Student: _____ Gr.: _____ Rm.: _____ ID#: _____

### Mother's Information

Name: _____

Place of Employment: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ e-mail: _____

### Father's Information

Name: _____

Place of Employment: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ e-mail: _____

### Child Custody Information

Child lives with:

( ) Both Parents ( ) Both Parents Alternately ( ) Mother Only ( ) Father Only

( ) Legal Guardian ( ) Foster Parents ( ) Grandparents ( ) Other please specify

_____

Special Custodial Court Instructions: ( ) Yes* ( ) No

***If Yes, Please provide a copy of Court Order.**

Legal Guardian Name (if applicable) _____

Address: _____

Place of Employment: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ e-mail: _____

**PLEASE LIST TWO PERSONS WE MAY CONTACT IN CASE OF EMERGENCY.**

**NEED PICTURE ID**

**NOTIFY THESE INDIVIDUALS PRIOR TO LISTING THEM. INFORM THEM THAT THEY MAY BE REQUIRED TO PICK UP YOUR CHILD IN THE EVENT THAT WE CANNNOT CONTACT YOU.**

**EMERGENCY CONTACT #1**

Name: _____

Work Phone: _____ Home Phone: _____

Cell Phone: _____ e-mail: _____

Address: _____

**EMERGENCY CONTACT #2**

Name: _____

Work Phone: _____ Home Phone: _____

Cell Phone: _____ e-mail: _____

Address: _____

Parent/Guardian Signature: _____

**++++++ If this information changes during the school year, please call the school to update your emergency information. This is extremely important!!!!**

# This is a Must Read!

Christopher Columbus Charter School
www.cccs.k12.pa.us

Dear Parents/Guardians,

CCCS administration and staff have developed plans for procedures in the case of an unexpected early dismissal due to inclement weather, due to a civic emergency, or any local emergency need. We have gone over the process time and time again regarding the best ways to protect your children and keep them safe. We feel that these plans are good ones and we ask that you cooperate with your part to ensure the safety of all of our children and staff members. Listed below are a number of things that you could do to help us in the case of any early dismissal or emergency.

1. ***Complete the attached information sheet with all the information requested and please inform us if there are any changes in phone numbers or addresses.***

2. Please do not park in our school yard when picking up your children. The gate will be closed – do not under any circumstances open this gate.

3. Enter the North building by the 9th St. side main entrance only. Staff members will be covering other entrances and access by any other door will be denied.

4. In the case of a school lockdown do not attempt to enter the building. Please wait until an all clear is given. Once you enter the building you will be directed to your child's grade table in the cafeteria (both at 9th and 13th St.). Please sign EACH of your children out. We understand that it is inconvenient to go to each table but we need to document that each of the children left with a responsible adult. **Never take another child from the school without his/her parent's permission or without informing a staff or faculty member.**

5. Please remember that we are responsible for all the children in our school. Your calm, cooperative and orderly behavior will be the model that your children follow.

   **Please always listen to KYW if there is inclement weather or any type of emergency.** Thank you for your cooperation in this matter.

Rosemary Dougherty
Campus Principal/CEO

Christopher Columbus Charter School

Parent Conference Questions

**Teachers, please go over these questions with your parents/guardians.**

Name of Child _____Teacher _____RM. #

Does your child have any special needs?

Religious Restrictions?

Medicine or Food Allergies?

Are there any custody issues that the school needs to know? Please provide custody papers if you wish us to uphold custody provisions.

Does your child have an IEP or a 504 Plan? _____ If so, please be sure the school receives a copy of it.

###Reminder – children should not be in the school yard before 8:00AM – there will be NO supervision before 8:00AM **Children in Foundations may come in at 7:00AM for breakfast** – all other students may enter the building at 8:00AM for breakfast. ,.,.

****Dismissal is at 3:30 PM for grades K-5 Monday thru Friday
9th St. Building
****Dismissal is at 3:45 PM for grades 5-8 Monday thru Friday
13th St. Building

****Please check the school calendar for early dismissal days.

## Pick Up Information

Student's Name: _____ Grade _____

Address: _____

Dear Parents/Guardians:

We would like to have a list of adults you will authorize to pick up your child/ren. If you are authorizing your child to either walk home or take public transportation, please note that as well.

---

_____ My child, _____ walks to/from CCCS.

_____ My child, _____ takes public transportation

to/from CCCS. The route # is _____.

The following individuals are authorized to take/pick up my child to/from CCCS.

1. Name _____ Phone # _____
2. Name _____ Phone # _____
3. Name _____ Phone # _____
4. Name _____ Phone # _____
5. Name _____ Phone # _____

**If this information changes at any time during the year, please be sure to call the school office and inform the administration and your child's teachers.**

Parent/Guardian Signature _____

**Email address:** _____

Transportation Reimbursement

Christopher Columbus Charter School
www.cccs.k12.pa.us

Dear Parents/Guardians:

The School District of Philadelphia determines eligibility for partial reimbursement of transportation costs to families that are driving students to school in an automobile or van on a daily basis. If you are driving your child to school and wish to be considered for reimbursement, please complete the bottom of this form.

Once the School District has determined that you are eligible to receive transportation reimbursement, a monthly check will be mailed directly to you. Because of this, it is important that you notify us of any address change that may occur through the school year.

The amount of each month's reimbursement check will be based upon your child's monthly attendance at CCCS.

***If you would like consideration for free transpasses, please mark the appropriate lines below.***

**THIS INFORMATION WILL DETERMINE YOUR ELIGIBILITY FOR THE 2017-18 SCHOOL YEAR.**

Please remember to sign the form. Incomplete forms will be returned and may delay your eligibility status.

Rosemary Dougherty
Campus Principal/CEO

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Please print

My child/ren _____, Grade _____

_____, Grade _____

_____, Grade _____

_____, Grade _____

Student's Address: _____

City, State, Zip _____

Telephone#: (____) _____

Year, Make and model of car, truck or van (for example, 99 Ford Taurus sedan/wagon, etc.)

_____

Vin # (on registration card) _____

Actual mileage to/from school: _____

Seat Capacity (# of persons your auto holds): _____

Please **print** the name of the person driving your child and whose name will appear on the monthly transportation reimbursement check. (One name per check, please).

_____

_____ I would like to receive reimbursement for transportation. **(Only applies to grades 1-6)**

_____ I would like to receive transpasses for transportation. **(Only applies to grades 1-8)**

**Kindergarten students are not eligible for trans-passes or transportation reimbursement.**

_____

Parent/Guardian Signature: _____ Date: _____

Families with multiple children are eligible for only one reimbursement or trans-passes for each child.

**Christopher Columbus Charter School Parent/Guardian Responsibility Checklist**

**2017-18**

_____ Send my child to school healthy, well-nourished, clean and prepared to learn.

_____ **See that my child is punctual and attends school on time every day.**

_____ Support the school's discipline policy.

_____ See that my child wears his/her uniform **everyday to school. Policy attached to student checklist.**

_____ Establish a time and place for homework each day and provide a quiet and well lighted place for study.

_____ Check the homework on a regular basis and check power school to monitor progress.

_____ Be respectful toward all members of CCCS staff and faculty.

_____ Attend all parent report card conferences unless teacher deems it not necessary.

_____ Commit to 20 hours per year as a volunteer – hours can be accumulated by participating in various school functions. (Meetings, fundraisers, attending report card conferences, volunteering for special events, etc.)

_____ I understand that the policy of CCCS is to promote students from grade to grade based on academic performance.

_____ **I will take responsibility for the behavior of my child in school and understand that unacceptable behavior as determined by teachers and other staff members will result in sanctions explained in the school's code of conduct. Good behavior is also rewarded in various ways during the school year.**

_____ I understand that this COMPACT is an agreement to support the faculty, staff and volunteers as they work to help me help me help my child be a productive, and cooperative member of the school community.

Parent/Guardian Signature _____

Child/ren Name/s _____

Date: _____

**Christopher Columbus Charter School Teacher and School Responsibility Checklist**
**2017-18**

_____ Provide a safe and caring classroom environment in which your child will begin to be responsible for his/her own behavior and learning

_____ Follow the curriculum designed for this school and for your child

_____ Utilize the information gathered about your child through diagnostic testing, interviews, conferences, observation in class, and assessment of your child's performance to construct, implement and modify the Individualized Learning Plan for your child

_____ Take into account your child's strengths and unique attributes

_____ Make classroom learning activities enjoyable, challenging and effective

_____ Help your child follow school and classroom rules

_____ Keep you informed of your child's progress by updating Power School regularly.

_____ Schedule parent/teacher conference to accommodate parents' schedules

_____ Help you with how to help your child at home

_____ Vary teaching techniques so that all types of learning can take place.

_____ Assign homework, check completion of homework.

Teacher Signature _____ Date _____

Parent Signature _____ Date _____

**Christopher Columbus Charter School Student Compact**

Name _____ 2017-18

**Student Responsibility Checklist**

_____ Attend school regularly and be on time.

_____ Behave well in my class.

_____ Come to school with materials I need in order to do my best work.

_____ Follow the instructions of my teachers.

_____ Follow classroom rules and school policy.

_____ Complete and return my homework on time.

_____ Use regular study hours at home.

_____ Make good effort.

_____ Respect all adults in our school.

_____ Respect all students in our school.

_____ Respect other people in our community.

_____ Respect school property.

_____ I will follow CCCS guidelines for wearing uniforms.

Student Signature _____
(parent sign if child cannot write)

Teacher Signature _____

pennsylvania
DEPARTMENT OF EDUCATION

# HOME LANGUAGE SURVEY[1]

The Office of Civil Rights (OCR) requires that all Local Education Agencies (LEA's) identify limited English proficient (LEP) students in order to provide appropriate language instructional programs for them. Pennsylvania has selected the Home Language Survey as the initial step in the identification process.

**School District:** _____ **Date:** _____

**School:** _____

**Student's Name:** _____ **Grade:** _____

1. **What is/was the student's first language?** _____

2. **Does the student speak a language(s) other than English?** **Yes** **No**

   *(Do not include languages learned in school.)*

   **If yes, specify the language(s):** _____

3. **What language(s) is/are spoken in your home?** _____

4. **Has the student attended any United States sch ool in any** **Yes** **No**

   **3 years during his/her lifetime?**

   **If yes, complete the following:**

| Name of School | State | Dates Attended |
|---|---|---|
| | | |
| | | |
| | | |

*(if other than parent/guardian)*

**Parent/Guardian signature:** _____

[1] The local education agency (LEA) has the responsibility under the federal law to serve students who are limited English proficient and need English instructional services. Given this responsibility, the LEA has the right to ask for the information it needs to identify English Language Learners (ELLs). As part of the responsibility to locate and identify ELLs, the LEA may conduct screenings or ask for related information about students who are already enrolled in the school as well as from students who enroll in the LEA in the future.

Christopher Columbus Charter School
Permission for Pictures

2017-18

Student's Name _____

Dear Parents,

Occasionally members of the staff would like to take a still photo of the children or capture one of their activities on videotape. The pictures might be displayed on bulletin boards with the school, or they might be sent to the newspapers along with an article that describes the activity in which the children were engaged. For example, we might take a picture of the winners of a spelling contest and send it to the newspaper along with an article about the school's spelling program and the performance of the youngsters who won the contest. Videotapes are generally used within the school to capture a special program or to establish a base line that allows children to see how much they have grown in a given period. The Audio-Visual and Publications Agreement gives the school your permission to photograph your child and display his/her picture and name in newspaper articles, video presentations, etc.

**The Christopher Columbus Charter School** may use any material it may gather to written, audio, and/or means in such manner and form as it deems appropriate in fulfillment of its obligation to ensure the highest standards of educational services. This material may include but not be limited to candid photographs and/or moving picture of video presentations, as well as material from or about me, my child, or any person for whom I am legally responsible.

Accepted By:

Father _____ Date _____

Mother _____ Date _____

Legal Guardian _____ Date _____

++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++

I do not wish to have my child photographed or have his/her name mentioned in any media publication or broadcast.

Signature _____ Date _____

# Christopher Columbus Charter School

2017-18

**Permission for Neighborhood Walks**

**Student's Name** _____

Dear Parents:

The staff of the CCCS will want to take the children on short walks through the neighborhood in order to take advantage of such facilities as recreation centers, libraries, museums, parks, etc. Please be assured that these trips will be integral parts of the school's programs and that your children will derive educational benefits from participating.

I give my permission for my child. _____,to walk to places of interest in the neighborhood surrounding CCCS. I understand that a member of the staff will accompany the children. I further understand that if my child behaves in a manner that is disruptive, or that endangers his/her personal safety or that of other members of the class, he/she will be excluded from similar activities for a period of time to be determined by the school. The school will be under no obligation to provide a similar alternative program.

_____ Date _____

Parent/Guardian Signature

Emergency Number where I can be reached _____

1. Alternate emergency number _____

2. Alternate emergency number _____

Please list any special medical condition we should be aware of . . .

Christopher Columbus Charter School

2017-18

Dear Parents/Guardians,

The students will be accessing the Internet for research, graphics, SAFE Internet use, instruction and much more. While accessing the Internet, students will be responsible for their actions.

***Internet access is a privilege and that privilege
may be revoked
if misused by any student.***

**Any student who accesses an inappropriate website will be suspended from school for a period of three days. All social networks may never be accessed during the school day!**

Ms. Rosemary Dougherty

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Internet Access Permission

_____ No, I do not give permission for my child, _____,
access to the Internet while attending CCCS.

_____ Yes, I do give permission for my child _____,
access to the Internet while attending CCCS.

Parent's/Guardian Signature

_____

Date: _____

Christopher Columbus Charter School
2017-18 Calendar

**2017**

| | |
|---|---|
| August 29,30,31st | Professional Development |
| September 5,6,7,8th | Grades 1-8 1:30 dismissal |
| September 11th Begins | First Day of Kindergarten – Foundations |
| September 21st,22nd | Holidays – Rosh Hashanah |
| October 9th | Holiday – Columbus Day |
| November 22nd | 1:30 dismissal – **NO Foundations** |
| November 23, 24th | Holidays – Thanksgiving |
| December 8th students | Professional Development – no school for |
| December 22nd-January 2nd | Winter Break |
| School Resumes January 3rd | |

**2018**

| | |
|---|---|
| January 15th | Holiday – Martin Luther King |
| February 16th and 19th | Holidays – Presidents Day |
| March 26th-April 2nd | Spring Break – school resumes on April 3rd |
| May 7th | Professional Development no school for students |
| May 25 and 28th | Holidays – Memorial Day |
| June 8, 11, 12th | 1:30 dismissal – June 12th last day of school |

The following days are 1:30 dismissal for Faculty Meeting – There **will be** Foundations on these dates.

October 27th March 6th April 27th

**Please check your monthly calendar – these dates are subject to change.**

**Christopher Columbus Charter School**

**Acceptable Use Policy for Computer, Internet, and Technology Resources**

Christopher Columbus Charter School (CCCS) provides computer technology and internet access to promote educational excellence through resource sharing, innovation, and communication. All technology must be used in an ethical and legal manner. Access is provided in a responsible manner consistent with the educational mission of the school.

CCCS believes that technology and internet access enhances the quality and delivery of education and is an important part of preparing children for life in the 21st century. Technology includes but is not limited to networked computers, laptops and chrome books, cameras, tablets and e-readers, projectors, video camcorders, mp3 players, usb flash drives, printers.

CCCS Students receive technology training and education regarding appropriate online behavior in their classes. This includes digital literacy, etiquette, law, health and wellness, security, and communication (including interaction with other individuals on social networking websites and cyber bullying awareness).

All technology users must understand that the Internet is a global, fluid community, which remains largely unregulated. While it is an extremely valuable educational tool, there are sections that are not compatible with our school, community, or family standards. CCCS believes that the Internet's advantages far outweigh its disadvantages and will provide an Internet filtering device which blocks access to a large percentage of inappropriate sites. It should not be assumed that users are completely prevented from accessing inappropriate materials or from sending or receiving objectionable communications. Teachers and students must be careful and diligent that content is school appropriate.

Additionally, CCCS considers access to the Internet and computer resources a privilege, not a right. Therefore, students violating this Acceptable Use Policy (AUP) may be subject to revocation of these privileges and potential disciplinary action. CCCS also reserves the right to report any illegal activities to the appropriate authorities. Ultimately, parents and guardians of minors are responsible for conveying the standards that their children should follow when using media and information sources and upholding the published standards of CCCS. All students must have a current, signed AUP on file with their school of attendance or they will not be permitted to access the CCCS Network or the Internet.

- Students will never disclose or publicize personal information.
- Students will only download materials or images relevant to their studies.
- Students will be aware that any usage, including distributing or receiving information, school-related or personal, may be monitored for unusual activity, security and/or Network management reasons.

Email:

- Students will use approved class email accounts or personal accounts only under supervision by or permission from a teacher.
- Students will not send or receive any material that is illegal, obscene, and defamatory or that is intended to annoy, intimidate, or harass another person.
- Students will not intentionally reveal their own or other people's personal details, such as addresses or telephone numbers or pictures.

Social Networking:

- Students will only have access to chat rooms, discussion forums, Weblogs, messaging or other electronic forms of communication that have been approved by CCCS and supervised by a teacher.
- Chat rooms, discussion forums, Weblogs and other electronic communication forums will only be used for educational purposes.

School Web Site:

- Students may be given the opportunity to publish projects, artwork or school work on the World Wide Web in accordance with clear policies and approval processes regarding the content that can be loaded to the school's Web site.
- The Web site will be checked regularly to ensure that there is no content that compromises the safety of students or staff.
- The publication of student work will be coordinated by a teacher.
- Students' work may appear in an educational context on Web pages.
- Personal student information including home address and contact details will be omitted or redacted from school Web pages.
- Students will continue to own the copyright on any of their own work published.

Personal Cell Phones and Devices

- Personal Cell Phones and Devices
- Students using their own cellular technology in school, such as leaving a mobile phone turned on during school hours, using it in class without teacher permission, or the unauthorized taking of images with a mobile phone camera (still or moving) is in direct violation of this Acceptable Use Policy as well as the CCCS Student Code of Conduct.
- Students may use cellular technology in class for educational purposes with teacher permission.

Ethical Use:

- Users may not cause malicious or intentional damage to school technology.
- Users may not tamper with default or teacher-created settings on any school owned computers.
- Users may not plagiarize or violate copyright law in any way from any source.
- Users may not send, display or receive messages, pictures, or other media which are abusive, obscene, sexually inappropriate, threatening, and racially offensive, considered harassment or offensive.
- Users must comply with laws regarding cyber bullying. Cyber bullying is willful and repeated harm and/or harassment inflicted through the use of computers, cell phones, and other electronic devices. The policies regarding these situations will follow applicable state and federal law.
- Users may not intentionally waste valuable limited resources (paper, ink, toner, CDs, DVDs, etc.).
- Inadvertent access to any inappropriate content using school technology needs to be reported to a teacher or administrator immediately.

Sanctions:

- Misuse of the Network or Internet may result in disciplinary action, including written warnings, withdrawal of access privileges and, in extreme cases, suspension or expulsion. The school also reserves the right to report any illegal activities to the appropriate authorities.

General Provisions:

- Students and parents should familiarize themselves with information about legislation relating to Internet use, including the Children's Internet Protection Act of 2000 (CIPA).

Chromebooks:

CCCS is supplying all students in Grade 7-8 a Chromebook device. This device is property of CCCS. The function will be to provide student access to required educational materials needed for each student to be successful. The Chromebook allows student access to Google Apps for Education, educational web-based tools, as well as many other useful sites. It is an educational tool not intended for gaming, social networking or recreational computing. The mission of the 1-to-1 Chromebook program at CCCS is to create a collaborative learning environment for all students in Grades 7-8. This environment will enable and support students and teachers to implement transformative uses of technology while enhancing students' engagement with content and promoting the development of self-directed, responsible life-long learners and users. Students will transition from consumers of information to creative producers and owners of knowledge.

- Students are responsible for the general care of the Chromebook that was issued to them by the District. Chromebooks that are broken or fail to work properly must be reported immediately to their teacher or technology specialist.
- Chromebooks are intended for use at school each day. Students are responsible for bringing their Chromebooks to all of their classes, unless specifically instructed not to do so by their teacher.
- Close the Chromebook screen before moving it, unless directed to do so by a teacher.
- Do not lean on the top of the Chromebook when it is closed.
- Do not place anything near the Chromebook that could put pressure on the screen.
- Do not place anything in the carrying case that will press against the cover.
- Do not poke or write on the screen.
- Do not place anything on the keyboard before closing the lid (e.g. pens, pencils, or disks).
- Clean the screen with a soft, dry cloth or anti-static cloth.
- Do not bump the Chromebook against lockers, walls, doors, floors, etc.
- No food or drink is allowed next to your Chromebook while it is in use.
- To conserve battery life Chromebooks should be shut down before moving them.
- Chromebooks must remain free of any writing, drawing, stickers, or personal decorative labels.
- Chromebooks must never be left in an unlocked car or any unsupervised area.
- Students are responsible for charging their Chromebook's battery before the start of each school day.
- Students may be selected at random by teachers or administrators to provide their Chromebook for inspection for damages or misuse.

Permission Form:

Please review the attached Christopher Columbus Charter School (CCCS) Acceptable Use Policy (AUP). Sign and return this permission form to the school of attendance.

Name of Student: _____

Grade: _____

Student:

I agree to follow the Christopher Columbus Charter School (CCCS) Acceptable Use Policy (AUP) on the use of Computer Technology, Network, Internet. I will use these tools in a responsible way and will obey all the rules established by the school.

Signature: _____

Date: _____

Parent/Guardian :

As the parent or legal guardian of the above student, I have read the CCCS AUP and grant permission for my son or daughter or the child in my care to access the Network and Internet. I understand that Network and Internet access is intended for educational purposes. I also understand that every reasonable precaution has been taken by CCCS to provide for online safety, but that CCCS cannot be held responsible if students access unsuitable Web sites.

Signature: _____

Date: _____

ALL CHROME BOOKS ARE THE PROPERTY OF CHRISTOPHER COLUMBUS CHARTER SCHOOL AND WILL BE RETURNED TO THEIR HOMEROOM TEACHERS IN JUNE OF 2018.

# Medication Policies

1) Medication should be given at school only if it cannot be given at home.
2) Medication prescribed 3x a day can be given at home (morning, afterschool and at bedtime).
3) Medication prescribed 4x a day can be given once in school with a doctor's order.
4) All medication must be prescribed by a qualified health care provider on form MED-1. Forms available upon request. No medication or treatment will be administered without form MED-1. (Inhaler /Nebulizer medication which is properly packaged and labeled by a registered pharmacist may be administered by the school nurse for a period not to exceed 10 school days without this form). This will allow the parent time to get the MED-1 form completed and signed. A written order by a physician on a prescription pad or letterhead is acceptable. As well as a fax from your doctor's office. Medication will be returned after 10 days after it is received if the proper form is not on file. Any dose changes must have documentation from the physician as well.
5) The parent will supply the medication, properly labeled in its original package.
6) OTC (over the counter) medications and temporary prescribed medication require written confirmation by a qualified health care provider (prescription pad, letterhead and/or fax is acceptable). This includes Tylenol and Motrin.
7) OTC medication must be in the original manufacturer's container with directions for use intact on the label or box. (Pills loose in a bag are unacceptable).
8) Written parental approval is also required with full instructions and dosage.
9) Prescribed medication must have the name of the recipient clearly visible on the label or box.
10) All medication that is to be given in school (inhalers, pills, etc) must be given to the nurse/health tech. as soon as the student arrives at school. Students may not carry medication on them for any reason. Students who are caught with medication will be issued demerits, detention or suspension as determined by administration.
11) A new medication form, MED-1 is needed each school year.
12) Finally, Tylenol will only be administered to students who have a standing order from their doctor.

***Any medication sent with your child that does not meet the above requirements, will not be administered by the medical staff

**NO CHILD IS PERMITTED TO CARRY HIS/HER MEDICATION ON THEM !!!!**

## Health Room Policies:

1) The school nurse cares for illnesses and injuries that occur in the school setting.
2) **Notification of parents/guardians will be on an as needed basis and at the discretion of the nurse as over 30 students are seen each day.**
3) The nurse will not treat injuries that occurred at home, redressing wounds from home is the parent's responsibility and/ or your family doctor.
4) Children with complaints of headache will be offered ice; only children with a doctor's order on file will be given Tylenol.
5) Children who are sick must stay home; perfect attendance is not an appropriate reason to send a sick child to school. Remember Tylenol masks/hides a fever it does not cure it, your child is still sick.

## MANDATED HEALTH RECORDS:

- ALL sixth graders will need a new physical by the eight month of the school year (April). A copy of shot records is NOT a physical.
- All new students will need a physical; this includes Kindergarten and students transferred from other schools.

I have found it necessary to be firm with these policies as our student population continues to grow and compliance has been less than perfect in previous years. In regard to medications, there will be no exceptions.

If you have any questions or concerns feel free to contact me at 215-925-7400

K.Mingroni, RN, BSN
School Nurse

Melissa Smith
Health Technician

THE SCHOOL DISTRICT OF PHILADELPHIA

SCHOOL HEALTH SERVICES

# REQUEST FOR ADMINISTRATION OF MEDICATION, TREATMENTS OR USE OF EQUIPMENT IN SCHOOL

(PLEASE SEE MESSAGE TO PHYSICIAN AND PARENT ON BACK OF FORM)

**PHYSICIAN, PLEASE NOTE:** Fill in all of the spaces. Missing information will cause the form to be returned to you. This will cause a delay in your patient receiving medication / treatment. A separate request is needed for each medication.

| NAME OF PATIENT/STUDENT | ADDRESS/ZIP | ROOM/BOOK NO. |
|---|---|---|
| | | |

| DATE OF BIRTH | SCHOOL/ORG.# | REGIONAL OFFICE | PID |
|---|---|---|---|
| | | | |

DIAGNOSIS:

REASON MEDICATION MUST BE GIVEN IN SCHOOL:

| NAME OF MEDICATION/EQUIPMENT/TREATMENT: | DOSE: |
|---|---|
| | |

| TIME(S) TO BE GIVEN IN SCHOOL: | TOTAL DOSAGE PER 24 HRS: |
|---|---|
| | |

| DATE BEGIN: | DATE END: |
|---|---|
| | |

INSTRUCTION FOR ADMINISTRATION/UTILIZATION:

CONTRAINDICATIONS:

SIDE EFFECTS: _____

TREATMENT OF SIDE EFFECTS/ACTION TO BE TAKEN: _____

IS ANY RESTRICTION ON ACTIVITY NECESSARY: YES ☐ NO ☐

IF YES, DESCRIBE: _____

IS STUDENT TAKING ANY OTHER MEDICATION? YES ☐ NO ☐

IF YES, NAME OF MEDICATIONS: _____

IS SIMILAR EQUIPMENT KEPT BY THE CHILD'S FAMILY AT HOME? YES ☐ NO ☐

| PRINT NAME OF HEALTH CARE PROVIDER/CREDENTIALS | TELEPHONE |
|---|---|
| ADDRESS | EMERGENCY NUMBER |
| SIGNATURE OF HEALTH CARE PROVIDER | DATE SIGNED |

To The Principal

- I authorize selected school personnel to administer the indicated medication, or to use the equipment or machinery as prescribed by my child's health care provider, whose signature appears on this form.
- Medication is to be administered by the Certified School Nurse. In the absence of the Certified School Nurse, it may be administered by the Principal or his/her designees.
  Certified School Nurse will provide instruction for administration of medication or use of equipment to the Principal or his/her designees.
- My child may self-administer medication/equipment as determined appropriate by the school nurse.
- I authorize the school nurse to communicate with my child's health care provider and my health care provider to reply, as needed, regarding this medication/ equipment and/or my child's response.

PARENT SIGNATURE _____ TELEPHONE NUMBER _____

DATE SIGNED _____ EMERGENCY NUMBER _____

SIGNATURE OF SCHOOL NURSE _____

TELEPHONE NUMBER OF SCHOOL NURSE _____

MED-1 (Rev. 3/11) – COMM. CODE 81602445400

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