# SCOTT COUNTY VIRGINIA PUBLIC SCHOOLS

"Every Child, Every Opportunity"



# REGULATIONS, FORMS, AND NOTIFICATIONS 2023-2024

# **REGULATIONS/FORMS 2023-2024**

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# \*The notifications need to be posted on a bulletin board so they are visible to the public.

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## Acceptable Use Policy for Electronic Information, Services, and Networks

# Each employee must sign this Agreement as a condition for using the School Division's computer system. Each student and his or her parent/guardian must sign this Agreement before being permitted to use the School Division's computer system. Read this Agreement carefully before signing.

Prior to signing this Agreement, read Policy GAB/IIBEA and Regulation GAB-R/IIBEA-R, Acceptable Computer System Use. If you have any questions about this policy or regulation, contact your supervisor or your student's principal.

I understand and agree to abide by the School Division's Acceptable Computer System Use Policy and Regulation. I understand that the School Division may access, monitor, and archive my use of the computer system, including my use of the internet, e-mail and downloaded material, without prior notice to me. I further understand that should I violate the Acceptable Use Policy or Regulation, my computer system privileges may be revoked and disciplinary action and/or legal action may be taken against me.

Student/Employee Name \_\_\_\_\_ (Please Print)

Student/Employee Signature

Date

I have read this Agreement and Policy GAB/IIBEA and Regulation GAB-R/IIBEA-R. I understand that access to the computer system is intended for educational purposes and Scott County School Division has taken precautions to eliminate inappropriate material. I also recognize, however, that it is impossible for the School Division to restrict access to all inappropriate material and I will not hold the School Division responsible for information acquired on the computer system. I have discussed the terms of this agreement, policy, and regulation with my student.

I grant permission for my student to use the computer system in accordance with Scott County School Division's policies and regulations and for the School Division to issue an account for my student

Parent/Guardian Name	
(Please Print)	

Parent/Guardian Signature

Date \_\_\_\_\_

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

## POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; Ja Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Souto no discriminarán por motivos de traza, color, religión, origen nacional, afiliación de notidad de genero, orientación sexual, genero / sexo funciluado is descutadintes embases, leade, estatales, escudares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Souto no discriminarán por motivos de traza, color, religión, origen nacional, afiliación de polítea, jedenco / sexo funciluado las escutiantes embases), edad, estado civil, discaganción genética en cualquier programa educativo, incluidad la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extraurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

## LETTER TO PARENTS: Acceptable Use Policy for Electronic Information, Services, and Networks

Dear Parent/Guardian:

The Scott County School Board offers your child the use of electronic communications through the Scott County School Division's computer system. Your child will be able to communicate with other schools, colleges, organizations and individuals around the world through the Internet and other electronic information systems/networks.

Part of the School Division's responsibility in preparing students for the 21st century is to provide them access to the tools they will be using as adults. The Internet will likely be one of these tools. Through the Division's computer system your child will have access to databases, libraries and computer services from all over the world. We accept the responsibility of teaching your child about his/her role as a "network" citizen and the code of ethics involved with this new community.

With this educational opportunity also comes responsibility on the part of your child. It is important that you and your child read the enclosed Division policy, administrative regulation and agreement form and discuss these requirements. The Division takes precautions to prevent access to inappropriate material. However, it is impossible to control access to all material and a user may access inappropriate material.

In order for your child to take advantage of this educational opportunity, your authorization is needed. Attached to this letter are the Acceptable Computer System Use Policy and Regulation (GAB/IIBEA) and the Acceptable Computer System Use Agreement which both you and your child must sign before your child may use the computer system. Please review these materials carefully with your child before signing the required agreement.

Sincerely,

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## ACKNOWLEDGMENT CONCERNING THE USE OF STUDENT LOCKERS

I acknowledge and understand that:

- 1. Student lockers are the property of the school system;
- 2. Student lockers remain at all times under the control of the school system;
- 3. I am expected to assume full responsibility for my school locker; and
- 4. The school system retains the right to inspect student lockers for any reason at any time without notice, without student consent, and without a search warrant.

Student

Date

Locker Number

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## ACKNOWLEDGEMENT OF PARENTAL RESPONSIBILITY

Code of Student Conduct

As a parent, I, \_\_\_\_\_\_, acknowledge that I have received a copy of the school system's Standards of Student Conduct and a copy of the Virginia Code Section 22.1-279.3.

Your signature below indicates only acknowledgement of receipt of this material. By signing this statement of receipt, parents are not deemed to have waived, but expressly reserve their rights protected by the constitutional laws of the United States and Virginia.

Student's Name

Parent's Name

Date

## I have read this Student Handbook and Code of Conduct.\*

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

Parent's Signature:	

Date: \_\_\_\_\_

## NONDISCRIMINATION POLICY

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# ACTIVITY FUND POLICY

All activity funds received by a local school must be deposited into its account through the school principal. The school employee (teacher, etc.) responsible for receipting activity funds must maintain a Scott County Public Schools Activity Sheet containing the date, specific activity (school pictures, etc.), amount received, paid to/by (student's name, etc.).

Upon transfer of the activity fund monies to the principal's office for deposit, the employee (teacher, etc.) must verify the amount and acknowledge transfer by signature. The office employee receiving the activity fund deposit from the school employee (teacher, etc.) will verify the amount received and acknowledge receipt of the monies by signature.

The office staff and employee (teacher, etc.), must maintain a copy of the Activity Sheet on file.

DATE	ΑCTIVITY	AMOUNT	PAID TO/BY

RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

\*Copies of the completed form should be kept on file by the teacher and office staff.

# ANTI-BULLYING POLICY

## INTRODUCTION

Bullying is a problem in many spheres of our culture: it exists in the work place, it exists in intimate relationships, and it exists in families and communities. Bullying exists in public schools, but public schools are in a unique position to educate children and adolescents about its presence, danger, and negative consequences. Schools can also teach behaviors that will protect students from the harmful effects of bullying. Based on the findings of past and current research, Scott County School's policy promotes school practices that address bullying behaviors in schools. This policy unequivocally considers bullying, aggression, and harassment as unacceptable behaviors; it promotes adoption of age-appropriate strategies designed for prevention, intervention, and accountability for bullying behaviors; and it promotes the use of whole-school and evidence- based practices in the classroom, in the school, and across the school division.

Bullying has been linked to negative outcomes for students who are its victims, for bystanders, and for students who are bullies themselves. Bullying negatively affects school climate. Bullying also has negative impacts on learning, health, behavior and school outcomes. For these reasons, Scott County Schools is committed to providing a safe and civil environment for all students, employees, parents or guardians, volunteers, and visitors.

## **DEFINITIONS**

The Code of Virginia at 22.1.276-01 defines bullying as:

...any aggressive and unwanted behavior that is intended to harm, intimidate, or humiliate the victim; involves a real or perceived power imbalance between the aggressor or aggressors and victim; and is repeated over time or causes severe emotional trauma. "Bullying" includes cyber bullying. "Bullying" does not include ordinary teasing, horseplay, argument, or peer conflicts.

The Scott County School Board adopts the definition of bullying as stated in the *Code of Virginia* and expounds upon it further:

Bullying is an aggressive, purposeful behavior that repeatedly inflicts physical hurt or psychological distress on one or more students or employees. A student, either individually or as a part of a group, shall not harass or bully others either in person or by the use of any communication technology including computer systems, telephones, pagers, or instant messaging systems. Prohibited conduct includes, but is not limited to, physical, verbal, or written intimidation, taunting, name-calling, and insults and any combination of prohibited activities. Prohibited conduct includes verbal or written conduct consisting of comments regarding the race, gender, religion, physical abilities or characteristics or associates of the targeted person.

Bullying may involve, BUT is not limited to:

- 1. Intimidation
- 2. Physical violence
- 3. Cyber bullying
- 4. Public humiliation
- 5. Harassment
- 6. Unwanted taunting
- 7. Threatening
- 8. Stalking

## **Prevention and Intervention**

Scott County Public Schools expects staff and students to exhibit the finest values of humanity and civility. Bullying is unproductive and unacceptable in schools. Bullying harms the school culture and climate, and the individual lives of the victim, the bystander, and the bully. Bullying should be prevented, and intervention should be taken in cases where bullying has been reported or is suspected.

- A. Anti-Bullying Programs: A school wide-evidence based anti-bullying program will be part of a system of positive behavioral supports and school improvement efforts across grade levels.
- B. School Climate Information: The division and individual schools shall promote student involvement in the antibullying efforts, peer support, mutual respect, and creation of a culture which encourages students to report bullying to adults.
- C. Collaboration: Each school shall collaborate with families and the community to inform parents about the prevalence, causes, and consequences of bullying; including its central role as a public health hazard, the means of preventing it, and the methods of reporting it should it happen or occur.
- D. Bullying Prevention Coordinator: A bullying prevention coordinator is a person who serves as the primary school division contact to receive copies of all formal and informal reports of bullying incidents. S/he ensures policy is implemented and that all staff within the division are properly educated and trained.

The bullying prevention coordinator:

- a. serves as the school division's primary contact for harassment, intimidation, and bullying;
- b. supports and assists the school principal (or designee) in resolving complaints (except where the complaint is against the principal or designee);
- c. reviews all copies of incident reporting forms, discipline referral forms, and letters to parents providing the outcomes of investigations, before these are mailed to parents;
- d. uses school bullying and complaint data to identify division wide patterns of behavior and areas of concern;
- e. implements school division policy and procedures by overseeing the investigative processes, including ensuring that investigations are prompt, impartial, and thorough;
- f. assesses the training needs of staff and students to ensure successful implementation of policy throughout the school division ensuring that staff receive annual training and technical assistance based on the results of staff and student surveys;
- g. develops a procedure for maintaining written records of all incidents of bullying and their individual resolution; and
- h. disseminates her/his contact information liberally throughout the school division.
- E. Education: Each year students should receive age-appropriate information on the recognition and prevention of harassment, intimidation, or bullying behaviors. Information provided should include a copy of the Bullying Incident Report Form or a link to a Web-based reporting form.
- F. Training: Staff should receive annual training on the school division's bullying prevention policy and procedures as regards their roles and responsibilities in responding immediately to bullying incidents, as well as the reporting, intervening and following-up with victims and bullies. Annual professional development should increase staff awareness of the prevalence, causes, and consequences of bullying, and continually promote the use of evidence-based strategies for preventing bullying. Professional development should be provided for employees hired after the annual training has been conducted.
- G. School Safety Surveys: Students and staff should be surveyed at least biennially regarding the prevalence and characteristics of bullying in their school; data collected should be used to guide local decision making and program planning related to surveillance needs, prevention, intervention, and professional development. School safety survey results should be shared with the school board for eventual dissemination to the public.

# **Reporting, Investigating, and Recording Incidents**

Scott County Schools will follow these policies and procedures to ensure prompt investigation and response to any report of an incident of bullying. These procedures should protect the victim from additional bullying or retaliation.

Step 1: Reporting an incident (see Bullying Incident Report Form in Appendix)

- a. Any student who believes s/he has been the target of bullying, or any other person in the school community who observes or receives notice that a student has or may have been the target of bullying, may report incidents verbally or in writing to any staff member.
- b. An incident reporting form may be filed anonymously (via the Web, a physical drop box, and/or a verbal or written report may be made to any school staff member);
- c. All reports of intimidation or bullying should be recorded on a school division incident reporting form and submitted to the principal or designee, unless the designee is the subject of the complaint, and to the bullying prevention coordinator. All reports that have an identified complainant should be investigated.
- d. All staff should document oral reports of bullying incidents made to them.

Step 2: Investigating (see Investigation Form in Appendix)

# Upon receipt of a report of bullying, the school principal or designee shall promptly conduct an investigation.

a. When investigating the incident all of the surrounding facts, circumstances, severity, and age/developmental factors should be considered.

b. At each school in the school division, the procedures for investigating bullying should include:

- 1) investigation by the principal or designee. The designee(s) may not be the accused perpetrator (harasser or bully) or victim.
- documentation of interviews conducted by the principal or designee with the victim, alleged perpetrator, and witnesses (interviews are confidential, and are conducted privately and separately). At no time should the alleged perpetrator and victim be interviewed together.
- 3) the collection and evaluation of the facts including, but not limited to
  - a) a description of the incident(s) including the nature of the behavior and the context in which the alleged incident(s) occurred;
  - b) how often the conduct occurred;
  - c) whether there were past incidents or past continuing patterns of behavior;
  - d) the relationship between the parties involved;
  - e) the characteristics of parties involved (i.e., grade, age, gender, ethnicity, etc.);
  - f) the identity and number of individuals who participated in bullying or harassing behavior;
  - g) where the alleged incident(s) occurred (time/date/place of incident);
  - h) whether the conduct adversely affected the student's education or adversely affected the educational environment;
  - i) whether an imbalance of power is evident; and
  - j) the date, time, and method of informing parents/legal guardians of all parties involved in the incident.

Whether conduct is "substantially interfering with a student's education" should be determined by considering a targeted student's grades, attendance, demeanor, interaction with peers, participation in school and extracurricular activities, and other performance or behavioral indicators. Negative changes in behavior would be particularly noteworthy.

- c. Whether a particular action or incident constitutes a violation of bullying prevention policy requires a determination based on all the facts and surrounding circumstances and includes:
  - 1) recommended remedial steps necessary to stop the bullying and/or harassing behavior,
  - 2) a safety plan and follow-up with the victim, and
  - 3) a final written report by or to the principal.

Step 3: Reporting investigation results

Three possible outcomes exist:

- a. If the incident falls within the scope of school division policy, appropriate consequences and/or interventions should be implemented. The prescribed actions should be designed to prevent and remediate the bullying and should include graduated interventions that are appropriate to the context and severity of the behavior. Appropriate support services should be provided for others affected by the bullying behavior.
- b. If the incident falls outside of the scope of school division policy, and/or is determined to be a criminal act, referral should be made to appropriate law enforcement authorities.
- c. If the incident falls outside of the scope of school division policy, and is determined not be a criminal act, the parents/legal guardians of all students involved should be informed.

# Step 4: Additional considerations

- a. The principal or designee may determine that other steps must be taken before the investigation is complete.
- b. The investigation should be completed within two school days from the initial complaint or report. If more time is needed to complete an investigation, the school division should provide all involved parent(s)/guardian(s) and/or the student(s) with weekly updates.

Following the completion of the investigation and the submission to the school division administrator and bullying prevention coordinator, the principal or designee shall respond to the parent/guardian of the alleged aggressor and victim(s) stating:

1) the results of the investigation,

- 2) if the allegations were substantiated and there was a violation of policy, and
- 3) the process for any party to challenge the findings.

If the school principal or designee determines that bullying or retaliation has occurred, the school principal or designee should take appropriate disciplinary action, notify the parents or guardians of the perpetrator, and notify the parents or guardians of the victim. If the school principal or designee believes that the situation is placing the victim in a position of harm or danger, s/he should notify local law enforcement.

Step 5: School division recordkeeping and review

- a. Scott County Schools will keep statistics regarding the number of incident reports submitted at each school. Each school will be required to report to the bullying prevention coordinator on a monthly basis. These summaries should include the number of incidents, and number of students involved, that were substantiated and the number still under investigation. It should also include demographics about those involved in the reported incidents, i.e., each student's grade, race/ethnicity, or other pertinent information. Locations where bullying took place should be noted. Regular review of bullying incident data will aid the school division and school in prevention planning.
- b. The statistics about incident reports should parallel the reports of behaviors on the discipline, crime and violence reporting form and have "bullying" disaggregated from other behaviors.

Considerations for students with disabilities:

Any bullying of a student with a disability that result in the student not receiving meaningful educational benefits constitutes a denial of a free appropriate public education (FAPE) under the Individuals with Disabilities Education Act (IDEA). Furthermore, some bullying of students with disabilities may also constitute discriminatory harassment and trigger additional responsibilities under the civil rights laws.

Procedures that will be followed when a student with a disability is involved in any bullying incident:

A. Convene the Individualized Education Program (IEP) Team to determine whether, as a result of the effects of the bullying, the student's needs have changed, and if the IEP is no longer designed to provide meaningful educational benefit. The decisions must be made by the IEP Team and be consistent with the IDEA parental participation provisions. Parents have the right to request an IEP Team meeting at any time that a student's needs may have changed as a result of the bullying.

- 1) If the IEP is no longer designed to provide a meaningful educational benefit to the student, the IEP Team must then determine to what extent additional or different special education or related services are needed to address the student's needs, and revise the IEP accordingly.
- 2) IEP Teams should exercise caution when considering a change in placement or the location of services and should keep the student in the original placement unless the student can no longer receive FAPE in the least restrictive environment (LRE) placement.
- 3) The placement of a student with disabilities in a more restrictive "protected" environment setting to avoid bullying behavior may constitute a denial of the IDEA's requirement that the school provide FAPE in the LRE.
- 4) Schools may not attempt to resolve the bullying situation by unilaterally changing the frequency, duration, intensity, placement, or location of the student's special education and related services.
- 5) If a student with a disability engages in bullying behavior, the IEP Team should review the student's IEP to determine if additional supports and services are needed to address the inappropriate behavior.
- 6) The IEP Team and other school personnel should examine the environment in which the bullying occurred to determine if changes to the environment are necessary.

# Notification

The principal, or designee, shall promptly report via telephone, personal conference, and/or in writing, the occurrence of any incident of bullying as defined by this policy to the parent or legal guardian of all students involved on the same day an investigation of the incident(s) has been initiated. Notification must be consistent with the student privacy rights under the applicable provisions of the Family Educational Rights and Privacy Act of 1974 (FERPA). Once the investigation has been completed and it has been determined that criminal charges may be pursued against the perpetrator, all appropriate local law enforcement agencies should be notified.

## Additional considerations:

- A. Statement of rights to other legal recourse: This policy may not be interpreted to prevent a victim of harassment, intimidation or bullying or a victim of cyberbullying from seeking redress or other legal remedies under any other available law, whether civil or criminal.
- B. Relationship to other laws: Scott County Schools works to insure compliance with all state and federal laws regarding harassment, intimidation or bullying. Nothing in this policy or its procedures prevents a student, parent/guardian, school or school division from taking action to remediate harassment or discrimination based on a person's gender or membership in a legally protected class under local, state, or federal law.
- C. Procedure to refer victims and perpetrators of bullying for counseling: Scott County Public Schools will intervene when bullying or harassment is suspected or when a bullying incident is reported. Scott County Schools will provide a continuum of supports appropriate to the range of possible severity of incidents.

# **Bullying Incident Report Form**



# **Scott County Public Schools**

(Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report.)
the basis of an anonymous report.)
2. Are you the target of the bullying: Yes No
3. Are you Student Staff member Parent AdministratorOther (specify)
Your contact information/telephone number:
4. If student, what school do you attend? Grade: Grade:
5. If staff member, name of your school or work site:
6. Information about the incident:
Name of target/victim (of aggression):
Name of aggressor (Person who started the aggression):
Date(s) of incident(s):
Time when incident(s) occurred:
Location of incident(s) (Be as specific as possible):
7. Witnesses (List people who saw the incident or have information about it):
Name:StudentStaffOther
Name:Other
Describe the details of the incident (people involved, what occurred, and what each person
did and said, including specific words used). Use additional space on back if necessary.
Signature of person filing this report: Date: Date:
(Note: Reports may be filed anonymously.)
Form given to: Position: Date:
Signature: Date received:

### NONDISCRIMINATION POLICY

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## POLÍTICA DE NO DISCRIMINACIÓN

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# **Investigation Form**



# **Scott County Public Schools**

 1. Investigator(s):
 Position(s):

 If the incident is within scope of the school division, move to procedures for investigating bullying.

 If the incident is outside the scope of the school division, and determined a criminal act, refer to appropriate law enforcement. Referred to \_\_\_\_\_\_ Date \_\_\_\_\_

 If the incident is outside the scope of the school division, and determined not a criminal act, inform parents/legal guardians of all students involved.

2. Interviews:

 Interviewed aggressor Name:
 Date:

 Interviewed target Name:
 Date:

 Interviewed witnesses Name:
 Date:

3. Behaviors exhibited were intended to harm the target or targeted group?  $\square$  Yes  $\square$  No

4. Are there any prior documented incidents by the aggressor?  $\Box$  Yes  $\Box$  No If yes, have incidents involved target or target group previously?  $\Box$  Yes  $\Box$  No Any previous incidents with findings of BULLYING, RETALIATION  $\Box$  Yes  $\Box$  No

5. The aggressor's relationship to the target or target group included an imbalance of power/the target or targeted group felt the aggressor was in a position with more physical or social power? 

Yes 
No

6. The investigator shall collect and evaluate the facts including, but not limited to

a. a description of incident(s) including nature of the behavior; context in which the alleged incident(s) occurred, etc.;

b. how often this conduct occurred;

c. whether there were past incidents or past continuing patterns of behavior;

d. the relationship between the parties involved;

e. the demographics of the parties involved (i.e., grade, age, etc.);

f. the identity and number of individuals who participated in bullying or harassing behavior;

g. the location of the alleged incident;

h. whether the conduct adversely affected the student's education or educational environment;

i. whether an imbalance of power is evident; and

j. the date, time, and method in which parents/legal guardians of all parties involved were contacted.

7. Whether a particular action or incident constitutes a violation of this policy requires a determination based on all the facts and surrounding circumstances and includes:

a. recommended remedial steps necessary to stop the bullying and/or harassing behavior and

b. a safety plan

Summary of Investigation:

(Please use additional paper and attach to this document as needed)

Date: \_\_\_\_\_\_ Signature \_\_\_\_\_

# Follow-Up to the Investigation Form



# **Scott County Public Schools**

<ol> <li>Finding of bullying or retaliation:YESNO</li> </ol>
Bullying incident documented as
RetaliationDiscipline referral only
2. Contacts:
Target's parent/guardian: Date: Aggressor's parent/guardian: Date:
Central Office: Date: Law Enforcement Date:
3. Action Taken (Note action taken with all students if more than 1)
Loss of PrivilegesDetentionSuspensionCommunity ServiceEducation Other
4. Description of Safety Plan (for Target/Victim)
·
Follow-up with Target: Scheduled for
initial and date when completed:
Follow-up with Aggressor: Scheduled for
nitial and date when completed:
Report forwarded to Principal: Date (If principal was not the investigator)
Report forwarded to Superintendent/Designee: Date
Signature and Title: Date:

#### NONDISCRIMINATION POLICY

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## POLÍTICA DE NO DISCRIMINACIÓN

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## **APPLICATION FOR BIDDER PREQUALIFICATION**

PROJECT NO.

	APPLICATIONS WILL BE DUE ON:	
QUALIFICATION	N RESPONSE PER	
THE FOREGOIN	NG SOLICITATION:	
1. All ma	aterial submitted shall be in six copies. A copy of this page shall be the c	cover page for each copy submitted.

2. Be sure that all required attachments and any additional information requested in this Application are attached to each copy submitted.

<u>Submitted</u>	<u>By</u> :		
Applicant's	s Name:		
Tax Identif	ication Number (EIS/SSN):		
Is the Appl	icant a: Sole Proprietorship; Partnership; Corporation;		
	Joint Venture (Check one)		
Address:			
City/State/	/Zip:		
Signed By:			
Printed Na	me and Title:		
Telephone	No.: ()		
Initial if: N	/inority owned: Woman owned: neither:		
Attachmer	nts:		
A G	eneral Information about Applicant (Form)		
B-1, 2 In	formation on Past Projects (Forms)		
C Fi	Financial Statement (Separate Envelope) (Form)		
D A	Action Plan (By Applicant)		
E St	Statement about Ability to Acquire Virginia Contractor's License (By Applicant)		
F At	Affidavit for Accuracy of Information (Form)		
G Su	upplemental Information to the Above (By Applicant)		

APPLICANT'S NAME: \_\_\_\_\_\_

SIGNATURE:

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## ATTACHMENT A

# APPLICATION FOR BIDDER PREQUALIFICATION (GENERAL INFORMATION ABOUT APPLICANT)

1.	Identify years	Applicant has been in b	ousiness as a:		
	General Contra	actor: From to _	; Subcontractor:	From to	
	Identify years	your organization has l	peen in business under	its present name:	·
	Indicate other	or former names unde	er which your organizat	ion has operated:	
2.	Applicant's Vir	ginia General Contract	or's Class		
	License Numbe	er:			
	-	/ licensed in Virginia, ir :. (Attachment E)	ndicate Applicant's abil	ity to acquire same pric	or to bid submission on
3.	List the catego	ries of work that your	organization normally	performs with its own f	forces:
4.	Identify the po	rtions of the Contract	Work as identified here	ein that are expected to	o be subcontracted:
5.	Identify the co	nstruction experience	of the Applicant's prine	cipals:	
Princip	al's Name	Present Position	Years of Construction	Last Employer	Last Position

\*Describe on separate pages the specific experience on projects most similar in size, scope and complexity to this project.

Experience\*

6. Give the complete name, address and telephone number under which the Applicant does business and is seeking prequalification:

а

	Name:				
	Address:				
	Telephone Number: ()				
7.		f the Applicant's current organization chart showing number of emplo	yees by discipline and		
8.		names and titles down through project field superintendents. apacity \$ Available bonding capacity \$	. Attach certified		
	document from A	Applicant's regular bonding company indicating availability of bid, per			
9.	Indicate name, fi	roject from corporate surety approved on US Treasury list. firm, and telephone number for the following financial references:			
	Ι.	Bonding Company			
		Name of Contact Person:			
		Firm:			
		Telephone Number:			
	١١.	Bank			
		Name of Contact Person:			
		Firm:			
		Telephone Number:			
	III.	Insurance Company			
		Name of Contact Person:			
		Firm:			
		Telephone Number:			
10.	State the total w	vorth of work in progress and under contract:			
	(A) total: \$	; (b) of the type called for in this project: \$			
11.	State the average	ge annual amount of construction work performed during the last five	years (a)		
	Total \$	; (b) of the type called for in this project: \$			
12.	Claims and suits. details.)	. (If the answer to any of the questions below is yes, please attach a s	ummary of all relevant		
	Ι.	Has your organization had judgments entered against it for the brea contract?	ch of any construction		
	11.	Has any court or arbitrator ever ruled that your organization was in with the terms and conditions of a construction contract with anoth comparable in size, scope, or complexity to the project which is the prequalification?	er public body on a job		
	111.	Has any officer of your organization been convicted within the past involving moral turpitude regarding the procurement of or performa contract?			
13.	received in the p	s received for violation of failure to abate safety violations, or constru bast three years of (a) the United States Occupational Safety and Heal tion Safety and Health Administration; (c) the occupational and health	th Administration; (b) the		

14. Has your firm, in either its present name or former name, filed for bankruptcy under the United States Bankruptcy Act within the past seven years?

APPLICANT'S NAME: \_\_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

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# ATTACHMENT B-1 APPLICATION FOR BIDDER PREQUALIFICATION (PROJECT EXPERIENCE)

Project Name	Project Owner and Address	Project Start Date	Project Completion Date	Contract Value

APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

#### NONDISCRIMINATION POLICY

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POLÍTICA DE NO DISCRIMINACIÓN

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# ATTACHMENT B-2 APPLICATION FOR BIDDER PREQUALIFICATION (PAST PROJECTS) (Last 5 years)

1.	Name of Project:	
	Contract No	Project No
2.	Bidder Name:	
	Project Manager Name:	
	Superintendent Name:	
3.	Owner Name:	
	Address:	
	Telephone Number: (	_)
4.	Engineer Name:	
	Address:	
	Contact Person:	
	Telephone Number: (	)
5.	Contract Dates: Started	
	Contra	ctual Completion:
	Actual	Completion:
	Final Payment Received: _	
6.	Description of Project:	
7.	Original Contract Value:	\$
	Final Contract Value:	\$
	Value of: Change Orders to	o Date \$
	Outstanding Clai	ms to Date \$
8	Legal action or arbitration	resulting in finding of substantial non-compliance with

8. Legal action or arbitration resulting in finding of substantial non-compliance with or breach of contract by your organization? Yes \_\_\_\_\_ No\_\_\_\_\_ If yes, explain on additional sheet.

9.	Name of Bonding Company:	
	Address of Bonding Company:	
	Contact Person:	_
	Telephone Number: ()	
	Bond Nos.:	
10.	Major Subcontractor:	_
	Address:	_
11.	Major Supplier:	_
	Address:	
	Contact Person:	
	Telephone Number: ()	
12.	What percent of work was related% to the type of work called for in this	project?
PLICA	NT'S NAME:	

APPLICANT'S SIGNATURE\_\_\_\_\_

AP

## NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (Including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, advities or exestive. The admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminarión de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de South o discriminarión por motivos de tarza, color, religión, origen nacional, afiliación o polítea, identidad de género, o reientación sexual, genero / sexo tudiantes embersal, eday, edatado civil, discaparidad o información genética en cualquier programa educativo, incluidad la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de Jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

## ATTACHMENT C FINANCING

# 1. Financial Statement.

- A. Attach a financial statement, preferably audited, including your organization's latest balance sheet and income statement showing the following items:
  - i. Current Assets (e.g., cash, joint venture accounts, accounts receivable, notes receivable, accrued income, deposits, materials inventory and prepaid expenses;
  - ii. Net Fixed Assets;
  - iii. Other Assets;
  - iv. Current Liabilities (e.g., accounts payable, notes payable, accrued expenses, provision for income taxes, advances, accrued salaries and accrued payroll taxes);
  - v. Other Liabilities (e.g., capital, capital stock, authorized and outstanding shares par values, earned surplus and retained earnings).
- B. Name and address of firm preparing attached financial statement, and date thereof.
- C. Is the attached financial statement for the identical organization named on page one?
- D. If not, explain the relationship and financial responsibility of the organization whose financial statement is provided (e.g., parent-subsidiary).
- 2. Will the organization whose financial statement is attached act as guarantor of the contract for construction?

SIGNAT	URE	
I.	Dated at	_
	Name of Organization:	_
	Ву:	
	Title:	
II.	bein	ng
	Duly sworn deposes and says that the information provided herein is tr	rue
	And sufficiently complete so as not to be misleading.	
	Subscribed and sworn before me this day of	
otary	Public:	
∕lv Con	mission Expires:	

### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activites, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

## POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Titulo II de las Enmiendas de Educación de 1976; Titulo IV de la Ley de Derechos Civiles de 1972; Titulo IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1976; Titulo IV de la Ley de Derechos Civiles de 1972; Titulo IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y políticas, las Escuelas Públicas de londado de Social no discriminaráon por motivos de raza, color, religión, origen nacional, afiliación que en y orientación sexual, genero / sexo funcional genero / sexo tudiantes emberse), ledad, estatado civil, discapadidad o información genética en cualquier programa educativo, incluidad la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

# ATTACHMENT F-1 APPLICATION FOR BIDDER PREQUALIFICATION (AFFIDAVIT FOR SOLE PROPRIETORSHIP)

My Commission Expires: \_\_\_\_\_

## NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; The Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Jaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; Ja Ley de No Discriminarión de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminarión por motivos de raza, color, religión, origen nacional, afiliación oplitica, identidad de género, orientación sexual, género / sexo filiculados los estudiantes embarzadas y paderes), edad, estado civil, discaparidad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvaco na la no discriminación o para presentar una queja.

# ATTACHMENT F-2 APPLICATION FOR BIDDER PREQUALIFICATION (AFFIDAVIT FOR SOLE PROPRIETORSHIP)

STATE OF	
COUNTY OF	
	being duly sworn, deposes and says that he is the owner of; that the information provided in this Application for
•	e and accurate; that the attached financial statement, taken from his/her
books, is a true and accurate statement of the	e applicant's financial condition as of the date hereof.
	(Applicant must sign here)
Sworn to before me this day	
Of	
	(SEAL)
Notary Public:	
My Commission Expires:	

## NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, adjust varitivies or exertacturicular admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pretaining to nondiscrimination or to file a complaint.

## POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de los Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scotti no discriminarán por motivos de raza, color, religión, origen nacional, afiliación o por intentiva de genero, orientación sexual, genero / sexo funcilouidos los estudiantes embersa), edad, estado civil, discaparidad o información genética en cualquier programa educativo, incluidad la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de Jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

# ATTACHMENT F-3 APPLICATION FOR BIDDER PREQUALIFICATION (AFFIDAVIT FOR CORPORATION)

STATE OF \_\_\_\_\_

COUNTY OF\_\_\_\_\_

\_\_\_\_\_being duly sworn, deposes and says that he is the owner of

the firm of \_\_\_\_

\_\_\_\_\_; that the information provided in this Application for

Bidder Prequalification and attachments is true and accurate; that the attached financial statement, taken from his/her books, is a true and accurate statement of the applicant's financial condition as of the date hereof.

(Financial Officer of Corporation sign here)

(Executive Officer of Corporation must sign here)

Sworn to before me this \_\_\_\_\_ day

Of \_\_\_\_\_, \_\_\_\_,

(SEAL)

Notary Public: \_\_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Corporate Seal:

NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pretaining to nondiscrimination or to file a complaint.

POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminarión de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scotti no discriminarión por motivos de raza, color, religión, origen nacional, afiliación o polítea, identidad de género, o reientación sexual, género / sexo funciloudo so les estudiantes emberse), edad, estado civil, discaparidad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para resentar una queja.

## ATTACHMENT F-4 APPLICATION FOR BIDDER PREQUALIFICATION (AFFIDAVIT FOR JOINT VENTURE)

The name of a joint venture and each joint member venture must be identified below. An affidavit for each individual, partnership and corporation that is a member of the joint venture must be provided on the appropriate form herein before.

The following firms comprise the joint venture members applying for prequalification under this Application for bidder Prequalification, and an affidavit for each is attached:

ess:		
ohone Number (	)	
tification of Joint V	enture Members:	
	NameOperating as an	Address, Telephone Number
1.		
2.		
3.		
4.		
т.		
-		
5.		

### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; The Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School Jules, Jaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education of career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activites, and provides equal access to the Boy Scouts and other designated youth groups. Contract Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminarión de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Sortin o discriminarión por motivos de raza, color, religión, origen nacional, afiliación o polítea, identidad de género, o reientación sexual, género / sexo filiculados los estudiantes emberse), edad, estado civil, discaparidad o información genética en cualquier programa educativo, incluidad la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Box Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

## ATTACHMENT F-5 CERTIFICATE OF CONTRACTOR COMPLIANCE

STATE OF \_\_\_\_\_

COUNTY OF\_\_\_\_\_

Bidder hereby certifies that, if awarded the Contract for construction of the project, it will take all possible actions to minimize costs to the Owner which are related to any disruptions in any part of the work resulting from unforeseeable conditions which may be encountered and work changes or additions which may be made. Bidder further certifies that it will comply with the principles and intent of the Action Plan submitted with the Application for Prequalification of Bidders as approved by the Owner.

Sworn to before me this \_\_\_\_\_ day

Of \_\_\_\_\_, \_\_\_\_,

(SEAL)

Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

## NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (Including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

## POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; Ja Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de scotto no discriminarán por motivos de raza, color, religión, origen nacional, afiliación de nolitica, i dentidad de género, orientación sexual, género / sexo filiculdus los escutiantes embarzadas y apártese), edad, estatado civil, discapardiada o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Box Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación para resentar una queja.

## APPLICATION FOR ENROLLMENT OF UNDER-AGE KINDERGARTEN STUDENTS

Name of Student:	
Social Security Number:	Date of Birth:
Parents' Names:	
	_ Children in Family:
School to Attend:	
Why do you wish for us to consider your child for e	arly enrollment?

Do you understand that, if accepted, it will be on a provisional basis only, and that their enrollment may be discontinued due to a number of circumstances?

Yes\_\_\_\_\_ No\_\_\_\_\_

\*I understand that my child cannot enter 1st Grade earlier than the State approved birthdate, even though he/she may be accepted into this program.

\*I understand the provisions of the early enrollment program and agree to them. I also give permission for Scott County School Personnel to evaluate my child to determine their level of development.

(Parent's Signature)

(Date)

### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title VI county Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extracturicular admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pretaining to nondiscrimination to file a complaint.

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## APPLICATION FOR STUDENT ORGANIZATIONS

Name of School	:					
Name of Organi	ization:					
Faculty Sponsor	/Monitor:					
General stateme	nt of purposes of the orgar	nization:				
Qualifications fo	r membership:					
Organization governance structure (rules, officers, etc.):						
Relationship of t	he organization to the scho	ool curriculum (if any):				
Describe the role	of the faculty sponsor/mo	onitor in the organization:				
Signatur	e of Sponsor/Monitor	Date				
Application is:						
	Approved					
	Denied	Principal/Designee				
		Date				

## NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; The Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Jaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, aliy activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination to file a complaint.

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En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título IV de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; Título IX Reglamento de 1976; Yitulo IX Reglamento de 1976; Yitulo IX Reglamento de 1976; Yitulo IX Reglamento de 1972; Artículo 504 de la Ley de rehabilitación de 1973; Ia Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scotti no discriminarán por motivos de raza, color, religión, origen nacional, afiliación o política, idención agénero / sexo (incluidos los estudiantes embarzadas y padres), leda, estado civil, discapacidad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación para presentar una queja.

# APPLICATION FOR USE OF SCHOOL FACILITIES

Name of Organization:			
Authorized Agent:	Contact Pers	son:	
School or site:			-
Space(s) to be used:			_
Dates to be used:	Beginning time:	Ending Time:	_
Total hours: with air c	onditioning?	with heating?	-
Number of participants, approximately?			_
Will there be a charge for admission?			
Specify the purpose for use of space:			_
			_
Equipment or food service needs (specif	fy):		_
			_
Is organization nonprofit? Do you	carry liability insurance?	(Documentation may be required.)	

APPLICANT AGREEMENT:

- 1) We will be responsible for payment of the rental fee four (4) days in advance. The amounts charged are estimates based on planned use. Credit or refunds will be calculated based on actual use;
- 2) We will be responsible for payment for necessary personnel at a rate to be determined by personnel services;
- 3) This permit may be canceled by the School Board at its discretion;
- 4) The we become responsible for any and all damage to the site, building, and/or equipment, for the duration of the time(s) and date(s) listed on the application and understand that we will not be permitted to use the school property again if we fail to undertake these measures;
- 5) That we agree to indemnify and hold harmless the School Board, and all of its officers, employees, and agents from any and all claims demands, suits causes of action, or judgments any person had, now has or may have in the future against the event which is the subject of this agreement;
- 6) The School Board is not liable for anything we do or sponsor while using these facilities;
- 7) This organization has an open membership policy and does not discriminate on the basis of race or sex;
- 8) We understand that smoking and alcohol use are prohibited on school property;
- 9) We will restrict usage to assigned areas and observe contracted time limits;
- 10) We will obtain prior approval before any signs, placards, or banners are erected on school property;
- 11) We agree to follow all requirements set forth in Regulation KG-R.

Authorized Agent

Date

Organization: \_\_\_\_\_

The application was re	eceived by:	Principal	Date
Application is:			Dute
Approved			
Deviad		Superintendent/Designe	ee
Denied			
Notified of	decision	Date	_
IRS Nonprofit Letter S	ubmitted? YesNo	Liability Insurance Policy?	YesNo
1) Rental Fees Ca		Rate:	
	urs X Fee - \$		
2) Personnel Fee 1 <sup>st</sup> Personnel Need:	-	2nd Personnel Need:	
		Employee Name:	
		Rate (include overtime):	
No. Days X Hrs. X Fee	= \$	No. Days X Hrs. X Fee = \$	
Total Personnel Fees:	\$		
3) Special Fees:			
No. Days X Hrs	5. X Special Fee = \$		
Subtotal of Fees:	\$		
Late Payment Fee (if a	any): \$		
TOTAL: \$			
COMMENTS:			

#### NONDISCRIMINATION POLICY

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# SCOTT COUNTY SCHOOLS APPROVED VACATION LEAVE

Name of Employee:	
Date of Request:	
School:	
Date(s) of Vacation Leave:	
No. of Days:	
Will need Substitute	Will not need Substitute
Signed:	(Employee)
	(Immediate Supervisor)



# **Building Access Request Form**

# Section 1: Identification-Information of the Key Holder requesting key(s)/card access

Last Name: \_\_\_

First Name:

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ I am affiliated with: \_\_\_

# Section 2: Building Access- List Building and Rooms Requiring Access

Building	Door(s) to be Accessed	Beginning Date	Ending Date	Time(s)

# Section 3: Submission Instructions/Key Holder Responsibilities/Required Approvals

Submission Instructions:

The person requesting the key shall complete section 1. The building administrator will complete section 2. The person making the request and the building administrator will sign under section 4 and submit the completed form to the central office.

All Key Holder/Authorizers shall read and agree to the following:

- 1. There is a \$5 deposit that is required for all requested cards/keys. When the card/key is returned, then the deposit shall be refunded. If the card/key is not returned in 3 business days after use, then the deposit shall not be refunded.
- 2. The card/key holder shall ensure they have the card/key at all times.
- 3. All doors are locked after exiting the building. Only the assigned card/key holder is allowed access to the card/key. Sharing of keys or cards is strictly prohibited. Do not prop doors open at any time.

Date

- 4. If your card or key is lost or stolen, contact the school immediately, so it can be removed from the system.
- 5. Do not make or duplicate access cards/keys.
- Section 4: Key Holder's Acknowledgement and Signature

I acknowledge that I understand the building access policy and agree to abide by those guidelines:

Key Holder's Signature

Section 5: For Scott County Schools Use Only

Building Administrator's Signature/Approval

Central Office's Signature/Approval

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# SCOTT COUNTY PUBLIC SCHOOLS CAUSAL HEARING/MANIFESTATION DETERMINATION

Name:_			DOB:		Date:
504	I.D.E.A.	School:	Grad	de:	Primary Disability:
Placeme	ent:	No. yrs. ii	n special education/504:	Mos	st recent eligibility date:
1.		as per suspension (p			pended this year: ferenced and include statement o
	Define the disab	ling condition:			
2.	attach relevant of evaluation at observation the student's action, the at behavior inte reports from medical reco	documents.) nd diagnostic results of the student (attac s IEP/IAP and placem ppropriateness of the ervention strategies. teachers	and information provided h) ent, and in relationship to e IEP/IAP placement, suppl ] verbal	by parent (ati the behavior	subject to disciplinary s and services, and
3.	STUDENT PROF Does the studen right or wrong?		e him/her from having the	capacity to de	etermine whether the actions we
	Given the studer basis?	nt's disability, can the	e student be expected to fo	ollow school r	ules and regulations on a regula
	Does the studen consequences o	=	situation where the stude	nt would not	be aware and understand the
4.	MANIFESTATION	I DETERMINATION R	EVIEW		

Was the conduct in question caused by the child's disability?

YES NO

Did the conduct in question have a direct and substantial relationship to the child's disability?

YES NO

Was the conduct in question a direct result of Scott County School's failure to implement the IEP/IAP? YES INO If the behavior was a manifestation of the child's disability, the IEP/IAP team must conduct a functional behavioral assessment (FBA) and behavioral intervention plan (BIP) for the student, or review an existing plan and modify it as necessary to address the behavior. If the behavior is a manifestation, the student is returned to the pre-discipline placement, unless the parent and school division agree otherwise.

## 5. FINDINGS AND RECOMMENDATIONS

The above stated misconduct **is NOT a manifestation** of the student's disability. The student must continue to receive FAPE, but in a different setting.

- The above stated misconduct is **NOT** a manifestation of the student's disability.
- The above stated misconduct **is a manifestation** of the student's disability.

COMMITTEE PARTICIPANTS

Principal/Designee	Special Education Teacher
Teacher	Other
Guidance Counselor	Other
Parent	Other

Dissenting opinions may be made. A committee member who disagrees with the conclusion indicated above must attach a separate statement presenting his/her own conclusion.

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DIS-3 Pg. 2

# SCOTT COUNTY SCHOOLS CAUSAL HEARING

# EDUCATIONAL SUMMARY/CLASSROOM TEACHER

Student Nan	ne School
	e precise in your narratives of the student's performances. Describe specific areas of math and reading, such as ion, vocabulary, computation, calculation, and application. Also, consider behaviors, attendance, etc.
I.	Briefly describe the student's learning strengths:
Ш.	Briefly describe the student's learning weaknesses/behavioral concerns:
III.	What interventions have been tried to assist this student?
IV.	Current Grades:

Date

Classroom Teacher's Signature

Subject

# PRIOR WRITTEN NOTICE

Student:		School:		Meeting Date:
Student ID:	D.O.B		Age:	Meeting Date: Grade:
Describe the action tha	at the school division p	roposes or refuse	s to take:	
Explanation of why the	e school division is prop	oosing or refusing	to take action:	
Description of each eva refuse the action:	aluation procedure, ass	sessment, record	or report the sc	hool division used in deciding to propose or
Description of any othe	er choices that the tear	n considered and	the reasons wh	y those choices were rejected:
Description of other re	asons or other factors	relevant as to wh	y the school div	ision proposed or refused the action:
Resources for the pare related Federal and Vir		n understanding	the Individuals v	vith Disabilities Education Act (IDEA) and the
If this notice is not the safeguards:	initial referral for evalu	uation, explain ho	w the parent wa	as provided a copy of the procedural

## SCOTT COUNTY PUBLIC SCHOOLS CERTIFICATE OF RECORDS DISPOSAL

This form documents the destruction of public records in accordance with the *Virginia Public Records Act,* § 42.1-86.1 *of the Code of Virginia*.

1. Agency/Locality: \_\_\_\_\_\_

2. Division/Department/Section: \_\_\_\_\_\_

3. Address and Telephone Number of Person Completing This Form:

\_\_\_\_\_Phone :(\_\_\_\_\_) \_\_\_\_\_

4. Records To Be Destroyed:				
a. Schedule and Series Number	b. Records Series Title	c. Date Range (MO/YR)	d. Location	e. Volume/C.F.

**Destruction Approvals** 

-

We certify that the records listed above have been retained for the scheduled retention period, required audits have been completed, and no pending or ongoing litigation or investigation involving these records is known to exist.

5.		
APPROVING OFFICIAL (PRINT NAME)	SIGNATURE	DATE
6		
DESIGNATED RECORDS OFFICER (PRINT NA	ME) SIGNATURE	DATE
7. RECORDS DESTROYED BY:		
	NAME (PRINT OR SIGNATURE)	DATE
	NAME (PRINT OR SIGNATURE)	DATE

### CHAPERONE CERTIFICATION FORM (Revised September 4, 2007)

In accordance with school board policy and the Code of Virginia, Title 22.1-296.1, applicants for chaperone duty with Scott County Public School are required to make certifications regarding criminal convictions. These certifications are required of all candidates for chaperone and the school board cannot use as chaperones persons who cannot make these certifications.

## READ THE FOLLOWING CERTIFICATIONS CAREFULLY BEFORE SIGNING:

I hereby certify that I have NOT been convicted of a felony and that I have NOT been convicted of any offense involving the sexual molestation, physical, or sexual abuse, or rape of a child in any jurisdiction in the United States of America.

## (SIGNATURE OF APPLICANT)

I hereby certify that I have NOT been convicted of any crime of moral turpitude (for purposes of this certification, moral turpitude is defined as any act involving lying, cheating, stealing- regardless of amount, making false statements of forgery) in any jurisdiction in the United States of America.

## (SIGNATURE OF APPLICANT)

I hereby certify that I have NOT been the subject of a founded case of child abuse and/or neglect by a Department of Social Services in this Commonwealth or by a similar agency in any jurisdiction in the United States of America.

## (SIGNATURE OF APPLICANT)

Anyone making a materially false statement regarding any of the above certifications may be charged with a Class 1 misdemeanor.

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### **CHAPERONE INFORMATION**

Name	
Date of Birth	Driver's License No,
Mailing Address	
Home Phone	Cell Phone
Employer	Work Phone
In Case of Emergency	
Family Physician	Phone No
Health Insurance Provider	
Policy No	Group No
Emergency contact if no answer at hon	ne.
Name	
Telephone No	
Are you currently taking any prescriptio duties of a chaperone? If so, please exp	on medication(s) or have any medical conditions that could affect your assigned lain.
Signature	
Date	
	NONDISCRIMINATION POLICY

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### COMPLAINT OF DISCRIMINATION

Name of Complainant:		
Student's School and Class:		
Address:		
Email Address:	Phone Number(s):	
Name(s) of Parent/Legal Guardian:		
Email address(es):	Phone Number(s):	
Dates of Alleged Discrimination:		
Names of the persons you believe discriminated agains	t you or others:	
Please describe the disability that forms the basis of th	e complaint	
Please describe any past incidents that may be related	to this complaint	
Please name any witnesses that may have information	nination, including where and when the incidents occurred. regarding the alleged discrimination. Attach additional pages	
Please identify any attempts you have made to discuss or resolve this issue with any school division staff, including the results of those iscussions		
Please provide your suggestions about how the issue c	an be resolved	
I certify that the information provided in this report is true, correct and complete to the best of my knowledge.		
Signature of Complainant	Date	
Complaint Received By:Compliance	Officer Date	
Compliance	Uniter Date	

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### **CONSENT FOR RELEASE OF STUDENT DATA/RECORDS**

Student Name:	Date of Birth	
Name of School	School ID #	
Student Address		
Home Telephone #:	_	
Parent/Legal Guardian (1) Mobile Telephone #		
Parent/Legal Guardian (2) Mobile Telephone #		

I authorize the \_\_\_\_\_\_ Division to release to the individual or Agency identified below identifying educational/medical data and records (the "Records") of the student listed above. I understand that in addition to educational records and data, such Records may also contain health information pertaining to diagnosis and treatments, immunization records, suspensions/office referral data, attendance data, referrals to student service teams, as well as written communications with school staff related to mental health interventions.

### Time Period During Which Release of Student/Data is Authorized:

From: Date that form is signed below.				
Until:				
Name of Authorized Individual or Agency				
Name and Title				
Agency Name (if applicable)				
Address (1)				
Address (2)				
Email Address				
Phone Number				
Fax Number				
Signature of Parent/Guardian				
Name of Parent/Guardian				
Relationship to Student				
Date				
Witness				

#### NONDISCRIMINATION POLICY

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## Credit Accommodations for Students with Disabilities (IDEA and 504) Eligibility Form

DIRECTIONS: Credit accommodations for the Standard Diploma shall be determined by the student's Individualized Education Program (IEP) team or 504 plan committee, including the student where appropriate, at any point after the student's eighth-grade year. The school must secure the informed written consent of the parent/guardian and the student, as appropriate, to choose credit accommodations after review of the student's academic history and full disclosure of the student's options.

The student must meet the following criteria to be eligible to receive credit accommodations for the Standard Diploma:

a. Student must have a current IEP or 504 plan with standards-based content goals.

b. Due to the intensity of the student's disability he/she is unlikely to achieve and make progress commensurate with grade level expectations, but is learning on grade level content.

c. Student needs significant instructional supports to access grade level SOL content and to show progress.

d. Based on multiple objective measures of past performance, the student might not be expected to achieve the required standard and verified units of credit within the standard time frame.

To identify appropriate students for credit accommodations, a student's IEP team or 504 committee must address each section of this form and attach supporting documentation as indicated.

# Section I: Student Information

Student Name:	Date of Birth:
State Testing Identifier (STI):	
School:	Current Grade of Enrollment:

Credit Accommodation considered:

- o Substitute Assessment
- Locally Awarded Verified Credit
- VMAST
- Division of Minimum Coursework

## Section II: Qualifying Questions and Supporting Documentation

To participate in credit accommodations for the standard diploma, the student's IEP Team or 504 committee must determine that the student is eligible based on responses to the three criteria and reviewing the information provided below. A response of "No" for any single criterion or failure to provide supporting documentation indicates that the student is NOT eligible for the credit accommodation listed in Section I of this form.

1. Due to the intensity of the student's disability, he/she is unlikely to achieve and progress commensurate with grade level expectations, but is learning on grade level content? **Yes or No** 

- Provide a brief overview of the student's disability
- Describe the impact of the disability on the student's classroom performance

2. The student requires significant instructional supports to access grade-level Standards of Learning (SOL) and show progress? **Yes or No** 

- Describe the individualized supports/specialízed program/intervention provided to the student to access grade level SOL content.
- Describe the amount of time the student has used the individualized supports/specialized program/intervention and the impact on progress.

3. Based on multiple objective measures of past performance, the student is not expected to achieve the required standard and verified units of credit within the standard time frame. **Yes or No** 

- List the assessments and student's performance used to determine that the student is not progressing at the rate expected for the grade level or course.
- Describe the instructional remediation provided for the student to progress in the grade level SOL content.
- Describe the amount of time the student has used the instructional remediation and the impact on progress.

## Section III: Justification Statement

Signed:

The IEP Team must also provide a justification statement summarizing why the IEP team/504 committee has determined that the student is eligible for credit accommodations. The justification cannot be based on any specific categorical label (disability, gender, social, cultural or economic status, excessive or extended absences, beliefs that the student will fail the test, does not need the test for promotion or graduation or the student's behavior).

Date\_\_\_\_\_\_ Course Content Teacher \_\_\_\_\_\_Date\_\_\_\_\_\_ Special Education Teacher/504 Representative \_\_\_\_\_\_Date\_\_\_\_\_\_ Parent \_\_\_\_\_\_Date\_\_\_\_\_\_ Date\_\_\_\_\_\_ Building Administrator or Designee \_\_\_\_\_\_Date\_\_\_\_\_\_ Other \_\_\_\_\_\_Date\_\_\_\_\_\_

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11245; Title 1 of the Education Amendments of 1976; Title V1 of the C/ull Rights Act of 1972; Title V1 Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1972; Title V1 Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1972; Title V1 Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1972; Title V1 Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1972; Title V1 Regulation and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, policia Affiliation, gender identity, sexual orientation, gender/sex (Including pregnant and parenting students), age, marital stud, disability, or genetic Information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliant. Stars Schule 1007 (Sing Control Scouts) and policies information pretraining to nondiscrimination or to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de NO Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, escatates, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminarán por motivos de raza, color, religión, origen nacional, afiliación política, identidad de género, orientación sexual, género / sexo (Incluidos las seturadas y padres), edad, estado civil, discapacidado información genetica en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o par esentar una queja.

## **DISCIPLINARY CHART**

Response	Elementary (K-6) Responses	Secondary (Grades 7-12) Responses
LEVEL 1	Classroom-based responses, intervention, and management	Classroom-based responses, intervention, and management
LEVEL 2	<ul> <li>Classroom-based responses</li> <li>Administrative intervention and response</li> <li>In-school suspension up to 3 days</li> </ul>	<ul> <li>Classroom-based responses</li> <li>Administrative intervention and response</li> <li>Afterschool</li> <li>In-school suspension up to 3 days</li> </ul>
LEVEL 3	<ul> <li>Administrative intervention and response</li> <li>Alternatives to suspension</li> <li>Afterschool</li> <li>In-school suspension up to 3 days</li> <li>Out-of-school suspension up to 3 days</li> </ul>	<ul> <li>Administrative intervention and response</li> <li>Alternatives to suspension</li> <li>In-school suspension up to 5 days</li> <li>Out-of-school suspension up to 5 days</li> </ul>
LEVEL 4	<ul> <li>Administrative intervention and response</li> <li>Alternatives to suspension</li> <li>In-school suspension up to 3 days</li> <li>Out-of-school suspension up to 10 days</li> <li>Recommendation for Long-term Suspension (LTS) / Expulsion</li> </ul>	<ul> <li>Administrative intervention and response</li> <li>Alternatives to suspension</li> <li>In-school suspension up to 5 days</li> <li>Out-of-school suspension up to 10 days</li> <li>Recommendation for Long-term Suspension (LTS) / Expulsion</li> </ul>
LEVEL 5	<ul> <li>Out-of-school suspension (10 days) and Recommendation for LTS / Expulsion <i>required</i></li> </ul>	Out-of-school suspension (10 days) and Recommendation for LTS / Expulsion <i>required</i>

	Scott County Public Schools Behavior Codes with Levels (Elementary)					
Behavior Code	Description	Level 1	Level 2	Level 3	Level 4	Level 5
BAP: Beha	viors that Impede the Academic Progress (BAP) of the student or of other stu	dents				
BAP1	Interfering with learning in the classroom (examples include talking, excessive noise, off-task, out of seat, possessing items that distract)	x	х			
BAP2	Interfering with learning outside of the classroom (examples include excessive noise, interrupting a class)	x	х			
BAP3	Scholastic dishonesty (such as cheating, plagiarism)	х	х			
BAP4	Unexcused tardiness to class	х	х	х		
BAP5	Unexcused tardiness to school	х	х	х		
BSO: Beha	viors related to School Operations (BSO) interfere with the daily operation of	f schoo	l proce	dures		
BSO1	Altering an official document or record	x	х			
BSO2	Giving false information, misrepresentation	х	х			
BSO3	Refusal to comply with requests of staff in a way that interferes with the operation of school	x	х	х		
BSO4	Failure to be in one's assigned place	х	х			
BSO5	Failure to attend assigned disciplinary setting (detention, in-school suspension, Saturday school)	х	х	х		
BSO6	Bringing unauthorized persons to school or allowing unauthorized persons to enter the school building	x	х	х		
BSO7	Dress Code Violation	х	х			
BSO8	Gambling (games of chance for money or profit)	х	х			
BSO9	Possessing items that are inappropriate for school (examples include toys, literature, electronics)	х	х	х		
BSO10	Possession of stolen items	х	х	х		
BS011	Unauthorized use of school electronic or other equipment	х	х	х	х	
BSO12	Violation of the Acceptable Use of Technology/internet policy	х	х	х	х	
BSO13	Violation of school board policy regarding the possession or use of portable communication devices	х	х	х	х	
BSO14	Vandalism, graffiti or other damage to school or personal property	х	х	х	х	
	onship Behaviors (RB) create a negative relationship between two or more m al harm is done.)	embers	of the	school	comm	unity
RB1	Bullying with no physical injury (See Model Policy to Addressing Bullying in Virginia's Public Schools)		х	х		
RB2	Cyberbullying (See Model Policy to Addressing Bullying in Virginia's Public Schools)		х	х		
RB3	Posting, distributing, displaying, or sharing inappropriate material or literature, including using electronics means	х	х	х		
RB4	Saying or writing either directly or through electronic communication sexually suggestive comments, innuendos, propositions, or other remarks of a sexual nature	x	х	х		
RB5	Stealing money or property without physical force	х	х	х		

RB6	Speaking to another in an uncivil, discourteous manner	Х	х	х		
RB7	Teasing, taunting, engaging in a verbal confrontation, verbally inciting a fight	Х	х	х		
RB8	Using profane or vulgar language or gestures (swearing, cursing, hate speech, gang signs or gestures)	х	x	x		
RB9	Using slurs based upon the actual or perceived race, ethnicity, color, national origin, citizenship/immigration status, weight, gender, gender identity, gender expression, sexual orientation, or disability	х	x	x	x	
RB10	Failure to respond to questions or requests by staff	Х	х			
RB11	Unwanted or inappropriate physical contact	Х	х	х		
BSC: Beh	aviors of a Safety Concern (BSC) create unsafe conditions for students, staff, an	nd/or v	visitors	to the s	school.	
BSC1	Alcohol: Possessing, using, or being under the influence of alcohol				х	х
BSC2	Alcohol: Distributing alcohol to other students				х	х
BSC3	Drugs: Possessing drug paraphernalia			х	х	х
BSC4	Drugs: Violating school board non-prescription (Over the counter) medication policy or look-alike drug policy		х	х	х	х
BSC5	Tobacco: Possessing/Using/Distributing tobacco products, possessing tobacco paraphernalia, electronic cigarettes, vaping equipment		x	x	x	
BSC6	Bullying Behavior without physical injury that continues after intervention (See Link: Model Policy to Addressing Bullying in Virginia's Public Schools) Bullying that leads to physical injury should be classified as Assault and Battery.			x	x	x
BSC7	Cyberbullying that continues after intervention (See Link: Model Policy to Addressing Bullying in Virginia's Public Schools) Cyberbullying that relates a threat to the safety of students and staff should be treated with a higher level of intervention and consequences.			x	x	x
BSC8	Harassment: Repeatedly annoying or attacking a student or a group of students or personnel creating an intimidating or hostile educational or work environment			x	x	х
BSC9	Bus: Distracting the bus driver		х	х		
BSC10	Bus: Endangering the safety of others on the bus		х	х		
BSC11	Fire alarm: Falsely activating a fire or other disaster alarm	х	х			
BSC12	Fire Related: Possessing items that could be used to set or cause a fire or produce large amounts of smoke	х	х			
BSC13	Engaging in reckless behavior the creates a risk of injury to self or others	Х	х	х	х	
BSC14	Fighting that results in no injury as determined by the school administration			х	х	
BSC15	Inciting or causing a substantial disturbance to the operation of school or the safety of staff and/or students		х	х	x	х
BSC16	Throwing an object that has the potential to cause a disturbance, injury, or property damage	х	х	х		
BSC17	Shoving, pushing, striking, biting another a student with no visible injury	Х	х	х		
BSC18	Exposing body parts, lewd or indecent public behavior			х	х	х
BSC19	Physical contact of a sexual nature – patting body parts, pinching, tugging clothing	х	х	х		
BSC21	Stalking as described in the Code of Virginia section 18.2-60.3				х	х

BSC22	Stealing money or property using physical force (no weapon involved)		х	х	
BSC22		x	X	^	
BSC25	Leaving school grounds without permission				
BSC25	Trespassing Possessing dangerous instruments/substances that could be used to inflict harm upon another	X	X	x	x
BSC27	Weapons: Possessing any weapon (other than a firearm) as defined by § 18.2-308.1.			x	x
BESO: Beł	naviors that Endanger Self or Others (BESO) These behaviors endanger the hea	lth, safety,	or welfa	re of ei	ther
the stude	nt or others in the school community.				1
BESO1	Assault: Intending to cause physical injury to another person	Х	х	х	х
BESO2	Assault and Battery: Causing physical injury to another person		х	х	х
BESO3	Fighting: The use of physical violence between students or on another person where there is minor injury as determined by the school administration	x	х	x	
BESO4	Striking Staff: The use of force against a staff member when no injury is caused	x	x	x	х
BESO5	Drugs: Possessing controlled substances, illegal drugs inhalants, or synthetic hallucinogens or unauthorized prescription medications			x	х
BESO6	Drugs: Being under the influence of controlled substances, illegal drugs, inhalants, or synthetic hallucinogens or unauthorized prescription medications			x	x
BESO7	Drugs: Using controlled substances or using illegal drugs or synthetic hallucinogens or unauthorized prescription medications			x	x
BESO9	Fire: Attempting to set, aiding in setting, or setting a fire	х	х	х	х
BESO10	Gang-Related Behavior: Engaging in threatening or dangerous behavior that is gang-related as defined in §18.2-46.1	x	x	х	х
BESO11	Hazing as defined in §18.2-56 and noted in § 22.1-279.6.	х	х	х	х
BESO12	Threatening, intimidating, or instigating violence, injury or harm to a staff member or members	x	x	x	
BESO13	Threatening, intimidating, or instigating violence, injury or harm to another student(s) or other(s)	x	х	х	
BESO15	Using an object not generally considered to be a weapon to threaten or attempt to injure school personnel		x	x	х
BESO16	Using an object not generally considered to be a weapon to threaten or attempt to injure students or others		x	x	х
BESO17	Bomb threat –Making a bomb threat		х	х	х
	viors described in the Virginia's Unsafe School Choice Option Policy required b Act of 2015.	y the federa	l Every S	Student	
	Sub-Category I				
PD1	Homicide - Firearm			х	х
PD2	Homicide - Other Weapon			х	х
PD3	Sexual Assault			х	х
PD4	Attempted Sexual Assault			х	х
PD5	Use of a Bomb			х	х

	Sub-Category II			
PD6	Assault with Firearm or Weapon		Х	х
PD7	Actual or Attempted Robbery		Х	х
PD8	Kidnapping/Abduction		Х	х
PD9	Malicious Wounding without a Weapon		Х	х
PD10	Aggravated Sexual Battery on a Student		Х	х
	Sub-Category III			
PD11	Illegal Possession of Handgun		Х	х
PD12	Illegal Possession of Rifle or Shotgun		Х	х
PD13	Illegal Possession of Any Other Projectile Weapon		Х	х
PD14	Illegal Possession of Bomb		Х	х
PD15	Illegal Possession of Other Firearms		х	х
PD16	Illegal Possession of Controlled Drugs and Substances with Intent to Distribute or Sell		х	х

	Scott County Public Schools Behavior Codes with Levels (Secondary)					
Behavior Code	Description	Level 1	Level 2	Level 3	Level 4	Level 5
BAP: Behaviors that I	mpede the Academic Progress (BAP) of the student or of other stud	lents				
BAP1	Interfering with learning in the classroom (examples include talking, excessive noise, off-task, out of seat, possessing items that distract)	x	х	x		
BAP2	Interfering with learning outside of the classroom (examples include excessive noise, interrupting a class)	х	х	х		
ВАРЗ	Scholastic dishonesty (such as cheating, plagiarism)	х	Х	х		
BAP4	Unexcused tardiness to class	х	х	х		
BAP5	Unexcused tardiness to school	х	х	х		
BSO: Behaviors relate	ed to School Operations (BSO) interfere with the daily operation of	school	proced	dures		
BSO1	Altering an official document or record	х	х	х	х	
BSO2	Giving false information, misrepresentation	х	Х	х		
BSO3	Refusal to comply with requests of staff in a way that interferes with the operation of school	х	х	х		
BSO4	Failure to be in one's assigned place	х	х	х		
BSO5	Failure to attend assigned disciplinary setting (detention, in- school suspension, Saturday school)	х	х	х		
BSO6	Bringing unauthorized persons to school or allowing unauthorized persons to enter the school building	х	х	х		
BSO7	Dress Code Violation	х	х	х		
BSO8	Gambling (games of chance for money or profit)	х	х	х		
BSO9	Possessing items that are inappropriate for school (examples include toys, literature, electronics)	х	х	х		
BSO10	Possession of stolen items	х	Х	х		
BS011	Unauthorized use of school electronic or other equipment	х	х	х	х	
BSO12	Violation of the Acceptable Use of Technology/internet policy	х	Х	х	Х	
BSO13	Violation of school board policy regarding the possession or use of portable communication devices	х	х	х	х	
BSO14	Vandalism, graffiti or other damage to school or personal property	х	х	х	х	
RB: Relationship Beh (No physical harm is	aviors (RB) create a negative relationship between two or more me	mbers	of the	school	comm	unity
RB1	Bullying with no physical injury (See Model Policy to Addressing Bullying in Virginia's Public Schools)	х	х	x	х	
RB2	Cyberbullying (See Model Policy to Addressing Bullying in Virginia's Public Schools)	x	х	х	х	х
RB3	Posting, distributing, displaying, or sharing inappropriate material or literature, including using electronics means	х	х	х	х	

		r	r		1	
RB4	Saying or writing either directly or through electronic communication sexually suggestive comments, innuendos, propositions, or other remarks of a sexual nature	x	x	x	x	
RB5	Stealing money or property without physical force	х	х	х	х	
RB6	Speaking to another in an uncivil, discourteous manner	х	х	х		
RB7	Teasing, taunting, engaging in a verbal confrontation, verbally inciting a fight	х	х	х	х	
RB8	Using profane or vulgar language or gestures (swearing, cursing, hate speech, gang signs or gestures)	х	х	х	x	
RB9	Using slurs based upon the actual or perceived race, ethnicity, color, national origin, citizenship/immigration status, weight, gender, gender identity, gender expression, sexual orientation, or disability	x	x	x	x	
RB10	Failure to respond to questions or requests by staff	х	х	х		
RB11	Unwanted or inappropriate physical contact	х	х	х	х	
BSC: Behaviors of a Sa	afety Concern (BSC) create unsafe conditions for students, staff, an	d/or v	isitors	to the s	school.	
BSC1	Alcohol: Possessing, using, or being under the influence of alcohol				х	х
BSC2	Alcohol: Distributing alcohol to other students				х	х
BSC3	Drugs: Possessing drug paraphernalia			х	х	х
BSC4	Drugs: Violating school board non-prescription (Over the counter) medication policy or look-alike drug policy		х	х	x	х
BSC5	Tobacco: Possessing/Using/Distributing tobacco products, possessing tobacco paraphernalia, electronic cigarettes, vaping equipment		x	х	x	x
BSC6	Bullying Behavior without physical injury that continues after intervention (See Link: Model Policy to Addressing Bullying in Virginia's Public Schools) Bullying that leads to physical injury should be classified as Assault and Battery.			x	x	x
BSC7	Cyberbullying that continues after intervention (See Link: Model Policy to Addressing Bullying in Virginia's Public Schools) Cyberbullying that relates a threat to the safety of students and staff should be treated with a higher level of intervention and consequences.			x	x	x
BSC8	Harassment: Repeatedly annoying or attacking a student or a group of students or personnel creating an intimidating or hostile educational or work environment			х	x	x
BSC9	Bus: Distracting the bus driver			х	х	
BSC10	Bus: Endangering the safety of others on the bus			х	х	
BSC11	Fire alarm: Falsely activating a fire or other disaster alarm	x		х	х	
BSC12	Fire Related: Possessing items that could be used to set or cause a fire or produce large amounts of smoke	x x x		х		
BSC13	Engaging in reckless behavior the creates a risk of injury to self or others	x x x		х	х	
BSC14	Fighting that results in no injury as determined by the school administration	x >			х	

	Inciting or causing a substantial disturbance to the operation of					
BSC15	school or the safety of staff and/or students		Х	Х	Х	Х
BSC16	Throwing an object that has the potential to cause a disturbance, injury, or property damage	х	x	x	x	
BSC17	Shoving, pushing, striking, biting another a student with no visible injury	х	x	x		
BSC18	Exposing body parts, lewd or indecent public behavior		х	х	х	х
BSC19	Physical contact of a sexual nature – patting body parts, pinching, tugging clothing	х	х	х	х	
BSC21	Stalking as described in the Code of Virginia section 18.2-60.3			х	х	х
BSC22	Stealing money or property using physical force (no weapon involved)			х	х	х
BSC24	Leaving school grounds without permission			х	х	
BSC25	Trespassing		х	х	х	
BSC26	Possessing dangerous instruments/substances that could be used to inflict harm upon another				х	х
BSC27	Weapons: Possessing any weapon (other than a firearm) as defined by § 18.2-308.1.			х	х	х
	at Endanger Self or Others (BESO) These behaviors endanger the healers in the school community.	lth, sai	fety, or	welfar	e of eit	her
BESO1	Assault: Intending to cause physical injury to another person			х	х	х
BESO2	Assault and Battery: Causing physical injury to another person			х	х	х
BESO3	Fighting: The use of physical violence between students or on another person where there is minor injury as determined by the school administration			х	x	
BESO4	Striking Staff: The use of force against a staff member when no injury is caused			х	х	х
BESO5	Drugs: Possessing controlled substances, illegal drugs inhalants, or synthetic hallucinogens or unauthorized prescription medications			х	х	х
BESO6	Drugs: Being under the influence of controlled substances, illegal drugs, inhalants, or synthetic hallucinogens or unauthorized prescription medications			x	x	х
BESO7	Drugs: Using controlled substances or using illegal drugs or synthetic hallucinogens or unauthorized prescription medications			х	х	х
BESO9	Fire: Attempting to set, aiding in setting, or setting a fire		х	х	х	Х
BESO10	Gang-Related Behavior: Engaging in threatening or dangerous behavior that is gang-related as defined in §18.2-46.1			х	х	Х
BESO11	Hazing as defined in §18.2-56 and noted in § 22.1-279.6.				х	Х
BESO12	Threatening, intimidating, or instigating violence, injury or harm to a staff member or members			х	х	Х
BESO13	Threatening, intimidating, or instigating violence, injury or harm to another student(s) or other(s)			х	х	х
BESO15	Using an object not generally considered to be a weapon to threaten or attempt to injure school personnel			х	х	х
BESO16	Using an object not generally considered to be a weapon to threaten or attempt to injure students or others			x	х	х

BESO17	Bomb threat –Making a bomb threat			Х	Х	Х
PD: Behaviors d Succeeds Act of	escribed in the Virginia's Unsafe School Choice Option Policy required by 2015.	/ the fe	deral E	ivery St	tudent	
	Sub-Category I					
PD1	Homicide - Firearm				х	х
PD2	Homicide - Other Weapon				х	х
PD3	Sexual Assault				х	х
PD4	Attempted Sexual Assault				Х	х
PD5	Use of a Bomb				х	х
	Sub-Category II					
PD6	Assault with Firearm or Weapon				х	х
PD7	Actual or Attempted Robbery				х	х
PD8	Kidnapping/Abduction				х	х
PD9	Malicious Wounding without a Weapon				х	х
PD10	Aggravated Sexual Battery on a Student				х	х
	Sub-Category III					
PD11	Illegal Possession of Handgun				х	х
PD12	Illegal Possession of Rifle or Shotgun				Х	х
PD13	Illegal Possession of Any Other Projectile Weapon				Х	Х
PD14	Illegal Possession of Bomb				Х	Х
PD15	Illegal Possession of Other Firearms				Х	Х
PD16	Illegal Possession of Controlled Drugs and Substances with Intent to Distribute or Sell				х	х

						_	
Code for VDOE Data	Instructional Support Description		Adr	ninistrati	ve Level of	Response	
Collection		1	2	3	4	5	
1	Change in Placement for Students with Disabilities (IEP required).		х	x	x	Х	
2	Home-based Education with face- to-face teacher contact			х	х	х	
3	Virtual Learning Programs with a virtual teacher		х	х	х	х	
4	Instruction via Alternative Program				Х	Х	
5	Alternative Hours of Attendance with face-to-face teacher contact		х	х	х	Х	
6	Graded Work Provided without face-to-face teacher contact (include in Days Absent on SRC)			x	x	Х	
7	Other Instructional Programs with face-to-face teacher contact		х	х	х	Х	
8	Other Instructional Programs without face-to-face teacher contact (include in Days Absent on SRC)			x	x	х	
Code for VDOE Data	Behavioral Intervention	Administrative Level of Response					
Collection	Description	1	2	3	4	5	
1	Parent Contact		Х	х	х	Х	
2	Parent Involvement in Intervention Planning		Х	х	х	Х	
3	Referral to Specialized Instructional Support Personnel		Х	x	х	Х	
4	Referral to multi-disciplinary intervention team				х	Х	
5	Referral to IEP Team		Х	Х	Х	Х	
6	Functional Behavior Assessment			Х	Х	Х	
7 8	Behavioral Intervention Plan (BIP) Manifestation Determination			X X	X X	x x	
9	Meeting (MDR) Participation in Restorative Practices		х	x	x	х	
10	Referral to Outside Support Agency		Х	x	Х	Х	
11	Referral to threat Assessment Team Weapon, bomb.			X	X	X	
Code for VDOE Data	Disciplinary Sanction Description		Adr	ninistrati	ve Level of	Response	
Collection		1	2	3	4	5	
STS1	Short Term Suspension with Instructional Services			х	x		
STS2	Short Term Suspension with NO Instructional Services			х	х		
ISS	In-School Suspension (1/2 day or more)		х	х	x		

CR	Class Removal (less than 1/2 day)		Х	Х	Х	
DS	Detention Sanction Outside of Regular School Hours		Х	х	х	
Code for VDOE Data	Disciplinary Sanction Description		Adr	ninistrati	ive Level o	f Response
Collection		1	2	3	4	5
SBCS	School-based Community Service Assigned		Х	х	x	
LOP	Loss of School Privileges or Participation in Extracurricular programs		х	x	x	х
SBP	Suspension of Bus Privileges		Х	Х	Х	
LTS1	Long-term Suspension with Instructional Services				х	Х
LTS2	Long-term Suspension without Instructional Services				х	Х
EX2	Expulsion with Instructional Services				Х	Х
EX2	Expulsion without Instructional Services				x	Х
ALT	Alternative Program Placement per code 22.1-277.2:1			х	х	Х
NONE	No Disciplinary Sanction applied or taken	х	Х			

# SCPS Tiered Decision Rules Chart

		Tier 1 (80-100%)		
	Academics	Attendance Policy 7-2.3	Behavior	Social-Emotional Wellness
Purpose:	Monitor student academic progress to ensure that adequate gains are being made toward mastery of the content	To align with school board policy regarding attendance. Focus on relationships with students and families to minimize truancy and chronic absenteeism	Classroom wide strategies and supports for all students Each class/school has their own classroom management plan	Encourage the development of positive interpersonal skills and appropriate self-help strategies
Profile of student in this group:	All students are considered for Tier 1 strategies	All students are considered for Tier 1 strategies	All students are considered for Tier 1 strategies	All students are considered for Tier 1 strategies
Data to be reviewed:	Progress reports Report card grades Benchmark testing Standardized test scores CIP data PALS Performance Matters IXL	Daily attendance Document in PowerSchool - MUST add reason for absence in comment area and time for tardy	Teacher and administration documentation in PowerSchool	SEL Curriculum documentation of efforts General "school climate" data that could include some broad information regarding attendance, behavior, and student involvement information Statistics from School Counselor visits
Team Makeup:	PBIS team • Regular/Special Education teachers • Specialists (Math and Reading) • Administration • School Counselors • Parents • Child Study/IEP Team	PBIS team • Regular/Special Education teachers • Specialists • Administration • School Counselors • Parents • Child Study/IEP Team • Truancy Liaison (TL)	PBIS team Regular/Special Education teachers Specialists (Behavior) Administration School Counselors Parents Child Study/IEP Team	PBIS team Regular/Special Education teachers Specialists (SEL, SW) Administration School Counselor Parents Child Study/IEP Team School Psychologist
Meeting Frequency:	Quarterly	Quarterly	Quarterly	Quarterly

Strategies:	Excellent instruction Clear grading rules Adequate opportunity to demonstrate success Regular review of student progress Communication with students and parents regarding progress	<ul> <li>At 5 UNEXCUSED Absences =</li> <li>TL or other school designee contacts parent (in person, by phone, or other communication device).</li> <li>Plan to improve attendance discussed - barriers determined, next steps if continued absences.</li> <li>Document in PowerSchool. MUST include specific reason WHY absent in comment box.</li> <li>If teacher calling, he/she must document and send info to Administration to enter in PS.</li> <li>If in person, ask if contact numbers/email are up to date.</li> </ul>	<ul> <li>0-5 Office Discipline Referrals (Based on nature of referral.)</li> <li>Teaching behavior expectations</li> <li>Acknowledgement system to reinforce expected behaviors</li> <li>Positive feedback to increase behaviors desired</li> </ul>	School-wide programming that develops the traits/skills you hope to see in your students addressed through announcements and assemblies "Awareness" weeks imbedded in content curriculum as much as possible SEL curriculum and individual assessments
Resources and Supports	PowerSchool Parent Portal, collaborative planning periods, Math/Reading Specialist, Title I, School Counselors, ITRT, After- School Programs, Tutors	<ul> <li>Discussed at Back to School Nights</li> <li>Posters around School</li> <li>Attendance School Goals</li> <li>Attendance Celebrations</li> <li>Part of PBIS expectations</li> <li>Attendance Works webinars and resources</li> </ul>	ALL ADULTS IN BUILDING SHOULD BE IMPLEMENTING THESE ELEMENTS.	School Counselors Specialists
Professional Development which supports teachers at this level:	New Teacher Trainings Teacher Mentor Departmental Meetings Subject Area PD ITRT Trainings CIP Data Technology Trainings	Resources shared from the leadership team on family engagement and building/maintaining relationships with students	Effective Classroom Management Trainings Behavior Intervention Trainings	National programs Youth Mental Health First Aid Child Abuse <i>Cultural Competency Training</i>

Tier 2 (15-20%)					
Academics Attendance Behavior Mental Health					
Purpose:       Identify and assist students making insufficient progress toward academic goals       At-Risk Students = History of truancy/chronic absenteeism       To provide targeted supports for students (groups) who are not successful with Tier 1 supports       Identify and assist students seem to be demonstrating mental health needs					

Profile of student in this group:	Student is failing at least one course, OR, standardized test data reveals significant academic weaknesses	Have identified At-Risk Students = History of truancy/chronic absenteeism Code of VA <u>22.1-258/22.1-262</u>	6-8 Office Discipline Referrals (Based on nature of referral.)	Student needs regular support to navigate the demands of school - stress, anxiety, anger, depression, etc.
Data to be reviewed:	Mid-term reports Report card grades Standardized test scores Missing assignments Attendance Remediation Individual student records Special Education Referrals PALS Performance Matters IXL	Daily attendance Document in PowerSchool - MUST add reason for absence in comment area and time for tardy	Teacher and administration documentation in PowerSchool	SEL documentation of efforts General "school climate" data that could include some broad information regarding attendance, behavior, and student involvement information Statistics from school Counselor visits Pertinent medical data for the students Threat assessments (if any) Clinic data Teacher and parent assessments
Team Makeup:	PBIS team Administration School Counselors Specialists (Math/Reading) Regular/Special Education teachers Child Study/IEP Team Parents	PBIS team Administrator School Counselors Specialists (as needed) Regular/Special Education teachers Child Study/IEP Team Truancy Liaison Parents	PBIS team Administration School Counselors Specialists (Behavior) Regular/Special Education teachers Child Study/IEP Team Parents	PBIS team Administration School Counselors Specialists (SEL, SW) Regular/Special Education teachers Child Study/IEP Team Parents School Psychologist
Meeting Frequency:	3-6 Times Quarterly	3-6 Times Quarterly	3-6 Times Quarterly	3-6 Times Quarterly
Strategies:	Excellent instruction Clear grading rules Adequate opportunity to demonstrate success Regular review of student progress Communication with students and parents regarding progress Small-group instruction Targeted tutoring programs RTI IEP/504 Eligibility	At 8+Total Absences = *If no other identified concerns - put on monitor list *Designee to request further documentation from parents for future absences *If identified concerns in 2 or more areas, start Tier 3 paperwork • Possible intervention: Can hold group meetings with students to inform, and make an informal plan (law, expectations, goals, assistance needed). Students with an IEP *Coordinates with Case Manager, who will schedule IEP Team meetings for identified	<ul> <li>School Counselor</li> <li>Groups (social skills, organizational skills, anger management, self-regulation, etc.)</li> <li>See individual student</li> <li>Students identified monitoring to enter program based on school decision rules.</li> <li>Program success monitored</li> </ul>	School-wide programming that develops the traits/skills you hope to see in your students can be addressed through announcements and assemblies "Awareness" weeks Imbedded in content curriculum as much as possible Individualized visits with the School Counselors Frequent communication with home Purposeful relationship building with key school leaders, like Principals, School Counselors, SRO, Nurses, etc. Consideration of IEP/504 Eligibility Consideration of homebound

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		students, with TL invited At 10+ <mark>Unexcused</mark> Absences		services
		*Must have meeting within 10		
		days to develop Attendance/Action plan		
		*Use data (PS) to identify groups of students		
		*Implement suggested interventions and continue to monitor		
		*If parent does NOT attend, proceed with meeting and document in Action Plan.		
		*Plan must document that parents were informed that 1 additional day absent without documentation may result in a referral		
		Students with an IEP		
		*Must have IEP Team Meeting with parents in attendance		
		* IEP documentation of meeting use to develop Attendance Action plan.		
		*The IEP Team implements suggested interventions and continues to monitor		
Resources and Supports	PowerSchool Parent Portal	Attendance Works resources; webinars	Mentor Program	School Counselors
Supports	Collaborative planning periods	webiliars	Basic Behavior Plan/Daily Report Card	Peer mentor program
	Tutors			Community mentors
	After-school Programs			"Free Pass" Plan to seek support during class time
	Peer tutors			
	Schedule change Specialists (Math and Reading)			
Professional	New Teacher Training	Opportunities for principals to	Behavior Implementation Plan	National programs like Character
Development which supports	Teacher Mentors	gather and share notes/ideas	Assessment (BIP) (less intense behaviors)	Counts
teachers at this level:	Specific training for small-		Parent meeting to	Teaching Tolerance
	groups/reteaching		discuss intervention and have parent	Youth Mental Health First Aid
	Specialized training around identifying a potential disability		SIGNED PERMISSION     Team meetings with     relevant staff	Child abuse and neglect training Cultural Competency Training
	Relationship-building opportunities.		<u>relevant staff</u> <u>members to:</u>	Calcular competency Hummy
	Differentiated instruction training		Identify problem behavior	
	Technology Training		Data collection on problem behavior	
			Interviews with student, teachers, parent on problem behavior	
			Creation of Positive Behavior Plan	
L		<u> </u>		

			for student success	
		Tier 3 (3-5%)		
		· · ·		
	Academics	Attendance	Behavior	Mental Health
Purpose:	Identify and assist students making essentially no progress	+1 Additional Unexcused Absence (after interventions	To address more disruptive behavior that creates barriers to	Identify and assist students who are diagnosed/demonstrate
	toward academic goals	from Child Study/IEP Team have	learning and excludes students	significant mental health needs
		been attempted)	from social settings	
Profile of	Student is failing multiple courses,	+1 Additional Unexcused	8+ Office Discipline Referrals	Student is not being successful
student in this group:	OR, standardized test data reveals significant academic weaknesses.	Absence (after interventions from Child Study/IEP Team have	(Based on nature of referral)	in the regular school setting due to their mental health needs.
Proub.	Likely appears completely	been attempted)	(Succe on metare of rejental)	Student may present as a risk to
	disconnected from the academic focus of the school			him/herself or others
	1		L	1

Team Makeup:     PBIS team     PBIS team     PBIS team       • Child Study/ IEP • Administration • School Counselors • Regular/Special Education Teachers • Specialists (Math, Reading, Behavior) • Parents     • PBIS team     • Child Study/ IEP • Parents					
Standardized test scores     Histing assignments       Missing assignments     Attendance       Remediation     Hidroduld student record       Special Education Referrals     Reduction Referrals       Relationship data - is this student connected to anyone?     Partnership with the family       PALS     Performance Matters       Did     Data from hospitalizations, if any Clinic data       Did     Special Education Referrals       Not.     Partnership with the family       PALS     Performance Matters       Did     Clinic data       Did     Clinic data       Performance Matters     Did       Did     Clinic data       Performance Matters     PBIS team       PBIS team     Child Study/I IP Team       Administration     School Counselior       Administration     School Counselior       Special Education Referrals     PBIS team       Performance Matters     Did       Did     Child Study/I IP Team       Administration     School Counselior       Administration     School Counselior       Administration     School Counselior       Special Education Referrals     PBIS team       Partnership with the family     Partnership with the family       Did     Child Study/I IP Team       Adm		Mid-term reports	PowerSchool		SEL documentation of efforts
Remediation       Individual student record       Statistics from school Counselor         Special Education Referrals       Reinformation Referrals       Resistant from parents and teachers.         Performance Matters       Partneship with the family       Performance Matters         IXL       Partneship with the family       Partneship with the family         PALS       Performance Matters       IXL         Vit       Data from any outside comments       Comments         IXL       Partneship with the family       Data from any outside comments         IXL       Child Study/(EP) from any outside comments       Comments         IXL       Partneship with the family       Data from any outside comments         IXL       Child Study/(EP) from any outside comments       Child Study/(EP) from any outside comments         Secolar Conselers       School Conselers       PBIS team            Child Study/(EP) from any outside comments         School Conselers       School Conselers       School Conselers           Child Study/(EP) from any outside comments         School Conselers       School Conselers          School Conselers          School Conselers         School Conselers       School Conselers          School Conselers          School Conselers         Specialits (RLMAT), Parent		Standardized test scores			that could include some broad information regarding attendance, behavior, and student involvement
Team Makeup:     PBIS team     PBIS team     PBIS team       Team Makeup:     PBIS team     PBIS team     PBIS team       ************************************					
Special Education Referrals     Relationship data - is this student connected to anyone?     Pertinent medical data for the students       Partnership with the family PALS     Performance Matters     Performance Matters       Pd.I     Performance Matters     Path of the family       PL     Path of the family     Data from any outside counseling service/threapy       Data from hospitalizations, if any Risk assessments     PBIS team     PBIS team       •     Child Study/ IEP team •     •     Child Study/ IEP team •       •     Child Study/ IEP team •     •     Child Study/ IEP team •       •     School Counselors •     •     Child Study/ IEP team •       •     Child Study/ IEP team •     •     Child Study/ IEP team •       •     School Counselors •     •     Child Study/ IEP team •       •     Child Study/ IEP team •     •     Child Study/ IEP team •       •     Child Study/ IEP team •     •     Child Study/ IEP team •       •     School Counselors •     •     Child Study/ IEP team •       •     School Counselors •     •<					
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Partnership with the family       PALS         PALS       Performance Matters         IXL       Data from any outside counseling service/therapy         Data from hospitalizations, if any Risk assessments         Team Makeup:       PBIS team         • Child Study/IEP Team • Child Study/IEP Team • Child Study/IEP Team • School Counselors • Regular/Special • Child Study/IEP Team       • Child Study/IEP Team • Administration • Administration • Regular/Special • Education Teachers • Specialists (Behavior) • Parents       • Child Study/IEP Team • Administration • Regular/Special • Education Teachers • Specialists (Behavior) • Parents       • Child Study/IEP Team • Administration • Regular/Special • Education Teachers • Specialists (Behavior) • Parents       • Child Study/IEP Team • Administration • Regular/Special • Education Teachers • Specialists (Behavior) • Parents       • Child Study/IEP Team • Administration • Regular/Special • Education Teachers • Specialists (Behavior) • Parents       • Parents • School Psychologist		Relationship data - is this student			
PALS       Performance Matters       Partnership with the family       Partnership with the family         IXL       Partnership with the family       Data from any outside counseling service/therapy         IXL       Data from hospitalizations, if any Risk assessments         Team Makeup:       PBIS team       PBIS team         • Child Study/IEP       • Child Study/IEP       Partnership with the family         • Child Study/IEP       • Child Study/IEP       Partnership with the family         • Child Study/IEP       • Child Study/IEP       Partnership with the family         • Child Study/IEP       • Child Study/IEP       • Child Study/IEP         • Child Study/IEP       • Child Study/IEP       • Child Study/IEP         • School Counselors       • Child Study/IEP       • Child Study/IEP         • School Counselors       • Regular/Special       • School Counselors         • Specialits (Behavior)       • Specialits (GEL, SW)       • School Counselors         • Parents       • Specialits (SEL, SW)       • Specialits (SEL, SW)         • Parents       • Trancy Liaison       • School Counselors         • Specialits (SEL, SW)       • Parents       • School Psychologist		-			Threat assessments (if any)
Team Makeup:       PBIS team       Data from any outside counseling service/therapy         Data from hospitalizations, if any Risk assessments       Data from hospitalizations, if any Risk assessments         Team Makeup:       PBIS team       PBIS team         • Child Study/ [EP Team · Administration · Administration · School Counselors · Education Teachers · Begular/Special Education Teachers Regular/Special Education Teachers · Regular/Special Education Teachers · Regular/Special Education Teachers · Specialists (BEL, sw) · Parents · Truancy Liaison       PBIS team / Parents · School Counselors · School Counselors · Specialists (BEL, sw) · Parents · School Counselors · Specialists (BEL, sw) · Parents · School Counselors · School Counselors · School Counselors · School Counselors · School		PALS			
ML       Counseling service/therapy         Data from hospitalizations, if any         Risk assessments         Team Makeup:       PBIS team         • Child Study/IEP Team         • School Counselors         • School Counselors         • School Counselors         • Regular/Special Education Teachers         • School Counselors         • Regular/Special Education Teachers         • Specialists (Behavior)         • Parents         • Parents         • Parents         • Parents         • Parents         • School Parents <tr< th=""><th></th><th>Performance Matters</th><th></th><th></th><th></th></tr<>		Performance Matters			
Team Makeup:       PBIS team       PBIS team       PBIS team       PBIS team         • Child Study/IEP Team       • Child Study/IEP Team       • Child Study/IEP Team       • Child Study/IEP Team         • Child Study/IEP Team       • Child Study/IEP Team       • Child Study/IEP Team       • Child Study/IEP Team         • School Counselors       • Child Study/IEP Team       • Child Study/IEP Team       • Child Study/IEP Team         • School Counselors       • Regular/Special       • Child Study/IEP Team       • Child Study/IEP Team         • School Counselors       • Regular/Special       • Child Study/IEP Team       • School Counselors         • School Counselors       • Regular/Special       • Education Teachers       • School Counselors         • Specialists (Math, Reading, Behavior)       • Specialists       • Specialists (SEL, SW)       • Parents         • Parents       • Truancy Liaison       • Nonthly       Monthly       Monthly		IXL			
Team Makeup:     PBIS team     PBIS team     PBIS team          • Child Study/ IEP Team         • Child Study/ IEP Team         • Child Study/ IEP Team           • Child Study/ IEP Team         • Child Study/ IEP Team         • Child Study/ IEP           • Child Study/ IEP Team         • Child Study/ IEP         • Child Study/ IEP           • Child Study/ IEP         • Child Study/ IEP         • Child Study/ IEP           • School Counselors         • Administration         • Administration           • School Counselors         • Regular/Special         • School Counselors           • Specialitsts (Math,       • Reading, Behavior)         • Specialitsts         • Specialitsts           • Parents         • Parents         • Parents         • Parents           • Meeting       Monthly      Monthly      Monthly      Monthly					Data from hospitalizations, if any
·Child Study/ IEP Team ··Child Study/IEP Team·Child Study/IEP Team··Administration ···Administration ···Child Study/IEP Team··Child Study/IEP Team··Child Study/IEP Team··Child Study/IEP Team··Child Study/IEP Team·Child Study/IEP Team··Child Study/IEP Team·Child Study/IEP Team·Administration·Administration·Administration·Administration·Administration·Administration·Administration·School Counselors·School Counselors··Parents·Parents·Parents					Risk assessments
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•     Administration     Team     Team       •     School Counselors     •     Administration     •     Administration     •       •     School Counselors     •     Administration     •     Administration     •     Administration       •     Regular/Special     •     School Counselors     •     School Counselors     •     School Counselors       •     Specialists (Math, Reading, Behavior)     •     Regular/Special     •     Regular/Special     •     Regular/Special       •     Parents     •     Specialists     •     Specialists (Behavior)     •     Specialists (SEL, SW)       •     Parents     •     Parents     •     Parents     •     School Psychologist       •     Monthly     Monthly     Monthly     Monthly     Monthly     Monthly	Team Makeup:	PBIS team	PBIS team	PBIS team	PBIS team
		<ul> <li>Administration</li> <li>School Counselors</li> <li>Regular/Special Education Teachers</li> <li>Specialists (Math, Reading, Behavior)</li> </ul>	Team Administration School Counselors Regular/Special Education Teachers Specialists (Behavior) Parents	<ul> <li>Team</li> <li>Administration</li> <li>School Counselors</li> <li>Regular/Special Education Teachers</li> <li>Specialists (Behavior)</li> </ul>	<ul> <li>Team</li> <li>Administration</li> <li>School Counselors</li> <li>Regular/Special Education Teachers</li> <li>Specialists (SEL, SW)</li> <li>Parents</li> </ul>
	-	Monthly	Monthly	Monthly	Monthly

Strategies:	Excellent instruction Clear grading rules Adequate opportunity to demonstrate success Regular review of student progress Communication with students and parents regarding progress Small-group instruction Targeted tutoring programs Child Study/IEP/504 Eligibility Summer School Consideration ISAEP Opportunities Alternative placement	<ul> <li>Make appropriate referral</li> <li>Continue to action plan Child Study/IEP Team as needed</li> <li>For ANY FURTHER ABSENCES TO BE EXCUSED MUST have verified document (Dr. note, program from event, etc.)</li> </ul> From Case Manager to IEP Team implements suggested interventions continues to monitor <ul> <li>Case Manager communicate will report success of interventions to Admin. For Division Truancy (K Funkhouser)</li> </ul>	Behavior Implementation Plan (more severe needs) Parent meeting to discuss intervention and have parent <u>SIGNED PERMISSION</u> <u>Meetings with relevant staff</u> <u>members to student to:</u> Identify problem behavior Data collection on problem behavior Interviews with student, teachers, parent on problem behavior Create Crisis Plan if needed to keep student and staff safe and student in the building Creation of Positive Behavior Plan for student success	School-wide programming that develops the traits/skills you hope to see in your students can be addressed through announcements and assemblies "Awareness" weeks Imbedded in content curriculum as much as possible Individualized or small-group visits with the School Counselor Frequent communication with home Purposeful relationship building with key school leaders, like Principals, School Counselors, SRO, Nurse, etc. Consideration of IEP/504 Eligibility Consideration of homebound services Medication support through School Clinic Referral to outside counseling services Consideration of administrative homebound services Risk assessment
Resources and Supports	Instructional Coaches PowerSchool Parent Portal Celebrative planning periods Tutors After-school Programs Peer tutors Schedule changes Project AIM Alternative Education ISAEP/SOAR Programs	Contact Admin. Of Division Truancy if court deemed necessary by team Court outcomes communicated Case Manager who will communicate to IEP Team	Behavior Specialist	School Counselors Community organizations PTA/Booster Clubs Community mentors "Free Pass" Plan to seek support during class time Private counseling Risk assessments

Professional Development which supports teachers at this level:       New Teacher Trainings Teacher Mentors       BIP Tr         State       Teacher Mentors       Second Secon	<ul> <li>P Training</li> <li>National programs like Character Counts</li> <li>Teaching Tolerance</li> <li>Youth Mental Health First Aid</li> <li>General mental health conditions training</li> <li>Guidelines around risk assessments, hospitalizations, etc.</li> </ul>	
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# DISCIPLINE PROCEDURE TABLE

	PRINCIPAL/ ASSISTANT PRINCIPAL	SUPERINTENDENT/ DESIGNEE	COMMITTEE (AT LEAST 3 MEMBERS)	FULL BOARD
SUSPENSION OF 10 DAYS OR LESS	Principal implements upon notice to student, give facts as known, opportunity for student to explain	May be authorized to make a decision which is final		
SUSPENSION OF MORE THAN 10 DAYS	Principal recommends; upon notice to student, give facts as known, opportunity for student to explain	May be authorized to make a decision, which may be appealed to the committee	May be authorized to render a final decision, but it must be unanimous in order to be final; otherwise the decision is appealable to the full board.	All cases except unanimous decision by an authorized board committee must be appealable to the full board.
EXPULSION	Principal recommends; upon notice to student, give facts as known, opportunity for student to explain	May be authorized to make a decision, which may be appealed to the committee	May be authorized to render a final decision, but it must be unanimous in order to be final; otherwise the decision is appealable to the full board.	All cases except unanimous decision by an authorized board committee must be appealable to the full board.
EXCLUSION FROM ATTENDANCE	Principal recommends; upon notice to student, give facts as known, opportunity for student to explain	Decision is final, when authorized by the board, but the board may choose to review the decision in its discretion after timely petition from the student. After one year (365 days), the student may petition the full board.	Could review decisions of superintendent or designee, if authorized in regulation, and make I) a final decision, board could still choose to review the decision in its discretion after timely petition from the student; or ii) a decision appealable to the full board. If a final decision, the student may petition full board after exclusion period ends.	Board may retain final appealability of exclusion, as is the case under current policy. After 365 days or the termination of the underlying suspension, the student may repetition the full board.

# DISCIPLINING STUDENTS WITH DISABILITIES

Students with disabilities, who violate the student code of conduct, or engage in conduct for which they may be disciplined, will be disciplined in accordance with this policy. Additionally, the regular disciplinary procedures must be followed. School personnel may consider any unique circumstances on a case-by-case basis when determining whether to order a change in placement for a child with a disability as a result of discipline.

I. Long-Term Suspensions, Expulsions or Short-Term Suspensions Which Constitute a Pattern -- Change in Placement

For the purpose of removing students with disabilities from their current educational placements, a change in placement occurs when:

- (1) the removal is for more than 10 consecutive school days at a time; or
- (2) there is a series of removals each of which is for 10 days or less and they cumulate to more than 10 days in a school year and constitute a pattern because of:
  - (a) the length of each removal,
  - (b) the proximity of the removals,
  - (c) the total time the student is removed, and
  - (d) the child's behavior is substantially similar to the child's behavior in previous incidents.

If the disciplinary action will result in a change of placement for a student with a disability then that student's parents must be sent notice that same day of the recommendation for discipline and be provided with a copy of the procedural safeguards. The procedures outlined in Section IV must also be followed.

II. Short-Term Suspension

A short-term suspension is a suspension of 10 consecutive days or less at a time. School authorities may remove a student with a disability from his or her current educational setting for up to 10 school days cumulative in a school year to the extent that such removal would be applied to students without disabilities and for additional short-term suspensions provided no pattern exists.

III. Functional Behavior Assessments and Behavior Intervention Plans

If the school administration, the parent, and the relevant Individualized Education Program (IEP) team members determine that a manifestation exists, the IEP team must:

- A. conduct a Functional Behavioral Assessment (FBA) and implement a Behavioral Intervention Plan (BIP), if no FBA was conducted previously; or,
- B. if the student already has a FBA and BIP in place, review and modify the BIP, as necessary to address the behavior.

If a manifestation is found, the school division and the parent may agree to a change in placement when reviewing or modifying the BIP. Without this agreement, the student must return to the placement from which the student was removed.

## IV. Educational Services While Disciplined

For the first 10 days of removal in a school year, the School Board is not required to provide educational services to the student with a disability if services are not provided to students without disabilities who have been similarly removed.

After the first 10 days of removal in a school year, the School Board shall provide educational services to the student during the period of removal. The services must enable the student to:

continue to progress in the general curriculum, although in another setting, and
 progress toward meeting the goals set out in the student's IEP.

The determination of educational services is made by the IEP team for discipline which constitutes a change in placement. For discipline which is not a change in placement, the determination is made by school personnel in consultation with the student's special education teacher.

## V. Manifestation Determination

When a disciplinary action is proposed that will result in a change of placement, a manifestation determination review shall be conducted within 10 school days after the date on which the decision to take disciplinary action is made. This review shall be conducted by the Manifestation Team which consists of a local educational agency representative, the parent and relevant members of the IEP team (as determined by the parent and the school division).

The Manifestation Team may determine that the behavior of the student was not a manifestation of such child's disability only if the Team:

- 1). considers all relevant information in the student's file, including the student's IEP, any teacher observations, and any relevant information supplied by the parents; and
- 2). determines that:

(a). the conduct in question was not caused by, or had a direct and substantial relationship to, the student's disability; and

(b). the conduct in question was not the direct result of the school division's failure to implement the IEP.

If a manifestation is found, the student cannot be disciplined beyond any permissible short term removal that may be available. A parent may request an expedited due process hearing if the parent disagrees with the determination that the behavior was not a manifestation of the student's disability or if the parent disagrees with any decision regarding the placement of the student while disciplined. The student will remain in the interim alternative education setting pending the decision of the hearing officer or the expiration of a forty-five school day removal.

VI. Disciplinary Action for Behavior that is Determined Not to be a Manifestation

If the behavior is not a manifestation of the student's disability, the disciplinary procedures will be applied in the same manner as applied to nondisabled students. Following a removal which constitutes a change in placement, the student must continue to receive the educational services necessary to enable the student to continue to participate in the general curriculum, although in another setting, and to progress toward meeting the goals set out in the student's IEP. In addition, the special education and disciplinary records of the student must be made available to the person who makes the final decision regarding the discipline.

VII. Disciplinary Action and/or Alternative Placement for Behavior That Is Determined To Be a Manifestation

A student with a disability whose behavior is determined to be a manifestation of his or her disability may not be disciplined except to the extent a removal is otherwise. The student may also be removed to a more restrictive placement by following change in placement procedures. The IEP team must conduct or review a FBA and/or BIP as provided in Section III.

VIII. Interim Alternative Educational Settings for Weapons and Drugs and Infliction of Serious Bodily Injury

Students with disabilities 1) who carry or possess a weapon to or at school, on school premises, or to or at a school function under the jurisdiction of a state or local educational agency; 2) who knowingly possess or use illegal drugs or sell or solicit the sale of a controlled substance, while at school, on school premises, or at a school function under the jurisdiction of a state or local educational agency; or 3) who inflict serious bodily injury upon another person while at school, on school premises, or at a school function under the jurisdiction agency may be disciplined pursuant to Policies JFCD, JFCF or JGDB and may be placed in an interim alternative educational setting for up to forty-five school days. This option is available without regard to whether a manifestation exists. If no manifestation is found, the student may be disciplined to the extent a student without disabilities would be disciplined. Any interim alternative educational setting shall be selected, by the IEP team, so as to enable the student to continue to progress in the general curriculum, although in another setting, and to progress toward meeting the goals set out in the student's IEP. The student must also receive, as appropriate, a FBA, behavioral intervention services and modifications designed to address the behavior so it does not recur.

IX. Change of Placement by Hearing Officer

In addition to the other options for removal, a hearing officer may order a change in the placement for a student with a disability to an appropriate interim alternative educational setting for not more than forty-five (45) school days if the hearing officer determines that maintaining the current placement of such student is substantially likely to result in injury to the student or others. Additional forty-five (45) school day removals may be authorized by the hearing officer as necessary.

## X. Placement During Appeals

Students with disabilities are entitled to the due process rights available to a non-disabled student. In addition, students with disabilities are entitled to the due process procedures available under the Individuals with Disabilities Education Act, as amended and any state procedures. During the course of any appeals, the student's placement shall be in accordance with the provisions of federal law unless the parent and the school division agree otherwise.

## XI. Students Not Identified as Disabled

Students for whom the parents assert there is a disability but who have not yet been identified as disabled may be subjected to the same measures applied to students without disabilities if the school division did not have knowledge of the disability before the behavior that precipitated the disciplinary action occurred. A school division will be found to have knowledge of the student's disability if before the behavior that precipitated the disciplinary action occurred:

- 1) the parent expressed concern in writing to supervisory or administrative personnel of the school division, or to a teacher of the student, that the student is in need of special education and related services; or
- 2) the parent requested an evaluation of the student for special education eligibility through formal evaluation procedures; or
- 3) the student's teacher or other school personnel had expressed specific concerns about a pattern of behavior demonstrated by the student directly to the director of special education or to other supervisory personnel of the school division.

A school division would not be found to have knowledge of a student's disability if:

- (1) the parents refused to allow an evaluation of the student or refused special education services; or
- (2) the student was evaluated and found not eligible for special education services.

If a request for an evaluation is made during the period such student is subject to disciplinary measures, the evaluation shall be conducted in an expedited manner. If the student is found eligible as a child with a disability, taking into consideration information from the evaluation conducted by the school division and information provided by the parents, then the student must be provided special education and related services, although in another setting, in compliance with the procedures for suspended and expelled students with disabilities. Pending the results of the evaluation, the student shall remain in the educational placement determined by the school authorities.

XII. Disciplining Certain Section 504 Students Who Violate Alcohol and Drug Policies

Students who are identified as disabled solely under Section 504 of the Rehabilitation Act, and who are currently engaging in the illegal use of drugs or alcohol, may be disciplined for violating the division's alcohol and drug policies to the same extent as non-disabled students. The student is not entitled to a due process hearing under special education procedures in this circumstance but does retain the protections afforded to regular education students.

## DISCLOSURE LOG (To be placed in each student's record)

To ensure compliance with the requirements of the Privacy Protection Act, EACH time information is disclosed by ANY of the listed agencies, staff of the DISCLOSING AGENCY must enter the following information into the client's record:

- Name of the agency and the name, title, telephone number of individual receiving the information;
- Type and source of information;
- Reason or purpose for the disclosure; and
- Date the information was disclosed.

This requirement can be met either by using this disclosure log or by continuing the procedures your agency has used to meet these requirements.

# (Name of Agency and Staff Contact Person)

(Full Printed Name of Client)

(Client's Address)

(Client's Birth Date)

(Client's SSN Optional)

## Log of Disclosure of Information:

Receiving Agency	Name, Title, Telephone Number of Individual Receiving Information	Type of Information Disclosure	Reason or Purpose of Disclosure	Date Disclosed

## **DOCUMENTATION OF CONTRACT DAYS 2023-2024**

NAME: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

Check box if paraprofessional

DAYS IN SECTION A: \_\_\_\_\_ HOURS IN SECTION B1: \_\_\_\_+ B2: \_\_\_\_=

		Number of Days
Activity	Date	
PRESERVICE Check if attended	8/9/2023	1
PRESERVICE Check if attended	8/10/2023	1
PRESERVICEcheck if attended	8/11/2023	1
PRESERVICEcheck if attended	8/14/2023	1
WORK DAY Check if attended	10/16/2023	1
WORK DAY Check if attended	1/4/2024	1
WORK DAY Check if attended	3/12/2024	1
POST-SERVICEcheck if attended	5/28/2024	1
POST-SERVICE Check if attended	5/29/2024	1
Planning Day- #1 (list details and dates)		
		1
Planning Day- #2 (list details and dates)		
		1
Planning Day- #3 (list details and dates)		
		1
Planning Day- #4 (list details and dates)		
		1
		Total: 13

Activity	Date	Number of H
*Anaphylaxis		0.5
*Blood Borne Pathogens		0.5
*Confidentiality		0.5
*School Crisis Plan Training		1
*Power Point on Sexual Harassment		0.5
*Human Trafficking		0.5
		Total:

\*Required Trainings

B.2	PRINCIPAL (Maximum of 29.5 "principal hours" may count toward contract fulfillment	t)	
	Activity	Date	Number of HOURS

TEACHER'S SIGNATURE:		DATE:
----------------------	--	-------

PRINCIPAL'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

# DRUG AND ALCOHOL TESTING

The Scott County School Board seeks to provide a drug-free, safe, and secure work environment for all employees of the Board and all students served by the School Division. All employees will receive a copy of the Drug and Alcohol Testing Policy and will sign a statement certifying that he/she has received a copy of the policy and the division shall maintain this signed copy.

## **REQUIRED TESTING**

- Testing for Employees Required to Maintain Commercial Drivers Licenses (CDLs) All employees who are required to maintain a CDL for employment activities will be required to submit to drug and alcohol testing in accordance with Policy File GDQ.
- Testing Where There is Reasonable Suspicion
  - An employee is required to undergo drug and/or alcohol testing if school administration determines there is a reasonable suspicion that the employee is under the influence of drugs and/or alcohol. Reasonable suspicion means suspicion, based upon objective and articulable facts, sufficient to lend a prudent supervisor to suspect that an employee is under the influence of alcohol and/or drugs. Such objective and articulable facts may include, but are not limited to, impaired motor coordination, smell of alcohol, observed use, possession and/or sale of alcohol and/or drugs, violation of drug statutes, frequent tardiness and/or absences, and poor job performance.
- Testing for Employees Involved In or Connected With Accidents
   If an employee is involved in or connected with an accident involving personal injury or property damage while on
   the job or an accident involving a government-owned vehicle, he/she may be tested for drug and/or alcohol use if
   recommended by an immediate supervisor.
- Random Testing

If there is determined to be a need by the Division Superintendent, school personnel may be subject to random drug screens as deemed necessary to further the educational interests and/or welfare of the school division. Before the implementation of such random testing, the Division Superintendent shall provide notice, in writing, to school personnel of the reasons for such testing. School personnel is defined for this policy provision as all employees of the Scott County School Board regardless of employment position.

#### PROCEDURES

If an employee is requested to submit to a test for the presence of drugs and/or alcohol, the employee will be given a full explanation of the testing procedure and will be required to sign a consent form. Drug tests will consist of testing for substances, which may include marijuana, synthetic cannabinoids, opiates, cocaine, amphetamines, phencyclidine, MDMA, and/or any other substance defined as a "controlled substance" by either Virginia or Federal law. Drug testing will be conducted by obtaining a specimen of oral fluid and/or urine or as otherwise permitted by law. An Evidential Breath Test (EBT) using an EBT device operated by a trained technician will be used to test for alcohol.

Testing will be performed on a very private, strictly confidential basis. All medical information will be considered confidential and will be available only to staff members authorized to access personnel records.

Where there is reasonable suspicion that an employee is under the influence or using drugs and/or alcohol in violation of this policy, a school official shall transport the suspected employee to a pre-approved testing site to submit to testing for alcohol and/or drugs.

An employee involved in a work-related accident shall, upon direction of his/her immediate supervisor, as soon as reasonably possible, submit to testing for alcohol and/or drugs at a pre-approved testing site.

The employee must remain available for drug and/or alcohol testing until the testing has been conducted. An employee who fails to remain readily available for such testing shall be deemed to have refused to submit to testing.

# CONSEQUENCES

An employee who is tested for reasonable suspicion shall be placed on leave with pay until the test results are received. Any employee who refuses to submit to testing, attempts to tamper with the results of a drug and/or alcohol test, or refuses to release the results of a drug and/or alcohol test shall be charged with insubordination and suspended with pay in accordance with Policy GCPF and/or may be subject to further disciplinary actions up to, and including termination. Any employee so suspended shall continue to receive his/her then applicable salary unless and until the school board, after a hearing, determines otherwise in accordance with Policy GCPF.

Any employee whose test yields a confirmed positive result for alcohol and/or drugs may be subjected to disciplinary action, up to and including termination, and/or may be required to satisfactorily participate in and complete a drug abuse assistance or rehabilitation program. An employee may also be required, as a condition of continued employment, to submit to follow-up and return-to-duty testing, and/or testing pursuant to an agreed to testing schedule.

# SEARCHES

Scott County Public Schools reserves the right to search, without employee consent, all areas and property in which it maintains either full control or joint control with the employee, including, but not limited to, Scott County Public Schools' vehicles, property, and equipment, under the following circumstances:

- 1. when an employee is required to submit to reasonable suspicion testing;
- 2. when an employee is required to submit to post-accident testing; and/or
- 3. when an employee who is subject to random testing receives a confirmed positive result.

4.

Searches may be conducted only by authorized administrative personnel. Nothing in this policy, however, shall be interpreted to prohibit any search by law enforcement.

## COST

Scott County Public Schools shall bear the cost of all initial testing requested by a school official. All costs associated with a re-test of a confirmed positive test result shall be borne by the employee.

Adopted: June 26, 2014

My signature below certifies that I have received a copy of <u>Policy GBEA-R1</u>, *Drug and Alcohol Testing*, of the Scott County Public Schools Policy Manual.

Employee's Name (Print)

Employee's Name (Signature)

Date

NAME:		
SCHOOL:		
CRADE		
GRADE:		
AGE:		
PLACE OF EMPLOYMENT:		
EMPLOYER'S PHONE NUMBER:		
EIVIPLUTER 3 PHONE INDIVIDER.		
PLEASE EXPLAIN IN DETAIL YOUR	REASON(S) FOR REQUESTING EARLY DISMISSAL FROM SCHOOL:	

\*If this student is in Special Education, Parent, Special Education Teacher, and Special Education Supervisor must sign this application.

GUIDANCE COUNSEL	OR' SIGNATURE	DATE	
PRINCIPAL'S SIG	GNATURE	DATE	
PARENT'S/ADULT STU	DENT'S SIGNATURE	DATE	
SPECIAL ED TEACHE	R'S SIGNATURE	DATE	
SPECIAL ED SUPERV	ISOR'S SIGNATURE	DATE	
APPROVED			
DENIED	SUPERINTENDENT OR DESIG	SNEE'S SIGNATURE	DAT

\*A transcript and the student's course schedule for the upcoming school year must be attached.

#### NONDISCRIMINATION POLICY

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminarión de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scotto no discriminarión por motivos de raza, color, religión, origen nacional, afiliación o polítea, identidad de género, o vientación sexual, género / sexo funciloudos los escutiantes embaresadas y apdrese), edad, estado civil, discapardiad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación par presentar una queja.

#### File: IKF-R

#### EARLY GRADUATION APPLICATION

NAME:	
SCHOOL:	
DATE OF BIRTH:	
DATE ENTERED SCHOOL:	
YEARS RETAINED:	
DATE ENTERED 9TH GRADE:	
COMMENTS:	 -
	-
	 -

\*If this student is in Special Education, Parent, Special Education Teacher, and Special Education Supervisor must sign this application.

GUIDANCE COUNSELOR' SIGNATURE		DATE	
PRINCIPAL'S SIGNATURE		DATE	
PARENT'S/ADULT STUDENT'S SIGNATURE		DATE	
SPECIAL ED TEACHER'S SIGNATURE		DATE	
SPECIAL ED SUF	PERVISOR'S SIGNATURE	DATE	
APPROVED			
DENIED	SUPERINTENDENT OR DESIG	GNEE'S SIGNATURE	DATE

\*A transcript and the student's course schedule for the upcoming school year must be attached.

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; The Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Jaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

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# SCOTT COUNTY SCHOOLS APPROVED EDUCATIONAL LEAVE

Name of Employee:		Dat	e of Reques	t:
School:				
Reason for educational leave request: _				
Date or dates of leave:		Number	of days:	
Will need substitute				_ Will not need substitute will cover otherwise
Will reimbursement be requested?		_Yes	No	
If yes list approximate amounts. Lodging	ng			
	Food			
	Travel			
	Total			
	SIGNED			
	PRINCIPAL			
	APPROVED			

\*This approved form <u>must</u> be attached to absent employee report.

# SCOTT COUNTY PUBLIC SCHOOLS Emergency Use of Physical Restraint Report of Incident

Submit to a designated administrator within 24 hours of the occurrence of the incident. Multiple behavioral interventions cannot be merged into a single report.

Student Name_		Date of Birth	
Grade	School	Date of Report	·····-
Person Comple	ting Form	Position	
Physical Restra	int was used (check a	l that apply):	
• This	decision is substantian emergency situation an emergency threat of harm to: physical rest the student so than others or causing s physical rest and procedures for the force us	er less intrusive interventions had failed. ted by the following explanation: (check all that apply): y situation existed that necessitated the use of physical restrain selfothersproperty raint was used only for the time period that was necessary to co the student no longer posed an immediate threat of causing ph evere property damage raint was implemented in accordance with all school division an physical restraint sed in the application of physical restraint did not exceed the for er the circumstances precipitating the use of physical restraint	ontain the behavior of hysical injury to self or d/or program policies
Date of Inciden	t:	Location of Incident:	
Time physical r	estraint began:	Restraint ended:	
Name(s) of per	son(s) involved:		
Detailed Descri	ption of Incident: (Co	ntinue on back of this sheet if needed.)	
School/Progran	n Administrator notifi	ed. Date:Time:	
Parent/Guardia	an notified. Date:	Time:	
Date and Docu	ment All Follow-up Ad	tions:	

Copy to Parent/Guardian Copy to Student File Copy to Central Office

# SCOTT COUNTY PUBLIC SCHOOLS Emergency Use of Seclusion Report of Incident

	gnated administrator within 24 d into a single report.	hours of the occurren	ce of the incident. Multiple behav	ioral interventions
Student Name		Date of B	irth	
Grade	School		Date of Report	_
Person Completi	ng Form		Position	_
Seclusion was us	ed (answer the following):			
• Thi	harm to: selfo seclusion was used only so that the student no longer causing severe property dama	ne following explanati all that apply): existed that necessita thersproper- for a time period tha posed an immediate t ge	on: ated the use of seclusion due to in	havior of the student o self or others or
Date of Incident	necessary under the circumsta	ances precipitating the	did not exceed the force that was e use of seclusion t:	
			ed:	
			eded.)	
Detailed Descrip	tion of Behavior in Seclusion: (C	Continue on back of th	is sheet if needed.)	
-	Administrator notified.		Time:	
Parent/Guardian	notified. Date:	Time	2:	

Date and Document All Follow-up Actions: \_\_\_\_\_\_

Copy to Parent/Guardian/Adult Student Copy in Student File Copy to Central Office

\_\_\_\_\_

#### **To Scott County Employees:**

We are asking that you complete the following information in case of an emergency. It will be kept in the office and accessed only if the need arises. After completing the form, place it in an envelope, seal it, and sign the back. It will be returned to you at the end of the school year and will be updated annually as needed.

## **EMPLOYEE HEALTH INFORMATION**

Name:
Address:
Home Phone:
Spouse's Name:
Spouse's Place of Employment:
Work Phone:
Cell Phone:
Emergency Contact:
Phone:
Physician:
Physician's Address:
Physician's Phone:
Any serious health condition?
Any regular prescription medication?
Hospital preference?
Comments:

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminarán por motivos de raza, color, religión, origen nacional, afiliación o polítea, identidad de género, orientación sexual, género / sexo (incluidos los estudiantes emberse), edad, estado civil, discaparidad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación para ersentar una queja.

\_\_\_\_ HOMEBOUND (\$25/HR)

# EMPLOYEE TIME SHEET

- # HOURS:
- \$25/HR) \_\_\_\_ SUMMER SCHOOL Elementary Teacher (\$25/HR)
- \_\_\_\_ ALT ED NIGHT SCHOOL (\$25/HR)
- \_\_\_\_\_ AFTER SCHOOL Elementary Teacher (\$25/HR)
- \_\_\_\_\_ AFTER SCHOOL Secondary Teacher (\$25/HR)
- \_\_\_\_\_ AFTER SCHOOL DET./SATURDAY SCHOOL (\$25/HR)
- \_\_\_\_\_ SUMMER SCHOOL Secondary Teacher (\$25/HR)
- \_\_\_\_ NURSE (\$25/HR)
- \_\_\_\_ INSTRUCTIONAL AIDE (\$15/HR) \_\_\_\_BUS AIDE (\$15/HR)

\_\_\_\_\_ HIGH SCHOOL STUDENT (\$11/HR) \_\_\_\_\_COLLEGE STUDENT/2 YRS (\$15/HR)

\_\_\_\_BUS AIDE (\$15/HR)

PRINT NAME		SCHOOL:		_ MONTH:
	DATE	HOURS WORKED	NO. STUDENTS SERVED	HOURS WORKED THIS WEEK:
MON				
TUE				
WED				
THU				
FRI				
SAT				
			-	HOURS WORKED THIS WEEK:
MON				
TUE				
WED				
THU				
FRI				
SAT				
	r			HOURS WORKED THIS WEEK:
MON				
TUE				
WED				
THU	_			
FRI				
SAT				
		-		HOURS WORKED THIS WEEK:
MON				
TUE				
WED				
THU				
FRI				
SAT				
	I	1		HOURS WORKED THIS WEEK:
MON				
TUE		_		
WED				
THU	-			
FRI				
SAT				

SIGNATURE OF EMPLOYEE: \_\_\_\_\_

SIGNATURE OF PRINCIPAL/SUPERVISOR: \_\_\_\_\_\_

# FIELD TRIP REQUEST FORM

EDUCATIONAL	:	SOCIAL
SCHOOL:		
GROUP/CLUB:		
DESTINATION OF TRIP:		
DATE OF PROPOSED TRIP:		
ESTIMATED ROUND TRIP MILEAGE:		
TIME OF DEPARTURE:AF	RRIVAL BACK AT SCHOOL:	
ARE ALL STUDENTS IN GRADE/CLASS INCLUDED IN TR	RIP?YESNO	
IF NO, EXPLAIN:		
LIST BRIEFLY HOW THE PROPOSED TRIP WILL ASSIST I	IN MEETING OBJECTIVES AS SET FORTH IN CUI	RRICULUM GUIDES:
TEACHER/SPONSOR REQUESTING TRIP:		
NAMES OF CHAPERONES:		
HOW WILL TRIP BE FINANCED?		
PRINCIPAL'S APPROVAL:	DATE:	
SCHOOL BOARD'S APPROVAL:	DATE:	
REQUEST DENIED:	REASON:	

(APPROVED COPY TO BE RETAINED IN SCHOOL OFFICE)

(Date)

Scott County Circuit Court Jackson Street Gate City, VA 24251

To Whom It May Concern:

As directed by State Regulations, we are providing your agency with a copy of the Scott County Schools policy on the management of scholastic records.

If you have any questions with regard to the policy and procedures enclosed, please contact

Sincerely,

\_\_\_\_\_

Enclosure

Identical letter to:

Scott County Department of Social Services Scott County Health Department Scott County Juvenile & Domestic Relations Court

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; The Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or attrivites, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a compliant.

POLÍTICA DE NO DISCRIMINACIÓN

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# FUND RAISING APPROVAL

School		Date
Club/Organization		_Sponsor/Monitor
escribe fund raising prop	oosal (specifically include s	student role, if any, in proposed fund raising activity):
anned date(s) of fundra	iser:	
tended use of funds, otl	her than general club/orga	anization use:
		nstructional time.
	ising may not infringe on i	
	ising may not infringe on i	
inderstand that fund rai	ising may not infringe on i	nstructional time.
inderstand that fund rai	ising may not infringe on in  nitor	nstructional time.
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nderstand that fund rai	ising may not infringe on in  nitor	nstructional time Date Principal/Designee
anderstand that fund rai	ising may not infringe on in nitor Approved Denied	nstructional time.  Date
nderstand that fund rai	ising may not infringe on in 	nstructional time Date Principal/Designee
anderstand that fund rai	ising may not infringe on in nitor Approved Denied	nstructional time Date Principal/Designee

## HOMEBOUND INSTRUCTION

Homebound instruction is provided by Scott County Public Schools to students who are temporarily unable to attend school due to physical illness or emotional disorders. Eligibility for homebound instruction is determined on the basis of medical evidence submitted by a licensed physician or a licensed clinical psychologist. The school division reviews all requests for completeness of information and appropriateness of the request.

Scott County Public Schools will ask the parent(s)/guardian(s)/adult student to sign a release of information form allowing the physician or licensed clinical psychologist to share information of clarify information provided for approval of homebound instruction. Approval is determined by school division personnel on the basis of student documented need for service. In the event extended medical leave is recommended (beyond 9 weeks), the Homebound Director may request a second medical opinion from another physician/mental health provider at no cost to the parent.

# Student with Disabilities

If the student is s student with disabilities, the Individualized Education Plan (IEP) must be amended by the IEP team to meet the special education student's temporary instructional needs based on approved certification of need for homebound instruction. Parent consent must be obtained to amend the IEP, prior to initiation of homebound services. If a student with disabilities is receiving related services at the time of homebound request, the IEP must address how those services are to be delivered. If a student with disabilities is denied the request of homebound services, a Written Notice must be sent to the parent(s)/guardian(s)/adult student with an explanation of denial of services. If the student with disabilities is approved for homebound services, the IEP team must amend the IEP upon termination of homebound services in order for the student to return to the school setting. If the homebound teacher assigned to the student for services is not a highly qualified special education teacher, the IEP must reflect how services are to be provided under the direct supervision of a special education teacher.

# Initiation of Service and Estimated Time

Homebound instruction should be initiated no later than five instructional days after approval of request. Estimated hours of instruction:

- Elementary school students may receive 2-5 hours a week depending on the need. This time may include planning time and grading time.
- Middle school/high school students 2-8 hours a week depending on the need. This time may include planning time and grading time.

## **Termination of Services**

Students receiving homebound instruction should return to the school setting as soon as possible. Homebound services are always considered temporary. If homebound services go beyond a nine-week period as determined by additional medical or psychological information, other support staff such as school nurse, school counselor, or school psychologist may also be assigned to the student depending on the student's needs.

## Student/Parent/Guardian

A student 18 years of age or older is considered at the age of majority and may represent themselves without parent/guardian involvement.

The student and parent/guardian are expected to work cooperatively with the assigned homebound teacher and school personnel to:

- Obtain certification from the physician or licensed clinical psychologist requesting homebound services, and complete parental signature forms in order to begin homebound instruction.
- Have a responsible adult in the home during the entire period of instruction.
- Provide adequate facilities for teaching (quiet room without interruptions, with a table, chairs and appropriate supplies).
- Have the student ready for instruction at the time designated by the homebound teacher.

- Supervise daily homework.
- Notify the teacher, prior to the scheduled visit, if there is a contagious illness in the home or if there is an emergency.
- Keep all appointments with the homebound teacher (excessively missed appointments may result in suspension of services) and/or involvement with Truancy Coordinator.
- If the student has to miss the appointment due to a doctor's appointment, a note from the doctor's office should be presented to the homebound teacher for the student's file.
- Make every effort to complete assignments.
- Advise the homebound teacher of any change in the student's status that would necessitate modification or termination of homebound services.
- Notify the school division's Director of Homebound Instruction of excessively missed appointments of tardiness by the homebound teacher.
- Verify the homebound teacher's attendance by signing-off on their time sheets.

#### **Homebound Teacher**

Persons serving as homebound teachers must:

- Maintain close contact with the student's teachers to receive and implement appropriate educational programs.
- Maintain an accurate record of hours of instruction.
- Submit student's completed work to the school of attendance in a timely manner.
- Responsible for assigning grades if the student is on homebound for more than nine weeks of instruction. These grades are to be averaged with other grades earned by the student in the general education program during regular attendance.

Please return the completed form to:

Brenda Robinette Supervisor of Homebound Instruction Scott County Public Schools 340 E. Jackson St. Gate City, VA 24251 276-386-6118 FAX 276-386-2684

#### NONDISCRIMINATION POLICY

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#### POLÍTICA DE NO DISCRIMINACIÓN

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## MEDICAL REQUEST FOR HOMEBOUND

	tt County Public Schools 340 East Jackson St. ate City, Virginia 24251 276-386-6118 FAX 276-386-2684
Student Name:	Date of Birth:
Address:	
Home Phone:	_Cell Phone:
Reason requesting for Homebound Services:	
Student with Disability: YES NO	
If the student has a disability and is enrolled in spec	ial education, please explain the placement:
Student with Disability - Case Manager:	
Parent/Guardian/Adult Student (Printed Name):	
Parent/Guardian/Adult Student Signature:	
School:	Grade:
Homeroom Teacher:	
Subjects 1 <sup>st</sup> Semester:	Teacher:
Subjects 2 <sup>nd</sup> Semester (As appropriate):	Teacher:

#### NONDISCRIMINATION POLICY

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## HOMEBOUND INSTRUCTION

(Continued)

To Be Completed by the Parent/Guardian/Adult Student

Name of Parent/Guardian/Ad	ult Student:		
Name of Eligible Student:		Home Phone:	
Work Phone:		_ Cell Phone:	
Street Address:			
City:	State:	Zip Code:	

<u>Acknowledgement/Release</u>: I acknowledge this request and agree with the need for homebound services. I further acknowledge that the requested homebound services for students receiving special education services shall be subject to review by the student's IEP team pursuant to the Individuals with Disabilities Education Act. I will provide an environment conducive to learning, ensure that a responsible adult is in the home for the duration of instruction, or provide transportation to another agreed upon facility. I will keep appointments with the homebound teacher or contact the teacher or homebound coordinator if an appointment must be missed.

I understand that the local school division has established policies and procedures for homebound instruction that provide more detail than this certificate of need.

By my signature, I authorize the release and exchange of medical information between the health care provided, or his/her designee, and school division personnel. My signature provides the health care provider(s) with the authorization necessary to disclose protected health information and records regarding said student as it pertains to the condition for which homebound instructional services are being requested.

<u>Please Note:</u> This form, including parental permission to contact the treating physician or psychologist, <u>must be fully</u> <u>completed</u> in order for the student to be considered for homebound services. If you have a concern about homebound services or the homebound instructor, questions about homebound services, or completing this form, please contact: Supervisor of Homebound Instruction at the Scott County School Board Office (276-386-6118).

Signature of Parent/Guardian or Eligible Student

Date

#### HOMEBOUND INSTRUCTION MEDICAL CERTIFICATION OF NEED

To be Completed by Licensed Physician or Licensed Clinical Psychologist Providing Care to the Student for the Condition for Which Services are Requested.

Homebound instruction shall be made available to students who are confined at home or in a health care facility for periods that would prevent normal school attendance (8VAC20-131-180). The term "confined at home or in a health care facility" means the student is unable to participate in the normal day-to-day activities typically expected during school attendance; and, absences from home are infrequent, for periods of relatively short duration, or to receive health care treatment. Students receiving homebound instruction may not work or participate in extra-curricular activities, non-academic activities (such as field trips), or community activities unless these activities are specifically outlined in the students medical plan of care or Individualized Education Program (if applicable).

4.	Is the student confined at home or in a hea	lth care facility?	Vos	NO
5.	Is the illness/treatment intermittent in natu YESNO	ure (e.g., sickle cell a	nemia, chem	otherapy for childhoo
6.	Could this child attend school if accommod	lations are made by	the school? _	YESNO
	If yes, please list the accommodations requ	iired. If no, please e	xplain:	
	Estimated date of return to school:			
7.	Estimated date of return to school: Explain ongoing treatment and/or therapy			
		being provided:		
	Explain ongoing treatment and/or therapy	being provided:		
7.	Explain ongoing treatment and/or therapy Frequency of treatment:	being provided:		

POLÍTICA DE NO DISCRIMINACIÓN

Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

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#### SCOTT COUNTY PUBLIC SCHOOLS AUTHORIZATION FOR DISCLOSURE OF PROFESSIONAL INFORMATION 340 EAST JACKSON STREET GATE CITY VA 24251 PHONE: 276.386.6118 FAX: 276.386.2684

Student Name:		Date of Birth:	Date:
Outside Agency Name:	Phone:		Fax:
Address:			
□ I hereby give my consent and authorize Scott County Publ	lic Schools	to receive the following in	formation:
YES NO	YES N	10	FOR THE PURPOSE OF:
Evaluations (specify):		Referral	Coordination of Services
Progress Reports		] Psychological	Evaluation/Assessment
Psychiatric		Behavioral Health	Eligibility
History (specify):		Educational	IEP Development
School Records/Reports (specify):		Identification	Other:
Diagnosis or Principal Complaint		] IEP/Eligibility	
Admission, Discharge & Tx Summary		Medical/Vision/Hearing	
Alcohol & Drug Abuse Treatment Information		Psychosocial Information	
Lunderstand that this consent is subject to revession by me at any t	time and u	nlass an aarliar data is spacifia	d this release will evoire 10 menths ofter the

I understand that this consent is subject to revocation by me at any time, and unless an earlier date is specified, this release will expire 12 months after the \_(either N/A or date). As the person signing this consent, I date specified below. If less than 12 months, the alternate expiration date is \_ understand that I am giving my permission to the above named provider or other named third party for disclosure of confidential health care records. I also understand that I have the right to revoke in writing to the person who is in possession of my records except to the extent that action has been taken in reliance thereon. A copy of this consent will accompany any disclosure, and a notation concerning the persons or agencies to whom disclosure was made shall be included with my original records. I may also request to inspect or copy the information to be used or disclosed. The person who receives the records to which this consent pertains may not disclose them to anyone else without my separate written consent unless such recipient is a provider who makes a disclosure permitted by law.

I understand that I have the right to refuse to sign this Authorization for Disclosure of Professional Information and have been informed that by refusing to allow communication between treating physicians/clinicians is counter-productive and potentially dangerous.

Patient/Client Signature (16 years & older)		Date Signed	
Guardian or Legally Authorized Representative	Relationship to Patient/Client	Date Signed	
Prohibition on disclosure: This information has been disclosed (Educational Records) and HIPPA (Medical Records) guidelines	, , ,	dentially rules and meets both the	FERP
Signature of Witness and Title:	Date:		

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## SCOTT COUNTY PUBLIC SCHOOLS INCIDENT REPORT (10-DAY RULE)

Complete the following, if in special education beginning on the I lth day of removal, and for each out-of-school suspension thereafter. Notice must be provided to parent with a copy of Procedural Safeguards (PS).

Student:	School:	DOB:	
Grade:	Disability:	DOB:	
Parent/Guardian:	A	ddress:	
Date of Incident:	Desc	ription of Incident:	
Student's Version of Incider	nt:		
Recommended Disciplinary			
	-	ng factors: the length of each remo er, the behavior(s) which result in	-
Factors Reviewed:			
Discipline Records	IEP	_Other Educational Records	BIP
	evious suspensions. Persons cons teacher, parent, other (identify: _	sulted - circle all that apply: guidar ).	nce, special education
What considerations were	provided in order for the student	to stay current with classes during	g removal?
reasons for removals, othe	r factors, FBA/BIP:Yes	t of time the student was remove No	
must consult with the speci		ginning on the 11th day of remova e the services provided. Any of the	
		opriately progress toward achievi	ng the goals set out in the
	nts provided to student for comp	letion in alternative setting.	
Student a	lowed to make-up assignments u	_	
A long-term removal const cumulative school days wh	itutes a change in placement wh ich constitute a pattern. School p	en there are more than 10 consec personnel may place a student wi ions involving weapons, drugs, ar	ith a disability in an interim
school days or more in a giv Review. <b>Prior Written notic</b>	en school year, provide notice ar	pattern: Within 10 business days do not be an IEP meeting/Causal	0

the parent(s) to one of the below proposals. (Check the one that applies.)

\_\_\_\_\_A Behavior Assessment will be completed if there is a pattern of behavior or if it was determined at the Causal Hearing that the behavior was a manifestation of the student's disability (If one does not already exist.)

\_\_\_\_\_\_A review of the existing Behavior Intervention Plan will be conducted (If one exists) to determine if modifications or revisions are necessary. If so, the IEP must be revised and implemented. <u>Obtain informed consent from</u> <u>parents if the functional behavioral assessment plan calls for assessments beyond reviewing existing information.</u> A revised IEP must be implemented through an addendum with the behavior interventions.

The IEP Team determines the services needed and identifies how the student will continue to participate in the general curriculum for the student during long-term removals.

Special Education Teacher	Date
Principal/Assistant Principal	Date
Other	Date

#### NONDISCRIMINATION POLICY

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# SCOTT COUNTY SCHOOLS INDIVIDUAL/SCHOOL REIMBURSEMENT REQUEST FORM (Pre-Approval Form Must Be Attached To This Form)

SCHOOL:			
PAYABLE TO:	 	 	
ADDRESS:			

PROGRAM AREA REQUESTING REIMBURSEMENT:

Date of	Descriptions/Items	Person/Program	Amount
Purchase		Purchased For	Requested
NOTE: Receipts must	be attached for all items.		
No i L. Neceipto must	be attached for an items.	ΤΟΤΑΙ	
		TOTAL	•

Person requesting reimbursement

Principal/Supervisor

Superintendent

#### INFORMATION REQUEST FOR PERSONNEL DIRECTORY

This if the information needed for the Personnel Directory:

- **NAMES** must be in alphabetical order by LAST name then FIRST.
- Include <u>PHONE NUMBERS</u> even if they are unlisted (indicate that the number is unlisted and it will not be given out).
- <u>ASSIGNMENT OR JOB TITLE</u> Please break down, if applicable. For example: Secondary History Please indicate what History course(s) you teach. In elementary, if departmentalized list the subjects and grades you teach.

Those who are not teachers, list your job title (mechanic, secretary, custodian, bus driver, cafeteria, aide, etc.).

You do not have to use this form. The information may be turned in on a spreadsheet, typed in a document, etc. as long as all of the information listed below is included.

Last Name:
First Name:
School:
Address:
City:
State:
Zip:
Home Phone:
Assignment/Job Title:

\*Return to Renee Adams no later than Friday, September 1, 2023.

#### NONDISCRIMINATION POLICY

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# SCOTT COUNTY PUBLIC SCHOOLS

340 East Jackson Street Gate City, VA 24251 276-386-6118

## **EL Parent Notification Letter**

To the parent(s)/guardian(s) of		Date:
School:		DOB:
Grade:	Primary Language:	

## **English Learner (EL) Identification**

Under Title VI of the *Civil Rights Act of 1964*, U.S. schools are required to identify English Learners (ELs) and assess their English proficiency level in order to provide language instruction educational program (LIEP) services. A language other than English has been indicated on your student's enrollment documents. Therefore, an English language proficiency screening assessment was administered to your student:

## English Language Proficiency Screening or ACCESS for ELLs Assessment Results

Based on your student's score of \_\_\_\_\_\_ he/she is designated an English Learner (EL) and is eligible to receive LIEP services.

Your student's English language proficiency is identified as:

٧	Student's English proficiency level	
	1	Entering
	2	Emerging
	3	Developing
	4	Expanding

A general description of each English language proficiency level according to the WIDA Performance Definitions is listed:

#### WIDA Performance Definitions

Listening and Reading – Grades K-12 Speaking and Writing – Grades K-12

1	Entering	<ul> <li>words, phrases, or chunks of language;</li> <li>single words to represent ideas;</li> <li>general content-related words and everyday social or instructional phrases;</li> </ul>
		<ul> <li>simple questions or declarative sentences; and</li> </ul>
		<ul> <li>simple grammatical constructions and single statements or questions.</li> </ul>
2	Emerging	<ul> <li>multiple related simple sentences or phrases;</li> </ul>
		<ul> <li>emerging expression of ideas;</li> </ul>
		<ul> <li>compound or formulaic grammatical structures with repetitive sentence</li> </ul>
		patterns across content areas;
		<ul> <li>general content words and expressions including cognates; and</li> </ul>
		<ul> <li>social and instructional words and expressions across content areas.</li> </ul>
3	Developing	<ul> <li>short and some expanded sentences with emerging complexity;</li> </ul>

	<ul> <li>related ideas specific to particular content area;</li> <li>compound and some complex grammatical constructions;</li> <li>specific content-area language and expressions; and</li> </ul>
4 Expanding	<ul> <li>words and expressions with multiple meanings across content areas.</li> <li>short, expanded, and some complex sentences</li> <li>organized expression of ideas with emerging cohesion related to a particular content area;</li> <li>compound and complex grammatical constructions;</li> <li>specific and some technical content-area language; and</li> <li>words and expressions with multiple meanings using collocations and idioms across content areas.</li> </ul>

# Language Instruction Educational Program (LIEP)

The goal of LIEP services is to assist ELs in becoming fully proficient in English and meeting the same challenging state content standards as all other students are expected to meet. Your

## **Exit Requirements**

School divisions in Virginia use the ACCESS for ELLs assessment to determine the English language proficiency of EL students. The four language domains of listening, speaking, reading, and writing are incorporated into the state's definition of "proficient" in English through the WIDA<sup>®</sup> English Language Development (ELD) standards.

ELs will be considered proficient when they earn a composite score of 4.4 or above on the ACCESS for ELLs assessment. ELs who have met the proficiency criteria will be considered former EL for two years, during which time their academic achievement will be monitored.

## **Expected Rate of Graduation**

School divisions may choose to use the state or school division four-year on-time cohort graduation rate for high school students.

## **EL Students with Disabilities**

If your student is determined to have a disability, LIEP services will be provided in coordination with your student's Individualized Education Plan (IEP) or a 504 Plan. Parent Rights

# Parents have the right to: 1) "opt-out" the student from LIEP services at any time during the school year; 2) re-enroll the student in LIEP services at any time during the school year; and 3) choose other LIEP models [if available] for the student with the assistance of [INSERT NAME OF SCHOOL DIVISION].

## I consent to my student's placement in LIEP services.

**I** do not consent to my student's placement in LIEP services.

Signature of Parent or Legal Guardian

Date

For parents who "opt-out" the student from LIEP services, please provide contact information so division/school staff can contact you to discuss alternative program options.

rent Name:	
rent Address:	
rent Phone Number:	
rent E-mail:	_

School division staff are available to meet with you to discuss your student's LIEP placement and educational program options at any time. We strongly encourage you to contact us if you have any questions. Interpretation services are available at your request. Please contact the division/school contact person listed below:

Please contact Reagan Mullins, with any questions about the parent notification letter or process at (276) 386-6118 or reagan.mullins@scottschools.com.

#### NONDISCRIMINATION POLICY

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#### POLÍTICA DE NO DISCRIMINACIÓN

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# Virginia Assessment Program Calculator Accommodation Criteria Form

This form takes effect beginning with the 2017-2018 test administrations and replaces all documentation pertaining to calculator accommodations for student with disabilities as used on state assessments.

This form is to be completed by an IEP Team/504 Committee to document that a student with a disability qualifies for the calculator accommodation on a mathematics and/or science Standards of Learning (SOL) test or Virginia Substitute Evaluation Program (VSEP) assessment. The calculator accommodation must be necessary for the student to access the state assessment, and it must be directly related to the student's disability. The calculator accommodation is not intended to enhance student performance for students with disabilities whose skills in performing mathematical calculations are below grade level.

**Student Information:** 

Student Name:	State Testing Identifier (STI):
School Division:	School:
Teacher:	Grade:
Primary Disability:	_ Secondary Disability (if applicable):
Test and Calculator Accommodation Infor	mation:
Test Name:	Calculator Name and Model:

## Justification:

The IEP Team/504 Committee must respond to the questions below, and the form must be retained as part of the student's IEP:

1. Does the student have a current IEP/504 Plan that documents, or will document, the student's disability and need for the calculator indicated above?

If the response is No, then the use of this calculator cannot be approved.

2. As a result of a specific disability, has the student routinely used this specific calculator in the classroom to perform calculations?

If the response is No, provide details of the student's experience with the calculator and how the student will be prepared to use the calculator before completing the assessment.

For questions 3, 4, and 5 that follow, any "Yes" response must also include a justification statement. The *Checklist of Mathematical Capabilities* for *Approved Calculators* provided with this form must be referenced when completing a justification statement, and the statement must include:

- a description of the impact of the student's disabilities as related to mathematics,
- the calculator's accessibility features and/or additional mathematical capabilities needed by the student, and
- an explanation of how the specific characteristics of the student's disabilities are addressed by the features or capabilities of the calculator.
- 3. Does the student need to use a calculator with accessibility features (e.g., large display, large button, audio) to access the SOL test or VSEP assessment?

Justification Statement: \_\_\_\_\_

Note 1: If the calculator with accessibility features needed by the student also has additional mathematical capabilities that are not needed (see #4 below), a completed <u>Special Assessment Accommodation Request Form</u> must be submitted to the Division of Student Assessment and School Improvement with a copy of this completed Calculator Accommodation Criteria Form. An explanation of how student access to the additional mathematical capabilities will be prevented during testing must be provided.

Note 2: The Appendix of this document details three calculators that may be used by students with visual impairments, including blindness; however, the conditions outlined in the Appendix for the specific calculator must be followed. A visual impairment, including blindness, means an impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness (34 CFR §300.8(c) (13)). The term "visual impairment" does not include children who have learning problems that are primarily the result of visual-motor or perceptual deficits; although, visually impaired students may also have these additional diagnoses.

4. Does the student need to use a calculator with additional mathematical capabilities to access the SOL test or VSEP assessment?

Justification Statement \_\_\_\_\_\_

5. Does the student need to use a calculator, arithmetic tables, or machines to access the section of the SOL Mathematics test in which a calculator is not allowed (SOL Mathematics tests for grades 3-7)?

Justification Statement

## IEP Team/504 Committee Signatures:

Title/Position	Print Name	Signature	Date

This calculator accommodation criteria form and associated documentation is subject to audit by the Division of Student Assessment and School Improvement.

# Scott County Public Schools Read Aloud/Audio Accommodation for the Virginia Standards of Learning Reading Test/Grade Level Alternative (VGLA)

Name of Student:	Sch	ool:

In order for a student to be eligible for the Read Aloud/Audio Accommodation on a SOL Reading Test, the student must meet all of the following:

YES	NO	<ol> <li>Does the student demonstrate a weakness in decoding and this IEP identifies diagnostic information below and includes goal(s) to address decoding?</li> </ol>
YES	NO	2. Does the student demonstrate adequate comprehension (student understands material read to him/her)?
YES	NO	3. Does the student have access to the general education curriculum? Inclusion?
YES	NO	4. Does the student use classroom accommodations for the identified weakness in decoding?

Questions 1-4 must be answered YES before answering question 5, 6 or7. In addition <u>one of</u> 5, 6, or 7 must be answered YES for the student to qualify for the Read-Aloud accommodation.

YES	NO	5. Does the student have a visual impairment where large print or Braille is not an appropriate accommodation?
<u> </u>	<u>R</u>	
YES	NO	6. Does student have a specific disability that severely limits or prevents them from decoding text at any level of difficulty (code <i>315</i> specific learning disability in reading as provided by the psychological report)?
<u>0</u>	<u>R</u>	
VES	NO	7 Does the student have a specific learning disability that limits or prevents the student from

YES NO 7. Does the student have a specific learning disability that limits or prevents the student from decoding text at any level of difficulty as evidenced by a standard score of less than or equal to 77 in at least one area (1.5 standard deviations below the mean on test with a mean of 100 and when one standard deviation would be equal to 85 and 1.5 standard deviations would equal 77)?

Test/Subtest	Test Date	Student Score	Confidence Level	Student Range	Meets criteria of <u>&lt;</u> 77 Standard Score
WJ-III Letter-Word Identification			<u>+</u> 5		
WJ-III Word Attack Skills			<u>+</u> 5		

W-J = Woodcock-Johnson Achievement Test-III

# Scott County Public Schools Read Aloud/Audio Accommodation for the Virginia Standards of Learning Reading Test/Grade Level Alternative (VGLA)

Test/Subtest	Test Date	Student Score	Confidence Interval	Student Range	Meets Criteria <u>&lt;</u> 77 Standard Score
WJ-III FLUENCY					

W-J= Woodcock-Johnson Achievement Test- III

#### OR

YES NO 8. Does the student read below level to meet the following criteria (select one)?

\_\_\_\_\_ Reading 2 years below grade level in grades 3 or 4

\_\_\_\_\_ Reading 3 years below grade level in grades 5-8

• \_\_\_\_\_ Reading 4 years below grade level in grades 9-12.

If #7 or #8 is chosen for acceptance for the read-aloud using the WJIII, students must be RE-ASSESSED at the end of each school year to determine competency or eligibility for the following school year on a Read Aloud/Audio Accommodation for the Virginia Standards of Learning. If the standard scores are greater than 77, the student will no longer qualify for the read-aloud accommodation.

Parent	Date:
Student (as appropriate)	Date:
Classroom Teacher:	Date:
Referring Teacher:	Date:
Special Education Teacher	Date:
Principal	Date:

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# Scott County Public Schools Nebulizer Policy for School Clinics

# **OVERVIEW**

Asthma is a chronic health condition affecting the airways in the lungs. Symptoms include wheezing, shortness of breath, chest tightness, retractions or other student specific asthma signs and symptoms as indicated.

A nebulizer changes liquid medicine into fine droplets (in aerosol or mist form) that are inhaled through a mouthpiece or mask. A nebulizer may be warranted instead of a metered dose inhaler. Nebulizers are often used with children because the procedure is easier to coordinate and use than metered dose inhalers.

Beginning in 2020, attention has been heightened on procedures that have the potential to spread infection disease by aerosols generated by nebulizers. However, if a student's doctor deems nebulizer use necessary the procedure should be as follows:

# PROCEDURE

- Ensure that the student has an asthma care plan in place, along with an order from the student's physician. The student's parent / guardian will be responsible for providing the medication and equipment required for administering nebulizer treatments.
- 2. The nebulizer treatment should be performed with no other students in the room.
- 3. Staff administering the treatment should wear at a minimum a surgical mask and gloves.
- 4. During the treatment, staff should be only as close as necessary, taking care to keep their face as far away from, and above the nebulizer as possible. Observation of the student from across the room or outside of the door is adequate if the child is able to hold the nebulizer cup during the treatment.
- 5. Following the treatment both the student and staff member should wash their hands properly.
- 6. Return child to classroom.
- 7. Wear gloves and a mask while disinfecting surfaces in the room, and cleaning the nebulizer machine in accordance with the machine instructions.

# NOTICE OF INTENT TO PROVIDE HOME INSTRUCTION

DO NOT SUBMIT THIS FORM TO THE VIRGINIA DEPARTMENT OF EDUCATION. PLEASE FORWARD THIS COMPLETED FORM TO YOUR LOCAL SCHOOL DIVISION. Contact information for Virginia public school divisions can be found at the following address: <u>Virginia Public School Division Staff (va-doeapp.com</u>).

I am providing notice of my intention to provide home instruction for the child(ren) listed below as provided by 22.1-254.1 of the *Code of Virginia*, in lieu of having them attend school for the school year 20\_\_\_\_\_-20\_\_\_\_.

Name(s) of Child(ren)	Date of Birth	Grade Level

I wish to be recognized as eligible to provide home instruction by selecting the option indicated below. (Check one below.)

\_\_\_\_ I have a high school diploma or a higher credential.

(Attach a copy of the documentation that shows this.)

I have the qualifications prescribed by the Board of Education for a teacher.

(Attach a copy of a teaching license or a statement to this effect from the Virginia Department of Education.)

# \_\_\_\_ I have provided a program of study or curriculum which is to be delivered through a correspondence course or a distance learning program or in some other manner.

(Attach a notice of acceptance or other evidence of enrollment showing the name and address of the school and a list of subjects to be studied for the coming school year if the child is enrolled in a correspondence course or distance learning program. If you choose to provide a program of study or curriculum in some other manner as specified in the *Code*, a list of the subjects to be studied for the coming school year must be submitted to the school division.)

# \_\_\_\_ I have attached to this notice a statement which describes why I am able to provide an adequate education for my child(ren).

(Please contact your local school division to determine what its requirements are.)

As prescribed in § 22.1-254. 1 of the *Code of Virginia*, I have included or will provide the school division with a description of the curriculum, limited to a list of subjects to be studied during the coming school year, and evidence of having met one of the above criteria along with this Notice by August 15 of each year. If I begin home instruction after the school year has started, I will submit this Notice as soon as practicable and comply with the other requirements within 30 days of this Notice to the school division. I understand that by August 1 following this school year, I must provide evidence of educational achievement as prescribed in § 22.1-254.1 of the Code of Virginia, which defines the requirements for home instruction. I hereby certify that I am the parent or guardian of the child(ren) listed above.

Parent/Guardian Signature	Date
Name and Address	
(Please print or type)	
Telephone number	
Email address	



# Scott County Public Schools

# OUT OF COUNTY ENROLLMENT FORM

School:	School Official Completing Form:	
Student Name:,	,,	
LAST	FIRST	MIDDLE
Student Birth Date:///	Gender:Male	Female
Enrolling Grade:Has student previously	y been enrolled in Scott County? I	NO YES
If yes, list enrollment period beginning	// and ending//	
Would any of the following make the student	ineligible for enrollment? (please resp	oond to each item)
Student has missed more than 10% of the curr	ent/previous school year?	NOYES
Student is failing or has failed a class(es) in this	s current or previous school year?	NOYES
Student has discipline that includes weapons, v	violence, or drugs?	NOYES
Student has excessive documented classroom		NO YES
Previous Expulsions/Suspensions?		NOYES
Student has been placed in Alternative Ed.		NOYES
(If yes, list the name & location of Alt, )	Ed. program)	
(5)		<u> </u>
Completed Applications Must Have the Follov    A     School Transcript		Discipline Overview
Other Considerations:		
Family works in Scott County	Childcare locat	ed in Scott
Family owns land in Scott County	Sibling(s) Enrol	
Other (Please Attach)		
I UNDERSTAND THAT MY CHILD'S ENROLLMEN ACADEMIC ISSUES.	IT MAY BE REVOKED IF THERE ARE ATTE	NDANCE, DISCIPLINE, OR
Parent Signature		Date
Administration Use Only:		
Principal/Assistant Principal Recommend Enro	ollmentNOYES	
Signature of Principal/Assistant Principal	Date	
Signature of Central Office Supervisor	Date	

# **OVERNIGHT FIELD TRIP REQUEST FORM**

This form is to be used by school personnel requesting an overnight field trip to any planned event (academic competition, athletic competition, band trip/competition field trip, etc.). Overnight trips must be filed with the
Superintendent at least three (3) months prior to the planned trip for approval of the Scott County School Board. Please attach an agenda.
Name of School Grade/Group
Activity/Event
Location
Date(s)
Purpose of Trip
No. of persons to be transported: Students Sponsors Chaperones
Type of transportation:Chartered Bus School BusPrivate Car(s)
If Chartered Bus, please provide name of bus company, address, and telephone number:
Total cost of trip:
How will trip be financed?
Maximum Out-of-Pocket Student Cost:
Estimated Student Cost (after fundraisers, etc.):
How will students unable to pay their share be given an opportunity to go on the trip?
Place/date/time of departure:
Place/date/time of return:
Name/address/phone no. of lodging (if applicable):
Name of teacher(s)/chaperone(s) accompanying group:

#### **OVERNIGHT FIELD TRIP REQUEST FORM**

low will the cost of the chaperone's expenses be covered?						
ApprovedDisapproved						
Principal/Assistant Principal:						
Date:						
Date School Board Approved	Disapproved	_				

\*Include with the agenda, how students will be allowed to earn money to assist in paying for their expenses of the trip.

\*The Superintendent or his/her designee may revoke permission for a scheduled field trip if a natural or manmade incident(s) should create an unsafe environment for our students and staff.

# PARENTAL PERMISSION FOR BEHAVIOR SERVICES

(This consent form is in effect for one calendar year from date of signature.)

Child's Name:	DOB:
Teacher:	School:

The following behavior service(s) has/have been requested for your child:

\_\_\_\_\_Functional Assessment (may include direct observation, records review, Teacher interviews, data collection and analysis)

\_\_\_\_\_Behavior Intervention Plan (based on results from functional assessment)

\_\_\_\_\_Administer Assessment of Basic Language and Learning Skills (ABLLS)

\_\_\_\_\_Development of Applied Behavior Analysis academic programming

\*\*Courtney Currier, MS, BCBA, who is the behavior analyst at your child's school will provide these services.

The behavior analyst is one member of a team of educational professionals. As appropriate, information obtained in the process of delivering applied behavior analysis services may be shared with other team members in order to provide the best possible educational services to your child. As a rule, no information will be shared with anyone outside the school without your prior consent. However, as required by Virginia law, and/or as required by the voluntary policies of this school system, there are some exceptions to this rule of confidentiality. (Refer to Page 2)

As a parent/legal guardian, I do give my consent and permission for my child to receive the applied behavior analysis services checked above, and I understand the limits of confidentiality as described on page 2.

Signature/Date

As a parent/legal guardian, I do not give consent and permission for my child to Receive the applied behavior analysis services checked above.

Signature/Date

#### **BEHAVIOR REFERRAL PROCIESS**

The following steps should be put in place before submitting a referral to the Behavior Analyst:

# 1. Collect data

- a. Data should be collected from the very first occurrence of problem behavior. Important things to write down include:
  - i. Antecedent: what was happening before the behavior occurred
  - ii. Behavior: what exactly did the student do (be specific)
  - iii. Consequence: what happened immediately after the behavior occurred.

# 2. Involve your guidance counselor

a. Guidance should begin seeing the student for 15-30 minutes at least 1x per week. Sessions should consist of discussions about problem behavior and alternative ways to handle anger, frustration. Sessions should be conducted for a minimum of 4-6 weeks.

# 3. Develop an informal behavior plan

- a. If a student is not responding to your classroom discipline system, an individual plan should be developed. Your plan should focus on decreasing an undesirable behavior and increasing a desirable behavior. It is highly recommended that positive reinforcement be utilized. This can include praise, rewards, free time, etc. Keep in mind that students will be more successful if rewards are made available more frequently rather than waiting until the end of the week.
- b. Implement the plan for a minimum of 4 to 6 weeks and continue to collect data to determine if the plan is working.
- c. ISS, OSS, After School, Saturday School, and referrals to Alt. Ed. Are considered to be disciplinary actions and do not count as interventions.

If problem persists after 4-6 weeks of implementing counseling sessions and your behavior plan, the student should be referred for a formal behavior plan. The following steps should be completed:

- 1. Fill out the referral using as much detail as possible
- 2. Attach data that you have collected since the first occurrence of problem behavior. You can attach the student's discipline report; however, this should not be the only record of behavior that you have. Discipline reports often do not include detailed information about the student's behavior.
- 3. Attach a copy of the informal behavior plan. Be detailed about what intervention you tried.

# **Limits of Confidentiality**

- A. Under Virginia Law, I may be required to breach confidentiality in circumstances such as the following:
  - **Child Abuse:** If I have reason to suspect that a child is abused or neglected, I am required by law to report the following matter to the Virginia Department of Social Services. [63.2 1509]
  - Adult Abuse: If I have reason to suspect that an elderly or incapacitated adult is abused, neglected or exploited, I am required by law to immediately make a report and provide information to the Virginia Department of Welfare of Social Services. [63.2 1606]
  - **Court Proceedings:** If your child becomes involved in a court proceeding, or there is a custody dispute, and if we receive a subpoena for health records or testimony in that court case, we will notify you. If you wish the records protected, you or your child's attorney must file a motion to object to the subpoena, requesting that the judge protect your child's information and/or records. However, while awaiting that decision, we may be required to turn the records over to the clerk of the court. [32.1 \_\_\_127.1:03]
  - Serious Threat to Health or Safety to Another: If you or your child communicate to me a specific and immediate threat to cause serious bodily injury or death to an identified or to an identifiable person, and I believe there is the intent and ability to carry out that threat immediately or imminently, I am legally required to take steps to protect third parties. These precautions may include 1) warning the potential victim(s), or the parent or guardian of the potential victim(s), if under the age of 18; 2) notifying a law enforcement officer, or 3) seeking hospitalization. [54.1 2400.1]
- B. By school policy, I may be required to breach confidentiality in the following circumstances:
  - Serious Threat to Own Health or Safety: By policy, I may use and disclose information when necessary if in my professional opinion, your child poses an immediate, serious threat to his/her own health or safety.

#### **Referral to Behavior Analyst**

Date: \_\_\_\_\_

Student's Name:	School:
Grade: Teacher:	Case Manager:

Please be as detailed as possible when answering the following questions. Attach additional pages if necessary.

- 1. Describe the behavior(s) of concern (describe what the behavior looks like):
- 2. How often does the behavior occur? (every day, once per week, 5 times per day, etc.)

- 3. How long does the behavior last?
- 4. What is happening when the behavior occurs? Describe what is happening according to on-going activities and people present. Were demands presented? Was teacher attention divided?

5. When is the behavior most likely to occur (time of day, during a particular subject, etc)?

\_\_\_\_\_

- 6. Where is the behavior most likely to occur?
- 7. With whom are the behaviors most likely to occur?
- 8. What activities are most likely to produce the behaviors?
- 9. How can you tell the behavior is about to occur?

10.	What usually happens after the behavior? Describe what is happening according to adult(s), peer(s), and the student's responses.
11.	What is likely the function (intent of the behavior? Why do you think the student behaves this way? What does the student get or avoid from behaving this way.
12.	What strategies have been used with this student?
13.	What are the student's interests? What does the student like to do? (e.g. computer time, listening to music, reading, drawing, helping, etc)
14.	What are the student's strengths?
15.	Has the student worked with the guidance counselor?yesno If yes, please briefly describe how often and what strategies have been used:
16.	Does the student receive outside counseling?yesno ➤ If yes, please list the agency/counselor:
17.	Number of conferences with parents to discuss behavior:
	ase list any other information that would be beneficial to know about the student:

	Signatures
Parent	Teacher
	Administrator
Student (as appropriate)	Other
	Office Use Only
Approved	Not Approved
Administrator	Behavior Analyst

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# **Scott County Schools**

Antecedent-Behavior-Consequence Analysis (ABCA)						
Student:	School:	Teacher:				

Instructions: Use this form during assessment to identify situational factors related to the occurrence of a behavior problem. Each time a target behavior occurs, record the date and time. Use check marks to identify the target behavior, location, activity, and what happened immediately before and after the behavior.

Date								
Time								
Behavior:	l		l	L				
		[ ]		[		[		
Location where behavior occurred:	I		I					
Classroom								
Lunchroom								
Bathroom								
Hall								
Gym								
Bus/Car								
Outside								
Other:								
General activity in progress:								
Group Instruction				[				
Individual Instruction								
Lunch								
Group Play								
Individual Play								
Other:								
Immediate antecedent:	<u> </u>	. <u> </u>	<u> </u>		<u> </u>	<u> </u>	I	
Teacher delivered an instruction or prompt								
to work								
Teacher denied a request								
Teacher was attending to other children								
Teacher prompted the student to stop								
playing								
Student was provoked by a peer								
None(individual was alone/doing nothing)								
Other:								
Immediate consequence:			 			 		
Teacher verbally prompted student to								
"stop"								
Teacher interrupted the behavior								
Student acquired leisure material, other								
tangible						 		
Teacher redirected the student to another								
area/activity								
Teacher terminated the instruction to work						 		 
Teacher did not respond						 		
Other:								

## PETTY CASH FUNDS POLICY

The school may establish a petty cash fund for the purpose of paying small obligations such as providing change for concessions, lunch sales, postage costs, and other purchases requiring immediate cash as a means of payment. Such funds shall not exceed <u>\$200</u> for Duffield Primary School, Gate City High School, Gate City Middle School, Nickelsville Elementary School, Rye Cove High School, Scott County Career & Technical Center, Shoemaker Elementary School, Twin Springs High School and Weber City Elementary School and <u>\$100</u> for Dungannon Intermediate School, Fort Blackmore Primary School, Hilton Elementary School, Rye Cove Intermediate Schools, and Yuma Elementary School. To establish a petty cash fund at the beginning of the fiscal year (July 1), the school will issue a check from the general fund payable to the Petty Cash Fund in the amount agreed upon for that particular school (listed above). A separate activity fund for posting all petty cash fund transactions must be set up within the School Activity Fund Monthly Report which is submitted to the superintendent each month. At the end of the fiscal year to close the cash balance of the petty cash fund a check is to be written to the general fund for any remaining balance.

If a school establishes a petty cash fund, the principal (or designee) shall be the only authorized person to approve payment of claims arising from such petty cash funds. An accounting record of all petty cash transactions is to be maintained. Every reimbursement from the fund must be by receipts signed by the payee and contain itemized invoices or claims. The only deposits to the petty cash fund should be the warrants issued to the petty cash custodian to reimburse the fund and the check to the petty cash fund requires dual signatures. Other miscellaneous receipts should not be deposited to the petty cash fund. The petty cash account should be reimbursed on a monthly basis, or as needed, and must be reimbursed at fiscal year-end in order to properly reflect current year expenditures.

# PETTY CASH RECORD

# \_\_\_\_\_ SCHOOL YEAR

Date	Paid To	Paid For	Code	Paid Out	Cash Received	Balance on Hand

SCSB 39.10 (6/3/08)

#### PHYSICAL RESTRAINT INCIDENT REPORT

Physical restraint means "the restriction of a student's movement by one or more persons holding the student or applying physical pressure upon the student" and "does not include touching or holding a student without the use of force for the purpose of directing the student or assisting the student in completing a task or activity". Physical restraints may also be used in "an emergency by a school administrator, teacher, school employee, or volunteer as necessary to maintain order or to prevent a student from harming him/herself, other students, and school staff.

Student Name:		ID #:	Date of	Birth:
□ IEP □ 504 □ BIP		Grade:	School:	
Incident Description				
Date Incident Occurred:		ime restraint began: □ A.M. □ P.M.		Time restraint ended:
Location of incident:	Behavior(s) t	Behavior(s) that lead to restraint:		
🗆 Hall				
Cafeteria				
Playground				
Other:				
Behavior(s) directed at:	Description of activity in which the restrained student or other students were engaged in immediately preceding use of physical restraint:			
Peers				
□ Self				
□ Other:				
Thorough description of efforts m	ade to deescalate ar	nd alternatives to	physical restr	aint that were attempted:

Restraint Methodology used:	Physical restraint hold(s) used:
Restraint Methodology used:	Physical restraint hold(s) used:
Handle With Care Primary Restraint Technique	
Student's behavior during restraint:	Student's behavior after restraint:
C C	
Why was the use of physical restraint necessary?	How restraint ended(check all that apply)
why was the use of physical restraint necessary:	<ul> <li>Determination by staff member that student was no</li> </ul>
	longer a risk to himself or others
	□ Intervention by administrator(s) to facilitate de-
	escalation
	Law enforcement personnel arrived
	Staff sought medical assistance
	□ Other (describe):
Staff member(s) responsible for continuous monitoring of	
student's status during the physical restraint:	Description of any injury to student and/or staff and any
	medical or first aid care provided (as per district policy, if
	injury occurred, complete in addition to this form.):
	injury occurred, complete in addition to this form.j.
	<u> </u>

Staff administering restraint				
Name	Position	Certified to	Name of approved	Received prior restraint
		administer restraints	restraint methodology	<u>training</u>
		🗆 Yes 🗆 No	Handle With Care	🗆 Yes 🗆 No
		🗆 Yes 🗆 No	Handle With Care	🗆 Yes 🗆 No
		🗆 Yes 🗆 No	Handle With Care	🗆 Yes 🗆 No

Observers		
Staff members/other adult witnesses (include name and position):	<u>Student(s):</u>	

Parent Notification	Parent Notification					
Name of parent(s) contacted:	Documented attempt to contact parent if unable to contact verbally (describe):	Contacted by the following staff member (include name and position):				
Phone #:						
Date and time of contact:						
□ A.M. □ P.M.						

This report has been prepared by:

(Name)

(Position)

(Date)

#### **Physical Restraint Incident Debriefing Notes**

Within twenty-four hours of use of physical restraint, a documented debriefing by appropriate staff, including staff involved in the restraint must occur. The purpose of the debriefing is to review the incident and take any necessary actions to reduce the chances that such an incident will reoccur. Those attending the debriefing meeting shall have the opportunity to review the Physical Restraint Report documenting the incident.

Debriefing Information		
Date of Debriefing:	Time of Debriefing Meeting:	Location:
Debriefing Notes:		
Further Action(s) to be taken:		

Signatures of those attending the debriefing meeting	Position

This report has been prepared by	
----------------------------------	--

(Name)

(Position)

# PRIOR WRITTEN NOTICE

Student:		School:		Meeting Date:
Student ID:	D.O.B		Age:	Meeting Date: Grade:
Describe the action that				
Explanation of why the s	school division is propos	sing or refusing to	take action:	
Description of each evalure refuse the action:	uation procedure, asses	ssment, record or	report the sch	nool division used in deciding to propose or
Description of any other	choices that the team o	considered and th	ne reasons wh	y those choices were rejected:
Description of other reas	sons or other factors rel	levant as to why	the school divi	sion proposed or refused the action:
Resources for the parent related Federal and Virg		understanding the	e Individuals w	vith Disabilities Education Act (IDEA) and the
If this notice is not the ir safeguards:	nitial referral for evaluat	tion, explain how	the parent wa	as provided a copy of the procedural

#### SCOTT COUNTY SCHOOLS PRE-APPROVAL FORM FOR TUITION

NAME:	_SCHOOL:
ADDRESS:	JOB ASSIGNMENT:
	_
REASON COURSE IS BEING TAKEN (Check all that apply):	
To Become Highly Qualified	Superintendent's Request
Request for Additional Certification	Recertification ( <i>No pre-approval</i> required)

\_\_\_\_\_Other, Please Specify \_\_\_\_\_\_

DATE	COURSE(S) TO BE TAKEN	COST OF COURSE
	TOTAL COST	

One class for recertification will be reimbursed every five years to school personnel upon receipt of cancelled check and/or receipt from college. Personnel must have a passing grade to receive reimbursement. Books and other fees are not reimbursable.

If money is available, other classes and fees will be considered for reimbursement. For instance, courses to become highly qualified or situations in which the employee has been asked to get an additional certification. Prior approval must be received for tuition reimbursement.

Maximum reimbursement for a course is \$500.00

Signature of Employee

Date

Signature of Superintendent

Date

# SCOTT COUNTY SCHOOLS PRE-APPROVAL FOR OUT OF TOWN/CONFERENCE TRAVEL

ALL CONFERENCES/OUT OF TOWN TRAVEL MUS REIMBURSEMENT WILL BE GIVEN.			
NAME:	SСНС	00L:	
ADDRESS:	JOB	ASSIGNMENT:	
DESTINATION:	DATE	:S:	
CHECK ALL APPLICABLE BOXES:			
Conference	Workshop	Technical Assist	ance
Presenter	Member	Appointed Tear	n
Other (Explain):			
JUSTIFICATION:			
ESTIMATED COST OF TRIP: Transportation Cost (Air, Train, State Ca			
Lodging - Number of Nights		Rate	
Lodging Tax and Surcharges			
Meals and Incidental Expenses			
Registration Costs			
Other (Itemize)			
TOTAL ESTIMATED COST OF TRIP			
IS AN OUTSIDE ORGANIZATION REIMBURSING	ANY OF YOUR EXPE	ENSES DIRECTLY TO YOU OR	THE SCHOOL SYSTEM?
ORGANIZATION'S NAME:		PAYABLE TO:	
REQUIRED SIGNATURES: YOUR SIGNATURE:		DATE:	
PRINCIPAL/SUPERVISOR	SIGNATURE		DATE
SUPERINTENDENT			DATE
	SIGNATURE		DATE

#### SMALL PURCHASES PROCEDURE - SCOTT COUNTY PUBLIC PROCUREMENT ORDINANCE

GOODS (BOTH NEW AND USED); CONSTRUCTION	NON-PROFESSIONAL SERVICES	PROFESSIONAL SERVICES	PROCEDURE
0-\$999.99	See definition of non-professional services in Ordinance. Less than \$2,500		Single quote. If reason to believe a quotation is not a fair and responsible price, seek additional quotes.
\$1,000 to less than \$2,000	\$2,500 to less than \$5,000	See definition of professional services in Ordinance. Less than \$3,000.00	Solicit two valid sources by phone or by writing. (Written confirmation of quotes obtained to be furnished to the County Purchasing Admin.)
\$2,000 to less than \$15,000	\$5,000 to less than \$15,000	\$3,000 to less than \$15,000	Solicit three valid sources by phone or by writing. (Written confirmation of quotes obtained to be furnished to the County Purchasing Administrator.)
\$15,000 to less than \$30,000	\$15,000 to less than \$30,000	\$15,000 to less than \$20,000	Solicit minimum of four valid sources in writing. (Written confirmation of quotes obtained to be furnished to the County Purchasing Admin.)

PLEASE NOTE: THE MINIMUM TEN (10) DAY PERIOD BETWEEN SOLICITATION AND DUE DATE FOR RECEIPT OF BIDS DOES NOT APPLY TO THE SMALL PURCHASES PROCEDURE.

#### COMPETITIVE SEALED BIDDING OR COMPETITIVE NEGOTIATION - CODE OF VIRGINIA § 2.2-4301 AND § 2.2-4303(A)

GOODS (BOTH NEW AND USED); CONSTRUCTION	NON-PROFESSIONAL SERVICES	PROFESSIONAL SERVICES	PROCEDURE
Required for purchases over \$30,000; can be used for lesser amounts	Required for purchases over \$30,000.00; can be used for lesser amounts	Required for purchases over \$20,000; can be used for lesser amounts	NOTE: See Section 3, Article 1 of County Procurement Ordinance
			Use one of the following methods: 1. Competitive sealed bidding 2. Competitive negotiation. A written justification is required for use of #2 instead of #1.

#### EXCEPTIONS TO COMPETITIVE PROCUREMENT - CODE OF VIRGINIA § 2.2-4303(E) & (F)

GOODS (BOTH NEW AND USED);	NON-PROFESSIONAL SERVICES	PROFESSIONAL SERVICES	PROCEDURE
CONSTRUCTION			
Emergency such as health or safety or equipment in jeopardy	Emergency such as health or safety or equipment in jeopardy	Emergency such as health of safety or equipment in jeopardy	NOTE: See Procedure at Section 1F, Article 2 of County Procurement Ordinance Competition required as practicable.
			Procure directly. Requires written justification. Must be approved in advance by Agency Head or designee. Requires public posting on the county website.
SOLE SOURCE: Only one source practically available.	SOLE SOURCE: Only one source practically available	SOLE SOURCE: Only one source practically available.	NOTE: See Procedure at Section 1E, Article 2 of County Procurement Ordinance. Requires written justification. Must be approved in advance by the Agency head or designee. Requires public posting on the county website.

# Random Alcohol and Drug Testing Regulations for Students Involved with Competitive Extra-curricular Activities

#### Pledge Program

# **Background and Justification**

- Over the last several decades, there have been many initiatives and programs to educate our youth on the dangers of alcohol and unauthorized drugs. Examples of these programs are Drug Awareness and Resistance Education, Drug-Free Schools initiative, Mothers Against Drunk Drivers, Students Against Drunk Drivers, Project Prom, and various health education curricula.
- One particular initiative that many Virginia public school divisions have implemented has been directed at athletics and other extra-curricular activities. This initiative is a randomized drug testing of students involved in extra-curricular activities.
- During the past three years, there have been 53 students disciplined for drug or alcohol related incidents in Scott County Schools. While the number of overall incidents has been consistently the same over the past three years, during the 2013-2014 school year, the number of student athletes involved with drug and alcohol related incidents drastically increased.
- With this background and justification, The Scott County Public School's Pledge Program is based on the following facts:
  - Student participation in extra-curricular activities is voluntary. Students who choose to participate do so
    with the understanding that their participation is a privilege based on their adherence to high moral,
    ethical, and academic standards.
  - Medical studies have established that drug use affects motor skills, learning, memory retention, reasoning ability and coordination.
  - Except in extreme cases, drug use is difficult for laymen, or even physicians, to detect by casual observation.
  - No safe level of drug use has been established. Any measurable amount of a mind-altering drug or alcohol in a person's body can cause some degree of impairment, even if that impairment is not readily apparent to the layman.
  - The use of alcohol is illegal for anyone under the age of 21. All forms of drug use without a prescription are illegal.

# Purpose and Intent

- For Scott County Public Schools to detect and prevent drug use among its students, to provide assistance to students with drug problems, and to give students additional reasons for declining to use drugs.
- Participation in extra-curricular activities is a privilege, not a right, for students in Scott County Public Schools. Consent to drug testing is a mandatory prerequisite for any student to participate in a VHSL sanctioned extracurricular activity.

# **Testing Coordinator**

• The Supervisor of Personnel and Student Services will coordinate and supervise the testing program.

# **Eligibility for Testing**

- Scott County Public Schools students in grades 8-12 who choose to participate in VHSL-sanctioned extra-curricular activities not required by the Board of Education for graduation will be required to participate in the random testing program for alcohol, illegal drugs, or unauthorized drugs in order to participate in their chosen activity.
- Students become eligible upon submission of a consent form. Students must submit a consent form immediately following the Student Pledge Program Parent/Guardian Meeting for their season or before their next practice following the Pledge Program Meeting.
- Students remain eligible for random alcohol and drug testing from the date the consent form is turned in through the end of their sport or extra-curricular activity season. In the event that a student eligible for random alcohol and drug testing ceases to participate or withdraws from an athletic team or extra-curricular activity, he or she will no longer be subject to random drug and alcohol testing associated with this program.

#### For what Substances will Students be Tested?

• In administering the program, the division will test for the presence of certain substances that may include, but are not limited to, the following substances or their metabolites: alcohol, marijuana (THC), synthetic cannabinoids, opiates, cocaine, methamphetamines, anabolic steroids and phencyclidine (aka PCP), MDMA (aka Ecstasy), and/or any other substance defined as a "controlled substance" by either Virginia or Federal law.

# Selection of Students for Random Testing

- A confidential testing schedule will be created by the Program Coordinator to ensure that testing of eligible students is conducted in a manner that is random.
- Testing will only occur on student contact days during each sport or extracurricular activities' designated season.
- Selection of eligible students for testing will be conducted in a purely and entirely random basis by a third party vendor selected by Scott County Public Schools to administer the Random Alcohol and Drug Testing Program.
- A separate group of students will be selected by sport or activity and designated as alternates to be used in the event of student absence.
- The Program Coordinator/designee will notify the individual(s) selected for testing and a designee will escort them to the designated location for testing.
- The testing site will be at the participant's respective school in an area that has a secured bathroom/nurse's office which will maximize privacy of the participant or in the office of an approved collection agency contracted by the school division to collect and test oral fluid and/or urine samples.
- The names and/or any other personally identifiable information of the participants will remain confidential.
- Participants are encouraged to protect their own confidentiality.

# Suspicion Based Testing

- In the event that a coach or sponsor observes that a member of a team or extracurricular activity is demonstrating symptoms that cause reasonable suspicion that the member is under the influence of alcohol or drugs, during school or a school-sponsored activity, the coach or sponsor shall follow School Board Regulation JFCF.
- In the event that a coach or sponsor receives reports that a member of a team or extracurricular activity has been using alcohol or drugs outside of school or school-sponsored activities, then the Pledge Program Committee will meet with the player to further investigate the suspected use. If the committee believes there is reasonable suspicion of the use of alcohol or drugs, the Program Coordinator will contact the student's parent/guardian(s) to inform them that the student will be required to submit to an alcohol and drug screen which will be administered according to the procedures outlined below.

# **Test Administration**

- All aspects of the program, including the taking of specimens, will be conducted so as to safeguard the personal and/or privacy rights of the participant to the maximum extent possible. The program treats a participant's test result as a confidential health record pursuant to both federal and state regulations 42C.F.R. 2.1 and 2.2; VA Code § 32.1-126.1:03. As such, any information obtained by the program which would identify the participant as a drug or alcohol user may be disclosed only for those purposes and under those conditions permitted by federal regulations in accordance with 42C.F.R. Part II. No testing record of any participant will be used to initiate or substantiate any criminal charges against a participant or to conduct any investigation of him or her, and the division will not share participants' individual test results with law enforcement authorities unless legally required by court order or subpoena.
- The Program Coordinator/designee will coordinate the collection of specimens from the selected students in accordance with federal Substance Abuse and Mental Health Services Administration (SAMHSA) standards and forward the specimens to a licensed laboratory for testing. The Supervisor of Personnel and Student Services/designee may conduct an initial on-site test on the specimen before sending the specimen to the laboratory.
- The participant shall complete a specimen control form.
- The participant shall submit an oral fluid or urine specimen according the Scott County Public Schools School Division's Random Testing for Illegal/ Unauthorized Drugs and Alcohol Consent to Test Form.
- All students selected for testing must remain at the testing site under the direct supervision of the Athletic Director/designee until he/she can produce an adequate specimen for testing.

- Any attempt by a participant to tamper with the specimen collection process or refusal by the participant to provide a sample, will be treated as a resignation from all extracurricular activities for a period 365 days except in cases where a positive sample would constitute a 3<sup>rd</sup> violation. In such cases, the student will be banned from any further participation for the remainder of his/her enrollment in the Scott County Public Schools School Division.
- All efforts will be made to minimize the instructional impact of testing and to maintain the confidentiality and privacy rights of participants. All urine testing will be conducted in a closed-door restroom without direct observation by adult monitors.
- Specimens that test positive for the presence of alcohol, illegal drugs, or unauthorized drugs or their metabolites will be kept by the testing facility for at least one hundred eighty (180) days pending an appeal of the test result.

# Notification of Testing & Testing Results

- Students who choose to participate in division athletic programs, VHSL-sponsored activities, and/or competitive extra-curricular activities, not required by the Board for graduation, are required to complete and sign the Scott County Public Schools School Division's Random Testing for Illegal Drugs/Unauthorized Drugs and Alcohol Consent to Test Form.
- When a participant tests positive for an alcohol, illegal drugs, or unauthorized drugs, the participant's parent/guardian(s) will be contacted directly by a Medical Review Officer (MRO) to conduct a consultation. The consultation will address the reasons for the positive test and a decision will be made by the MRO regarding the legitimacy, validity, or accuracy of a positive test. Parent/guardian(s) will have 5 business days to provide documentation of a legal prescription that may have caused the positive test. The MRO will determine if that substance has been taken pursuant to a legal prescription.
- Results of student tests confirmed by the MRO will be provided to the Program Coordinator within twenty-four (24) hours of the MRO's consultation with the participant and his or her parent/guardian(s).
- The division respects the privacy of its students and shall maintain confidentiality regarding any alcohol and drug testing for this program. The results will only be released to designated division personnel. All records and subsequent actions shall be kept by the Program Coordinator in a file separate from the student's school records. The Program Coordinator will not release records of drug and alcohol tests or any resulting action to anyone other than designated school personnel and the student and/or his/her parent/guardian(s) without written authorization from the student and/or his/her parent/guardian(s) in accordance with 42C.F.R. Part II. Student drug testing information will not be turned over to any law enforcement authorities except under circumstances in which the division is legally compelled to surrender or disclose such test results.
- The Program Coordinator will destroy all records for each student when they have no remaining eligibility to participate in VHSL activities due to the fact that they have graduated, they are over the maximum age for participation, or they have completed four years of eligibility.
- The testing company will maintain testing records according to their records retention policies.

# Appeal Procedure:

- A student or his/her parent/guardian(s) may request a retest of his/her specimen at his/her own expense at a laboratory of their choice which follows federal Substance Abuse and Mental Health Services Administration (SAMHSA) standards concerning drug testing protocols and procedures. A written request must be made within twenty-four (24) hours of receiving the results of the drug test from the Program Coordinator. The specimen previously submitted will be forwarded to the approved lab in cooperation with the division approved outside agency responsible for confirmatory testing.
- Results of the re-test will be provided to the Program Coordinator by the approved laboratory. During the appeal period students may not participate in athletics or VHSL-sanctioned, extra-curricular activities.
- The student will be ineligible to participate during the appeal.

# **Consequences**

Consequences will result from the following:

- a confirmed positive test for alcohol, illegal drugs, or unauthorized drugs;
- refusal to participate in testing when selected; and/or
- tampering with, diluting or altering the specimen during the collection process.
- Students will be ineligible for participation in any VHSL-sanctioned, extra-curricular activities unless they complete the Scott County Public Schools' Random Testing for Illegal/Unauthorized Drugs and Alcohol Consent to Test Form.

Any attempt by a participant to tamper with, dilute or otherwise alter the specimen during the collection process or refusal by the participant to provide a sample, will be treated as a resignation from all extracurricular activities for a period of 365 calendar days except in cases where a positive sample would constitute a 3<sup>rd</sup> violation. In such cases, the student will be banned from any further participation for the remainder of his/her enrollment in the Scott County Public School Division.

- Upon confirmation of a positive test or a student's confession of alcohol, illegal drugs, or unauthorized drugs use as a result of an investigation based on suspicion of use, the student will be ineligible to participate in athletics or extracurricular activities until they adhere to the consequences outlined below.
- It should be noted that the consequences outlined below are cumulative across each participant's athletic and/or extracurricular "career" in the Scott County Public School Division. Each student's "career" begins in the 8th grade or upon initial participation in an athletic activity, VHSL-sanctioned, extracurricular activity and ends when they graduate or cease to participate in athletics or VHSL-sanctioned, extracurricular, competitive activities. For example, if a student has a positive test for an alcohol, illegal drugs, or unauthorized drugs in the 8th grade and, a second positive test for alcohol, illegal drugs, or unauthorized drugs in the 11th grade, they will be subject to the consequences outlined for a second offense.

#### Consequences – First Offense

Step 1: Upon confirmation of a positive screen for alcohol, illegal drugs, or unauthorized drugs or a student's confession of alcohol, illegal drugs, or unauthorized drugs use as a result of an investigation based on suspicion of use, the Supervisor of Personnel and Student Services will schedule a meeting with the student, his/her parent/guardian(s), and the principal on the first school day following the confirmation of alcohol, illegal drugs, or unauthorized drugs use to impose a suspension from athletic/extracurricular participation. The student shall be suspended from participating in contests for a period of time equivalent to 50 percent of the total number of VHSL contest limitations or activity contest for each sport or activity to be played during the regular season (any fraction of the calculation will be dropped). The penalty will be applied immediately and include the next contest(s) including playoffs, and/or to the next season in which the student athlete participates within 365 calendar days. During this time, the student shall continue to attend scheduled meetings, practices, and contests associated with his/her activity. The student shall participate in practices and may not dress out for contests. Written notification will be provided to parent/guardian(s) that will detail the conditions and the endpoint of the suspension. Additionally, in the event the season concludes while the student is suspended, the student will be allowed to participate in try-outs for the next activity season if the student has been retested by the current company who provides Scott County Public Schools with our student drug-testing or another drug-testing company approved by Scott County Public Schools administration that operates under SAMHSA (Substance Abuse and Mental Health Services Administration) certified laboratory guidelines, at the parent/guardian(s) expense, less extenuating circumstances; and the test results must be negative. After which time, the student will be ineligible until all conditions of reinstatement have been completed.

**Step 2:** The Program Coordinator will conduct a screening interview with the student and parent/guardian(s) as soon as possible. Based on the interview, the coordinator will design an intervention program suitable for the student.

**Step 3:** After suspension and prior to resuming full participation with his/her team/activity, the student will be required to take an additional oral fluid test/urinalysis screen to prove that he/she no longer has any trace of illegal substances in his/her system. The parent/guardian(s) shall be responsible for the cost of the screening, less extenuating circumstances.

**Step 4**: The student and parent/guardian(s) must participate in the recommended intervention program at their expense, less extenuating circumstances. Progress reports will be provided to the Program Coordinator to document the student's successful participation.

**Step 5:** The student and his/her parent/guardian(s) must agree to regular testing for alcohol, illegal drugs, or unauthorized drugs for the student for the remainder of the school year. The parent/guardian(s) shall be responsible for the cost of the screening(s), less extenuating circumstances.

**Step 6:** Upon satisfactorily attending all the prescribed intervention sessions, the student will be provided with a letter of reinstatement from the Program Coordinator indicating that he/she is a "student in good standing" and eligible to resume regular participation with his/her team.

#### Second Offense

**Step 1**: Upon confirmation of a second positive test for alcohol, illegal drugs, or unauthorized drugs or the student's admission of continued use of alcohol, illegal drugs, or unauthorized drugs, the Program Coordinator will schedule a meeting with the student, his/her parent/guardian(s), and the Principal on the first school day following the confirmation of alcohol, illegal drugs, or unauthorized drugs. The student shall be suspended from play for a period of time equivalent to 75 percent of the total number of VHSL contest limitations or activity contest for each

sport or activity to be played during the regular season (any fraction of the calculation will be dropped). The penalty will be applied immediately and include the next contest(s) including playoffs, and/or to the next sport season in which the student participates within 365 calendar days. During this time, the student shall continue to attend scheduled meetings, practices, and contests associated with his/her activity. The student shall not participate in practices and may not dress out for contests. Written notification will be provided to the parent/guardian(s) that will detail the conditions and the endpoint of the suspension. Additionally, in the event the season concludes while the student is suspended, the student will be allowed to participate in try-outs for the next activity season if the student athlete has been retested by the current company who provides Scott County Public Schools with our student drug-testing or another drug-testing company approved by Scott County Public Schools administration that operates under SAMHSA (Substance Abuse and Mental Health Services Administration) certified laboratory guidelines, at the parent/guardian(s) expense, less extenuating circumstances; and the test results must be negative. After which time, the student will be ineligible until all conditions of reinstatement have been completed.

**Step 2:** The Program Coordinator will conduct a screening interview with the student and parent/guardian(s) as soon as possible. Based on the interview, the coordinator will design an intervention program suitable for the student.

**Step 3:** After suspension and prior to resuming full participation with his/her team/activity, the student will be required to take an additional oral fluid test/urinalysis screen to prove that he/she no longer has any trace of illegal substances in his/her system. The parent/guardian(s) shall be responsible for the cost of the screening, less extenuating circumstances.

**Step 4:** The student and parent/guardian(s) must participate in the recommended intervention program at their expense, less extenuating circumstances. Progress reports will be provided to the Program Coordinator to document the student's successful participation.

**Step 5:** The student and his/her parent/guardian(s) must agree to regular testing for alcohol, illegal drugs, or unauthorized drugs for the student for the remainder of the activity season. The parent/guardian(s) shall be responsible for the cost of the screening(s), less extenuating circumstances.

**Step 6:** Upon satisfactorily attending all the prescribed intervention sessions, the student will be provided with a letter of reinstatement from the Supervisor of Personnel and Student Services indicating that he/she is a "student in good standing" and eligible to resume regular participation with his/her team.

# Third Offense

Upon confirmation of a third positive test for alcohol, illegal drugs, or unauthorized drugs or the student's admission of continued alcohol, illegal drugs, or unauthorized drugs use, the Program Coordinator will schedule a meeting with the student, his/her parent/guardian(s), and the Principal on the first school day following the confirmation of alcohol, illegal drugs, or unauthorized drugs use to suspend the student from any further athletic and/or extracurricular participation while enrolled in the Scott County Public School Division.

# **COLLECTION PROCESS**

Selected students are escorted from class or practice to the collection site. A specimen of oral fluid/urine is collected following this process:

# Oral Fluid Testing Procedures

- No purses, bags or containers may be taken into the collection area with the student. All extra coats, vests, jackets, sweaters, etc., are to be removed before entering the collection area.
- Student is asked to rinse his/her hands and dry them. If no water is easily accessible, an alcohol free wipe may be used instead.
- The Testing Custody and Control Form is completed by the student and collector.
- The student is told to check expiration date on back of kits for validity.
- The student opens the kits.
- The collector instructs the student to position the swab in their mouth and rub back and forth several times on inside of cheek one at a time.
- The student places the swabs in his own mouth.
- The collector and the student fill in designated sections of the laboratory chain of custody form.
- The samples and chain of custody form are labeled by the student and packaged for overnight delivery to the SAMHSA certified lab.

- The top lab copies of the Testing Custody and Control Form are folded with the top portion visible to the outside and placed in the Requisition Pouch. The transport bag and pouch are sealed as indicated. The student is given the donor copy of the form.
- The student may wash his/her hands and be released from the testing site.
- The collector distributes the remaining copies of the form as required, being responsible for getting the appropriate copy of the form to the MRO in a timely manner.
- The Program Coordinator will be notified immediately of any student who refuses to give a sample or is suspected of tampering with the sample.

# Urine Testing Procedures

- No purses, bags or containers may be taken into the collection area with the student. All extra coats, vests, jackets, sweaters, etc., are to be removed before entering the collection area.
- The collector adds a bluing agent (food coloring) to the water in the urinal or toilet.
- Student is asked to rinse his/her hands and dry them. If no water is easily accessible, an alcohol free wipe may be used instead.
- The Testing Custody and Control Form is completed by the Student and collector.
- The student is told to urinate directly into the provided container and should provide a sufficient amount of urine (at least 45ml) in one attempt. The student is also told they are to hand the container of urine to the collector.
- The student enters a closed stall or single use bathroom to collect the specimen, and then hands the container to the collector when they exit the stall or bathroom.
- The collector checks the volume, reads and records the temperature within four minutes of collection, and looks for evidence of tampering. If tampering is suspected, a second specimen will be requested. A second suspected tampered specimen will be considered refusal to test and the Program Coordinator will be notified.
- With the student watching, the collector will pour the specimen into the two bottles and recap the specimen bottles tightly.
- The collector takes the properly signed and student initialed bottle seals and places them over the caps and sides of the bottles. The sealed bottles are placed inside the transport bag.
- The top lab copies of the Testing Custody and Control Form are folded with the top portion visible to the outside and placed in the Requisition Pouch. The transport bag and pouch are sealed as indicated. The student is given the donor copy of the form.
- The student may wash his/her hands and be released from the testing site.
- The collector distributes the remaining copies of the form as required, being responsible for getting the appropriate copy of the form to the MRO in a timely manner.
- The Program Coordinator will be notified immediately of any student who refuses to give a urine sample or is suspected of tampering with the sample.

# MEDICAL REVIEW OFFICER (MRO) RESPONSIBILITIES

- The MRO will review all results of oral fluid/urine testing. Any urine specimen testing positive for alcohol, illegal drugs, unauthorized drugs, banned substances, or adulteration will be handled in the following manner:
- The MRO determines if any discrepancies have occurred in the Chain of Custody.
- Depending on the substances found in the urine, if necessary, the MRO will contact the parent/guardian to determine if the student is on any prescribed medication from a physician.
- If the student is on medication, the parent/guardian(s) will be asked to provide documentation from the prescribing physician, within five working days, to document what medication(s) the student is currently taking. Failure to provide such requested information will be considered a positive result.
- The MRO will determine if the prescribed medications resulted in the positive test result. For example, a positive test result for codeine may be ruled negative by the MRO when he receives a letter from the treating physician that the student has been prescribed Tylenol<sup>©</sup> with codeine as a pain medication following tooth extraction. Or, if the student has a positive screen for codeine and has no documented physician order for the medication (maybe a parent/guardian gave the student one of his/her pills), this would likely be ruled a positive test by the MRO.
- Finally, the MRO, based on the information given, will certify the test results as positive or negative and report this to the Program Coordinator, initially reporting positive results by phone.
- Screens positive for alcohol or illicit drugs (marijuana, heroin, cocaine) would automatically be considered positive by the MRO.
- The MRO may use quantitative results to determine if positive results on repeat tests indicate recent use of illicit or banned substances or the natural decline of levels of the illicit or banned substance from the body. If the MRO feels the quantitative levels determined to be above the established cutoffs do not reflect current use but natural decay, then a negative result may be reported.



# Scott County Public Schools Testing for Illegal/Unauthorized Drugs and Alcohol Consent Form

Student Pledge/Consent:

I understand fully that my participation in athletics and VHSL-sanctioned, extracurricular activities is a privilege; in order to participate, I must be a "student in good standing". Therefore, I hereby agree to accept and abide by the standards, rules, and regulations set forth by the Scott County School Board and the coaches/sponsors for these activities in order to participate. I acknowledge receipt of a copy of the Student Pledge Program Regulations.

Furthermore, I understand that any use, possession, or distribution of alcohol or illegal or unauthorized drugs is strictly prohibited. I pledge not to use, possess, or distribute these substances under any circumstances; and, I authorize Scott County Public Schools to test my urine or saliva for the presence of these substances in my body. I also authorize the release of information concerning the results of such tests to the Medical Review Officer, the Program Coordinator, and my parent(s)/guardian(s).

I understand that I will be subject to random and/or reasonable suspicion testing for illegal/unauthorized drugs and alcohol from the first day of my sport or activity through the last day of competition and I understand that, if necessary, consequences will be administered as specified in the Student Pledge Program Regulations.

By my signature below, I understand and agree to the above and agree to abide by and be subject to the terms, conditions, and consequences of the Student Pledge Program Regulations.

(Student's Name- Please Print)

(Student's Signature)

(Date)

Parent/Guardian Consent:

I have read and understand the above and by my signature below, I hereby agree and give my consent for the abovespecified student to be required to abide by and be subject to the terms, conditions, and consequences of the Student Pledge Program Regulations.

(Parent/Guardian's) Name- Please Print)

(Parent/Guardian's Signature)

(Date)

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, laws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-336-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminarión de Información Genética (GINA) de 2008 y todas las demás reglas federales, escatales, escatales, escularos, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminarión por motivos de traza, color, religión, origen nacional, afiliación de no polítea, idención genero / sexo (incluídos los esculares), leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminarión genética en cualquier programa educativo, incluída la educación vocacional para estudiantes embacións exual, género / sexo (incluídos los esculares), etade, statado civil, discagandia de acceso a los Boy Scouts y otros grupos de Jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionado con la no discriminación pare estatu queja.

This policy provides guidelines to be followed when receiving goods at the school.

All goods received must be inspected and verified immediately against the purchase order, packing slip, or receiving document. This inspection and verification must be done by someone other than the requisitioner or buyer of the goods. The goods ordered and received on behalf of the school must have two signatures.

The employee providing signature for goods on behalf of the school is responsible for assuring that such goods are received in the manner, quality and quantity ordered. This is to assure that the quality, amount, and price of the goods are correct, and that payment is made only for goods actually received. Any defective goods must be promptly returned to the vendor.

#### **RECORD OF INSPECTION**

Date	Time In	Time Out
Person Reviewing/ Requesting Records:	Name	Signature
Staff Person in Attendance		
or Providing Copies:	Name	Signature
<u>Records Reviewed</u> (describe)		

**Photocopies** 

Item

No. Pages

Date Copies Made

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title VI and the Civil Rights Act of 1972; Civil Rights

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# **Referral to Alternative Education**

First Name:	MI	_ Last Name:		
Address:	_ City:		_State:	Zip:
Birthdate: / / Sex: I	MF			
Parent/Guardian:	R	elationship to stu	dent:	
Home phone:	E	Emergency phone	:	
Does the parent/guardian support the stu	udent's enrollmen	t into the progran	n? YES N	0
Student is being considered for the altern	native education p	rogram because c	of: (please mar	k all that apply)
<ul> <li>Alcohol Related Violations</li> <li>Property Damage/Vandalism</li> <li>Disorderly Conduct</li> <li>Drug Related Violations</li> <li>Fighting</li> <li>Credit Recovery</li> </ul>	<ul> <li>Weapons Pos</li> <li>Violation of S</li> <li>Insubordinati</li> <li>Theft</li> <li>Threats</li> <li>Attendance</li> </ul>	chool Rules	Other act the well- teachers	ent, nonsexual ts that endanger -being of students, s, or any school ee. Please specify:
Other Student Information:				
2. What other options have been unsucc	essfully tried prior	to making referra	al?	
3. Has this student ever been referred to If yes, when and results:				
4. Is this student currently on probation of If yes, name of probation officer			No	
5. Is this student involved with any social If yes, list and explain:	service agency at		No	
6. Has this student ever been retained? If yes, list and explain:	Yes No			
Present grade level: (circle one) 6 7 8 9 10				
Counselor's Signature:				

\*Please include the following with the referral form: student information, grades, schedule, SOL/EOC information, IEP/504 Plan, discipline information, attendance information, BIP, court documents, and any additional information.

Principal's Signature

Date

#### **Student Schedule**

Student:	School:	
Teacher:	Grade:	Year:

# > When would be the best time to observe this student?

Time	Subject/Activity	Teacher	Please check one to indicate which activities the student enjoys and which activities are most associated with problems:
			Enjoys      Problems
			□ Enjoys □ Problems
			Enjoys      Problems
			□ Enjoys □ Problems
			Enjoys Problems

> When would be the best time to discuss the student's behavior with you?

Comments:\_\_\_\_\_

\_

# SCOTT COUNTY SCHOOLS LOCAL TRAVEL REIMBURSEMENT REQUEST

EMPLOYEE NAME\_\_\_\_\_

JOB ASSIGNMENT\_\_\_\_\_

ADDRESS\_\_\_\_\_

MONTH/YEAR\_\_\_\_\_

DATE	STARTING POINT	ENDING POINT	DESTINATION	TRIP PURPOSE	MILEAGE
					_
				TOTAL MILAGE:	40.00-
				RATE PER MILE:	\$0.625
				TOTAL COST:	

APPROVED:

Signature of Employee

Signature of Principal/Supervisor

# SCOTT COUNTY SCHOOLS LOCAL TRAVEL REIMBURSEMENT REQUEST FOR PARENTS/GUARDIANS

PARENT'S NAME: \_\_\_\_\_\_CHILD'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_\_ SCHOOL: \_\_\_\_\_

MILES TRAVELED		O SCHOOL TRAVEL E ONE BELOW)
		ROUND TRIP
	SINGLE TRIP	ROUND TRIP
	NOTE:	
		be signed by person
40.000	requesting reimbu	irsement.
\$0.625		
\$		
	\$0.625	Image: Constraint of the second structure       Image: Constraint of the second structure         Image: Constraint of the second structure       SINGLE TRIP         Image: Constraint of the sec

APPROVED:

Signature of Parent/Guardian

Signature of Principal/Supervisor

Signature of Superintendent

# SCOTT COUNTY SCHOOLS REIMBURSEMENT REQUEST FOR OUT OF TOWN/CONFERENCE TRAVEL (PRE-APPROVAL FORM MUST BE ATTACHED IN ORDER TO REQUEST REIMBURSEMENT)

NAME:	SCHOOL:				
ADDRESS:	JOB ASSIGNMENT:				
DESTINATION:	ESTINATION:DATES:				
DATE	(CONFERENCE NAME & LO	DCATION	)	MILES TRAVELED	
	Meals & Tips (Place)				
	Lodging (Place)				
	Other Miscellaneous Expenses				
*Travel form must be si *Original signatures of a	approval only (no signature stamps). gned by employee requesting reimbursement. approval only (no signature stamps)		TOTAL MILES: RATE PER MILE:	\$0.625	
*Travel form must be si APPROVED BY:	gned by employee requesting reimbursement.	TC	TOTAL COST: DTAL MEALS & TIPS: TOTAL LODGING:		
Signature of Employee			TOTAL OTHER: GRAND TOTAL:		

Signature of Principal/Supervisor

Signature of Superintendent

(MILEAGE, MEALS,

LODGING & OTHER)

**REF-10** 

#### SCOTT COUNTY PUBLIC SCHOOLS

#### AUTHORIZATION FOR DISCLOSURE OF PROFESSIONAL INFORMATION 340 EAST JACKSON STREET

GATE CITY VA 24251

PHONE: 276.386.6118 FAX: 276.386.2684

Student Nam	e:	Date of Birth:	Date:_	
🗌 I hereby giv	e my consent and authorize Scott Cou	unty Public Schools to disclose th	e following information	:
YES NO	Evaluations (specify): Progress Reports Psychiatric History (specify): School Records/Reports (specify): Diagnosis or Principal Complaint Admission, Discharge & Tx Summary Alcohol & Drug Abuse Treatment Inf		YES NO   Referral  Psychologic  Behavioral  Curve Constraints  Helicitie  Nedical/Vis  Psychosocia	Health I on ty
FOR THE PURPO	SES OF: (The minimum of protected health Coordination of services Evaluation/Assessment Eligibility IEP Development Other	h information will be disclosed to ac	complish the purpose spec	ified)
date specified be that I am giving i understand that reliance thereon shall be included records to which	t this consent is subject to revocation by n elow. If less than 12 months, the alternate my permission to the above named provid I have the right to revoke in writing to the . A copy of this consent will accompany an with my original records. I may also require this consent pertains may not redisclose to closure permitted by law.	expiration date is(either N/ er or other named third party for dis person who is in possession of my r ny disclosure, and a notation concer est to inspect or copy the information	A or date). As the person s icclosure of confidential hea ecords except to the exten ning the persons or agencie on to be used or disclosed.	igning this consent, I understand Ith care records. I also t that action has been taken in es to whom disclosure was made The person who receives the
	t I have the right to refuse to sign this Aut ation between treating physicians/clinician			been informed that by refusing to
Patien	t/Client Signature (16 years & older)		Dat	e Signed
Guardian o	r Legally Authorized Representative		ip to Patient/Client	Date Signed

Prohibition on Redisclosure: This information has been disclosed to you from records protected by Federal confidentially rules and meets both the FERPA (Educational Records) and HIPPA (Medical Records) guidelines.

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# Report of Anaphylactic Reaction

Name:School: DOB:Status of Person: StudentStaffVisitor Gender: MF distory of allergy: YesNoUnknownIf known, specify type of allergy: f yes, was allergy action plan available? YesNoUnknown distory of prior anaphylaxis? YesNoUnknown distory/Diagnosis of asthma? YesNoUnknown dichool Plans and Medical Orders ndividual Health Care Plan (IHCP) or 504 Plan in place: YesNoUnknown Does the student have a student specific order for epinephrine? YesNo Unknown
History of allergy: YesNoUnknown If known, specify type of allergy: f yes, was allergy action plan available? Yes No Unknown History of prior anaphylaxis? Yes No Unknown History/Diagnosis of asthma? Yes No Unknown History/Diagnosis of asthma? Yes No Unknown History Plans and Medical Orders Individual Health Care Plan (IHCP) or 504 Plan in place: Yes No Unknown
f yes, was allergy action plan available? Yes No Unknown History of prior anaphylaxis? Yes No Unknown History/Diagnosis of asthma? Yes No Unknown Echool Plans and Medical Orders Individual Health Care Plan (IHCP) or 504 Plan in place: Yes No Unknown
History of prior anaphylaxis? Yes No Unknown History/Diagnosis of asthma? Yes No Unknown Echool Plans and Medical Orders Individual Health Care Plan (IHCP) or 504 Plan in place: Yes No Unknown
listory/Diagnosis of asthma? Yes No Unknown ichool Plans and Medical Orders ndividual Health Care Plan (IHCP) or 504 Plan in place: Yes No Unknown
ichool Plans and Medical Orders ndividual Health Care Plan (IHCP) or 504 Plan in place: Yes No Unknown
ndividual Health Care Plan (IHCP) or 504 Plan in place: Yes No Unknown
oes the student have a student specific order for epinephrine? Yes No Unknown
Source of Epinephrine: Student Provided Stock Epinephrine Expiration date of Epi
ncident Reporting
Date/Time of occurrence:Vital Signs: BP/ Temp Pulse Respirations
pecify suspected trigger that precipitated this allergic episode: Food Insect Bite Exercise Aedication Latex Other
f food was a trigger, please specify food and when ingested:
f medication was a trigger, please specify medication given:
ocation where symptoms started: ClassroomCafeteriaClinicPlaygroundBusHallway GymOfficeOther
low did exposure occur?
symptoms: (circle all that apply)
Respiratory <u>GI Skin Cardiac/Vascular</u> <u>Other</u>
Cough Abdominal Discomfort Angioedema Chest discomfort Sweating Difficulty
Breathing Diarrhea Flushing Cyanosis Irritability Hoarse Voice Difficulty Swallowing General Itching Dizziness Loss of Consciousness
Stuffy or runny nose Oral Itching General Rash Faint/Weak pulse Metallic Taste Swollen
hroat/tongue Nausea Hives Headache Red Eyes Shortness of
Breath Vomiting Lip swelling Low Blood Pressure Sneezing Stridor/Wheezing Localized rash Rapid Heart Beat Uterine Cramping
ightness (chest, throat) Paleness

Epinephrine Administration
First Epinephrine Dose Given (.15mg or .3mg) Site (ex: upper left thigh) Time given: Initials of Person giving medication:
Second Epinephrine Dose Given (.15mg or .3mg) Site: Time given: Initials of Person giving medication:
Location where epinephrine administered to patient: Clinic Classroom Gym Playground Bus Office Cafeteria Hallway Other
Location of Epinephrine Storage: ClinicOfficeSelf-CarryOtherOther
Epinephrine Administered By: RNSelfUnlicensed trained personnelOther
Parent/Guardian notified of epinephrine administration: Yes No Time: Time: By whom:
Biphasic Reaction: Yes No Don't know
Disposition
EMS notified at what time: by whom:
Transported to hospital ER: Yes No If "NO", reason:
If "YES", transferred via: Ambulance Parent/Guardian School Staff (name :)
Student/Staff/Visitor outcome:
School Follow-up
Were parents/guardians advised to follow up with student's medical provider? Yes No Unknown
Were arrangements made to restock epinephrine? Yes No
Notes:
Signatures
Form completed by: (Please print) (Date/Time)
(Signature)
(Signature) (Title)
School Administrator:(Signature) (Date)

#### REPORT OF DISCRIMINATION/HARASSMENT COMPLAINT FORM

The Title IX Coordinator and/or desite themselves to be harmed by sexual			lty, staff, and/or	students who believe
Name of Person Filing the Complain	t (check one):F	acultyStaff	Student	Parent of Minor Student
For Students, School Attending:				
For Employees, Position and Depart	ment or School:			
Address and E-Mail Address:				
Home Phone:		Cell Phone:		
Have you brought his matter to the all other persons with whom you ha	•		school system?	If so, please list the name(s) of
Scott County Public Schools' Policies sex, disability, age or retaliation. Pl Bullying (specify) Cyber Bullying (specify) Gender Gender Inequity Sexual Misconduct Sexual Harassment Sexual Assault Stalking Rape Retaliation Relationship Violence Please include the date of the allege  Description of Complaint. Please su	ease indicate the ba	asis of your comp ct. (date[s])	olaint. (check all t	hat apply)

Name of person(s) you believe committed the offense against you and how you have contact with them (e.g. supervisor, administrator, co-worker, teacher, staff, student).

Describe the corrective action you are seeking. Attach additional pages if necessary.

necessary.	
Witnesses	
1	Telephone
2	Telephone
3	Telephone
I certify the aforementioned is true and correct.	
Signature:	Date:
Title IX Coordinator and/or designee	
Complaint taken by:	
Signature:	Date:

For retaliation complaints, please explain why you believe someone retaliated against you. Attach additional pages if

#### NONDISCRIMINATION POLICY

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#### POLÍTICA DE NO DISCRIMINACIÓN

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## REPORT TO LAW ENFORCEMENT SHERIFF'S OFFICE FAX: 276-386-2668

School:
Student's Name:
Incident:
Date of Incident:
Incident Reported By:

The following incidents occurring on school property, on a school bus, or at a school sponsored activity are to be reported to the sheriff's office: assault, assault and battery, sexual assault, death, shooting, stabbing, cutting or wounding, alcohol, marijuana, controlled substance, imitation controlled substance, anabolic steroid, threats against school personnel, illegal carrying of a firearm, firebombs, explosive materials or devices, hoax explosive devices, incendiary devices, chemical bombs, or any threats or false threats of bomb.

School Telephone: \_\_\_\_\_\_

School Fax: \_\_\_\_\_\_

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#### POLÍTICA DE NO DISCRIMINACIÓN

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#### **REQUEST FOR PUBLIC RECORDS**

		STAFF USE ONLY	_
Name		Date Request Received:	
Address		Request was made (check one)	
		by requester on this form	
		by telephone	
Phone		in writing other than on form	
		(Attach original request)	
I am a (check one):		Date Response Sent:	
$\theta$ Citizen of the Commonwea	lth of Virginia	(attach copy)	
$\theta$ Member of the Press Refer	enced in § 2.1-342	Identification Verified	
News Organization		Type: Number:	
		Date Inspection Made:	
OFFICIAL PHOTO IDENTIFICAT	<b>FION</b>	(attach record)	
MUST BE PRESENTED PRIOR		Itemized Cost Statement Attached	
TO INSPECTION OF RECORDS			
OR RECEIPT OF ANY COPIES			
(PHOTOCOPY ACCEPTABLE W	ITH MAILED/FAXED REQU	IEST)	
Reasonable costs for copying, schedule of costs appears in R		ne may be assessed in connection with this request. A curr	ent
Specify format desired (if avai	lable):		
Photocopies	🗆 E-mail (give addr	ess):	
-	□ Other (please specify):		
Check this box to request a	n advance determination	of cost.	
Signature		Date	
	RETURN	COMPLETED FORM TO:	
	Scott C	County Public Schools	
	340	East Jackson Street	
	Gat	te City, VA 24251	
	N	NONDISCRIMINATION POLICY	
1973; the Genetic Information Nondiscrimination Act (GINA political affiliation, gender identity, sexual orientation, gender students, daily activities or extra-curricular activities, or the	<ul> <li>A) of 2008 and all other Federal, State, School rules, der/sex (including pregnant and parenting students e admission to such programs or activities, and prov</li> </ul>	ivil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the i , laws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, s), age, marital status, disability, or genetic information in any educational program including vocational education for or vides equal access to the 80% scouts and other designated youth groups. Contact Rrenda Robinette Nondiscrimination Office for further information pertaining to nondiscrimination or to file a complaint.	national origin, career and technical
	PO	LÍTICA DE NO DISCRIMINACIÓN	
		Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; s demás reglas federales, estatales, escolares, leyes, regulaciones y <b>políticas</b> , las Escuelas Públicas del Condado de Soc	

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de chabilitación de 1973; Título IX Reglamento de 1974; Vatica de 1972; Título IX Reglamento de 1975; Título IX Reglamento de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Social no discriminarán por motivos de raza, color, regligión, origen nacional, afiliación política, idención política, idención genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extraurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngse en contacto con Brenda Robierte Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

File: KLB-E

## SCOTT COUNTY SCHOOL DIVISION REQUEST FOR RECONSIDERATION OF LEARNING RESOURCES

Request By:
Representing:    Myself      Organization or Group (please identify)       Address:
Telephone: Title or Description of Item: Author or Editor:
Type of Material (book / film / record / speaker / software / other (specify))
<ol> <li>Did you examine, review, or listen to this learning resource or presentation in its entirety?</li> <li>YES</li> <li>NO</li> </ol>
<ul> <li>Have you been able to discuss this material with school staff who ordered it or who use it?</li> <li>YES INO</li> </ul>
<ul> <li>Are you aware of the judgment of this material by professional critics?</li> <li>YES INO</li> </ul>
If no, would you be interested in receiving this information?
4. Describe what prompted your concern about the material. Please cite page numbers and/or specific information from the material to support your concerns (attach additional material, if necessary).
<ul> <li>Does the general purpose for the use of the material, as described by the school staff or in the Scott County School Division's program objectives, seem a suitable one for you?</li> <li>YES</li> <li>NO</li> </ul>
If not, please explain (attach additional material, if necessary)
6. What action[s] would you like to see the school take regarding this material?
Do not assign it to my child The school should reevaluate the material
□ OtherExplain
<ul> <li>Are there other materials of the same subject and format that you would suggest for consideration in place of th material?</li> <li>YES ONO</li> </ul>
If yes, please identify your suggestions.
Signature Date
NONDISCRIMINATION POLICY
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POLÍTICA DE NO DISCRIMINACIÓN En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de

En cumplimiento de la Orden Ejecutiva 11246; Titulo II de las Enmiendas de Educación de 1976; Titulo VI de la Ley de Derechos Civiles de 1972; Titulo IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1976; Titulo VI de la Ley de Derechos Civiles de 1972; Titulo IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1976; Titulo VI de la Ley de Derechos Civiles de 1972; Titulo IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1976; Titulo VI de la Ley de Derechos Civiles de 1972; Titulo IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1972; Juey de No Discriminación Genética (GINA) de 2008 y todas las demás reglas federales, escatares, ley eey, regulaciones y **politicas**, las Escuelas Públicas del Condado de Scott no discriminación programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extraurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jówenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

#### Scott County Public Schools Parent Notification Letter

## Right to Request Information on Teacher Qualifications As Required Under the No Child Left Behind Act of 2001

Date:

## Dear Parent,

On January 8, 2002, the *No Child Left Behind Act of 2001* (NCLB) was signed into law. Section 1111(h) (6) (A) states that as a parent of a student in [school name], receiving Title I funds, you have the right to know the professional qualifications of the classroom teachers instructing your child. Federal law requires the school division to provide you this information in a timely manner if you request it. Specifically, you have the right to request the following information about each of your child's classroom teachers:

- Whether the teacher meets the state qualification and licensing criteria for the grades and subjects he or she teachers.
- Whether the teacher is teaching under emergency or provisional status because of special circumstances.
- The teacher's college major, whether the teacher has any advanced degrees, and the field of discipline of the certification or degree.
- Whether paraprofessionals provide services to your child and, if so, their qualifications.

If you would like to receive any of this information, please contact your child's school either by phone or in writing.

Sincerely,

[Name]

[Title]

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## SCOTT COUNTY SCHOOL STUDENT CONCERNS – REFERRAL TO SCHOOL BASED TEAM

(To be completed by parent or any person noting concern)

Student Name:		Date:
School:	Grade:	_ 🗆 Male 🛛 Female
Person Noting Concern:		
Describe Concern (academic, behaviora	al, emotional, social, bulling, etc	c.)
Outside Report Presented: (if any)		
Date of Report:	By Whom:	Type of Report:
Concerns Noted by:  Phone Other	In Person 🛛 E-Mail 🗌	-
Signature		Date
Student Concerns Rece	ived by	Date

NOTE: If academic concerns are noted, classroom teacher is to complete Intervention Strategies and bring to School Based Team meeting.

School Based Team meeting date: \_\_\_\_\_

## SCOTT COUNTY SCHOOLS SCHOOL BASED TEAM LETTER OF CONCERN

	School
	Date
Dear:	
I have educational concerns pertaining to concerns with you and the School Based Committee.	and would like to discuss these
education teacher, a special education teacher, other speci The chairman will be the principal or the principal's designed difficulties in school and also attempts to identify specific s school to help your child perform more effectively. By wor with some changes at school the situation improves.	trategies or activities that can be tried in the classroom and king together the cause of concern may be identified, and often
The School Based Committee is scheduled to meet on	atatatatat
You are encouraged to attend.	
(Time)	Sincerely,
	Teacher
	Principal/Designee

NOTE: Please make two copies and send original to parent(s) and place one copy in confidential folder.

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# SCOTT COUNTY SCHOOLS INTERVENTION STRATEGIES/REFERRAL TO SCHOOL BASED TEAM

(To be completed by general education teacher prior to child study)

Student			DOB	Schoo	ol		
Grade	Date		Teacher				
Parents Nar	ne						
Referring Sc	ource: 🗆 Parent	t 🗆 School S	Staff:		Other		
Specific Rea	son(s) for Refer	ral:					
Check all al	ternatives used	to remediate	this problem:				
Parent	Conference		T	itle 1			
Readir	ng Recovery		R	eading Specialist			
Behav	ioral Contracts		N	1odified Assignme	ents (If yes, how	?)	
Team/ (If yes, what	Grade Level Cont t program?)	nference(s)		Modified Testing			Special Education
Schoo	dual/Small Grou I Counselor			Provided Student Assistance, Stu Jary Lists (If yes,	udy Guides, Copy		
			Standar	dized Test Result	s		
Name of Test	<u>Grade</u>	Date	<u>Reading</u> Comp. %tile	Lang. Arts Comp. %tile	<u>Arithmetic</u> Comp. %tile	Social Studies Comp. %tile	
		Readi	ing	Current Grades	Previous Y Grades	ears	
		Englis	sh				
		Spelli	ng				
		Math					
		Socia	l Studies				
		Scien	ce				

Grade(s) Re Other Info	etained:	Attendance: Days Present Days Absent Days Tardy
Yes	No	Previous referral to Child Based Team: If yes, give date and recommendations:
Yes	No	Does child have any medical problems: If yes, explain:
Yes	No	Is child taking medication? If yes, what type?
Yes	No	Has this child had testing, counseling and/or psychiatric services? If yes, explain:
Yes	No	(Attach reports. If not available, have they been requested?)
Yes	No	Has the parent or guardian of this student been contacted and informed of the reason for this referral? If no, please explain:

## SCOTT COUNTY SCHOOLS SCHOOL BASED TEAM DOCUMENTATION OF DATA

(May be a rev	iew without a meeting but must be	e completed within 10	D days of sending letter of concern)
Name	Testing ID	Date of School I	Based Meeting
Date of Birth	School	Grade	🗆 Male 🗆 Female
Parent's Name		Phone	
Address			
Reason for Concern:			
Name of Person Noting	Concern:		
-	, including evaluations and informa ments. <u>Check all that apply:</u>	ation provided by par	ent, observations by teachers and curren
□Title I Assessment □ Reading Specialist As □Grades	sessment	<ul> <li>Behavioral In</li> <li>Student Conc</li> <li>Intervention</li> </ul>	
□ Attendance		□Prescreening	Form (preschool/head start)
Proposed action by the	Committee. <u>Check all that apply:</u>		
	specialist acher e to intervention (RTI) r interventions/modifications (Attac	Other	ician/social worker/therapist
<ul> <li>Date for follow-up So</li> <li>Referred for Health (</li> <li>Referred for 504</li> </ul>	chool Based Committee Meeting if Care Plan special education assessment. Go t	needed	
Verification of Prior Wri I received prior notice o			
Signature of	Parent/Guardian		Date
Person responsible for f	ollow-through:		
Signature of person not	ing concern:		
Signature of person con	npleting form:		

## SCOTT COUNTY SCHOOLS SCHOOL BASE TEAM MEETING MINUTES

Student	DOB	
Address	Phone	
Parent/Guardian	Grade	
Teacher	Date	

Purpose of Meeting:

- O To share the results of evaluation/re-evaluation
- O To complete a re-evaluation review

O To develop an IEP

O To modify a current IEP

O To discuss behavioral/attendance concerns (FBA, BIP, manifestation determination as needed)

O Other (Please specify) \_\_\_\_

Summary/Recommendations:

I have received a copy of my Prior Notice and Procedural Safeguards (Parental Rights).

Date	Signature	Relationship to Student

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

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				<i>,</i>
Meeting Minutes continued			Page	_ ot

## SCOTT COUNTY SCHOOL SCHOOL BASED TEAM PRIOR WRITTEN NOTICE

Student:	School:		Meeting Date:	
Student ID:	D.O.B.:	Age:	Grade:	
Describe the action that t	the school division proposes or re	efuses to take:		
Explanation of why the so	chool division is proposing or refu	using to take action	:	
Description of each evalu refuse the action:	ation procedure, assessment, re	cord or report the s	chool division used in deciding to pro	ppose or
	choices that the team considered		hy those choices were	
Description of other reas	ons or other factors relevant as t	o why the school d	ivision proposed or refused the action	n:
Resources for the parent related federal and Virgir		ding the Individuals	with Disabilities Education Act (IDEA	) and the
If this notice is not the ini safeguards:	tial referral for evaluation, expla	in how the parent v	was provided a copy of the procedura	I

#### **Scott County Public Schools**

#### SCHOOL BEHAVIOR INTERVENTION PLAN (PRIOR TO REFERRAL TO BEHAVIOR SPECIALIST)

Student's Name:	Date:
Number of discipline referrals:	Grade:
School:	
BIP Report By:	

Problem Behavior: Inappropriate behavior(s). Be specific; clearly describe. If more than one, choose the most significant one.

Include Baseline Data.

**Reasons for the Behavior:** After discussing with student, teacher, guidance, administrator, observations.

## Previous Medications: What actions have been taken to address/correct the behavior?

- Teacher/student conference
- Administrator/student conference
- Parent conference
- In-school suspension
- Out-of-school suspension
- Peer/peer conflict resolution process
- Time-out
- Referral to

counselor(school/therapeutic day)

- Take away privileges: specify
- After-school detention
  - Other \_\_\_\_\_

#### Method of Teaching Replacement Behavior and By Whom: How will we teach the desired behavior and who will teach it?

- Direct instruction, by:
- Anger management, by: \_\_\_\_\_
- Role playing, by: \_\_\_\_\_
- \_\_\_\_\_ Behavior contract, by:
- Decision-making lesson, by:

Accommodations, Interventions, and Who's Responsible for Them: What help will we give the student to help him/her succeed? It is very important that these accommodations and/or recommendations be followed consistently by teacher(s) aides, and school staff.

## Accommodations to assist the student in displaying the replacement behavior:

- Clear, concise directions
- Frequent reminders/prompts
- Frequent breaks/vary activities
- Teacher/staff proximity
- Reprimand the student privately
- Modify assessments
- Review rules & expectations

- Provide alternate recess
- Provide cooling off period
- Communicate regularly with parents
- Supervise free time
- Avoid strong criticism
- Predictable, routine schedule
- Specified study area

- **Preferential seating**
- Avoid power struggles
- Specifically define limits
- Avoid physical contact
- Provide highly-structured setting
  - Other

## Interventions & Who's Responsible for Them:

- 1.
- 2.
- 3.
- 4.

## Method of Measuring Progress: How will we know if it's working or not?

- **Direct observation**
- Charting/graphing
- Daily behavior sheet
- Self-monitoring
- Weekly behavior sheet

- Social skills training, by: Providing cues, by: Modeling, by: Stress management, by:
- Use of mentor(s), by:

#### Length of Behavior Plan:

Semester	Begin Date
Nine weeks	
Other	Review Date

#### Positive Consequences for Appropriate Behavior: What can the student earn?

- Verbal Praise
- Earned privileges
- Tangible rewards
- □ Immediate feedback
- □ Earned tokens/points
- □ Free time
- Computer time
- Positive call or note home
- Positive visit to office
- Other

#### Negative Consequences for Inappropriate Behavior: What happens if student does not behave?

- □ Loss of points/tokens
- Phone call home
- Send to office
- □ Escort to another area
- □ Loss of privileges
- Work detail
- □ In-school suspension
- Time out
- Detention
- Out-of-school suspension
- Other

Signatures:	Administrator	 	
	Teacher	 	
	Other	 	
	Student	Date:	

## SCHOOL CREDIT CARD USE AND POLICY

Schools have the authority to make purchases for their schools using credit cards; however, no personal use of the credit card is permitted. The credit card is to be used only by the principal or principal's designee authorized to make purchases for the school. If the principal does not authorize the credit card purchase, the employee who made the purchase becomes personally liable for the amount of purchase.

School credit cards must be kept under lock and key. A sign out/sign in sheet must be maintained for each credit card. At the time of sign in to return the school credit card the receipts needed to support the items charged in the bill from the credit card company must be turned in to the person responsible for maintaining the credit card records for the school. No employee is to maintain a credit card in their possession. The card will only be in the employee's possession at the time of use and returned promptly along with the appropriate detailed documentation of charges as stated above.

The credit card is not intended to create debt for the school; therefore, any balance on the credit card must be paid in full on a monthly basis.

The principal may want to restrict the total amount of charges that can be made on the credit card to help limit exposure to theft or other improper uses of the credit card.

*There must be approval by the principal or designee before a credit card may be signed out and all information must be
on form.

NAME	PURPOSE FOR CARD USE	PROJECTED EXPENDITURE	ACCT. #	DATE RECEIVED	DATE RETURNED	*APPROVED SIGNATURE
			<u> </u>	1	1	
				1	1	
				1		
				1		
					-	
						+

# SCOTT COUNTY VIRGINIA PUBLIC SCHOOLS SCHOOL NUTRITION DEPARTMENT Complaints Procedure and Form

# Policy

United States Department of Agriculture (USDA)/Food and Nutrition Service (FNS) Instruction 113-1 (dated 11/8/05) delineates the civil rights requirements for participants in Child Nutrition Programs (CNP). The following is required at the local school food authority (SFA) level.

# <u>Procedure</u>

Any person alleging discrimination based on race, color, national origin, sex, age, or disability has a right to file a complaint within 180 days of the alleged discriminatory action. All civil rights complaints within *the Scott County Public Schools* School Nutrition Programs should be directed to **Jennifer Frazier** can be reached via phone at **276-386-6118** or by email at <u>jennifer.frazier@scottschools.com</u>. Complaints can be submitted verbally, in writing, or anonymously.

The Scott County Schools School Nutrition Programs will obtain all necessary complaint information and process the complaint within 90 days. The complaint will be forwarded to Virginia Department of Education at:

VDOE Office of School Nutrition Programs PO BOX 2120 Richmond, VA 23218-2120.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the <u>USDA Program</u> <u>Discrimination Complaint Form</u>, (AD-3027) found online at: <u>http://www.ascr.usda.gov/complaint\_filing\_cust.html</u>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights; 1400 Independence Avenue, SW Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov. This institution is an equal opportunity provider.

# Complaint Form

Complete form and submit to District Contact within 180 days of the alleged discriminatory action. Forms can be submitted via email to email address or through US mail to SFA address.

Name:	
School:	
Address:	
Phone:	
Email:	

1. What happened to you? Please include date, location and any supporting documentation that would help show what happened.

2. Who do you believe discriminated against you? List name(s).

3. Name(s) of witness(es) to alleged prohibited conduct if applicable:

4. It is a violation of the law to discriminate against you based on the following: race, color, national origin, religion, sex, disability, age, marital status, sexual orientation, family/parental status, income derived from a public assistance program, and political beliefs. I believe I was discriminated against based on my:

5. How would you like to see this complaint resolved?

# SCOTT COUNTY VIRGINIA SCHOOLS "Every Child, Every Opportunity"

SCHOOL BOARD MEMBERS

David M. Templeton - Chairman L. Stephen Sallee, Jr. – Vice-Chairman Linda D. Gillenwater Robin Hood William D. "Bill" Houseright Gail L. McConnell



#### **DIVISION SUPERINTENDENT**

John I. Ferguson 340 East Jackson Street Gate City, Virginia 24251 Phone: (276) 386-6118 Fax: (276) 386-2684

# SCHOOL NUTRITION PROGRAM PAYMENT/DEBT PROCEDURES

- 1. Students will always be served a reimbursable meal (breakfast or lunch). No student will be denied a meal.
- 2. Students who charge will receive a reimbursable meal.
- 3. Students will not be required to throw meals away, do chores in exchange for a meal or wear a wristband or handstamp.
- 4. Students will not be denied the opportunity to participate in any extracurricular school activity because the student cannot pay for a meal at school or owes a school meal debt.
- 5. School employees will direct any communication relating to a school meal debt to the student's parent. Communication will be made by a letter addressed to the parent to be sent home with the student or phone call.
- 6. Balances (positive and negative) will be carried forward from year to year.
- 7. All cafeteria accounts have a \$25 charge limit. Students may not purchase a la carte items if they have a \$10.00 negative balance. (Bottled water, extra entrée, etc.)
- 8. All outstanding debt to the office and café must be paid in full.
- 9. When students have reached the maximum \$25.00 charge limit, the child's parents/guardians must be notified with a call from the school office. The office will cover the cost of meals for that day.
- **10.** No charges for a la carte items will be allowed after May 1<sup>st</sup> for the remainder of the school year.
  - The following procedures will be followed for students with outstanding debts:
  - Weekly notification will be made to all students who have a debt. (School Messenger)
  - When debt reaches \$10, written notification should be sent to parents.
  - Manager will notify school office and central office in writing when debt reaches \$25.00.
- 11. SCPS will not file a lawsuit against a student or the student's parent because the student cannot pay for a meal at school or owes a school meal debt.
- 12. SCPS will not solicit and receive donations or other funds for the purpose of offsetting or eliminating school meal debt.

#### Parents are also encouraged to check their child's balance weekly at www.Myschoolbucks.com.

Parents/Guardians are also encouraged to sign up for online account at myschoolbucks.com in order to add money to their account, and view activity and balances

New Meal Pattern Requirements and Nutrition Standards

- Age-appropriate calorie limits
  - Larger servings of vegetables and fruits (students must take at least one serving of produce)8
  - A wide variety of vegetables, including dark green and red/orange vegetables and legumes
  - Fat-free or 1% milk
  - Whole grains
  - Less Sodium6

#### 2023-2024 Café Prices

Elementary Breakfast	High/Middle School Breakfast	Adult Breakfast	Elementary Lunch	High/Middle School Lunch	Adult Lunch
No Cost	No Cost	See Ala Carte Prices	No Cost	No Cost	See Ala Carte Prices

#### Ala Carte Prices: Lunch/Breakfast 2023-2024

Entrée /Large Salad	\$1.75
Salad w/meal	\$1.50
Ala carte side (fruit. Veggie)	\$.75
Ala carte Entrée/WO meal	\$1.75
Ala carte Entrée W/meal	\$1.00
Baked Potato	\$1.00
Dinner Roll	\$.30
PB & J	\$1.00
Large water	\$1.00
Plain Biscuit	\$.50
Breakfast Entrée	\$1.00
Milk	\$.50
Yogurt	\$.75
Yogurt parfait	\$1.25

You may check your child's cafe balance, participation report, and to also add money to your child's account at the following link: www.Myschoolbucks.com.

## SICK LEAVE BANK

The Scott County School System shall maintain a sick leave bank for full-time employees who have catastrophic or long-term illness or injury that have exhausted their own sick leave as long as one-third of the eligible members participate in the sick leave bank.

## Membership Requirements

- I. Eligible employees are those full-time employees who receive sick leave benefits.
- II. Membership in the Sick Leave Bank is voluntary on the part of the eligible employees.

## Enrollment

- I. An eligible employee may enroll within the first 30 days of employment. An employee who does not enroll when first eligible may do so between any subsequent September 1 to October 15 by making application.
- II. An employee may enroll in the bank by donating one (1) day of sick leave upon joining and one (1) day thereafter whenever an assessment is required during the school year and must be a member 30 days prior to application for benefits.
- III. A member not having a sick leave day to contribute at the time of assessment shall automatically be assessed the first sick leave day subsequently earned.

## Rules for Use

- The Sick Leave Bank will be administered by the Central Office and an Advisory Committee. The Advisory Committee consists of one member from each personnel classification, the Sick Leave Bank Coordinator and the Human Resources Manager.
- 2. A member must make application for use of the Sick Leave Bank benefit; it is not automatic.
- 3. The first 10 consecutive contract days of illness or disability will not be covered by the bank but must be covered by the employees own accumulated sick leave days.
- 4. A member of the bank will not be able to utilize the Sick Leave Bank benefits until his or her sick leave supply is exhausted.
- 5. For a participating member to be eligible to receive Sick Leave benefits, a physician's certificate is required.
  - a. This certificate must include the date the health condition began, the probable duration of the condition, and the appropriate medical facts.
  - b. For family care, the certification must state that the employee is needed to care for the family member, and must also provide an estimated amount of time that he or she will need.
  - c. The health care provider must certify, based on the employee's statement of the care he or she will provide a family member, that the employee's presence is required or would be beneficial.
  - d. Where the leave is for the employee's own serious health condition, the certification must state the employee is unable to perform the essential elements of his or her job.
  - e. Upon returning to work, where the leave was for the employees own health condition, a doctor's release must be presented. If doctor has not released, and employee returns on their own volition, the employee must sign a waiver releasing the School System of any liability.
- 6. Sick Leave Bank may be used for the applicant's own personal illness and/or primary care giver of an immediate family member. Such leave may be granted for the following reasons:
  - a) Immediate family member consists of spouse, child, or parent with a serious health condition; When a serious health condition (physical or psychological) makes the employee unable to perform essential job functions.
  - b) Maternity requests will be limited to complications up to the birth of the child. The six week period after delivery will be considered normal recovery time for any pregnancy and will not be covered by the sick leave bank. Consideration will be given to post-delivery days only when a doctor will certify complications caused the mother to receive special treatment beyond the six weeks.

Special circumstances may be granted at the discretion of the Sick Leave Bank Advisory Board.

- 7. A maximum of 45 working days each school year can be drawn by any member of the Sick Leave Bank.
- 8. Days drawn from the bank for any one period of disability must be consecutive.
- 9. Members receiving Sick Leave Bank benefits must provide a progress assessment from his/her physician at the end of the thirty (30) days to be eligible for the additional fifteen (15) days.

- 10. Leave from the bank may not be used for disabilities which qualify the member for Worker's Compensation leave and/or insurance benefits. (Cases pending will not be paid until resolution of such cases.)
- 11. The bank will carry over its total days from one school year to the next.
- 12. A member may withdraw from the bank, but days previously contributed will remain intact.
- 13. Participating members who have made application for Sick Leave Bank benefits and whose request was disapproved, may appeal the request to the Supervisor of Personnel or his designee.
- 14. Upon termination of employment or withdrawal of membership, a participant will not be permitted to withdraw his/her contributed day(s).
- 15. If an employee terminates membership in the Sick Leave Bank, they will not be permitted to join at a later date.
- 16. The Scott County School System reserves the right to abolish the Sick Leave Bank at any time. The Scott County School System will not assume responsibility for claims by any employee against the Sick Leave Bank from its inception or at any time in the future.
- 17. If the Sick Leave Bank becomes inoperative for any reason, the sick leave days remaining in the bank at that time will be distributed first to those members receiving benefits. From the remaining bank balance, the sick leave bank days will be credited to the nearest one-half (1/2) day to each participating member, if a sufficient number of days exist. If any insufficient balance exists to do this, the bank shall terminate and no further distribution will be made.

#### SICK LEAVE BANK APPLICATION FORM

I hereby make application for membership in the Scott County Public School Employee's Sick Leave Bank. I have read and understand the conditions under which the Bank is to be established, operated, and maintained.

I understand that I must make application to use this benefit.

Please print all information in this block.

(Last)	(First)	(Middle/Maiden)	
Name:			
School Name or Office Location:			
Position or Assignment:			
-			
Beginning Date of Employment:			
Signature:			
Date:			

Return completed application to:

Scott County Public Schools 340 East Jackson Street Gate City, VA 24251 Attention: Renee Adams

NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Titulo II de las Enmiendas de Educación de 1976; Título IV de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1976; Título IV de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scotto no discriminatión por motivos de raza, color, religión, origen nacional, afiliación de no formación genética en cualquier programa educativo, incluidad la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de lóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación para presentar una queja.

#### DOCTOR'S CERTIFICATE SICK LEAVE BANK

This complete certificate is required before a member may use his/her sick leave bank entitlement.

To be completed by Employee:
NAME
POSITION
SCHOOL
Reason for Leave: Employee Illness Family Illness (State Relationship)
To be completed by Physician: DETAILED DESCRIPTION OF ILLNESS
Estimated time away from Work:
Estimated time away from Work:
I hereby certify the above named employee of Scott County Public Schools is totally unable to work due to the illness or disability indicated above and will be able to return to work on
Physician's Signature
ADDRESS:
PHONE: ()
DATE:
I recommend/do not recommend approval of this sick leave bank utilization.
Advisory Committee
NONDISCRIMINATION POLICY
In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, laws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technic students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Office Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination to to file a complaint.
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## SIMULTANEOUS HIGH SCHOOL-COLLEGE ENROLLENT FOR SECOND SEMESTER SENIOR STUDENTS

To be eligible to participant in their graduation ceremony, students must satisfy all standards set forth by the Virginia Department of Education and Scott County Public Schools. Should a second semester senior elect to ease their transition from high school to college, simultaneous enrollment in high school and accredited colleges or universities is available. Simultaneous enrollment provides second semester senior students an opportunity to gain college credit while completing their high school education.

Students are qualified for participation in simultaneous high school – college enrollment by fulfilling the following criteria:

- continue enrollment in Scott County Public Schools,
- complete first semester senior year prior to beginning simultaneous enrollment status,
- possess a "C" or better average at the end of the first semester senior year,
- satisfy, by the end of first semester senior year, all the graduation requirements set forth by the Virginia Department of Education and Scott County Public Schools to receive a standard or advanced studies diploma,
- complete Simultaneous High School-College Enrollment application, inclusive of parent/guardian signature for minor students, and receive principal approval prior to enrollment in an accredited college or university.
- provide to their high school administration proof of full-time enrollment<sup>\*</sup> in an accredited college or university, and
- remain enrolled in their high school as students participating in independent study courses which mirror the courses in which the students are enrolled in the accredited college or university.

Prior to approval by the high school principal or designee for students to participate in simultaneous high school-college enrollment:

- the principal or designee must verify that students have meet graduation requirements prior to simultaneous enrollment in accredited college or university courses,
- the students must submit to the principal or designee a completed Simultaneous High School-College Enrollment application, inclusive of parent/guardian signature for minor students, and proof of full-time enrollment in an accredited college or university,
- the students must submit to the principal or designee a list of the courses in which the students will be enrolled, and
- the principal or designee must ensure the courses in which the students will be enrolled are assigned appropriate course codes as independent study courses.

To qualify for high school credit, students must present to the principal or designee, within fifteen (15) days upon completion of the college course, a transcript from the accredited college or university where the courses were successfully completed. The principal or designee will ensure the students receive corresponding grades for the independent studies in which the students are enrolled at the high school. As it relates to final G.P.A. and class ranking, the grades from the accredited college or university will be calculated into the students' high school G.P.A.

If students drop or add college or university courses within the college or university's drop/add timeline, students are responsible for forwarding the information within five (5) days to their principal or designee to ensure the students' independent study courses mirror the college or university courses in which the students are enrolled. Simultaneously enrolled students who elect to withdraw from a college/university courses after the accredited college/university drop/add deadline, are required to notify immediately the principal or designee.

Simultaneously enrolled students are solely responsible for their own transportation to and from college or university courses and are responsible for all tuition, fees and books associated with enrollment as students in an accredited college or university.

\*Full-time enrollment status is determined by the accredited college or university.

File: JQ (7/14)

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<u>File: JQ-F1</u> (7/14)

## Simultaneous High School-College Enrollment for Second Semester Senior Students Application for Minor Student\*

School:	Anticipated Spring Graduation Year:			
Student's Name:	Date of Birth:	Age:		
Name of Parent(s)/Legal Guardian(s):				
Address:				
Parent Telephone: (1)	(2)	Date of Request:		

My signature below indicates that I desire to ease my transition to college by pursuing college credits while completing high school. My signature also acknowledges that I am fully aware of the provisions of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students. Additionally, my signature acknowledges that the final grades I will earn while enrolled in the independent study courses at my high school will be calculated in my high school grade point average and class rank. Finally, my signature below indicates that after reviewing the provisions of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students, I agree with the terms and conditions for my participation in, compliance with and completion of the requirements of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students.

Signature of Student

My signature below indicates that I desire for my son/daughter to ease his/her transition to college by pursuing college credits while completing high school. My signature also acknowledges that I am fully aware of the provisions of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students. Additionally, my signature acknowledges that the final grades my son/daughter will earn while enrolled in the independent study courses at his/her high school will be calculated in his/her high school grade point average and class rank. Finally, my signature below indicates that after reviewing the provisions of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students, I agree with the terms and conditions for my son/daughter's participation in, compliance with and completion of the requirements of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students.

Signature of Parent/Legal Guardian

Date of Signature

\*A Minor Student is defined as a student who, on the date of the request, is not yet 18 years of age.

## TO BE COMPLETED BY THE PRINCIPAL:

□ Student has met all the requirements deleted in SCPS Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students.

□ Student <u>has not met</u> the following requirement(s) deleted in SCPS Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students:\_\_\_\_\_

□ I approve Simultaneous High School-College Enrollment for the student.

□ I <u>do not</u> approve Simultaneous High School-College Enrollment for the student.

Signature of Principal

Date of Signature

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Jaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; Ja Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scotti no discriminarán por motivos de traza, color, religión, origen nacional, afiliación de noltica, identidad de género, orientación sexual, género / sexo funciloudos los esculantes embersal, edad, estatales y technicados, estudiantes embersal, edad, estatales, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información con a lan o discriminación para estenta rua queja.

Date of Signature

File: JQ-F2 (7/14)

## Simultaneous High School-College Enrollment for Second Semester Senior Students Application for Adult Student\*

School:	Anticipated Spring Gra	Anticipated Spring Graduation Year:	
Student's Name:	Date of Birth:	Age:	
Name of Parent(s)/Legal Guardian(s):			
Address:			
Telephone: (1)	(2)	Date of Request:	

My signature below indicates that I desire to ease my transition to college by pursuing college credits while completing high school. My signature also acknowledges that I am fully aware of the provisions of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students. Additionally, my signature acknowledges that the final grades I will earn while enrolled in the independent study courses at my high school will be calculated in my high school grade point average and class rank. Finally, my signature below indicates that after reviewing the provisions of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students, I agree with the terms and conditions for my participation in, compliance with and completion of the requirements of Scott County Public School Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students.

Signature of Student

Date of Signature

\*An Adult Student is defined as a student who, on the date of the request, is 18 years of age or older.

#### TO BE COMPLETED BY THE PRINCIPAL:

□ Student has met all the requirements deleted in SCPS Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students.

□ Student <u>has not met</u> the following requirement(s) deleted in SCPS Policy JQ, Simultaneous High School-College Enrollment for Second Semester Senior Students:\_\_\_\_\_

□ I approve Simultaneous High School-College Enrollment for the student. □ I **do not** approve Simultaneous High School-College Enrollment for the student.

Signature of Principal

Date of Signature

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Jaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, daily activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

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Date: \_\_\_\_\_

To: County Administrator

From: \_\_\_\_\_\_

Subject: SINGLE SOURCE PURCHASES

I certify based on the information contained below that this is the single source for the items requested.

Information used to determine single source status:

Requested By: \_\_\_\_\_

## SIGN-IN SHEET 2023/2024

	WORKSHOP	DATE	LENGTH IN HOURS
PRES	PRESENTER: TIME SPENT IN PREPARATION (IF INSERVICE CREDIT IS REQUESTED):		
	NAME	SCHOOL	DEPT
1			
2			
3			
4			
5			
6			
7			
8			
9			
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11			
12			
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28			
29			
30			

DATE: \_\_\_\_\_\_

NAME	DESTINATION	TIME	ANTICIPATED RETURN TIME	RETURN TIME

School Name:
Student:
Teacher:
Class:
Date:
Description of Behavior:
Administrative and/or Teacher Interventions
Attempted Prior to Removal and Results:
Date of Prior Incident Reports: (Note: Prior incident
reports must be attached.)
Signature of Teacher:

## SCOTT COUNTY SCHOOLS SUPERINTENDENT AUTHORIZATION OF SCHOOL REIMBURSEMENT REQUEST

SCHOOL:	
PROGRAM AREA REQUESTING REIME	BURSEMENT:
DATE OF REQUEST:	TOTAL AMOUNT REQUESTED:

Note: Complete top half of this form for approval of your reimbursement request. Upon approval, complete reimbursement information on bottom half of this form and return this original form to the School Board Office.

# **BIDS RECEIVED**

Vendor:	Amount:
Vendor:	Amount:
Vendor:	Amount:
Principal Approval:	Date:
Program Supervisor Approval:	Date:
Superintendent Approval:	Date:

## **REIMBURSEMENT REQUEST**

Payable to: \_\_\_\_\_\_Address: \_\_\_\_\_\_Address: \_\_\_\_\_\_

Date of Purchase	Descriptions/Items	Person/Program Purchased For	Amount Requested
NOTE	Receipts must be attached for all items.	TOTAL:	

Employee requesting reimbursement

Principal/Supervisor

Superintendent

# SCOTT COUNTY SCHOOLS SUPERINTENDENT'S PRE-APPROVAL OF INDIVIDUAL/SCHOOL REIMBURSEMENT REQUEST

SCHOOL:	
PAYABLE TO:	
PROGRAM AREA REQUESTING REIMBURSEMENT:	
DATE OF REQUEST:	
ITEM(S) REQUESTED:	
COST OF ITEM(S):	
AMOUNT OF REIMBURSEMENT REQUEST:	
Note: Complete this form for pre-approval of your request form and return it along with this pre-appr	reimbursement request. Upon approval, complete the reimburseme oval form to the School Board Office.
	BIDS RECEIVED
Vendor:	Amount;
Vendor:	Amount;
Vendor:	Amount;
Principal Approval:	Date:
Program Supervisor Approval:	Date:
Superintendent Approval:	Date:

- -

### THIRD PARTY COMPLAINT FORM

Employee subject to complaint \_\_\_\_\_\_

Work location/position \_\_\_\_\_

Nature of complaint: (Give specific times, dates, and locations)

Person Placing Complaint

**Date Complaint Filed** 

### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, political affiliation, gender identity, sexual orientation, gender/sex (Including pregnant and parenting students), age, marital status, disability, or genetic information in any educational program including vocational education for career and technical students, advities or exestive. The admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen, or Reagan Mullins at 276-386-6118, Scott County School Board Office for further information pertaining to nondiscrimination to file a complaint.

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## THREAT ASSESSMENT POLICY AND PROCEDURE

The Scott County School's Policy on Student Threat Assessment presented here is based on the precise language and requirements of § 22.1-79.4, *Code of Virginia* requiring local school boards to adopt policies for the establishment of threat assessment teams and prescribing the composition and responsibilities of teams as well as related referral and reporting requirements.

## STUDENT THREAT ASSESSMENT

- A formal threat assessment team shall be established for each school for the assessment of and intervention with students whose behavior may pose a threat to the safety of school staff or students.
- The superintendent shall establish, for each school, a threat assessment team; a particular threat assessment team may serve one or more schools as determined by the superintendent.
  - Each team shall include persons with expertise in counseling, instruction, school administration, and law enforcement.
  - Each team shall:
    - Provide guidance to students, faculty, and staff regarding recognition of threatening or aberrant behavior that may represent a threat to the community, school, or self;
    - Identify members of the school community to whom threatening behavior should be reported; and
    - Implement school board policies for the assessment of and intervention with students whose behavior poses a threat to the safety of school staff or students.
- All school division employees, volunteers, and contractors are required to report any expressed threats or behavior that may represent a threat to the community, school, or self.
- In cases determined to be appropriate, teams shall follow established procedures for referrals to community services boards or health care providers for evaluation or treatment when appropriate.
- Regardless of threat assessment activities, disciplinary action and referral to law enforcement are to occur as required by school board policy and the *Code of Virginia*.
- Upon a preliminary determination that a student poses a threat of violence or physical harm to self or others, a threat assessment team shall immediately report its determination to the superintendent or designee and attempt to notify the student's parent or legal guardian. Nothing in this policy shall preclude school division personnel from acting immediately to address an imminent threat.
- The superintendent will establish a committee operating within the division charged with oversight of the threat assessment teams consisting of individuals with expertise in human resources, education, school administration, mental health, and law enforcement.
- Each threat assessment team established pursuant to *Code of Virginia*, § 22.1-79.4 shall report quantitative data on its activities according to guidance developed by the Department of Criminal Justice Services.

## PROCEDURES FOR CONDUCTING STUDENT THREAT ASSESSMENTS

These procedures are consistent with the requirements of the *Code of Virginia* and reflect practices set forth in *Threat Assessment in Schools: A Guide to Managing Threatening Situations and to Creating Safe School Climates* as well as best practices identified in school divisions in Virginia. Elements of the procedure that are aligned with *Code of Virginia* requirements include a cross-reference to the applicable section of the *Code*.

## PURPOSE

The purpose of this regulation is to establish procedures for the assessment and intervention with students whose behavior poses a threat to the safety of school staff or students.

## DEFINITIONS

• A threat is a concerning communication or behavior that suggests a person may intend to harm someone else. The threat may be spoken, written, or gestured and is considered a threat regardless of whether it is observed or communicated directly to the target of the threat or observed by or communicated to a third party and regardless of whether the target of the threat is aware of the threat existing in any fashion, whether orally, visually, in writing, or electronically.

- A threat assessment is a fact-based process relying primarily on an appraisal of behaviors to identify potentially dangerous or violent situations and address them.
- A low risk threat is one in which the person/situation does not appear to pose a threat of violence and any underlying issues can be resolved easily.
- A moderate risk threat is one in which the person/situation does not appear to pose a threat of violence at this time but exhibits behaviors that indicate a continuing intent to harm and potential for future violence.
- A high risk threat is one in which the person/situation appears to pose a threat of violence, exhibiting behaviors that indicate both a continuing intent to harm and efforts to acquire the capacity to carry out the plan.
- An imminent threat exists when the person/situation appears to pose a clear and immediate threat of serious violence toward others that requires containment and action to protect identified target(s).

# THREAT ASSESSMENT TEAM

- School threat assessment teams shall be headed by the principal or administrative designee and include at least one guidance counselor, a school psychologist and/or school social worker, a law enforcement representative who is typically a school resource officer, and a member with expertise in instruction. Other school staff may serve on the team and/or be consulted during the threat assessment process, as appropriate, or as determined by the principal. [Note: § 22.1-79.4.D., *Code of Virginia*, requires school threat assessment teams to include persons with expertise in counseling, instruction, school administration, and law enforcement]
- In fulfilling statutory responsibilities, school threat assessment teams shall:
  - Conduct the assessment of and intervention with students whose behavior may pose a threat to the safety of the school staff or students.
  - Provide guidance to students, faculty, and staff regarding recognition of threatening behavior that may represent a threat by conducting presentations, broadly disseminating relevant information, and ensuring access to consultation from teams;
  - Clearly identify the person(s) to whom members of the school community are to report threatening behavior; and
  - Implement school board policies in an effective manner for the assessment of and intervention with students whose behavior poses a threat, including, in appropriate cases, referrals to community services boards or health care providers for evaluation or treatment. (§ 22.1-79.4.C., *Code of Virginia*)
- The school division level threat assessment team shall oversee and provide support for school threat assessment teams. [Note: § 22.1-79.4.B., *Code of Virginia*, authorizes the superintendent of each school division to establish a committee charged with oversight of the threat assessment teams operating within the division, which may be an existing committee established by the division. *If established*, it is required that the committee include individuals with expertise in human resources, education, school administration, mental health, and law enforcement.]
  - The team shall include a senior division administrator (e.g., Assistant Superintendent for Administration) and senior division administrators in school safety, in student services, and in human resources in consultation with designated representatives of the (specify) community services board and (locality) police department (or sheriff's office).
  - The school division level threat assessment team shall provide oversight to school level threat assessment teams; ensure that procedures are maintained for effective information sharing between the school division and community mental health and law enforcement agencies; assess the effectiveness of the threat assessment process throughout the school division; and recommend changes to policies and procedures, as needed, to ensure an effective threat assessment process reflecting known best practices.

# PROCEDURES

- Identifying and Reporting Threats
  - When a student makes a threat or engages in concerning communications or behaviors that suggest the likelihood of a threatening situation, the **Scott County Public School's Student Threat Assessment Guidelines** shall be followed. The goal of the threat assessment process is to take appropriate preventive or corrective measures to maintain a safe and secure school environment, to protect and support potential victims, and to provide assistance, as needed, to the student being assessed.
  - Regardless of threat assessment activities, disciplinary action and referral to law enforcement are to occur when required by school board policy or the *Code of Virginia*.
  - Threats of self harm require compliance with § 22.1-272.1, *Code of Virginia* and with applicable school board policies and regulations [*Policy JHF-R*] When threats of self harm are accompanied by threats to harm others,

or investigation suggests the existence of a threat to others, the threat assessment team shall be notified and take appropriate action to prevent acts of violence.

- All school division employees, volunteers, and contractors are required to report immediately to the designated school administrator any expression of intent to harm another person, concerning communications, or concerning behaviors that suggest a student may intend to commit an act of violence.
- Anyone who believes that a person or situation poses a clear and immediate threat of serious violence that requires containment should notify school security and/or law enforcement in accordance with school board policies.
- In accordance with § 22.1-279.3:1, *Code of Virginia* certain types of threats require immediate notification to law enforcement. The school administrator shall immediately report to the local law enforcement agency:
  - A threat that involves stalking of any person on a school bus, on school property, or at a school-sponsored activity.
  - Threats to bomb, burn, kill, or harm school personnel.
- Threats of death or bodily injury to a person or members of his or her family; and/or threats to commit serious bodily harm to persons on school property.
  - The school administrator shall also immediately report any act noted above that may constitute a criminal offense to the parents and/or guardians of any minor student who is alleged to have committed the act and shall report that the incident has been reported to local law enforcement, as required by law. The school administrator shall inform the parents and/or guardians that they may contact local law enforcement for further information, if they so desire. In addition, the school administrator may report other threats to the local law enforcement agency, as necessary and appropriate.
- Assessing Threats
  - When a threat is reported, the school administrator shall initiate an investigative process and, in consultation with the threat assessment team, make a determination of the seriousness of the threat as expeditiously as possible in accordance with **Scott County Public School's Student Threat Assessment Guidelines**.
  - The initial phase of the threat assessment process typically follows a standard discipline investigation process. As soon as the threat is reported, the school administrator is to conduct timely interviews of the student who made the threat, the recipients of the threat, and other witnesses who have knowledge of the threat. The purpose of the interviews is to evaluate the student's threat in context, so that the meaning of the threat and intent of the student can be determined.
  - Imminent threat. If the student appears to pose a clear and immediate threat of serious violence, the
    administrator shall notify law enforcement in accordance with School Board policies.[Note: In accordance with
    Virginia's Crisis Management and Emergency Response Resource Guide responses may include actions such as
    evacuation, lockdown, and soft lockdown.]
  - Low risk threat. If it is determined that the threat is a low risk threat and the threat assessment team
    determines no further assessment or monitoring is required at this time, the administrator shall complete the
    Student Threat Assessment and Response Form and retain a copy with the student's disciplinary records in
    accordance with School Board policy. If the student appears to be in need of assistance, the threat assessment
    team shall refer the student for assistance from the appropriate school or community-based resources and
    assign a case manager to monitor progress.
  - If it cannot be determined with a reasonable degree of confidence that the threat is low risk, then a more indepth investigation is to be undertaken by the threat assessment team to determine the nature and degree of any safety concerns and to develop strategies to reduce risk, as necessary. The investigation may include but not be limited to reviews of records, consultation with staff who knows the student, and interviews of the subject, student and threat recipient(s).
  - Based on information collected, the school threat assessment team is to determine strategies to mitigate the threat and provide assistance, as needed. As a step in this process, the threat assessment team is to classify threats and respond in accordance with the level of threat in accordance with **Student Threat Assessment** Guidelines.
  - Upon a determination that a student poses a threat of violence or physical harm to self or others, a threat assessment team shall immediately report its determination to the superintendent or designee and attempt to notify the student's parent or legal guardian. (§ 22.1-79.4.D., *Code of Virginia* and § 22.1-272.1., *Code of Virginia*).
  - In instances where the threat is deemed moderate risk or high risk, or requires further action, the school
    administrator shall notify the parent and/or guardian of the student who is the recipient of the threat and the
    parent and/or guardian of the student who made the threat. In cases involving low risk threats, the parent or
    guardian of the threat recipient may be notified at the discretion of the threat assessment team.

- Findings from assessment and classification of the threat are to be documented in writing by submitting the Student Threat Assessment and Response Report to the central office within 72 hours of the initial receipt of the threat.
- Intervening, Monitoring, and Resolving
  - If it is determined that the student poses a threat of violence, the threat assessment team shall develop, implement, and monitor an individualized plan to intervene and reduce the threat. The individualized plan is to be documented in the **Student Threat Assessment and Response Report.**
  - The student who made the threat and any impacted students are to be assisted in accessing appropriate school and community-based resources for support and/or assistance.
  - A member of the threat assessment team shall be designated case manager to monitor the status of the student and to notify the threat assessment team of any change in status or additional information that would be cause for a re-assessment. Additional information from monitoring and any re-assessment are to be documented in updates to the **Student Threat Assessment and Response Report.** These updates are to be submitted at least every 30 days until the case is resolved.
  - Resolution of the case is to be documented in the Verification of Case Closure portion of the **Student Threat** Assessment and Response Report.

## STUDENT THREAT ASSESSMENT GUIDELINES

These guidelines are based on principles and practices recommended in *Threat Assessment in Schools: A Guide to Managing Threatening Situations and to Creating Safe School Climates*, a 2002 publication of the U.S. Secret Service and U.S. Department of Education. The publication is available online at <u>www.secretservice.gov/ntac/ssi\_guide.pdf</u>.

## PRINCIPLES OF THREAT ASSESSMENT

Threat assessment is to be viewed as one component of an overall strategy to reduce school violence and implemented within the larger context of strategies to ensure schools are safe and secure environments. The principle objective of school violence-reduction strategies should be to create cultures and climates of safety, respect, and emotional support within the school.

Among other school safety strategies employed by Scott County Public Schools are:

- School climate assessments
- Emphasis on school connectedness
- Strong, but caring, stance against the code of silence
- Bullying prevention and intervention
- School-law enforcement partnerships including school resource officers
- Collaborative relationships with mental health, social services, and other community-based resources

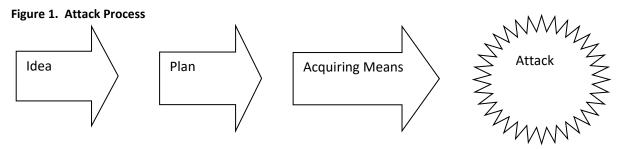
## Assumptions

Assumptions reflected in the guidelines are informed by findings of the *Safe School Initiative*, a study that examined 37 incidents of targeted school violence that occurred in the United States from December 1974 through May 2000. Among key findings:

- Incidents of targeted violence at school are rarely sudden, impulsive acts.
- Prior to most incidents, other people knew about the attacker's idea and/or plan to attack.
- Most attackers did not threaten their targets directly prior to advancing the attack.
- Most attackers engaged in some behavior, prior to the incident that caused concern or indicated a need for help.

The fact that most attackers engaged in pre-incident planning behavior and shared their intentions and plans with others, suggests that the information is likely to be uncovered through a sound threat assessment process.

Attacks examined under the *Safe School Initiative* appeared to be the end result of a process of thinking and behavior that begins with an idea, progresses to development of a plan, moves on to acquiring the means (e.g., weapons, training, capacity, access) to carry out the plan, and culminates in an attack. A graphic representation of the process is shown in Figure 1.



### Principles

The appraisal of risk in a threat assessment focuses on actions/behaviors, communications, and specific circumstances that might suggest that an individual intends to engage in violence and is planning or preparing for that event. The threat assessment process is centered upon an analysis of the facts and evidence of behavior in a given situation.

According to experts, six core principles that form the foundation of the threat assessment process are:

1. The central question in a threat assessment inquiry or investigation is whether a student poses a threat, not whether the student has made a threat.

The Safe School Initiative found that fewer than 20 percent of school shooters communicated a direct or conditional threat to their target before the attack. By contrast, individuals who are found to pose threats of violence frequently do not make threats to their targets. The study found that in more than 80 percent of the cases, school shooters did not threaten their targets directly, but they did communicate their intent and/or plans to others before the attack.

2. Targeted violence is the end result of an understandable, and often discernible, process of thinking and behavior.

Students who have committed targeted attacks did not "just snap," but engaged in a process of thought and escalation of action over days, weeks, months, and even years.

3. Targeted violence stems from an interaction among the individual, the situation, the setting, and the target.

Preventing acts of violence requires a focus on these four components and their interaction. A focus on the individual should provide insight into how the individual perceives and deals with conditions, often stressful, in his or her life. A focus on the situation should examine circumstances and events such as bullying or personal losses that contribute to feelings of being overwhelmed. Almost all school shooters experienced some major situational stress at some point prior to their attacks.

4. An investigative, skeptical, inquisitive mindset is critical to successful threat assessment.

Those who carry out threat assessment must strive to be both accurate and fair, continuing throughout the assessment process both to gather pieces of information and to fit the pieces into a larger picture.

- 5. Effective assessment is based upon facts and observations of behavior, rather than on characteristics or "traits." Student "profiles" do not provide a reliable basis for making judgments of the threat posed by a particular student.
- 6. An "integrated systems approach" coordinated with agencies and service systems within the school and the community (e.g., mental health services, law enforcement) should guide threat assessment inquiries.

Relationships with agencies and service systems within the school (e.g., school psychologist, school social worker, school-based mental health clinicians) and community (e.g., mental health, juvenile justice, child welfare) are critical to identifying, assessing, and managing students who are on a path to carrying out an act of targeted violence.

## Definitions

• A threat is a concerning communication or behavior that suggests a person may intend to harm someone else. The threat may be spoken, written, or gestured and is considered a threat regardless of whether it is observed or

communicated directly to the target of the threat or observed by or communicated to a third party and regardless of whether the target of the threat is aware of the threat existing in any fashion, whether orally, visually, in writing, or electronically.

- A threat assessment is a fact-based process relying primarily on an appraisal of behaviors to identify potentially dangerous or violent situations and address them.
- A low risk threat is one in which the person/situation does not appear to pose a threat of violence and any underlying issues can be resolved easily.
- A moderate risk threat is one in which the person/situation does not appear to pose a threat of violence at this time but exhibits behaviors that indicate a continuing intent to harm and potential for future violence.
- A high risk threat is one in which the person/situation appears to pose a threat of violence, exhibiting behaviors that indicate both a continuing intent to harm and efforts to acquire the capacity to carry out the plan.
- An imminent threat exists when the person/situation appears to pose a clear and immediate threat of serious violence toward others that requires containment and action to protect identified target(s).

# **School Threat Assessment Teams**

[Note: § 22.1-79.4.D., *Code of Virginia,* requires school threat assessment teams to include persons with expertise in counseling, instruction, school administration, and law enforcement.]

School threat assessment teams shall be headed by the principal or administrative designee and include at least one guidance counselor, a school psychologist and/or school social worker, a law enforcement representative who is typically a school resource officer, and a member with expertise in instruction. Other school staff may serve on the team and/or be consulted during the threat assessment process, as appropriate, or as determined by the principal.

At the discretion of the superintendent, a threat assessment team may be established to serve more than one school when logistics and staff assignments make it feasible. (§ 22.1-79.4.C., *Code of Virginia*)

School threat assessment teams are required by § 22.1-79.4.D, Code of Virginia, to do the following:

- Provide guidance to students, faculty, and staff regarding recognition of threatening behavior that may represent a threat by conducting presentations, broadly disseminating relevant information, and ensuring access to consultation from teams;
- Identify the person(s) to whom members of the school community are to report threatening behavior; and
- Implement school board policies in an effective manner for the assessment of and intervention with students whose behavior poses a threat, including, in appropriate cases, referrals to community services boards or health care providers for evaluation or treatment.

## **Division Threat Assessment Teams**

[Note: § 22.1-79.4.B., *Code of Virginia*, permits the superintendent to establish a division-level threat assessment team charged with oversight of the school threat assessment teams operating within the division and permits an existing division-level committee to function as the division threat assessment team. *If established*, the division-level threat assessment team must include individuals with expertise in human resources, education, school administration, mental health, and law enforcement.]

The division-level threat assessment team shall oversee and provide support for school threat assessment teams.

The team shall include a senior division administrator (e.g., Assistant Superintendent for Administration) and senior division administrators in school safety, in student services, and in human resources in consultation with designated representatives of the (specify) community services board and (locality) police department (or sheriff's office).

The division-level threat assessment team shall perform the following duties:

- provide oversight to school level threat assessment teams;
- ensure that procedures are maintained for effective information sharing between the school division and community mental health and law enforcement agencies;
- assess the effectiveness of the threat assessment process throughout the school division; and
- recommend changes to policies and procedures, as needed, to ensure an effective threat assessment process reflecting current best practices.

## Documentation

When a threat assessment is conducted and results in a determination of low risk, the administrator shall complete the **Student Threat Assessment and Response Report** and maintain a copy with the student's discipline record in accordance with existing policy.

When a student threat is determined to be moderate or high risk, the administrator shall ensure that the determination is documented in the **Student Threat Assessment and Response Report** and that the report is submitted to the central office within 72 hours of the initial report of the threat.

Any individualized plan to intervene and reduce the threat is to be documented in the **Student Threat Assessment and Response Report.** Additional information from monitoring and any re-assessment are also to be documented in updates to the **Student Threat Assessment and Response Report** that are to be submitted at least every 30 days until the case is resolved. Resolution of the case is to be documented in the Verification of Case Closure portion of the **Student Threat Assessment and Response Report**.

## **IDENTIFYING AND REPORTING THREATS**

All school division employees, volunteers, and contractors are required to report immediately to the school administrator any expression of intent to harm another person, concerning communications, or concerning behaviors that suggest a student may intend to commit an act of targeted violence.

The school threat assessment team shall strive to make the reporting process both understandable and highly accessible and to discourage a "code of silence" that may be a barrier to reporting. Faculty and staff, students, volunteers, and other members of the school community need to know:

- their role and responsibility to report;
- what to report;
- where to report it;
- that reports are wanted and will be acted upon.

Members of the school community should be encouraged on an ongoing basis to report any threatening communication or troubling behavior and be reminded that reporting is an act of caring and not "snitching" or "tattling."

Section 8.01-47, *Code of Virginia*, enacted in 2013, grants immunity from all civil liability to any person who, in good faith with reasonable cause and without malice, reports, investigates, or causes an investigation to be made into information that any person poses a credible danger of serious bodily injury or death to any other person on school property.

All threats of self harm require compliance with § 22.1-272.1, *Code of Virginia* and with applicable school board policies and regulations [cite Division Regulation #]. However, when threats of self-harm are accompanied by threats to harm others, or investigation suggests the existence of a threat to others, the threat assessment team shall be notified and take appropriate action to prevent acts of targeted violence.

Anyone who believes that a person or situation poses a clear and immediate threat of serious violence that requires containment should notify school security and law enforcement in accordance with school board policies.

## ASSESSING AND CLASSIFYING THREATS

When a threat is reported, the school administrator shall initiate an investigative process and, in consultation with the threat assessment team, make a determination of the seriousness of the threat as expeditiously as possible in accordance with **Scott County Public School's Student Threat Assessment Guidelines**.

The initial phase of the threat assessment process typically follows a standard discipline investigation process. As soon as the threat is reported, the school administrator is to conduct timely interviews of the student who made the threat, the recipients of the threat, and other witnesses who have knowledge of the threat. The purpose of the interviews is to evaluate the student's threat in context, so that the meaning of the threat and intent of the student can be determined.

If the student appears to pose a clear and immediate threat of serious violence, the administrator shall notify law enforcement in accordance with School Board policies. [Note: In accordance with *Virginia's Crisis Management and Emergency Response Resource Guide* responses may include actions such as evacuation, lockdown, and soft lockdown.]

Information obtained from the threat assessment should be recorded in the **Student Threat Assessment and Response Report** which documents information collected from multiple sources. All questions should be asked and responses recorded.

The following are examples of key questions to help assess the situation. Additional questions may be asked for clarification and/or to probe more deeply to fully understand the circumstances.

Questions for student who made the threat:

- What exactly was said or done
- What was meant by what was said or done
- Student understanding of how what was said/done would make target feel
- Reason student said or did concerning act
- What student now plans

Questions for witness(es):

- What exactly the student said or did
- What witness thinks student meant based on the context of the comment or action
- What witness thinks was motive for what student said/did
- Has the student engaged in any behaviors that would assist them in committing violent acts towards others (e.g., seeking weapons)

Questions for recipient(s) of threat:

- What exactly the student said or did, if witnessed
- Nature of relationship with student; whether there is history of conflict or prior threats
- What recipient thinks was motive for what student said/did

Information from records and consultation with adults in school who know student best:

- Recent disciplinary and school performance history
- Presence of known problems in the life of the student

Regardless of threat assessment activities, disciplinary action and referral to law enforcement are to occur as required by school board policy or § 22.1-279.3:1, *Code of Virginia*. Certain types of threats require immediate notification to law enforcement. The school administrator shall immediately report to the local law enforcement agency:

- A threat that involves stalking of any person on a school bus, on school property, or at a school-sponsored activity.
- Threats to bomb, burn, kill, or harm school personnel.
- Threats of death or bodily injury to a person or members of his or her family; and/or threats to commit serious bodily harm to persons on school property.

In accordance with § 22.1-279.3:1, *Code of Virginia*, the principal (or designee) shall also immediately report any act noted above that may constitute a criminal offense to the parents and/or guardians of any minor student who is alleged to have committed the act and shall report that the incident has been reported to local law enforcement, as required by law. The school administrator shall inform the parents and/or guardians that they may contact local law enforcement for further information, if they so desire. In addition, the school administrator may report other threats to the local law enforcement agency, as necessary and appropriate.

If it is determined that the threat is a low risk threat and the threat assessment team determines no further assessment or monitoring is required at this time, the administrator shall complete the **Student Threat Assessment and Response Form** and retain a copy with the student's disciplinary records in accordance with School Board policy.

If the student appears to be in need of assistance, the threat assessment team shall refer the student for assistance from the appropriate school or community-based resources and assign a case manager to monitor progress.

The school administrator should be able to investigate and resolve most low risk threats in consultation with members of the threat assessment team with minimal direct involvement by the full team.

If it cannot be determined with a reasonable degree of confidence that the threat is low risk, then a more in-depth investigation is to be undertaken by the threat assessment team to determine the nature and degree of any safety concerns and to develop strategies to reduce risk.

Before conducting an interview with a student of concern, threat assessment team members should be well acquainted with the facts that brought the student to the attention of school administrators and others. In addition, team members should review available information concerning the student's background, interests, and behaviors.

**Review of records/consultation with staff members who know the student best**: Background information can inform the threat assessment team's approach to and questioning of the student. This information may help the threat assessment team determine whether the student poses a threat to particular targets. In addition, knowledge of background information concerning the student prior to the interview may help the threat assessment team judge whether the student is forthcoming and straightforward.

**Student interview:** Generally, a student should be asked directly about his or her intentions. Often, adolescents will respond forthrightly to a direct question. A student interview conducted during a threat assessment inquiry can elicit important information that permits the threat assessment team to better understand the situation of the student and possible targets. This understanding, in turn, will help the threat assessment team to assess the risk of violence that the student may pose in a given situation. Interviews with a student of concern also can generate leads for further inquiry.

An interview can also send the message to the student that his or her behavior has been noticed and has caused concern. Interviews give students of concern the opportunity to tell their personal stories, to be heard, and to reassess and redirect their behavior away from activities that are of concern. The interview may suggest to a student who has mixed feelings about attacking that there are people who are interested in his or her welfare, and that there are better, more effective ways to deal with problems or with specific people.

Although an interview with a student of concern can provide valuable information, relying too heavily on that interview as a basis for making judgments about whether that student poses a threat may present problems. The information offered by the student may be incomplete, misleading, or inaccurate. It therefore is important to collect information to corroborate and verify information learned from the student interview.

Interview with threat recipient(s): Individuals who have been identified as potential targets of the student of concern should also be interviewed. The threat assessment team should inform the subject of the interview that the primary purpose of that interview is to gather information about a possible situation of concern. A potential target should be asked about their relationship to the student of concern and queried about recent interactions with that student. The interviewer should gather information about grievances and grudges that the student of concern may hold against a target or against others. Interviews with potential targets should be conducted with special sensitivity. Care must be taken to gather information without unduly alarming a potential target. If the threat assessment team believes that there may be a risk of violence to an identified target, that target should be offered assistance and support.

The assessment process facilitates increased and revised understanding of issues over time. That is, when new information is made available to the team during or after the initial assessment, the team should review the new information and reevaluate the threat accordingly.

## **Assessing Potential Threatening Behavior**

Information gathered in a threat assessment inquiry should be examined for evidence of behavior and conditions that suggest that the student of concern is planning and preparing for an attack. Analysis of this information should, in the end, answer these questions:

- Is the behavior of the student consistent with movement on a pathway toward attack?
- Do the student's current situation and the setting incline him or her toward or away from targeted violence?

Based on the information available, the threat assessment team should seek to answer the following questions:

## 1. What are the student's motive(s) and goals?

- What motivated the student to make the statements or take the actions that caused him or her to come to attention?
- Does the situation or circumstance that led to these statements or actions still exist?
- Does the student have a major grievance or grudge? Against whom?
- What efforts have been made to resolve the problem and what has been the result? Does the potential attacker feel that any part of the problem is resolved or see any alternatives?

## 2. Have there been any communications suggesting ideas or intent to attack?

- What, if anything, has the student communicated to someone else (targets, friends, other students, teachers, family, others) or written in a diary, journal, or on a Web site concerning his or her ideas and/or intentions?
- Have friends been alerted or "warned away"?

## 3. Has the subject shown inappropriate interest in any of the following?

- school attacks or attackers;
- weapons (including recent acquisition of any relevant weapon);
- incidents of mass violence (terrorism, workplace violence, mass murderers).

## 4. Has the student engaged in attack-related behaviors? These behaviors might include:

- developing an attack idea or plan;
- making efforts to acquire or practice with weapons;
- casing, or checking out, possible sites and areas for attack;
- rehearsing attacks or ambushes.

## 5. Does the student have the means to carry out an act of targeted violence?

- How organized is the student's thinking and behavior?
- Does the student have the means, e.g., access to a weapon, to carry out an attack?

## 6. Is the student experiencing hopelessness, desperation, and/or despair?

- Is there information to suggest that the student is experiencing desperation and/or despair?
- Has the student experienced a recent failure, loss, and/or loss of status?
- Is the student known to be having difficulty coping with a stressful event?
- Is the student now, or has the student ever been, suicidal or "accident-prone"?
- Has the student engaged in behavior that suggests that he or she has considered ending their life?

### 7. Does the student have a trusting relationship with at least one responsible adult?

- Does the student have at least one relationship with an adult where the student feels that he or she can confide in the adult and believes that the adult will listen without judging or jumping to conclusions? (Students with trusting relationships with adults may be directed away from violence and despair and toward hope.)

- Is the student emotionally connected to or disconnected from other students?
- Has the student previously come to someone's attention or raised concern in a way that suggested he or she needs intervention or supportive services?

## 8. Does the student see violence as an acceptable - or desirable - or the only - way to solve problems?

- Does the setting around the student (friends, fellow students, parents, teachers, adults) explicitly or implicitly support or endorse violence as a way of resolving problems or disputes?
- Has the student been "dared" by others to engage in an act of violence?

## 9. Is the student's conversation and "story" consistent with his or her actions?

- Does information from collateral interviews and from the student's own behavior confirm or dispute what the student says is going on?

## 10. Are other people concerned about the student's potential for violence?

- Are those who know the student concerned that he or she might take action based on violent ideas or plans?
- Are those who know the student concerned about a specific target?
- Have those who know the student witnessed recent changes or escalations in mood and behavior?

## 11. What circumstances might affect the likelihood of an attack?

- What factors in the student's life and/or environment might increase or decrease the likelihood that the student will attempt to mount an attack at school?
- What is the response of other persons who know about the student's ideas or plan to mount an attack? Do those who know about the student's ideas actively discourage the student from acting violently, encourage the student to attack, deny the possibility of violence, passively collude with an attack, etc.?

Thoughtful consideration of the answers to the above 11 questions will produce a sound foundation for the threat assessment team's response to the overarching question in a threat assessment inquiry: **Does the student of concern pose** *a threat of targeted violence at school?* 

Behaviors that should raise concern about potential violence include:

- ideas or plans about injuring him/herself or attacking a school or persons at school;
- communications or writings that suggest that the student has an unusual or worrisome interest in school attacks;
- comments that express or imply the student is considering mounting an attack at school;
- recent weapon-seeking behavior, especially if weapon-seeking is linked to ideas about attack or expressions about interest in attack;
- communications or writings suggesting the student condones or is considering violence to redress a grievance or solve a problem; and
- rehearsals of attacks or ambushes.

## **Classifying Threats to Determine Response Strategies**

The threat assessment is designed to identify and assess risks in a deliberate and thorough manner. In determining response strategies to mitigate the risk and to provide assistance, as needed, it is helpful to classify threats by level. Based on the information collected, the threat assessment team may classify threats using the following basic criteria:

Threat Levels	Criteria
Low risk threat	person/situation does not appear to pose a threat of violence and any underlying issues can be resolved easily.
Moderate risk	person/situation does not appear to pose a threat of violence at this time but exhibits behaviors
threat	that indicate a continuing intent to harm and potential for future violence.

Threat Levels	Criteria
High risk threat	person/situation appears to pose a threat of violence, exhibiting behaviors that indicate both a
	continuing intent to harm and efforts to acquire the capacity to carry out the plan.
Imminent threat	person/situation appears to pose a clear and immediate threat of serious violence toward
	others that requires containment and action to protect identified target(s).

## **RESPONDING TO THREATS**

Successful management of a threatening situation can require substantial time and effort. Management of these situations comprises three related functions:

- 1. controlling/containing the situation and/or student in a way that will prevent the possibility of an attack;
- 2. protecting and aiding possible targets to the extent possible; and
- 3. providing support and guidance to help the student deal successfully with his or her problems.

If it is determined that the student poses a threat of violence, the threat assessment team shall develop, implement, and monitor an individualized plan to intervene and reduce the threat. The individualized plan is to be documented in the **Student Threat Assessment and Response Report**.

The student who made the threat and any impacted students are to be assisted in accessing appropriate school and community-based resources for support and/or assistance.

A member of the threat assessment team shall be designated case manager to monitor the status of the student and to notify the threat assessment team of any change in status or additional information that would be cause for a reassessment. Additional information from monitoring and any re-assessment are to be documented in the **Student Threat Assessment and Response Report Update** to be submitted at least every 30 days until the case is resolved. Resolution of the case is to be documented in the **Verification of Case Closure portion of the <b>Student Threat Assessment Assessment and Response Report.** 

# **Threat Assessment and Disciplinary Responses**

Response strategies selected should be the ones with the greatest potential for long-term preventive power. While holding students accountable for their actions, school administrators must be fair and reasonable in disciplinary responses. A broad range of corrective disciplinary actions may be employed including admonition and counseling, student behavior contract, after-school or in-school detention, and suspension of student privileges for a specified period. These disciplinary responses may be combined with other actions such as parent conferences, modifications of student classroom assignment or schedule, and referrals to in-school and community-based programs such as mediation and community service.

It is important for threat assessment teams to recognize that even fair and reasonable discipline can be perceived as another grievance to which the student may react. In such cases, the disciplinary response could lead to escalation in threatening behavior.

The most punitive responses may or may not prevent acts of violence. Suspension or expulsion of a student *can* create the risk of triggering either an immediate or a delayed violent response unless such actions are coupled with containment and support. A student who is expelled may conclude: "I have lost everything. I have only a short time to act. I will give them what they deserve." In addition, a student who is suspended or expelled is often under less supervision than if he or she were to remain in a school setting.

Although detaining a student may be necessary in a particular situation, without careful attention to the need for confinement, weapons removal, or interpersonal intervention, that action may be insufficient to prevent an eventual attack at school or otherwise protect a target. Similarly, referring a student to the mental health system, without seeing that referral in the context of an overall monitoring/management plan, may not be sufficient to prevent violence.

## Low Risk Threat Responses

A low risk threat is one in which the person/situation does not appear to pose a threat of violence and any underlying issues can be resolved easily. The response to such a threat depends on the context of the threat, whether the threat requires some form of disciplinary action, and what is necessary to resolve the situation. All low risk threats must end in an apology, retraction, or explanation that indicates that the threat is over. School administrators should do the following:

- Since low risk threats by definition do not appear to pose a threat and can be easily resolved, action to protect the person(s) to whom the threat was directed may not be necessary. When the person to whom the threat was directed is a student, his/her parents or guardian may be notified, at the discretion of the threat assessment team. If parents of a threatened student are notified, they should be contacted promptly and reassured that the threat has been resolved.
- All low risk threats are subject to disciplinary action based on school board policy. Regardless of disciplinary action, the parent or guardian of the subject student is to be notified of the incident and of the disciplinary action taken.
- When the threat assessment team determines a threat to be low risk, the case may be resolved entirely with no further action or resolved with referral to appropriate school or community-based resources. When students are referred for services, a member of the threat assessment team is designated case manager to monitor the student and the ongoing situation. At any time that new information is made available after the initial assessment, the team should review the new information and re-evaluate the threat accordingly.

## **Moderate Risk Threat Responses**

A moderate risk threat will typically result in notifying the intended victim(s) of the threat and taking precautions to protect them, taking steps to monitor and supervise the subject student, and taking disciplinary action in accordance with existing discipline policy. The threat assessment team will also work to address the conflict or problem that led to the threat. Examples of strategies that may be employed include but are not limited to:

- Take precautions to protect potential victims. Precautions typically include:
  - Provide direct supervision so the student cannot carry out the threat while at school or on the bus.
  - Caution the student who made the threat about the consequences of carrying out the threat.
  - Contact the subject student's parents to assume responsibility for supervision of the student and to enlist their support in preventing the student from carrying out the threat.
  - Notify the intended victim(s) and their parents. The intended victim(s) and their parents must be notified of the seriousness of the threat, the identity of the student who made the threat, and what actions are being taken to ensure student safety. The intended victim and his/her parents should be notified before the student who made the threat leaves school grounds.
- Consult with the school resource officer to assist in monitoring and supervising the subject student as well as determining the need, if any, for law enforcement action.
- Follow applicable disciplinary procedure in accordance with conduct policy.
- Where appropriate, refer the subject student for counseling, conflict mediation, or other interventions to reduce the threat of violence and to address the underlying conflict or issues that led to the threat. The school administrator should involve school-based professionals, such as the psychologist, counselor, or social worker, who can provide assistance in resolving the conflict and appropriate intervention.
- At the discretion of the threat assessment team, a mental health evaluation may be conducted, following parameters for response to high risk threats below.
- If warranted by findings from the mental health evaluation, the threat assessment team shall convene to complete and implement a written safety plan to address the immediate steps taken to prevent the threat from being carried out and a plan for further action before the subject student is permitted to return to school or an alternative educational environment.

## **High Risk Threat Responses**

Threats to rape, kill, inflict severe injury, or use weapons, or other actions indicating intent to commit such offenses require the immediate involvement of the threat assessment team. When the threat is determined to be high risk, the threat assessment team must:

- Notify law enforcement per regulation to contain the threat and consult with the central office.
- Take immediate precautions to protect potential victims:
  - Provide direct supervision so the subject student cannot carry out the threat while at school or on the bus.
  - Caution the student who made the threat about the consequences of carrying out the threat.
  - Contact the subject student's parents and enlist their support in preventing the student from carrying out the threat; either law enforcement or the student's parents should assume responsibility for supervising the student.
  - Notify the intended victim(s) and their parents. The intended victim(s) and their parents must be fully notified of the seriousness of the threat, the identity of the student who made the threat, and what actions are being taken to

ensure student safety. The intended victim and his/her parents should be notified before the student who made the threat leaves school grounds.

- Follow applicable disciplinary procedure in accordance with conduct policy.
- A mental health evaluation is to be conducted either by a clinically qualified team member or by someone contracted to provide the assessment. The clinician conducting the evaluation should not have a treatment relationship with the student. The assessment should be based on a review of all available information as well as information from the student. The written report must identify the problem or conflict that prompted the threat and recommend strategies to address the problem and to reduce the risk of violence.
- The school administrator will determine the conditions of readmission to school that may include the requirement to cooperate in a mental health evaluation. The parents are to be notified of all requirements and any failure to comply. A re-admission meeting must be held prior to the subject student's return to school.
- Every effort will be made by threat assessment team members to obtain any required signed permission for release and exchange of information with mental health provider(s), if any, and local law enforcement agencies.
- After receiving the mental health evaluation report, the threat assessment team shall convene to complete and implement a written safety plan to address the immediate steps taken to prevent the threat from being carried out and a plan for further action before the subject student is permitted to return to school or an alternative educational environment.

The safety plan should include:

- conditions under which the subject student may return to school;
- interventions, such as counseling or mediation, that are needed to reduce risk;
- scheduled follow-up contact with the subject student and parent to assess changes in risk and update the safety plan over time, until the perceived threat is resolved; and
- person(s) who are responsible for monitoring and verifying that the safety plan recommendations are being followed.

## **Imminent Threat Responses**

An imminent threat exists when the person/situation appears to pose a clear and immediate threat of serious violence toward others. Such threats require immediate containment and action to protect identified target(s) and referral to law enforcement and consultation with school security.

Following immediate containment and action to protect identified target(s), these threats require the involvement of the threat assessment team for the purpose of conducting/coordinating appropriate mental health assessment and developing a safety plan.

Procedures for notification of the superintendent or designee, senior division administrator, and parents of the subject student and intended target student(s) that are set forth for high risk threats are to be followed.

Following mental health assessment, the threat assessment team shall complete and implement a written safety plan to address the immediate steps taken to prevent the threat from being carried out and a plan for further action before the subject student is permitted to return to school or an alternative educational environment. The safety plan should include:

- conditions under which the subject student may return to school;
- interventions, such as counseling or mediation, that are needed to reduce risk;
- scheduled follow-up contact with the subject student and parent to assess changes in risk and update the safety plan over time, until the perceived threat is resolved; and
- identification of person(s) who are responsible for monitoring and verifying that the safety plan recommendations are being followed.

PART I. THREAT REPORTED		
Instructions:		
This form should be completed by the school threat assessment team following a preliminary assessment by the school		
administrator.		
Administrator completing form:		
Position:		
School:		
Source of report: 🗌 Teacher, instructional staff 🔄 Support staff (bus driver, cafeteria, maintenance) 🗌 Student		
Anonymous Other (specify):		
Date assessment completed:		
Information on student making threat/engaging in concerning behavior:		
Name of student:		
Date of birth: Grade:		
Address:		
Home phone:		
Emergency contact: Relationship:		
Is there a history of violent behavior in school? Yes No Unknown		
Is there a history of violent behavior away from school? Yes No Unknown		
Is there a history of discipline referrals?		
Other information:		
Information about the threat/concerning behaviors:		
Date threat occurred: Date administrator learned of threat:		
Where the threat was made:		
Who reported the threat:		
What was reported (quote as closely as possible; use quotation marks to identify direct quotes):		
Information on target/recipient(s) of threat:		
Has the intended target and/or victim(s) been identified?		
Name(s) and grade of victim(s):		
Primary recipient(s) of the threat (check all that apply):		
I Student I Teacher I Darent I Administrator I Other		
Student Teacher Parent Administrator Other		

PART II. FINDINGS FROM INTERVIEWS
Student Interview
What exactly was said or done:
What was meant by what was said or done:
Student's understanding of how what was said/done would make target feel:
Reason student said or did concerning act:
What student new plans:
What student now plans:
Witness Interview
What exactly the student said or did:
What witness thinks student meant:
What witness thinks was motive for what student said/did:
Threat Recipient(s) Interview (if applicable)
What exactly the student said or did, if witnessed:
Nature of relationship with student; whether there is history of conflict or prior threats:
What recipient thinks was motive for what student said/did:
PART III. ANALYSIS OF FINDINGS
1. What are the student's motive(s) and goals?
2. Have there been any communications suggesting ideas or intent to attack?

<ul> <li>3. Has the subject shown inappropriate interimed school attacks or attackers</li> <li>weapons (including recent acquisition incidents of mass violence (terrorism defined school attacker)</li> </ul>	n of any relevant weapon)	If yes, describe:
mass murderers         4. Has the student engaged in attack-relate         developing an attack idea or plan         making efforts to acquire or practice         casing, or checking out, possible sites         rehearsing attacks or ambushes	with weapons	lf γes, describe:
<ul><li>5. Does the student have the means to carr</li><li>6. Is the student experiencing hopelessness</li></ul>	·	
7. Does the student have a trusting relation	ship with at least one respons	ible adult?
8. Does the student see violence as an acce	ptable – or desirable – or the	only – way to solve problems?
9. Is the student's conversation and "story"	consistent with his or her act	ions?
10. Are other people concerned about the s	student's potential for violenc	e?
11. What circumstances might affect the lik	elihood of an attack?	
12. Are any of the following indicators of po	otential for violence present?	
Indicators		Comments
Ideas or plans about injuring him/herself or attacking a school or persons at school	Unknown	
Communications or writings that suggest that the student has an unusual or worrisome interest in school attacks	Yes No Unknown	
Comments that express or imply the student is considering mounting an attack at school	Yes No Unknown	
Recent weapon-seeking behavior, especially if weapon-seeking is linked to ideas about attack or expressions about interest in attack	Yes No Unknown	
Communications or writings suggesting the student condones or is considering violence to redress a grievance or solve a problem	Yes No Unknown	
Rehearsals of attacks or ambushes	Yes No Unknown	
PART IV. DETERMINATION OF THREAT LE	VEL	
Check one:	t 🗌 Moderate risk threat	Low risk threat

# PART V. RESPONSE

Once the threat is classified, follow all corresponding, prescribed responses specified below.

# Imminent Threat Response

Steps taken to contain the threat:

Low Risk Moderate Risk High Risk/Imminent			
RESPONSES TO LOW RISK THREAT	RESPONSES TO MODERATE RISK THREAT	RESPONSES TO HIGH RISK/IMMINENT THREAT	
<ul> <li>Consult with threat assessment team, as needed</li> <li>Contact subject student's parents and/or guardians, if necessary</li> <li>Notify intended victim(s)'s parents and/or guardians, if necessary</li> <li>See that threat is resolved through explanation, apology, or making amends</li> <li>Consult with SRO, if necessary</li> <li>Refer subject student for services to resolve problem, if appropriate</li> <li>Follow discipline procedures as per conduct policy</li> <li>Develop behavior intervention plan and/or contract, as appropriate</li> <li>Refer for school- or community-based services, as appropriate</li> <li>Assign a case manager to monitor student and status of intervention, as appropriate</li> <li>Documentation</li> <li>Complete appropriate Parts of Student Threat Assessment and Response Report and maintain with student's discipline record</li> </ul>	<ul> <li>Mobilize threat assessment team</li> <li>Notify subject student's parents and/or guardians</li> <li>Provide direct supervision of subject student until parents and/or guardians assume control</li> <li>Caution the subject student about the consequences of carrying out the threat</li> <li>Protect and notify intended victim(s) and parents and/or guardians of victim(s)</li> <li>Consult with SRO to assist in monitoring/ supervising subject student and determining need for law enforcement action.</li> <li>Notify superintendent or designee</li> <li>Follow discipline procedures as per conduct policy</li> <li>If needed, refer subject student for mental health assessment</li> <li>Assign a team member to monitor student and status of intervention, as appropriate</li> <li>If warranted by findings of mental health assessment, develop/monitor safety plan.</li> <li>Documentation</li> <li>Submit report to central office within 72 hours of receipt of threat.</li> <li>Submit updated report every 30 days until resolution and closure of case</li> <li>Maintain threat assessment documentation in the Student Threat Assessment and Response Report.</li> </ul>	<ul> <li>Notify law enforcement per regulation to contain threat; and consult with Safety and Security</li> <li>Mobilize threat assessment team</li> <li>Provide direct supervision of subject student until removed from campus by law enforcement or parent/guardian.</li> <li>Caution the subject student about the consequences of carrying out the threat</li> <li>Protect and notify intended victim(s) and parents and/or guardians of victim(s)</li> <li>Notify subject student's parents and/or guardians</li> <li>Notify superintendent or designee</li> <li>Follow discipline procedures as per conduct policy</li> <li>Refer subject student for mental health assessment, notifying parents of requirements for re-admission to school</li> <li>Assign team member to monitor student and intervention/safety plan.</li> <li>Develop/monitor safety plan</li> </ul> Documentation <ul> <li>Submit updated report every 30 days until resolution and closure of case</li> <li>Maintain threat assessment</li> <li>documentation in the Student Threat Assessment and Response Report.</li> </ul>	
Print name of administrator: Date:			

Signature of administrator:

(Signature indicates agreement with identified level of threat and the above actions have been taken.)		
PART VI. STUDENT THREAT ASSESSMENT AND RESPONSE REPORT UPDATE		
<i>Instructions:</i> This section should be completed by the administrator <b>and</b> other team members such as the school psychologist, school social		
worker, or others, as appropriate, within one week of incident.		
Date of Update		
Disciplinary action(s) taken:		
Student suspended? Yes No		
Student recommended for expulsion?		
Student recommended for further disciplinary action and/or consideration?		
Comment:		
Creatien Diffuser		
Special Education? If yes:           Recommendation to reconvene IEP team?         Yes         No		
Develop Functional Behavioral Assessment and/or Behavior Intervention Plan for IEP?		
If no, should the student be referred to Child Study or Local Screening? Yes No		
Comment:		
Actions with potential victim(s) of the threat or students impacted by the threat:		
Case Manager Name:		
Case Manager Job Title:		
Offered or provided brief supportive counseling? Yes No Provided Declined		
Communicated with victim(s) and parent(s) or guardian(s)? Yes No		
Altered schedule to minimize contact with student who made the threat?		
Advised victim(s) and/or parent(s) or guardian(s) of their right to contact police? Yes No		
Name of staff member who provided this information:		
Student services staff to monitor student at regular intervals? Yes No		
Name of staff member who will monitor student:		
Informed victim(s) and parent(s) or guardian(s) of re-entry date and plan		
for re-entry of student who made the threat, if applicable? Yes No		
Additional Comments:		
Actions with student making the threat:		
Case Manager Name:		
Case Manager Job Title:		
Alter schedule to minimize contact with threatened student?		
Student services staff to monitor? Yes No		
Name of staff member who will monitor student:		
School-based supportive counseling offered or planned?		
Name/position of staff member who will provide counseling to student:		
Referral for private or community-based mental health services? Yes No		
Consult with any other agency? Yes No		
Agency & Name of Contact:		
Other actions planned:		

Print name of administrator:	Date:	
Signature of administrator:		
(Signature indicates agreement with identified level of threat and the above actions have been taken.)		
PART VII. VERIFICATION OF CASE CLOSURE		
This case has been resolved and necessary actions have been taken to provide support or assistance to the student who made the threat and to any impacted students.		
Signature of case manager (if appropriate):	Date:	
Signature of administrator:	Date:	

## **Related Reading on Student Threat Assessment**

Albrecht, S. (February 2010). Threat assessment teams: Workplace and school violence prevention. *FBI Law Enforcement Bulletin*. Washington, DC: Federal Bureau of Investigation. Available online at: <a href="https://www.fbi.gov/stats-services/publications/law-enforcement-bulletin/february-2010/threat-assessment-teams">www.fbi.gov/stats-services/publications/law-enforcement-bulletin/february-2010/threat-assessment-teams</a>

Brunner, J. & Lewis, D. (2012, February). Strategic safety: Little things are the big things. *Principal Leadership*, *12*(6). Available online at <a href="http://www.nassp.org/Content.aspx?topic=Strategic\_Safety\_0212">www.nassp.org/Content.aspx?topic=Strategic\_Safety\_0212</a>

Colorado School Safety Resource Center (November 2011). *Essentials of school threat assessment: Preventing targeted school violence*. Available online at <u>www.colorado.gov/cs/Satellite/CDPS-SafeSchools/CBON/1251622848436</u>

Cornell, D. & Sheras, P. (2006). Guidelines for responding to student threats of violence. Longmont, CO: Sopris West.

Cornell, D. (April 2009). Recommended practices for Virginia college threat assessment. Richmond, VA: Virginia Department of Criminal Justice Services. Available online at <a href="http://www.dcjs.virginia.gov/vcss/ocps/documents/RecommendedPracticesVCTA.pdf">www.dcjs.virginia.gov/vcss/ocps/documents/RecommendedPracticesVCTA.pdf</a>

Deisinger, G., Randazzo, M., O'Neill, D. & Savage, J. (2008). The handbook for campus threat assessment and management teams. Boston, MA: Applied Risk Management.

Drysdale, D.A., Modzeleski, W., & Simons, A.B. (April 2010). Campus attacks: Targeted violence affecting institutions of higher education. Washington, DC: United States Secret Service, United States Department of Education, and Federal Bureau of Investigation. Available online at: <u>http://www2.ed.gov/admins/lead/safety/campus-attacks.pdf</u>

Fein, R.A., Vossekuil, B., Pollack, W.S., Borum, R., Modzeleski, W. & Reddy, M. (2004) *Threat assessment in schools: A guide to managing threatening situations and to creating safe school climates.* Washington, DC: U.S. Secret Service and U.S. Department of Education. Available online at <u>http://www.secretservice.gov/ntac/ssi\_guide.pdf</u>

National Association of School Psychologists (n.d.). *Threat assessment: Predicting and preventing school violence*. Available online at <u>www.nasponline.org/resources/factsheets/threatassess\_fs.aspx</u>

Nolan, J.J., Randazzo, M.R., & Deisinger, G. (2011). Campus threat assessment and management teams: What risk managers need to know now. University Risk Management and Insurance Association (URIMA) Journal Reprint.

O'Toole, M. E. (2000). *The school shooter: A threat assessment perspective*. Quantico, VA: National Center for the Analysis of Violent Crime, Federal Bureau of Investigation.

Pollack, W. S., Modzeleski, W., & Rooney, G. (2008). *Prior knowledge of potential school-based violence: Information students learn may prevent a targeted attack.* Washington, DC: United States Secret Service and United States Department of Education. Available online at <u>www.secretservice.gov/ntac/bystander\_study.pdf</u>

Reddy, M., Borum, R., Berglund, J. Vossekuil, B., Fein, R., & Modzeleski, W. (2001). Evaluating risk for targeted violence in schools: Comparing risk assessment, threat assessment, and other approaches. Psychology in the Schools, 38(2), 157-172. Available online at: <u>http://www.secretservice.gov/ntac/ntac\_threat\_postpress.pdf</u>

U.S. Department of Education (2007). Practical information on crisis planning: A guide for schools and communities. Available online at <a href="http://www2.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf">www2.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf</a>

U.S. Department of Education (2013). Guide for developing high quality school emergency operations plans. Available online at: <u>http://www2.ed.gov/about/offices/list/oese/oshs/rems-k-12-guide.pdf</u>

Virginia Department of Education (2007). Crisis management and emergency response in Virginia schools. Richmond, VA: Author. Available online at

www.doe.virginia.gov/support/safety crisis management/emergency crisis management/crisis mgmt emerresponse guide.pdf

### **Related Resources**

## National Center on Safe Supportive Learning Environments (NCSSLE)

## http://safesupportiveschools.ed.gov/index.php?id=01

The Center is funded by the U.S. Department of Education's Office of Safe and Healthy Students and the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) to:

- provide training and support to state administrators, including 11 grantees funded under the Safe and Supportive Schools grant program; school and district administrators; institutions of higher education; teachers; support staff at schools; communities and families; and students and
- seek to improve schools' conditions for learning through measurement and program implementation, so that all students have the opportunity to realize academic success in safe and supportive environments.

The Center's website includes information about the Center's training and technical assistance, products and tools, and latest research findings.

## Youth Violence Project of the Curry School of Education, University of Virginia

## http://curry.virginia.edu/research/labs/youth-violence-project

The Youth Violence Project conducts research on effective methods and policies for youth violence prevention and school safety. The project's website contains extensive information about the Virginia model of threat assessment, an approach to violence prevention that emphasizes early attention to problems such as bullying, teasing, and other forms of student conflict before they escalate into violent behavior. School staff members are encouraged to adopt a flexible, problem-solving approach, as distinguished from a more punitive, zero tolerance approach to student misbehavior.

## APPENDIX A. Selected Virginia Laws on Threat Assessment

## § 22.1-79.4. Threat assessment teams and oversight committees.

- A. Each local school board shall adopt policies for the establishment of threat assessment teams, including the assessment of and intervention with students whose behavior may pose a threat to the safety of school staff or students consistent with the model policies developed by the Virginia Center for School Safety in accordance with § <u>9.1-184</u>. Such policies shall include procedures for referrals to community services boards or health care providers for evaluation or treatment, when appropriate.
- B. The superintendent of each school division may establish a committee charged with oversight of the threat assessment teams operating within the division, which may be an existing committee established by the division. The committee shall include individuals with expertise in human resources, education, school administration, mental health, and law enforcement.
- C. Each division superintendent shall establish, for each school, a threat assessment team that shall include persons with expertise in counseling, instruction, school administration, and law enforcement. Threat assessment teams may be established to serve one or more schools as determined by the division superintendent. Each team shall (i) provide guidance to students, faculty, and staff regarding recognition of threatening or aberrant behavior that may represent a threat to the community, school, or self; (ii) identify members of the school community to whom threatening behavior should be reported; and (iii) implement policies adopted by the local school board pursuant to subsection A.
- D. Upon a preliminary determination that a student poses a threat of violence or physical harm to self or others, a threat assessment team shall immediately report its determination to the division superintendent or his designee. The division superintendent or his designee shall immediately attempt to notify the student's parent or legal guardian. Nothing in this subsection shall preclude school division personnel from acting immediately to address an imminent threat.
- E. Each threat assessment team established pursuant to this section shall report quantitative data on its activities according to guidance developed by the Department of Criminal Justice Services.

# (2013, c. <u>710</u>.)

## §8.01-47. Immunity of persons investigating or reporting certain incidents at schools.

In addition to any other immunity he may have, any person who, in good faith with reasonable cause and without malice, acts to report, investigate or cause any investigation to be made into the activities of any student or students or any other person or persons as they related to conduct involving bome threats, firebombs, explosive materials or other similar devices as described in clauses (vi) and (vii) of subsection A of §22.1-279.3:1, alcohol or drug use or abuse in or related to the school or institution or in connection with any school or institution activity, or information that an individual poses any credible danger of serious bodily injury or death to one or more students, school personnel, or others on school property shall be immune from all civil liability that might otherwise be incurred or imposed as the result of the making of such a report, investigation, or disclosure.

# (2013, c. 665.)

## § 22.1-272.1. Suicide prevention in public schools

Responsibility to contact parent of student at imminent risk of suicide; notice to be given to social services if parental abuse or neglect; Board of Education, in cooperation with the Department of Behavioral Health and Developmental Services and the Department of Health, to develop guidelines for parental contact.

- A. Any person licensed as administrative or instructional personnel by the Board of Education and employed by a local school board who, in the scope of his employment, has reason to believe, as a result of direct communication from a student, that such student is at imminent risk of suicide, shall, as soon as practicable, contact at least one of such student's parents to ask whether such parent is aware of the student's mental state and whether the parent wishes to obtain or has already obtained counseling for such student. Such contact shall be made in accordance with the provisions of the guidelines required by subsection C.
- B. If the student has indicated that the reason for being at imminent risk of suicide relates to parental abuse or neglect, this contact shall not be made with the parent. Instead, the person shall, as soon as practicable, notify the local department of social services of the county or city wherein the child resides or wherein the abuse or neglect is believed to have occurred or the state Department of Social Services' toll-free child abuse and neglect hotline, as required by §

<u>63.2-1509</u>. When giving this notice to the local or state department, the person shall stress the need to take immediate action to protect the child from harm.

C. The Board of Education, in cooperation with the Department of Behavioral Health and Developmental Services and the Department of Health, shall develop guidelines for making the contact required by subsection A. These guidelines shall include, but need not be limited to, (i) criteria to assess the suicide risks of students, (ii) characteristics to identify potentially suicidal students, (iii) appropriate responses to students expressing suicidal intentions, (iv) available and appropriate community services for students expressing suicidal intentions, (v) suicide prevention strategies which may be implemented by local schools for students expressing suicidal intentions, (vi) criteria for notification of and discussions with parents of students expressing suicidal intentions, (vii) criteria for as-soon-as-practicable contact with the parents, (viii) appropriate sensitivity to religious beliefs, and (ix) legal requirements and criteria for notification of public service agencies, including, but not limited to, the local or state social services and mental health agencies. These guidelines may include case studies and problem-solving exercises and may be designed as materials for inservice training programs for licensed administrative and instructional personnel.

(1999, c. <u>425;</u> 2009, cc. <u>813</u>, <u>840</u>.)

## §9.1-184. Virginia Center for School Safety created; duties.

- A. From such funds as may be appropriated, the Virginia Center for School Safety (the Center) is hereby established within the Department. The Center shall:
  - 1. Provide training for Virginia public school personnel in school safety, on evidence-based antibullying tactics, and in the effective identification of students who may be at risk for violent behavior and in need of special services or assistance;
  - 2. Serve as a resource and referral center for Virginia school divisions by conducting research, sponsoring workshops, and providing information regarding current school safety concerns, such as conflict management and peer mediation, bullying, school facility design and technology, current state and federal statutory and regulatory school safety requirements, and legal and constitutional issues regarding school safety and individual rights;
  - 3. Maintain and disseminate information to local school divisions on effective school safety initiatives in Virginia and across the nation;
  - 4. Collect, analyze, and disseminate various Virginia school safety data, including school safety audit information submitted to it pursuant to § 22.1-279.8, collected by the Department;
  - 5. Encourage the development of partnerships between the public and private sectors to promote school safety in Virginia;
  - Provide technical assistance to Virginia school divisions in the development and implementation of initiatives promoting school safety, including threat assessment-based protocols with such funds as may be available for such purpose;
  - 7. Develop a memorandum of understanding between the Director of the Department of Criminal Justice Services and the Superintendent of Public Instruction to ensure collaboration and coordination of roles and responsibilities in areas of mutual concern, such as school safety audits and crime prevention;
  - Provide training for and certification of school security officers, as defined in § <u>9.1-101</u> and consistent with § <u>9.1-110</u>;
  - 9. Develop, in conjunction with the Department of State Police, the Department of Behavioral Health and Developmental Services, and the Department of Education, a model critical incident response training program for public school personnel and others providing services to schools that shall also be made available to private schools in the Commonwealth; and
  - 10. In consultation with the Department of Education, provide schools with a model policy for the establishment of threat assessment teams, including procedures for the assessment of and intervention with students whose behavior poses a threat to the safety of school staff or students.
- B. All agencies of the Commonwealth shall cooperate with the Center and, upon request, assist the Center in the performance of its duties and responsibilities.

(2000, c. 519, § 9-173.21; 2001, cc. 436, 440, 844; 2002, cc. 836, 868; 2012, cc. 281, 433; 2013, cc. 676, 710.)

## APPENDIX B. Association of Threat Assessment Professionals Model Violence Risk Assessment Process

Source: Risk Assessment Guideline Elements for Violence: Considerations for Assessing the Risk of Future Violent Behavior (2006). Association of Threat Assessment Professionals

## Notification of Concerning Behavior/Incident

Assess source quality and capture quality (e.g., first-hand information?; direct or indirect contact with reporting party)

"Three C's: - Content, Context, Circumstances - What is new/changed?

Initial assessment of immediacy of violence and accessibility of target.

Information could	Initiate Fact Find be obtained from any or		listed sources:
<ul> <li>Victim(s)</li> <li>Witnesses</li> <li>Family members including intimate p spouses</li> <li>Friends/Co-workers</li> <li>Law enforcement personnel</li> <li>Instigator</li> </ul>	- E partners and - C c e - V - N - N - C	Examination of for Contact information contact) or indirect etc.) Wiretap and surv Money transfers Other informants	S
Process Variables • Approach behavior • Evidence of escalation – threats, etc. • Fantasy rehearsal • Evidence of deterioration – deteriorating mental state, psychosis • Actively violent state of mind – suicidal or homicidal thoughts • Command hallucinations, thought insertion/withdrawal, paranoia of imminent threat • Diminishing or impaired coping • Inability or limited view or ability to pursue other options • Evaporating protective inhibitors • Sense of inevitability (tunnel vision, foregone conclusion) • Pre-attack or ritualistic preparatory actions (writing suicide note, suicide video, religious rituals, purchase of camouflage clothing) • Recent acquisition of/ preparation of weapons, escalation of practice with no sanctioned reason • Subject's response to assessment and inquiries	<ul> <li>Risk Factors</li> <li>Weapons – use conneemotional release, fast destructive power</li> <li>Motivational factors – driving the individual fanatical beliefs, reverentitlement, grandios force closure</li> <li>Drug use – meth, cocasteroids</li> <li>Head trauma</li> <li>History of criminal, vich homicidal, stalking, th assaultive behavior, vic conditional release</li> <li>Prior involuntary or vomental health commit</li> <li>Documented homicidat thoughts, psychotic vithoughts</li> <li>Past suicide attempts</li> <li>Ordinary response to limit setting</li> <li>Reference groups, her affiliations, and commattachments</li> <li>Perception of injustice problems</li> <li>History of mental prolocompromise coping of appeal of violence.</li> </ul>	ected to scination with - what is - delusion, nge, ity, need to aine, alcohol, olent, reats, iolation of oluntary tments al or suicidal olent authority and roes, nunity e or insoluble olems that	Inhibitors/Stabilizers Consideration of available inhibitors and the person's access and utilization of them • Treatment availability, utilization, and past receptivity • Family • Other social support • Spiritual beliefs opposing violence • Connectedness and healthy affectional bonds.

### **Analysis Guidelines**

Consideration of multiple behavioral and risk factors:

- Must involve consideration of contextual factors, mitigation factors, or inhibitors to risk as well as risk factors, potential stressors – as well as resiliency factors
- Access to sufficient, credible, first-hand collateral data sources
- Must assess the impact of gathering information and investigative/threat assessment process itself upon risk
- Avoid over-reliance on single factors (factors considered must be scientifically relevant or those considered within the field based upon empirical and published literature)
- When conceptualizing risk level, must recognize professional limitations pertinent to the threat assessment seek out relevant consultation or expertise when necessary
- Qualify assessment when necessary (e.g., availability of information, recognize assumptions, potential changes in relevant context, time-limited nature of assessment)
- Assessor must be aware of the complex contextual, legal, ethical, and regulatory issues that impact the violence risk assessment process

Categorize the Level of Risk

(e.g., Low, Moderate, or High, 1-5)

Provide assessment results to appropriate parties (e.g., Individual, victim, employer, incident management team, law enforcement, court, correctional system, probation\_parole

# SCOTT COUNTY SCHOOLS TUITION REIMBURSEMENT REQUEST FORM (Pre-Approval Form for Tuition Must Be Attached to This Form)

NAME:	SCHOOL:	
ADDRESS:	JOB ASSIGNMENT:	
	DATE:	

DATE	COURSE TAKEN	AMOUNT PAID
	TOTAL AMOUNT PAID	

C	- <b>f</b>	<b>F</b>	
Signature	στ	Emp	loyee

Date

Signature of Personnel Secretary

Signature of Superintendent

Date

Date

...

## RETURN COMPLETED FORM TO SCHOOL PRINCIPAL 2023-2024 OPT-OUT CHOICES

Parents have the right to consent to disclosure of their child's records that is considered "directory information." Directory Information is routine information that is generally not considered harmful to disclose. (Note: School yearbook photos are included. in this category). Consequently, this kind of information may be included in school publications and disclosed to outside organizations without the parent's prior written consent—unless the parent has opted out of such disclosure. Scott County Public Schools (SCPS) defines "directory information" as including (but not limited to):

- Name, including nickname
- Participation in officially recognized activities and sports
- Height and weight, if a member of an athletic team
- Birthdate
- Attendance record
- Awards and honors
- School and grade
- Photographs and other images
- Name of parent or guardian or individual with whom student lives
- Student gender, primary or home language (for limited purposes only—see below)
- Address and phone number (for limited purposes only—see below)

Public disclosure of directory information may he made in various ways. The following are examples of SCPS publications that frequently are made available to the public:

- School yearbooks (photos)
- Team rosters and class lists
- Graduation, theater, athletic, and music programs
- Videos of performances, school activities, and athletic events
- Articles about school activities and athletic events
- Lists of those receiving honors, awards, and scholarships

## •

## Types of Directory Information

Directory information may be available to the general public (including the press) unless you complete the opt-out form (attached). If you want your child to be in the yearbook and other school-related publications available to the public, do not sign any opt-out form. If you want to limit the information released about your child, sign the opt-out form and check the information you want to withhold.

### Opt-Out Options (Comprehensive and Limited)

## 1. Comprehensive Opt-Out Option:

Withhold all directory information about your child. This means your child will be completely excluded from all school publications available to the public, including school yearbooks, award lists, photographs, video productions, and student directories. It also means that directory information about your child will not be released to school-related organizations, such as PTAs or to state and county agencies unless specifically permitted by federal or state law.

## 2. Limited Opt-Out Options

As a general policy, SCPS does not release student addresses, phone numbers, parent information, or demographic information (such as primary language, or gender) to the press or the general public, even though it is directory information. SCPS does provide limited directory information to school-related organizations, such as PTAs, and to state and county agencies to help provide services. If you do NOT want directory information released to these entities, select one or more of the options below.

- A. <u>Choice A</u>. Omit your child from school directories. Unless you opt out, SCPS will provide student addresses and phone numbers to the press or the general public; however, it does provide that information to PTAs and other school-related organizations, which may use that information to publish student directories and may contact your family about school-related activities. Check Choice A if you want your child to be included in all school publications **except** student address and telephone directories.
- B. <u>Choice B.</u> SCPS also provides directory information, such as student address and phone; parent or guardian

name, address and phone number; and demographic information to state and county agencies if SCPS determines that such information will help provide services to students or the school community. Check Choice B if you do not want state and county agencies to receive this type of directory information about your child, but you do want your child included in school publications.

C. <u>Choice C</u>. Omit your child from photographic productions and other types of SCPS-sponsored publicity and media coverage. SCPS produces and participates in television, videotape, motion picture, audio recordings, Web-based media, and still photograph productions that may use your child's name, likeness, or voice. Such productions may be sold or used for educational purposes and may be copyrighted, edited, and distributed by SCPS. Also, news media cover Scott County schools and sometimes photograph, videotape, or broadcast likenesses of students during school hours. Check choice C if you do not want your child's image, name, or voice featured in such productions.

**Military Recruiters**: Federal law requires secondary schools to release the names, addresses, and telephone numbers of secondary school students to military recruiters who request this information. You or the student (even if the student is not 18 or emancipated) may prohibit the release of this information to military recruiters. Opt out by completing the appropriate form.

**Guidance and Counseling**: You have the right to withdraw your student from academic or career guidance provided by the school, personal-social counseling provided by the school, or both. The guidance program is part of the comprehensive education provided to all students and focuses on teaching positive approaches toward school and learning and the knowledge and skills for life and employment. It includes:

- Academic guidance, which helps students and their parents learn about required curriculum and testing and choose appropriate courses leading to graduation and a transition to college, career, and other educational opportunities.
- Career guidance, which helps students acquire information and skills in order to plan for work, jobs, apprenticeships, and postsecondary education and career opportunities.

The counseling program helps students develop an understanding of themselves and of the rights and needs of others; learn to resolve conflicts; and set individual goals reflecting their interests, abilities, and aptitudes. Personal-social counseling may be provided in groups (e.g., all ninth graders) in which general issues of social development are addressed (e.g., peer relationships) or in structured individual or small group, multisession counseling that focuses on the specific concerns of the participant(s) (e.g., social skills, grief, or anger management).

Participation in short-term personal-social counseling of an individual or small-group nature requires written notice to parents. Parental notice is not required for short-term personal-social counseling and/or crisis intervention that is needed to maintain order, discipline, or a productive learning environment.

You may excuse your child from academic or career guidance or from personal-social counseling at any time by completing the opt-out form on the appropriate page. An opt-out request will remain in effect from the day received by the school throughout the student's K-12 career in SCPS, unless the opt-out request is rescinded by the parents in writing. Parents who elect to have their child excused from academic or career guidance shall have sole responsibility to ensure that all academic and graduation requirements are fulfilled.

For more information about the forms, contact your child's school. If you need more than one form, photocopy them.

### Objection to Release of Directory Information to the Public (Grades K-12)

то:	(Principal's Name)
	(School Name)
REGARDING:	(Student's Name—please print)

**Comprehensive Opt-Out Option**: Do not release any directory information about my child. I understand this means exclusion from school documents that typically are made public, such as yearbooks, graduation programs, honor roll and other recognition lists, sports activities, and theatrical programs. It also means exclusion of my student's name, address, and phone number from the school or PTA directory it means that directory information about my child will not be released to school-related organizations, such as PTAs, or to state and county agencies unless specifically permitted by federal or state law. In addition, my child will not be featured in any videotape, television, motion picture, audio recording, broadcast, or still photograph production produced by and available to the public from SCPS or (to the extent that access is within SCPS control during school hours) the media.

Limited Opt-Out Option: You may release directory information about my student, except (check below):

Choice A. You may not provide address and telephone information to PTAs and other school-related organizations. I understand that this means my child will not be included in the student directory and my family may not be contacted about school-related activities sponsored by those organizations.

Choice B. You may not provide address and telephone; parent or guardian name, address, and phone number; and demographic information to state and county agencies.

Choice C. You may not feature my child's name, likeness, or voice in any videotape, television, motion picture, audio recording, broadcast, Web-based media, or still photograph production that will be produced by and available to the public from SCPS or (to the extent that access is within SCPS control during school hours) the media.

Parent's Signature

Date

#### NONDISCRIMINATION POLICY

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# **Objection to Release of Information for Graduation Photos**

for Commercial Purposes (Grades 9-12)

TO:	(Principal's Name)
	(School Name)
REGARDING:	(Student's Name—please print)
I object to the release of my stude	nt's name and address to commercial photographers for purposes of

I object to the release of my student's name and address to commercial photographers for purposes of marketing graduation ceremony photographs.

Parent's Signature

Date

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## Denial of Access to Military Recruiters (Grades 9-12)

TO: \_\_\_\_\_\_(Principal's Name) \_\_\_\_\_\_(School Name) \_\_\_\_\_\_(School Name) \_\_\_\_\_\_(School Name) \_\_\_\_\_\_(School Name)

(Print name of student)

to military recruiters during this school year. I understand that once this form has been signed by either the student or a parent, only a parent may change it. I also understand that if I want to change it, the parent must notify the principal in writing that the form is no longer in effect and that student information may be released.

Signature of Student or Parent

Name of Signing Student or Parent—Please Print

Date

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### Guidance and Counseling Opt-Out Form (Grades K-12)

Complete and return this form (to your child's school) only if you **DO NOT** want your child to participate in any aspect of the guidance and counseling program.

An opt-out request will be in effect from the day it is received by the school and will remain in effect throughout the student's K-12 career in SCPS, unless the opt-out request is rescinded by his or her parent in writing.

I request that my child \_\_\_\_\_\_, **NOT** participate in the following:

\_\_\_\_\_ Academic or career guidance that is provided by his or her school.

\_\_\_\_\_ Personal-social counseling that is provided by his or her school.

I understand that parental permission is not required for counseling and/or crisis intervention that is needed to maintain order, discipline, or a productive learning environment. I understand that parents who elect to have their child excused from academic or career guidance shall have sole responsibility to ensure that all academic and graduation requirements are fulfilled.

Signature of Parent or Guardian:

Date

Student's Name (Please Print)

Student's School (Please Print)

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## SCOTT COUNTY PUBLIC SCHOOLS 340 EAST JACKSON STREET GATE CITY, VIRGINIA 24251 (276) 386-6118

## **Management of Student Records Notice**

The Family Education Rights and Privacy Act (FERPA) (20 U.S.C. 1232g; 34 CFR Part 99) is a Federal Law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- 1. The right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance. It is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
- 2. Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has a right to a formal hearing.
- 3. Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR 99.31):
  - School officials, including School Resource Officers, with legitimate educational interest;
  - Other schools to which a student is transferring;
  - Specified officials for audit or evaluation purposes;
  - Appropriate parties in connection with financial aid to a student;
  - Organizations conducting certain studies for or on behalf of the school;
  - Accrediting organization;
  - To comply with a judicial order or lawfully issued subpoena;
  - Appropriate officials in cases of health and safety emergencies; and
  - State and local authorities, within a juvenile justice system, pursuant to specific State Law.
- 4. Student directory information will be released to military and college recruiters in accordance to Federal regulations and guidelines.
- 5. FERPA allows schools to make necessary disclosures without obtaining prior written consent in order to address emergencies. FERPA empowers school officials to act decisively and quickly when the need arises and is an important part of emergency preparedness.
  - Scott County Public Schools must be able to make the determination that there is an "articulable and significant threat" prior to making the disclosure.
  - Consent requirement is limited to the period of the emergency.
  - Consent is typically: law enforcement officials, public health officials, trained medical personnel, parents, and types of appropriate parties previously identified by FERPA.
- 6. Under FERPA's health or safety emergency provision, Scott County Public Schools has established a "Threat Assessment Team" that utilizes expertise of representatives from law enforcement in the community. Once it is determined that a health or safety emergency exists, a member of the team may disclose personally identifiable information from a student's education records to appropriate officials under the health or safety emergency exception.
- 7. FERPA permits disclosure without consent that is necessary to comply with lawfully issued subpoenas or judicial orders.
- 8. The right to file a complaint with the U. S. Department of Education concerning alleged failures by the Division to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office U. S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202-5901

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors, and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school. Scott County Public Schools notifies each parent via student handbook and by newspaper.

For additional information or technical assistance, you may call (202) 260-3887 (voice). Individuals who use TDD may call the Federal Information Relay Service at 1-800-877-8339.

Cualquier persona que necesita la informacion educacional debe llamar este numero', 386-6118.

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#### **CHILD ABUSE & NEGLECT MANDATED REPORTING**

Section 63.2-1509, of the Code of Virginia requires teachers or other persons employed in a public or private school, kindergarten, or nursery school, when acting in their professional roles, to immediately report suspicions of child abuse or neglect that may have occurred both within and outside of the school setting.

Reports can be made calling your local social services department or Child Abuse & Neglect hotline at 1-800-552-7096 or by contacting the Department of Social Services in Richmond, Virginia by e-mail at <u>www.dss.virginia.gov</u>.

In lieu of a report to the local social services department or the hotline, Section 63.2-1509 of the Code permits school employees to immediately notify the person in charge or his/her designee who "shall make a report forthwith."

All persons required to report cases of suspected child abuse or neglect are immune from civil or criminal liability or administrative penalty or sanction on account of such reports unless such person has acted in bad faith or with malicious purpose. VA Code 22.1-291.3

Servicios de Protección de Menores

Línea do asistencia para abuso infantil 1-800-552-7096

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## CHILD FIND PRESCHOOL Developmental Milestones From 2-5 Years

The Individuals with Disability Education Act (IDEA) guarantees a free and appropriate public education in the least restrictive environment to all children with disabilities, ages two to 21 (inclusive). The steps in the special education process include:

- 1. Identification and referral
- 2. Evaluation
- 3. Determination of eligibility
- 4. Development of an individualized education program (IEP) and determination of services
- 5. Reevaluation

## "Free Appropriate Public Education" (FAPE) means special education and related services:

- Are provided at public expense, under public supervision and direction, and without charge;
- Meet the standards of the Virginia Board of Education;
- Include an appropriate preschool, elementary school, middle school, or secondary school education in the state; and are provided in keeping with an individualized education program (IEP).

There are timelines schools must follow for each step. Timelines help to prevent any delay. Procedural safeguards, which are rights given to the parents of a child with a disability and the child upon reaching the age of majority (age 18), ensure that the child is provided a free appropriate public education according to the Federal and State rules. The services and placement of students with disabilities who need special education, are developed through an IEP, which is the responsibility of Scott County Public Schools. The Federal and State definition of special education and specially designed instruction are:

"**Special Education**" means specially designed instruction, at no cost to the parent(s), to meet the unique needs of a child with a disability, including instruction conducted in a classroom, in the home, in hospitals, in institutions, and in other settings and instruction in physical education. The term includes each of the following if it meets the requirements of the definition of special education: (§ 22.1-213 of the *Code of Virginia*; 34 CFR 300.39)

- 1. Speech-language pathology services or any other related service, if the service is considered special education rather than a related service under state standards;
- 2. Vocational education; and
- 3. Travel training.

"Specially Designed Instruction" means adapting, as appropriate to the needs of an eligible child, the content, ethodology, or delivery of instruction: (34 CFR 300.39(b) (3))

- 1. To address the unique needs of the child that result from the child's disability; and
- 2. To ensure access of the child to the general curriculum, so that the child can meet the educational standards that apply to all children within the jurisdiction of the local educational agency.

**"Individual Referral"** may be made by anyone: parent(s), guardian, adult student, school personnel, the school-based team (referring source), or outside agency may request an evaluation at any time by writing or by speaking to a school principal, assistant principal, guidance counselor, special education teacher or special education administrator. The request does not have to be in writing; however, a written request documents your referral and starts the timeline. The referring source must explain the reasons that an evaluation is requested and any efforts that have been made to address the concerns.

When the referral is received, the date is recorded; as well as, the reason for referral and name of person or agency making the referral. The School-Based Team has 10 business days of its receipt of referral to hold a meeting and decide whether to the principal of the school and the Special Education Director ensures confidentiality. Parents receive a Procedural Safeguards Notice and Prior Written Notice for their documentation.

If the referral is received by the Director of Special Education, the Director must decide whether to evaluate, request a review by the School-Based Team, or deny the request.

If the referral is received by the school, the School-Based Team is required to meet within 10- business days of receipt of the referral to decide whether to evaluate. The parent is part of this team if they wish to attend. Once the Special

Education Administrator (Central Office Special Education Staff) receives the referral, Scott County Public Schools has 65 business days to complete an evaluation and determine eligibility.

**"Screenings"** are provided for children in specific grades within 60 administrative days of initial enrollment and may be screened after 60 business days if the original results are not considered valid. If a child fails two screenings, they may be referred for further testing. Special education referrals may be generated from these screenings.

- Speech, Language, and Voice Screenings K and those who transfer into the school division for the first time.
- Hearing & Vision Screenings K, 3,7,10
- Audio logical Evaluation– Children who fail two hearing screenings will be referred for an audio logical evaluation.
- Scoliosis Screening Will be conducted twice during a six-year period in which students are in grades 5 through 10. For students in the school division at or prior to grade 5, the children will receive a screening at grade 5 and another at grade 10. If the student enters for the first time after grade 5, they will receive only one screening a grade 10.

"Nature of Disabilities" (refer to attachments: "Terms of Disabling Conditions" and "Preschool Developmental Milestones"

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#### CHILD FIND PRESCHOOL DEVELOPMENTAL MILESTONES

## From 2-5 Years

The following shows the normal signs of growth in a child. Many children develop faster than this. Those who develop slower than this, however, may be special children who may have disabilities.

The skills within each age group fall into one of the following categories:

- A. Fine Motor
- B. Gross Motor
- C. Cognitive
- D. Communication
- E. Social
- F. Daily Living Skills

<u>Fine Motor</u>: The child's ability to use small muscle groups. Included are manipulation of objects, eye-hand coordination, and pre-writing skills.

Gross Motor: The child's ability to use large muscle groups required for activities such as running, jumping, and throwing.

<u>Cognitive</u>: This refers to the child's mental processes such as memory, judgment, reasoning, and understanding of symbolic representation.

<u>Communication</u>: The child's ability to verbalize, as well as understand what is said to him/her.

Social: the child's ability to establish and maintain appropriate relationships with others.

Daily Living Skills: the child's ability to do things for his/herself such as dressing, eating, and toileting.

## I. Age Appropriate Skills

- A. 2 years old
  - 1. Kicks a large ball
  - 2. Turns pages of a book (2-3)
  - 3. Imitates housework
  - 4. Recognizes familiar pictures
  - 5. Asks for items by name
  - 6. Use 2-3 words together

## B. 3 years old

- 1. Walks up steps
- 2. Stands briefly on one foot
- 3. Pedals tricycle
- 4. Feeds self
- 5. Opens doors
- 6. Verbalizes toileting need

## C. 4 years old

- 1. Hops in place
- 2. Throws a ball overhead
- 3. Catches a bounced ball
- 4. Copies circle
- 5. Knows 6 colors
- 6. Knows sex, age and last name
- 7. Begins to play with others
- 8. Uses sentences with correct grammar
- 9. Washes hands unassisted

## D. 5 years old

- 1. Walks backwards heal to toe
- 2. Runs on tiptoes

- 3. Prints a few letters
- 4. Recognizes own name in print
- 5. Cuts food with a knife
- 6. Plays with others
- 7. Laces shoes

Upon review of these milestones, if you have a child that you may have concerns about, please contact Stacy Wood at 276-386-7935.

Cualquier persona que necesita la información educacional debe llamar este número 386-6118.

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; Title VI of the Civil Rights Act of 1972; Title VI of the Civil Rights Act of

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# CHILD FIND DISABILITY DEFINITIONS (TERMS DEFINING DISABLING CONDITIONS)

Scott County Public Schools provides a free, appropriate public education for all identified children with disabilities, ages 2-21, inclusive. This right is guaranteed by Individuals with Disabilities Education Act (IDEA). If you have a child, or know of a child, who you suspect may be disabled according to the definitions below, and who, because of such disability needs special education and related services, please contact the Director of Special Education, 340 East Jackson Street, Gate City, Virginia 24251 or call 386-6118. Also, if you or someone you know needs this information in another language, please feel free to contact the Director of Special Education at the same address and telephone number.

Definitions of disabling conditions are as follows:

<u>AUTISM SPECTRUM DISORDERS</u> -A child may be found eligible for special education and related services as a child with autism if there is an adverse effect on the child's educational performance due to documented characteristics of autism and the child has any of the Pervasive Developmental Disorders, also referenced as autism spectrum disorder, such as Autistic Disorder, Asperger's Disorder, Rhett's Disorder, Childhood Disintegrative Disorder, or Pervasive Developmental Disorder – Not Otherwise Specified including Atypical Autism. Children with a medical diagnosis of autism spectrum disorders must be found eligible for special education and related services under IDEA before an Individualized Education Program (IEP) is developed. Children who are suspected of having a disability should be referred to their local school division for evaluation and to initiate the process for determining eligibility.

DEVELOPMENTAL DELAY means a disability affecting a child ages two through six, inclusive:

- Who is experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one
  or more of the following areas: physical development, cognitive development, communication development, social or
  emotional development, or adaptive development, or (ii) who has an established physical or mental condition that has
  a high probability of resulting in developmental delay;
- The delay(s) is not primarily a result of cultural factors, environmental or economic disadvantage, or limited English proficiency; and
- The presence of one or more documented characteristics of the delay has an adverse affect on educational performance and makes it necessary for the student to have specially designed instruction to access and make progress in the general educational activities for this age group.

<u>EMOTIONAL DISABILITY</u> means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- an inability to learn which cannot be explained by intellectual, sensory, or health factors;
- an inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- inappropriate types of behavior or feelings under normal circumstances;
- a general pervasive mood of unhappiness or depression; or
- a tendency to develop physical symptoms or fears associated with personal or school problems.

The term includes students who are schizophrenic. The term does not apply to students who are socially maladjusted unless it is determined that they have emotional disturbance.

<u>INTELLECTUAL DISABILITIY</u> - A child may be found eligible for special education and related services as a child with an intellectual disability if there is an adverse effect on the child's educational performance due to documented characteristics of intellectual disabilities which are described as a significantly sub average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period. Children must be found eligible for special education and related services under IDEA before an Individualized Education Program (IEP) is developed. Children who are suspected of having a disability should be referred to their local school division for evaluation and to initiate the process for determining eligibility.

<u>LEARNING DISABILITY</u> - Specific learning disabilities are heterogeneous in nature, often differing markedly from one person to the next. The Regulations Governing Special Education Programs for Children with Disabilities in Virginia (effective March 27, 2002) define the term as follows:

"Specific Learning Disability" means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing, or motor disabilities; mental retardation; emotional disturbance; or of environmental, cultural, or economic disadvantage.

<u>MULTIPLE DISABILITIES</u> - A child may be found eligible for special education and related services as a child with multiple disabilities if there is an adverse effect on the child's educational performance due to documented characteristics of multiple disabilities which are described as simultaneous impairments (Such as intellectual disability with blindness, intellectual disability with orthopedic impairment), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments (this terms does not include deaf-blindness). Children must be found eligible for special education and related services under IDEA before an Individualized Education Program (IEP) is developed. Children who are suspected of having a disability should be referred to their local school division for evaluation and to initiate the process for determining eligibility.

<u>OTHER HEALTH IMPAIRMENT</u> - According to IDEA, "other health impairment" means having limited strength, vitality or alertness. This includes a heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment and which adversely affects a child's educational performance. Chronic or acute health problems that fall under "other health impairment"

<ul> <li>Asthma</li> </ul>		•	Tourette Syndrome
<ul> <li>Hemop</li> </ul>	hilia	•	Attention Deficit/Hyperactivity
<ul> <li>Lead Po</li> </ul>	bisoning		Disorder
<ul> <li>Leukerr</li> </ul>	ia	•	Diabetes
<ul> <li>Nephrit</li> </ul>	is	•	Epilepsy
<ul> <li>Sickle C</li> </ul>	ell Anemia	•	Heart Condition

<u>ORTHOPEDIC IMPAIRMENT</u> means a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by congenital abnormalities (e.g., club foot, absence of some member), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns which cause contracture).

<u>SENSORY DISABILITIES</u> - "Sensory disabilities" can involve any of the five senses, but for educational purposes, it generally refers to a disability related to hearing, vision, or both hearing and vision.

Sensory disabilities affect access – access to visual and/or auditory information. Most content information is presented visually and/or auditorily in the classroom. It is important that children experiencing a vision and/or a hearing loss are appropriately identified to ensure access to education.

Overviews:

## <u>Deaf – Blind</u>

The Regulations Governing Special Education Programs for Children with Disabilities in Virginia (effective July 7, 2009) defines the term as follows:

"Deaf-Blindness" means hearing and visual impairments occurring at the same time, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness. 34 CFR § 300.7 (c) (3); 8VAC20-81-10.

## Hearing Impairment – Deafness

The Regulations Governing Special Education Programs for Children with Disabilities in Virginia (effective July 7, 2009) defines the term as follows:

"Hearing Impairment" means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness in this section. 34 CFR § 300.7 (c) (5).

"Deafness" means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification that adversely affects the child's educational performance. 34 CFR § 300.7 (c) (3).

## Visual Impairment – Blindness

The Regulations Governing Special Education Programs for Children with Disabilities in Virginia (effective July 7, 2009) defines the term as follows:

"Visual impairment including blindness" means an impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness. (34 CFR §300.8(c) (13).

<u>SPEECH - LANGUAGE IMPAIRMENT</u> - Speech-language impairments can impact the way a student communicates. Speech errors include errors when producing specific sounds that are not a result of normal development or language acquisition, dysfluency (stuttering), or motor speech issues. Students may also receive therapy for improving the understanding and use of spoken or written language, pragmatics, and meta-linguistic skills. Students with swallowing disorders or dysphagia can also receive services from speech-language pathologists in Virginia public schools.

Students must meet Virginia eligibility criteria to be found eligible for services as a student with a speech language impairment or can receive speech-language therapy as a related service if included in the student's IEP.

TRAUMATIC BRAIN INJURY (TBI) "Traumatic brain injury" means an acquired injury to the brain caused by an external physical force or by other medical conditions, including stroke, anoxia, infectious disease, aneurysm, brain tumors, and neurological insults resulting from medical or surgical treatments, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. Traumatic brain injury applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. Traumatic brain injury does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma (34 CFR 300.8(c)(12))."

Cualquier persona que necesita la informacion educacional debe llamar este numero', 386-6118.

Please contact the following person if you suspect that your child has a disability:

Brenda Robinette Supervisor of Special Education 340 East Jackson Street Gate City, VA 24251 276-386-6118

#### NONDISCRIMINATION POLICY

In compliance with the Executive Order 11246; Title I of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1972; Title IX Regulation 1964 and Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Genetic Information Nondiscrimination Act (GINA) of 2008 and all other Federal, State, School rules, Iaws, regulations, and policies, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, policical affiliation, genetic identity, sexual orientation, genetic-federative, Scott County Public Schools shall not discriminate on the basis of race, color, religion, national origin, guitical affiliation, genetic identity, sexual orientation, genetic-federative, sexual orientative, sexual orientation, genetic-federative, disultative, diality activities or extra-curricular activities, or the admission to such programs or activities, and provides equal access to the Boy Scouts and other designated youth groups. Contact Brenda Robinette Nondiscrimination Compliant. State 5118, Scott County School Board Office for further information pertaining to nondiscrimination or to file a complaint.

#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo S04 de la Ley de rehabilitación de 1973; Ja Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Contado de Scott no discriminarán por motivos de traza, color, religión, origen nacional, afiliación política, identidad de género, orientación sexual, genero / sexo (incluidos los estudiantes embarazadas y padres), edda, estado civil, discapacidad o información genetica en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminatión o queja.

## HOMELESS CHILDREN AND YOUTH

In compliance with the Federal mandates of the Stewart B. McKinney Homeless Assistance Act in conjunction with Virginia's House Joint Resolution 181, Scott County Public Schools is required to identify "Homeless Children and Youth."

Definitions are as follows:

Homeless Children – A homeless individual is one who lacks a fixed, regular and adequate nighttime residence, including but not limited to (McKinney-Vento Definition):

- sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason
- a primary nighttime residence that is not usually used for sleeping

Child and Youth – Persons who, if they were children of residents of the State, would be entitled to a free public education. If a family lives in any of the following situations:

- In an emergency shelter, motel, vehicle, or campground
- On the street
- In an abandoned building, trailer, or other inadequate accommodations, or
- Sharing housing due to loss of housing

Then their preschool-aged and school-aged children have certain rights or protections under the McKinney-Vento Homeless Education Assistance Act.

Children have the right to:

- Go to school, no matter where they live or how long they have lived there. They must be given access to the same public education, including preschool education, provided to other children.
- Continue in the school they attended before they became homeless or the school they last attended, if that is their choice and is feasible. If a school sends a child to a school other than the one requested, the school must provide a written explanation and offer the person the right to appeal the decision.
- Attend a school and participate in school programs with children who are not homeless.

Children cannot be separated from the regular school program because they are homeless.

- Enroll in school without giving a permanent address. Schools cannot require proof of residency that might prevent or delay school enrollment.
- Enroll and attend classes while the school arranges for the transfer of school and immunization records or any other documents required for enrollment.
- Receive the same special programs and services, if needed, as provided to all other children served in these programs.
- Receive transportation to school.

When a homeless family moves, they should do the following:

- Contact the school district's local liaison for homeless education (see phone number below) for help in enrolling their child in a new school or arranging for the child to continue in his or her former school. (Someone at a shelter, social services office, or the school can direct the parent or guardian to the person they need to contact.)
- Contact the school and provide any information they think will assist the teachers in helping the child adjust to new circumstances.
- Ask the local liaison for homeless education, the shelter provider, or a social worker for assistance with clothing and supplies, if needed.

## LOCAL AREA CONTACT:

Brenda Robinette Supervisor of Special Education 340 E. Jackson St. Gate City, VA 24251 276-386-6118

If you need further assistance, call the National Center for Homeless Education at the toll-free Helpline number: 1-800-308-2145

Cualquier persona que necesita la información educacional debe llamar este número 386-6118.

If you know of anyone who may be homeless	, please provide the following information to the School Social W	/orker or
return to the nearest local school.		

Name of Homeless Student:	Date:			
School of Attendance:	_ <u>Elem</u> ., <u>Middle Sch</u> ., <u>High Sch</u> . (circle one)			
Parent/Guardian(s) Name:				
Person Making Referral:	Phone:			
Explain Your Reason for Suspecting that this Student is homeless:				
If there are other children, please give their names and schoo	ol:			

#### NONDISCRIMINATION POLICY

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#### POLÍTICA DE NO DISCRIMINACIÓN

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título IV de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminarán por motivos de raza, color, religión, origen nacional, afiliación política, identidad de género, orientación sexual, género / sexo (incluidos los estudiantes embarazadas y padres), edad, estado civil, discapacidad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información o para presentar una queja.

## PUBLIC NOTICE Scott County Public Schools NON DISCRIMINATION POLICY

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It is the intent of the Scott County Public Schools to comply with both the letter and spirit of the law in making certain that discrimination does not exist in its policies, regulations, and operations. Grievance procedures, for Title IX and Section 504, have been established for students, their parents, and employees who feel discrimination/harassment have been shown by the school division.

Inquiries to recipients concerning the application of Title IX and its implementing regulations may be referred to the Title IX Supervisor or to Office for Civil Rights (OCR).

Specific complaints of alleged discrimination under Title IX (gender) and Section 504 (disability) should be referred to:

Title IX/504 Supervisor	Assistant Title IX/504 Coordinator	Assistant Title IX/504 Coordinator
Brenda Robinette	Jason Smith	Jennifer Frazier
Supervisor of Special Education	Personnel Supervisor	Supervisor of Secondary Education
Scott County School Board	Scott County School Board	Scott County School Board
340 East Jackson Street	340 East Jackson Street	340 East Jackson Street
Gate City, VA 24251	Gate City, VA 24251	Gate City, VA 24251
276-386-6118	276-386-6118	276-386-6118
brenda.robinette@scottschools	jason.smith@scottschools.com	jennifer.fraxzier@scottschools.com
Assistant Title IX/504 Coordinator	Assistant Title IX/504 Coordinator	Office for Civil Rights (OCR)
Tammy Quillen	Reagan Mullins	District of Columbia Office
Supervisor of Elementary Education	Supervisor of Middle School	US Department of Education
Scott County School Board	Scott County School Board	P.O. Box 14620
340 East Jackson Street	340 East Jackson Street	Washington, DC 20044-4620
Gate City, VA 24251	Gate City, VA 24251	Telephone: 202-208-2545
276-386-6118	276-386-6118	FAX: 202-208-7797
Tammy.guillen@scottschools.com	reagan.mullins@scottschools.com	

En cumplimiento de la Orden Ejecutiva 11246; Título II de las Enmiendas de Educación de 1976; Título VI de la Ley de Derechos Civiles de 1972; Título IX Reglamento de 1964 y Aplicación de las Enmiendas a la Educación de 1972; Artículo 504 de la Ley de rehabilitación de 1973; la Ley de No Discriminación de Información Genética (GINA) de 2008 y todas las demás reglas federales, estatales, escolares, leyes, regulaciones y **políticas**, las Escuelas Públicas del Condado de Scott no discriminaránpor motivos de raza, color, religión, origen nacional, afiliación política, identidad de género, orientación sexual, género / sexo (incluidos los estudiantes embarazadas y padres), edad, estado civil, discapacidad o información genética en cualquier programa educativo, incluida la educación vocacional para estudiantes profesionales y técnicos, actividades diarias o actividades extracurriculares, o la admisión a dichos programas o actividades, y proporciona igualdad de acceso a los Boy Scouts y otros grupos de jóvenes designados. Póngase en contacto con Brenda Robinette, Nondiscrimination Compliance Officer, Jason Smith, Jennifer Frazier, Tammy Quillen o Reagan Mullins al 276-386-6118, Scott County School Board Office para obtener más información relacionada con la no discriminación o para presentar una queja.

For further information on notice of non-discrimination, visit <u>http://wdcrobcolp01.ed.gov/CFAPPS/OCR/contactus.cfm</u> for the address and phone number of the office that serves your area, or call 1-800-421-3481.