

ENROLLMENT/RE-ENROLLMENT CHECKLIST

There are several registration forms to be completed prior to the beginning of the 22-23 school year. Below, please find a checklist to facilitate the completion of these forms. All forms are available on the school's website: www.stcoletta.org/school-program/.

FOR PARENT SIGNATURE

- _____ **Emergency Care Form** (3 page form – please complete fully)
- _____ **Community Outings Permissions** (CBI permission– all students; CBT permission– students ages 14 to 22)
- _____ **Parent-School Compact** for 2022-2023
- _____ **Photographic Release Form** (required for NEW students; Returning students- complete if you wish to change your student's current permission level)
- _____ **Free and Reduced Lunch Form**
- _____ **Parent Handbook/School Policies Receipt**

MEDICAL FORMS

(REQUIRE PARENT/GUARDIAN AND PROVIDER SIGNATURE)

- _____ **Oral Health Care Certificate**
- _____ **DC Child Health Certificate & Immunization Record**
- _____ **Medication and Medical Procedure Treatment Plan** (*Required for students with medications and/or medical procedures administered during the course of the school day*)
- _____ **Authorizations Feeding Tube Procedure** (*Required if your student will need a g-tube feeding while at school*)





St. Coletta of Greater Washington

Seeing possibilities beyond disabilities

**ST. COLETTA OF GREATER WASHINGTON, INC.
EMERGENCY CARE INFORMATION
2022-2023**

Student's Legal Name: _____
Last First Middle

Address: _____
Street city state zip code

Date of Birth: ____/____/____ **Country of Birth:** _____ **Gender:** ☐ M ☐ F ☐ X **Race (Optional):** _____

Language Spoken at Home: _____ **Email Address:** _____

Parent/Guardians' preferred language of communication: _____

Parent/Guardian 1 Name: _____
Last First

Address (if different than above): _____

Occupation/Employer: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Parent/Guardian 2 Name: _____
Last First

Address (if different than above): _____

Occupation/Employer: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

EMERGENCY CONTACTS: In the event a parent/guardian cannot be reached, please give the name and phone number of two persons who could pick up and take your child home in a timely manner.

1) _____
Name Relationship Phone Number(s)

2) _____
Name Relationship Phone Number(s)

I agree to pick up my sick or injured child in a timely manner when contacted. If I cannot be reached, the above emergency contacts can be called to pick up my child. Additionally, if I cannot be contacted in an emergency, the school has my permission to take my child to the emergency room of the nearest hospital and I hereby authorize its medical staff to provide treatment that a physician deems necessary for the well-being of my child.

Signature of Parent/Guardian

Date

ADDITIONAL INFORMATION



Student Name: _____

<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: center;">Name of Insurance Company</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: center;">Policy/Group/Employee Number</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: center;">Name of Physician</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="text-align: center;">Physician Telephone Number</div>
<div style="display: flex; justify-content: space-between;"><div>HMO Number (if applicable): _____</div><div>Medicaid ID# (if applicable): _____</div></div>	

MEDICAL INFORMATION

My child's last Tetanus (TD, dT, DTaP) shot was given on the following date: _____

My child has allergies to drug(s)/foods/other: ☒ Yes No If yes, what is your child allergic to? Please list each item: _____

If you listed allergies please explain your child's allergic reaction to each item you listed; for example, skin rash: _____

My child has asthma: ☐ Yes ☒ No If yes, what medication is used to treat the asthma? _____

My child has seizures: ☐ Yes ☒ No If yes, please explain your child's seizure characteristics and medications used to control the seizures: _____

Please list all medical conditions your child has been diagnosed with and any important information that our staff and medical personnel must know about these medical conditions: _____

Does your child take any medications: ☒ Yes No If yes, please complete the following for each medication your child takes (continues to NEXT PAGE).

<u>Medication Name</u>	<u>Dosage Given</u>	<u>How Often Given</u>	<u>Reason Medication Given</u>

Student Name: _____



<u>Medication Name</u>	<u>Dosage Given</u>	<u>How Often Given</u>	<u>Reason Medication Given</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

My child will need to take the following medication(s) at school: _____

_____. (You must have your child's physician complete the Permission for Medication Form for any medication that will be taken at school, to include over-the-counter medications. This form can be found in your school form packet).





St. Coletta of Greater Washington

Seeing possibilities beyond disabilities

PARTICIPATION IN COMMUNITY OUTINGS rev. 6/2022

Student name: _____

COMMUNITY BASED INSTRUCTION (ALL students)

Community based instruction is an integral part of the curriculum at St. Coletta. Students frequently go for walks, go to the park, or go grocery shopping. When students travel beyond the Capitol Hill neighborhood, a specific permission slip will be sent to the home. On this form, we request your permission for your student's participation in the routine outings that are part of the instructional program.

Modes of travel may include: Metro, bus, school van, walking

When: During school hours

Please sign and date for permission for your child to participate in the community based instruction during the 2022-2023 school year. By signing below, you give St. Coletta permission to take the above student to the nearest hospital in the event you or an emergency contact cannot be reached in an emergency.

Parent signature

date

CAREER-BASED TRAINING (14 years and older) rev. 6/2022

Career-based training is a primary focus on a student's transition plan within their IEP. I understand that to participate in the Career-Based Training Program my child will:

- Travel to and from various training sites.
- Travel to and from various destinations in the community for travel training purposes.
- Participate in the tasks necessary to train at each site.
- Use all forms of public and private transportation.
- Eat lunch in areas, which are in route to or within walking distance of their destinations.
- Be accompanied by a staff member.
- Participate in the tasks necessary to train at each site (including in-house sites and Coletta Collections production)

Please sign and date for permission for your child to participate in the Career-Based Training Program during the 2022-2023 school year.

Parent signature

date



School-Parent/Guardian Compact **(SCHOOL COPY)**

St. Coletta School and the parents/guardians of the students participating in activities, services, and programs funded by Title I, Part A of the Elementary and Secondary Education Act (ESEA) agree that this compact outlines how the responsibility for improved student achievement will be shared by all parties to build and develop a partnership that will help the students achieve.

This school-parent compact is in effect during the 2022-2023 school year.

School/Teacher Responsibilities

St. Coletta School will:

1. **Provide high-quality curriculum and instruction in a supportive and effective learning environment that enables the participating students to achieve in the school setting as follows:**
 - a. Provide specialized instruction and related services to all students in accordance with their Individualized Education Program (IEP) document.
 - b. Provide parents opportunities to discuss their child's achievement through participation in annual IEP meetings, mid-year parent-teacher conferences, scheduled observations and trainings pertinent to instructional activities for carryover between home and school.
 - c. Provide comprehensive staff development training in the area of education to promote school-wide student achievement and IEP goal progress.
2. **Communicate with parents/guardians as follows:**
 - a. Provide written communication regarding the educational program, FLS curriculum, and teaching strategies utilized through school newsletters, the parent handbook, and Open House events.
 - b. Provide quarterly student progress reports and results of statewide testing, as appropriate.
 - c. Provide classroom specific information and via the home-school communication book.
 - d. Contact parent/guardian via phone as needed to discuss student programming, inform of upcoming events, and relay other pertinent student information.
 - e. Include updated school information and showcase school-wide activities on social media platforms.
3. **Monitor and track student attendance.**
 - a. The school will provide information on attendance and truancy guidelines.
 - b. Attendance calls will be made when a student is absent.
 - c. The school will contact parents to discuss attendance concerns and provide information on relevant resources.
4. **Provide parents/guardians opportunities for involvement in their child's achievement**
 - a. Parent/teacher trainings provided by the classroom teacher and/or therapists focused on specific student skills included on their IEP.
 - b. Parent trainings provided by special education teachers, therapists, and specialists on topics such as communication, behavior management, and transition planning.
 - c. Opportunities to provide input for IEPs and attend mid-year parent teacher conferences.

Parent/Guardian Responsibilities

We, as parents/guardians, will support our children's learning in the following ways:

1. **Promote my child's educational progress by:**
 - a. Being an active participant in the development of my child's IEP.
 - b. Attending and participating in IEP and eligibility meetings.
 - c. Participating in mid-year parent conferences or other meetings scheduled to discuss my child's progress.
 - d. Participating in at least one Parent Training
2. **Regularly communicate with school in such areas as:**
 - a. Completion of necessary school documents and permission forms so that my child can fully participate in their educational program.
 - b. Inform the school and classroom teacher of any attendance issues and provide documentation as needed.
 - c. Include important information pertinent to my child for the school day through their home-school communication book.
 - d. Parent will inform school of circumstances that may impact the child's day-to-day functioning in the school program.
3. **Ensure that my child attends school.**
 - a. I will communicate my child's absence by calling the school attendance line and provide excuses to the school in writing
 - b. I will provide documentation supporting my child's absences to the school
 - c. I will make efforts to schedule doctor and therapy appointments outside of my child's instructional hours
4. **Be involved in school-wide events, training opportunities offered by the school and any other parent involvement opportunities, as much as possible.**

Signature of School Representative/Teacher

Date

Signature of Parent/Guardian

Date

***Return this copy to the school and retain the version titled "Parent Copy" for your records.

INSTRUCTIONS FOR APPLYING

A HOUSEHOLD MEMBER IS ANY CHILD OR ADULT LIVING WITH YOU.

IF YOUR HOUSEHOLD RECEIVES BENEFITS FROM SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP), TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, OR THE FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS [FDPIRJ, FOLLOW THESE INSTRUCTIONS:

Part 1: List all household members and the name of school for each child.

Part 2: List the case number for any household member (including adults) receiving SNAP, TANF or FDPIR benefits.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign the form. The last four digits of a Social Security Number are not necessary.

Part 6: Answer this question if you choose to.

IF NO ONE IN YOUR HOUSEHOLD GETS STATE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP), OR TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) BENEFITS AND IF ANY CHILD IN YOUR HOUSEHOLD IS HOMELESS, A MIGRANT OR RUNAWAY, FOLLOW THESE INSTRUCTIONS:

Part 1: List all household members and the name of school for each child.

Part 2: Skip this part.

Part 3: If any child you are applying for is homeless, migrant, or a runaway check the appropriate box and call your child's school.

Part 4: Complete only if a child in your household isn't eligible under Part 3. See instructions for All Other Households.

Part 5: Sign the form. The last four digits of a Social Security Number are not necessary if you didn't need to fill in Part 4.

Part 6: Answer this question if you choose to.

IF YOU ARE APPLYING FOR A FOSTER CHILD, FOLLOW THESE INSTRUCTIONS:

If 2 or more children in the household are foster children:

Part 1: List all foster children and the school name for each child. Check the box indicating the child is a foster child.

Part 2: Skip this part.

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign the form. The last four digits of a Social Security Number are not necessary.

Part 6: Answer this question if you choose to.

If some of the children in the household are foster children:

Part 1: List all household members and the name of school for each child. For any person, including children, with no income, you must check the "No Income" box. Check the box if the child is a foster child.

Part 2: If the household does not have a case number, skip this part.

Part 3: If any child you are applying for is homeless, migrant, or a runaway check the appropriate box and call your child's school. If not, skip this part.

Part 4: Follow these instructions to report total household income from this month or last month.

- Box 1-Name: List all household members with income.
- Box 2 -Gross Income and How Often It Was Received: For each household member, list each type of income received for the month. You must tell us how often the money is received-weekly, every other week, twice a month or monthly. For earnings, be sure to list the gross income, not the take-home pay. Gross income is the amount earned *before* taxes and other deductions. You should be able to find it on your pay stub or your boss can tell you.
- For other income, list the amount each person got for the month from welfare, child support, alimony, pensions, retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits.
- Under *All Other Income*, list Worker's Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income. Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster payments received by the family from the placing agency. For ONLY the self-employed, under *Earnings from Work*, report income after expenses. This is for your business, farm, or rental property. If you are in the Military Privatized Housing Initiative or get combat pay, do not include these allowances as income.

Part 5: Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn't have one).

Part 6: Answer this question, if you choose.

ALL OTHER HOUSEHOLDS, INCLUDING WIC HOUSEHOLDS, FOLLOW THESE INSTRUCTIONS:

Part 1: List all household members and the name of school for each child. For any person, including children, with no income, you must check the "No Income" box.

Part 2: If the household does not have a case number, skip this part.

Part 3: If any child you are applying for is homeless, migrant, or a runaway check the appropriate box and call your child's school. If not, skip this part.

Part 4: Follow these instructions to report total household income from this month or last month.

- Box 1-Name: List all household members with income.
- Box 2 -Gross Income and How Often It Was Received: For each household member, list each type of income received for the month. You must tell us how often the money is received-weekly, every other week, twice a month or monthly. For earnings, be sure to list the gross income, not the take-home pay. Gross income is the amount earned *before* taxes and other deductions. You should be able to find it on your pay stub or your boss can tell you.
- For other Income, list the amount each person got for the month from welfare, child support, alimony, pensions, retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits. Under *All Other Income*, list Worker's Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income. Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster payments received by the family from the placing agency. For ONLY the self-employed, under *Earnings from Work*, report income after expenses. This is for your business, farm, or rental property. Do not include income from SNAP, FDPIR, WIC or Federal education benefits. If you are in the Military Privatized Housing Initiative or get combat pay, do not include these allowances as income.

Part 5: Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn't have one).

Part 6: Answer this question if you choose.

FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION

PART 1: ALL HOUSEHOLD MEMBERS

Names of all household members (first, middle initial, last)	name of school for each child indicate N/A if child is not in school	check if a foster child (legal responsibility of welfare agency or court) *if all children listed below are foster children, skip to PART 5 to sign this form	Check if NO INCOME

PART 2: BENEFITS

IF ANY MEMBER OF YOUR HOUSEHOLD RECEIVES [SNAP], [FDPIR] OR [TANF Cash Assistance] PROVIDE THE NAME AND CASE NUMBER FOR THE PERSON WHO RECEIVED BENEFITS AND **SKIP TO PART 5. IF NO ONE RECEIVED THESE BENEFITS, SKIP TO PART 3.**

NAME:

CASE NUMBER:

PART 3: IF ANY CHILD YOU ARE APPLYING FOR IS HOMELESS, MIGRANT, OR A RUNAWAY CHECK THE APPROPRIATE BOX AND CALL YOU CHILD'S SCHOOL

HOMELESS MIGRANT RUNAWAY

PART 4: TOTAL HOUSEHOLD GROSS INCOME You must tell us how much and how often

1.NAME (list only household members with income	2. GROSS INCOME AND HOW OFTEN IT WAS RECEIVED			
	earnings from work before deductions	welfare, child support, alimony	pensions, retirement, social security, SSI, VA benefits	all other income
<i>(example) Jane Smith</i>	\$199.99 /weekly	\$149.99/ every other week	\$99.99/monthly	\$50.00/monthly

PART 5: SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN)

An adult household member must sign the application. If Part 4 is completed, the adult signing the form also must list the last four digits of his or her Social Security Number or mark the "I do not have a Social Security Number" box. (see statement on next page)

I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that school official may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted.

Sign here:

Print name:

Date:

Address:

phone number:

City:

state:

zip code:

last four digits of Social Security Number: ***-**-_____

I do not have a Social Security Number

PART 6: CHILDREN'S ETHNIC AND RACIAL IDENTITIES (OPTIONAL)

Choose one ethnicity:

Hispanic/Latino

Not Hispanic/Latino

Choose one or more (regardless of ethnicity)

Asian

American Indian or Alaska Native

Black or African American

White

Native Hawaiian or Other Pacific Islander

DO NOT FILL OUT THIS PART. THIS IS FOR SCHOOL USE ONLY

Annual Income Conversion: Weekly x 52, Every 2 weeks x 26, Twice a Month x 24, Monthly x 12

Total Income:

Per:

week

every 2 weeks

twice a month

month

year:

Household size:

Categorical Eligibility:

Eligibility: Free

Reduced

Denied

Determining Official's Signature:

date:

Confirming Official's Signature:

date:

Verifying Official's Signature:

date:

Your children may qualify for free or reduced price meals if your household income falls at or below the limits found at this website: <http://www.fns.usda.gov/cnd/governance>

The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly. "In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."



St. Coletta of Greater Washington

Seeing possibilities beyond disabilities

ACKNOWLEDGEMENT

I acknowledge receipt and responsibility for review of the below policies and notifications:

SY 22-23 Parent Handbook

FERPA Notification

Discipline Policy

Bullying and Intimidation Prevention Policy

A copy of this receipt will be kept on file at my child's school. I understand that I may review these policies/notifications any time on the school's website (www.stcoletta.org) or by requesting hardcopies from school personnel.

Parent/Guardian Signature

Parent/Guardian Name (please print)

Date

Student's Name (Print)





St. Coletta of Greater Washington

Seeing possibilities beyond disabilities

July 2022

Dear Parents/Guardians:

We are excited for another school year and would like to share a few updates regarding health requirements. Attached are forms for medical orders pertaining to medications, feeding tubes, and other medical procedures for school. In accordance with the DC School Health Program, all medical orders must be renewed by the physician at the beginning of each school year. **Please provide all orders and medications prior to our first day of school so that we are prepared to serve your child.** Medication, tube feedings, and nursing procedures cannot be administered without these properly completed permission forms. Please ensure that we have new medications if the current medications are expired.

D.C. Department of Health (DOH) has strict immunization requirements continuing in the upcoming school year. Please have your medical provider review your child's immunization record and provide updates as needed. These immunizations are **mandatory** for school attendance. **NEW FOR SY 22-23: Any student age 16 or older at the start of the 22-23 school year must have received their primary COVID-19 vaccination series (or be proceeding in accordance with the series).** Vaccination for students ages 5 through 15 years is strongly recommended.

In addition, physical and dental examinations are required annually. The necessary forms are enclosed.

If you have any questions, please email the nursing office at jehan.jones@stcoletta.org. The office fax number is 202-350-8658.

Thank you,
St. Coletta Nursing Team






School Immunization Requirements Guide **effective 03-01-2022**

FAMILIES with CHILDREN in Public, Charter, Private, Parochial, Preschool - DC Health recognizes the importance of vaccinations for preventing disease and reducing the dangers that can come with being exposed to certain diseases. This document outlines the vaccines requirements based on age for all students upon enrollment in schools, reflecting recent changes to the CDC Child and Adolescent Immunization Schedule 2022.

All students attending school in **the District of Columbia** must present proof of appropriately spaced immunizations **annually**, by the first day of school.

- **Please complete and return** your student's school health forms including the Universal Health Certificate and Oral Health Assessment Form.
- ALL STUDENTS ARE **STRONGLY RECOMMENDED** TO RECEIVE AN **ANNUAL FLU VACCINE**
- ALL STUDENTS ARE **STRONGLY RECOMMENDED** TO RECEIVE A **FULL COURSE** OF COVID-19 VACCINE ONCE THEY BECOME ELIGIBLE

My student must receive these vaccine doses upon school enrollment*	
<p>Preschool – Head Start</p>  <p>2-3 years old</p>	<p>The following vaccines are typically received before the age of 2:</p> <ul style="list-style-type: none"> 4 doses of Diphtheria/Tetanus/Pertussis (DTaP) 3 doses of Polio 1 dose Varicella if no history of chickenpox 1 dose of Measles/Mumps/Rubella (MMR) 3 doses of Hepatitis B 2 doses of Hepatitis A 3 or 4 doses* of Hib (Haemophilus Influenza Type B) 4 doses of PCV (Pneumococcal) <p>*See PROVIDER for recommended doses.</p> <p>All Students ARE STRONGLY RECOMMENDED to receive an ANNUAL FLU VACCINE</p>
<p>Kindergarten – 1st Grade</p>  <p>4-6 years old</p>	<p>Additional doses needed <u>AFTER</u> receiving the vaccines listed above:</p> <ul style="list-style-type: none"> 1 dose of Diphtheria/Tetanus/Pertussis (DTaP) 1 dose of Polio 1 dose of Varicella if no history of chickenpox 1 dose of Measles/Mumps/Rubella (MMR) <p>All Students ARE STRONGLY RECOMMENDED to receive an ANNUAL FLU VACCINE</p>
<p>2nd Grade – 5th Grade</p>  <p>7-10 years old</p>	<p>Consult your PROVIDER to be certain your student has received <u>all vaccinations listed under 2-3 and 4-6 years of age.</u></p> <p>All Students ARE STRONGLY RECOMMENDED to receive an ANNUAL FLU VACCINE</p>

School Immunization Requirements Guide **effective 03-01-2022**

- Please **complete and return** your student's school health forms including the Universal Health Certificate and Oral Health Assessment Form.
- ALL STUDENTS ARE **STRONGLY RECOMMENDED** TO RECEIVE AN **ANNUAL FLU VACCINE**
- ALL STUDENTS ARE **STRONGLY RECOMMENDED** TO RECEIVE A **FULL COURSE** OF COVID-19 VACCINE ONCE THEY BECOME ELIGIBLE

My student must receive these vaccine doses upon school enrollment*

6TH Grade – 9TH Grade

11-16

years old

Additional Required Vaccines AFTER ALL vaccines on Page 1 are Received.

1 dose of Tdap
2 doses of Meningococcal (Men ACWY)
2 or 3 doses of Human Papillomavirus Vaccine (HPV)

***Student Athletes are required** to receive **COVID-19 Vaccinations**.
See **PROVIDER** for recommended doses and intervals.

All Students ARE STRONGLY RECOMMENDED to receive an ANNUAL FLU VACCINE

10TH Grade – 12TH Grade

16 +

years old

Required vaccinations for ALL Students 16 years of age and older

Full Course of a COVID-19 mRNA vaccine series.
See **PROVIDER** for dosage and intervals.

All Students should receive an ANNUAL FLU VACCINE

*The spacing and number of doses required may vary. Please contact your child's health care provider. For additional information, contact DC Health's Immunization Program at (202) 576-7130.

Dear Parent/Guardian,

In 2009, the District of Columbia passed a law, DC Law 17-10 Human Papillomavirus Vaccinations and Reporting Act of 2007 that requires students enrolling in grades 6 through 12 for the first time at a school in the District of Columbia to submit certification that the student has:

1. Received the Human Papillomavirus (HPV) vaccine; or
2. Not received the HPV vaccine this school year because:
 - a. The parent or guardian has objected in good faith and in writing to the chief of the school that the vaccination would violate his or her religious faith;
 - b. The student's physician, his or her representative or the public health authorities has provided the school with written certification that the vaccination is medically inadvisable; or
 - c. The parent or guardian, at his or her discretion, has elected to opt out of the HPV vaccination program by signing a declaration that the parent or legal guardian has been informed of the HPV vaccination requirement and has elected not to participate.

Each year, health care providers diagnose more than 32,000 new cases of cancer related to HPV. The HPV vaccine can help protect your child from nine HPV-associated cancers including cervical cancer in women, and cancers found in the mouth and throat in men and women. As parents/guardians, you make many decisions to keep your children free from disease. Being informed about HPV is an important decision. The HPV vaccine is safe and can help protect your child from cancer; it works best when it is given to a child prior to exposure to the virus. The vaccine can be given at the same time as other recommended vaccines and is administered in a two- or three-dose series, depending on your child's age when the vaccine series is started. It is important to complete the series.

Please review the information provided on the reverse side of this letter. After reading the information, as a parent/guardian, you may choose to have your child vaccinated or to Opt-out of the HPV vaccine school requirement. However, DC Health strongly proposes that children be vaccinated as recommended by the Centers for Disease Control and Prevention (CDC).

Contact your health care provider to determine when your child can receive the vaccine series. Take this opportunity to discuss HPV and other vaccines with the provider.

If you require additional information, contact the DC Health Immunization Program at (202) 576-7130.

Annual Human Papillomavirus (HPV) Vaccination Opt-Out Certificate

Instructions for completing HPV Vaccination Opt-Out Certificate (Return Completed Certificate to school, keep copy of information sheet for your reference)

Section 1: Before signing, read the information sheet on HPV and the HPV Vaccine.

Section 2: Parent/guardian or student (if 18 years of age or older) sign and date after reading the HPV Information Statement.

Section 2 Student Information

School Name:

Student Name:

Date of Birth:

Grade:

Street Address:

City:

Zip Code:

Phone:

Name and Address of Health Care Provider:

City:

Zip Code:

Phone:

My child's health care provider recommended the HPV vaccine. Yes ☐ No ☐

Annual Opt-Out for Human Papillomavirus (HPV) Vaccine

I have received and reviewed the benefits of the HPV vaccine in preventing cervical cancer and genital warts if it is given to preteen girls and boys. After reviewing the information about the risk of contracting HPV and the link between HPV and cervical cancer, other cancers and genital warts, I have decided to opt-out of the HPV requirement for the above named student. I know that I may revisit this decision at any time during the recommended vaccination window and complete the required vaccinations.

Signature of Parent/Guardian or Student if 18 years or older

Date

Print Name of Parent/Guardian or Student if 18 years or older

Oral Health Assessment Form

For all students aged 3 years and older, use this form to report their oral health status to their school/child care facility.

Instructions

- Complete Part 1 below. Take this form to the student's dental provider. The dental provider should complete Part 2.
- Return fully completed and signed form to the student's school/child care facility.

Part 1: Student Information (To be completed by parent/guardian)

First Name _____ Last Name _____ Middle Initial _____

School or Child Care Facility Name _____

Date of Birth (MMDDYYYY)

--	--	--	--	--	--	--	--

Home Zip Code

--	--	--	--	--	--

School Grade	Day-care	PreK3	PreK4	K	1	2	3	4	5	6	7	8	9	10	11	12	Adult Ed.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: Student's Oral Health Status (To be completed by the dental provider)

	Yes	No		
Q1 Does the patient have at least one tooth with apparent cavitation (untreated caries)? This does NOT include stained pit or fissure that has no apparent breakdown of enamel structure or non-cavitated demineralized lesions (i.e. white spots).	<input type="checkbox"/>	<input type="checkbox"/>		
Q2 Does the patient have at least one treated carious tooth ? This includes any tooth with amalgam, composite, temporary restorations, or crowns as a result of dental caries treatment.	<input type="checkbox"/>	<input type="checkbox"/>		
Q3 Does the patient have at least one permanent molar tooth with a partially or fully retained sealant ?	<input type="checkbox"/>	<input type="checkbox"/>		
Q4 Does the patient have untreated caries or other oral health problems requiring care before his/her routine check-up? (Early care need)	<input type="checkbox"/>	<input type="checkbox"/>		
Q5 Does the patient have pain, abscess, or swelling? (Urgent care need)	<input type="checkbox"/>	<input type="checkbox"/>		
Q6 How many primary teeth in the patient's mouth are affected by caries that are either untreated or treated with fillings/crowns ?	<div>Total Number</div> <table border="1"> <tr> <td></td><td></td> </tr> </table>			
Q7 How many permanent teeth in the patient's mouth are affected by caries that are either untreated, treated with fillings/crowns, or extracted due to caries ?	<div>Total Number</div> <table border="1"> <tr> <td></td><td></td> </tr> </table>			
Q8 What type of dental insurance does the patient have?	<div>Medicaid</div> <input type="checkbox"/>	<div>Private Insurance</div> <input type="checkbox"/>		
	<div>Other</div> <input type="checkbox"/>	<div>None</div> <input type="checkbox"/>		

Dental Provider Name _____
Dental Provider Signature _____
Dental Examination Date _____

Dental Office Stamp

This form replaces the previous version of the DC Oral Health Assessment Form used for entry into DC Schools, all Head Start programs, and child care centers. This form is approved by the DC Health and is a confidential document. Confidentiality is adherent to the Health Insurance Portability and Accountability Act of 1996 (HIPPA) for the health providers and the Family Education Right and Privacy Act (FERPA) for the DC Schools and other providers.

Medication and Medical Procedure Treatment Plan

Use this form to detail your student's medication and/or medical procedure plan to be administered at their school and return it to the Health Suite Personnel. The Health Suite Personnel will contact you to arrange medication/medical supply drop-off. For multiple needs, complete multiple sheets.

Part 1: Student and Parent/Caretaker Information | To be completed by student's parent/caretaker.

Student First Name:	Student Last Name:	Grade:
School Facility Name:	Student DOB:	
Parent First Name:	Parent Last Name:	
Parent Email:	Parent Phone:	

I hereby request and authorize Health Suite Personnel to administer prescribed medication/treatment as directed by the licensed health care providers to the student named in Part I. I understand that:

- I am responsible for bringing the necessary medications/medical supplies to school for the Health Suite Personnel.
- All medication/medical supplies will be stored in a secured area of the school. Health Suite Personnel will not assume any responsibility for possible loss of student medication/medical supplies.
- Within one week of the expiration of the medication/medical supplies and/or within one week of the end of the school year, I must collect what is unused or it will be destroyed.
- The School or Health Suite Personnel will not assume any responsibility for unauthorized medication/treatments that the student gives to himself/herself.
- If any changes occur in my student's health or treatment plan, I will immediately notify the school and health suite personnel annually as required by DC Official Code § 38-651.03.
- Treatment plans and medication plans must be updated annually and when there is any change in the student's health or treatment requirements.
- I hereby acknowledge that the District, and its schools, employees, and agents shall be immune from civil liability for acts of omissions under DC Law 17-107 except for criminal acts, intentional wrongdoing, gross negligence, or willful misconduct.

Parent/Caretaker Signature: _____ Date: _____

Part 2a: Student's Medication Plan | To be completed by licensed health care provider.

Diagnosis:	End date for school administration of this medication:
This medication is: <input type="checkbox"/> New; the first dose was given at home on date and time: _____ <input type="checkbox"/> Renewal <input type="checkbox"/> Change	
Is this a standing order? <input type="checkbox"/> Yes, epinephrine auto injector 0.15 mg: <i>refer to anaphylaxis plan</i> <input type="checkbox"/> Yes, other: _____	
<input type="checkbox"/> Yes, epinephrine auto injector 0.3 mg: <i>refer to anaphylaxis plan</i> <input type="checkbox"/> No	
<input type="checkbox"/> Yes, albuterol sulfate 90 mcg/inh: <i>refer to asthma action plan</i>	
Name and strength of medication:	Dose/route:
Time and Frequency at School (e.g. 10am and 2pm every day; as needed if standing order)	
If a reaction can be expected, please describe:	

Additional instructions or emergency procedures:

Part 2b: Student's Medical Procedure Treatment Plan | To be completed by licensed health care provider.

Diagnosis:	This procedure is: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Change
Treatment:	
When should treatment be administered at school? (e.g. 10am and 2pm every day)	
End date for school administration of this treatment:	
Additional instructions or emergency procedures:	

Has the student's Universal Health Certificate form been updated to reflect new health concerns? ☐ Yes ☐ No

Licensed Health Care Provider Office Stamp

Provider Name:

Provider Phone:

Provider Signature:

Date:

OFFICE USE ONLY | Medication and/or treatment plan received by Health Suite Personnel.

Name: _____ Signature: _____ Date: _____



St. Coletta of Greater Washington

Seeing possibilities beyond disabilities

Authorization for Feeding Tube Procedures at School

Healthcare provider: Please complete and sign the following order.

Student name: _____ Date of birth: ____/____/____

Student diagnosis: _____

Student address: _____

Student telephone number: _____

Please specify which of the following are indicated for this student while at school.

☐ Replace g-tube as needed OR ☐ Do not replace g-tube

Reason for procedure: _____

Precautions, possible adverse reactions: _____

☐ Tube feeding

Formula: _____

Route of administration: _____

Quantity: _____

Time: _____

Delivery (bolus, pump, etc.), given over how many minutes: _____

Flush: _____

Reason for procedure: _____

Precautions, possible adverse reactions: _____

☐ Oral intake (NPO, pureed, thickened liquids, etc.): _____

Date of authorization: ____/____/____

Order expiration date: ____/____/____

Healthcare provider name: _____

Healthcare provider telephone number: _____

Healthcare provider signature: _____ Date: ____/____/____

Parent/guardian: Please complete and sign the following.

I hereby authorize the school nurse/trained school personnel to perform enteral tube feeding procedures as directed by the physician for my child (insert name here) _____. I have read and agree to comply with the District of Columbia School Health Program regulations regarding authorization for specific health assistance in school.

Parent/guardian name: _____

Parent/guardian signature: _____ Date: ____/____/____

School nurse signature: _____ Date: ____/____/____



All students attending school in DC must present proof of appropriately spaced immunizations by the first day of school. Please complete and return your student's school health forms including the [Universal Health Certificate](#) and [Oral Health Assessment Form](#).
ALL STUDENTS SHOULD RECEIVE AN ANNUAL FLU VACCINE

My student should receive these vaccine doses upon school enrollment*



Preschool to Head Start

The following vaccines are typically received before the age of 2:

- 4 doses of Diphtheria/Tetanus/Pertussis (DTaP)
- 3 doses of Polio
- 1 dose Varicella if no history of chickenpox
- 1 dose of Measles/Mumps/Rubella (MMR)
- 3 doses of Hepatitis B
- 2 doses of Hepatitis A
- 3 or 4 doses depending on the brand of Hib (Haemophilus Influenza Type B)
- 4 doses of PCV (Pneumococcal)



Kindergarten to 1st Grade

Additional doses needed after receiving the vaccines listed above:

- 1 dose of Diphtheria/Tetanus/Pertussis (DTaP)
- 1 dose of Polio
- 1 dose of Varicella if no history of chickenpox
- 1 dose of Measles/Mumps/Rubella (MMR)



2nd Grade to 5th Grade

Consult your doctor and make sure your student received all the vaccines listed above!



6th Grade to High School

Additional vaccines needed after receiving all vaccine doses listed above:

- 1 dose of Tdap
- 2 doses of Meningococcal (Men ACWY)
- 2 or 3 doses of Human Papillomavirus Vaccine (HPV)

*The spacing and number of doses required may vary. Please contact your child's health care provider. For additional information, contact DC Health's Immunization Program at (202) 576-7130.

DC HEALTH Universal Health Certificate

Use this form to report your child's physical health to their school/child care facility. This is required by DC Official Code §38-602. Have a licensed medical professional complete part 2 - 4. Access health insurance programs at <https://dchealthlink.com>. You may contact the Health Suite Personnel through the main office at your child's school.

Part 1: Child Personal Information | To be completed by parent/guardian.

Child Last Name:		Child First Name:		Date of Birth:			
School or Child Care Facility Name:			Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Non-Binary	
Home Address:		Apt:	City:	State:	ZIP:		
Ethnicity: (check all that apply)		<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Non-Hispanic/Non-Latino	<input type="checkbox"/> Other	<input type="checkbox"/> Prefer not to answer		
Race: (check all that apply)		<input type="checkbox"/> American Indian/ Alaska Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian/ Pacific Islander	<input type="checkbox"/> Black/African American	<input type="checkbox"/> White	<input type="checkbox"/> Prefer not to answer
Parent/Guardian Name:				Parent/Guardian Phone:			
Emergency Contact Name:				Emergency Contact Phone:			
Insurance Type:		<input type="checkbox"/> Medicaid	<input type="checkbox"/> Private	<input type="checkbox"/> None	Insurance Name/ID #:		
Has the child seen a dentist/dental provider within the last year?				<input type="checkbox"/> Yes	<input type="checkbox"/> No		

I give permission to the signing health examiner/facility to share the health information on this form with my child's school, child care, camp, or appropriate DC Government agency. In addition, I hereby acknowledge and agree that the District, the school, its employees and agents shall be immune from civil liability for acts or omissions under DC Law 17-107, except for criminal acts, intentional wrongdoing, gross negligence, or willful misconduct. I understand that this form should be completed and returned to my child's school every year.

Parent/Guardian Signature: _____ Date: _____

Part 2: Child's Health History, Exam, and Recommendations | To be completed by licensed health care provider.

Date of Health Exam:	BP:	<input type="checkbox"/> NML	Weight:	<input type="checkbox"/> LB	Height:	<input type="checkbox"/> IN	BMI:	BMI Percentile:
	____/____	<input type="checkbox"/> ABNL		<input type="checkbox"/> KG		<input type="checkbox"/> CM		
Vision Screening:		Left eye: 20/____ Right eye: 20/____		<input type="checkbox"/> Corrected	<input type="checkbox"/> Wears glasses		<input type="checkbox"/> Referred	<input type="checkbox"/> Not tested
				<input type="checkbox"/> Uncorrected				
Hearing Screening: (check all that apply)		<input type="checkbox"/> Pass	<input type="checkbox"/> Fail	<input type="checkbox"/> Not tested	<input type="checkbox"/> Uses Device	<input type="checkbox"/> Referred		

Does the child have any of the following health concerns? (check all that apply and provide details below)

- | | | |
|---|--|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Failure to thrive | <input type="checkbox"/> Sickle cell |
| <input type="checkbox"/> Autism | <input type="checkbox"/> Heart failure | <input type="checkbox"/> Significant food/medication/environmental allergies that may require emergency medical care.
<i>Details provided below.</i> |
| <input type="checkbox"/> Behavioral | <input type="checkbox"/> Kidney failure | <input type="checkbox"/> Long-term medications, over-the-counter-drugs (OTC) or special care requirements.
<i>Details provided below.</i> |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Language/Speech | <input type="checkbox"/> Significant health history, condition, communicable illness, or restrictions.
<i>Details provided below.</i> |
| <input type="checkbox"/> Cerebral palsy | <input type="checkbox"/> Obesity | |
| <input type="checkbox"/> Developmental | <input type="checkbox"/> Scoliosis | |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Seizures | <input type="checkbox"/> Other: _____ |

Provide details. If the child has Rx/treatment, please attach a complete Medication/Medical Treatment Plan form; and if the child was referred, please note. _____

TB Assessment | Positive TST should be referred to Primary Care Physician for evaluation. For questions call T.B. Control at 202-698-4040.

What is the child's risk level for TB?	Skin Test Date:		Quantiferon Test Date:			
	Skin Test Results:		Positive, CXR Negative		<input type="checkbox"/> Positive, CXR Positive	<input type="checkbox"/> Positive, Treated
	Quantiferon Results:		Negative		<input type="checkbox"/> Positive	<input type="checkbox"/> Positive, Treated

Additional notes on TB test:

Lead Exposure Risk Screening | All lead levels must be reported to DC Childhood Lead Poisoning Prevention. Call 202-654-6002 or fax 202-535-2607.

ONLY FOR CHILDREN UNDER AGE 6 YEARS Every child must have 2 lead tests by age 2	1 st Test Date:	1 st Result:	<input type="checkbox"/> Normal	<input type="checkbox"/> Abnormal, Developmental Screening Date:	1 st Serum/Finger Stick Lead Level:
	2 nd Test Date:	2 nd Result:	<input type="checkbox"/> Normal	<input type="checkbox"/> Abnormal, Developmental Screening Date:	2 nd Serum/Finger Stick Lead Level:
HGB/HCT Test Date:			HGB/HCT Result:		

Part 3: Immunization Information | To be completed by licensed health care provider.

Child Last Name:					Child First Name:			Date of Birth:		
Immunizations	In the boxes below, provide the dates of immunization (MM/DD/YY)									
Diphtheria, Tetanus, Pertussis (DTP, DTaP)	1	2	3	4	5					
DT (<7 yrs.)/ Td (>7 yrs.)	1	2	3	4	5					
Tdap Booster	1									
Haemophilus influenza Type b (Hib)	1	2	3	4						
Hepatitis B (HepB)	1	2	3	4						
Polio (IPV, OPV)	1	2	3	4						
Measles, Mumps, Rubella (MMR)	1	2								
Measles	1	2								
Mumps	1	2								
Rubella	1	2								
Varicella	1	2	Child had Chicken Pox (month & year): Verified by: _____ (name & title)							
Pneumococcal Conjugate	1	2	3	4						
Hepatitis A (HepA) (Born on or after 01/01/2005)	1	2								
Meningococcal Vaccine	1	2								
Human Papillomavirus (HPV)	1	2	3							
Influenza (Recommended)	1	2	3	4	5	6	7			
Rotavirus (Recommended)	1	2	3							
Other	1	2	3	4	5	6	7			

☐ The child is **behind on immunizations** and there is a plan in place to get him/her back on schedule. **Next appointment is:** _____

Medical Exemption (if applicable)

I certify that the above child has a valid medical contraindication(s) to being immunized at the time against:

☐ Diphtheria ☐ Tetanus ☐ Pertussis ☐ Hib ☐ HepB ☐ Polio ☐ Measles
☐ Mumps ☐ Rubella ☐ Varicella ☐ Pneumococcal ☐ HepA ☐ Meningococcal ☐ HPV

Is this medical contraindication permanent or temporary? ☐ Permanent ☐ Temporary until: _____ (date)

Alternative Proof of Immunity (if applicable)

I certify that the above child has laboratory evidence of immunity to the following and I've attached a copy of the titer results.

☐ Diphtheria ☐ Tetanus ☐ Pertussis ☐ Hib ☐ HepB ☐ Polio ☐ Measles
☐ Mumps ☐ Rubella ☐ Varicella ☐ Pneumococcal ☐ HepA ☐ Meningococcal ☐ HPV

Part 4: Licensed Health Practitioner's Certifications | To be completed by licensed health care provider.

This child has been appropriately examined and health history reviewed and recorded in accordance with the items specified on this form. At the time of the exam, this child is **in satisfactory health** to participate in all school, camp, or child care activities except as noted on page one. ☐ No ☐ Yes

This child is cleared for **competitive sports**. ☐ N/A ☐ No ☐ Yes ☐ Yes, pending additional clearance from: _____

I hereby certify that I examined this child and the information recorded here was determined as a result of the examination.

Licensed Health Care Provider Office Stamp

Provider Name:

Provider Phone:

Provider Signature:

Date:

OFFICE USE ONLY | Universal Health Certificate received by School Official and Health Suite Personnel.

School Official Name:

Signature:

Date:

Health Suite Personnel Name:

Signature:

Date:

Oral Health Assessment Form

For all students aged 3 years and older, use this form to report their oral health status to their school/child care facility.

Instructions

- Complete Part 1 below. Take this form to the student's dental provider. The dental provider should complete Part 2.
- Return fully completed and signed form to the student's school/child care facility.

Part 1: Student Information (To be completed by parent/guardian)

First Name _____ Last Name _____ Middle Initial _____

School or Child Care Facility Name _____

Date of Birth (MMDDYYYY)

--	--	--	--	--	--	--	--

Home Zip Code

--	--	--	--	--	--

School Grade	Day- care	PreK3	PreK4	K	1	2	3	4	5	6	7	8	9	10	11	12	Adult Ed.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: Student's Oral Health Status (To be completed by the dental provider)

	Yes	No		
Q1 Does the patient have at least one tooth with apparent cavitation (untreated caries)? This does NOT include stained pit or fissure that has no apparent breakdown of enamel structure or non-cavitated demineralized lesions (i.e. white spots).	<input type="checkbox"/>	<input type="checkbox"/>		
Q2 Does the patient have at least one treated carious tooth ? This includes any tooth with amalgam, composite, temporary restorations, or crowns as a result of dental caries treatment.	<input type="checkbox"/>	<input type="checkbox"/>		
Q3 Does the patient have at least one permanent molar tooth with a partially or fully retained sealant ?	<input type="checkbox"/>	<input type="checkbox"/>		
Q4 Does the patient have untreated caries or other oral health problems requiring care before his/her routine check-up? (Early care need)	<input type="checkbox"/>	<input type="checkbox"/>		
Q5 Does the patient have pain, abscess, or swelling? (Urgent care need)	<input type="checkbox"/>	<input type="checkbox"/>		
Q6 How many primary teeth in the patient's mouth are affected by caries that are either untreated or treated with fillings/crowns ?	<div>Total Number</div> <table border="1"> <tr> <td></td><td></td> </tr> </table>			
Q7 How many permanent teeth in the patient's mouth are affected by caries that are either untreated, treated with fillings/crowns, or extracted due to caries ?	<div>Total Number</div> <table border="1"> <tr> <td></td><td></td> </tr> </table>			
Q8 What type of dental insurance does the patient have?	<div>Medicaid</div> <input type="checkbox"/>	<div>Private Insurance</div> <input type="checkbox"/>		
	<div>Other</div> <input type="checkbox"/>	<div>None</div> <input type="checkbox"/>		

Dental Provider Name _____

Dental Office Stamp

Dental Provider Signature _____

Dental Examination Date _____

This form replaces the previous version of the DC Oral Health Assessment Form used for entry into DC Schools, all Head Start programs, and child care centers. This form is approved by the DC Health and is a confidential document. Confidentiality is adherent to the Health Insurance Portability and Accountability Act of 1996 (HIPPA) for the health providers and the Family Education Right and Privacy Act (FERPA) for the DC Schools and other providers.

Medication and Medical Procedure Treatment Plan

Use this form to detail your student's medication and/or medical procedure plan to be administered at their school and return it to the Health Suite Personnel. The Health Suite Personnel will contact you to arrange medication/medical supply drop-off. For multiple needs, complete multiple sheets.

Part 1: Student and Parent/Caretaker Information | To be completed by student's parent/caretaker.

Student First Name:	Student Last Name:	Grade:
School Facility Name:	Student DOB:	
Parent First Name:	Parent Last Name:	
Parent Email:	Parent Phone:	

I hereby request and authorize Health Suite Personnel to administer prescribed medication/treatment as directed by the licensed health care providers to the student named in Part I. I understand that:

- I am responsible for bringing the necessary medications/medical supplies to school for the Health Suite Personnel.
- All medication/medical supplies will be stored in a secured area of the school. Health Suite Personnel will not assume any responsibility for possible loss of student medication/medical supplies.
- Within one week of the expiration of the medication/medical supplies and/or within one week of the end of the school year, I must collect what is unused or it will be destroyed.
- The School or Health Suite Personnel will not assume any responsibility for unauthorized medication/treatments that the student gives to himself/herself.
- If any changes occur in my student's health or treatment plan, I will immediately notify the school and health suite personnel annually as required by DC Official Code § 38-651.03.
- Treatment plans and medication plans must be updated annually and when there is any change in the student's health or treatment requirements.
- I hereby acknowledge that the District, and its schools, employees, and agents shall be immune from civil liability for acts of omissions under DC Law 17-107 except for criminal acts, intentional wrongdoing, gross negligence, or willful misconduct.

Parent/Caretaker Signature: _____ Date: _____

Part 2a: Student's Medication Plan | To be completed by licensed health care provider.

Diagnosis:	End date for school administration of this medication:
This medication is: <input type="checkbox"/> New; the first dose was given at home on date and time: _____ <input type="checkbox"/> Renewal <input type="checkbox"/> Change	
Is this a standing order? <input type="checkbox"/> Yes, epinephrine auto injector 0.15 mg: <i>refer to anaphylaxis plan</i> <input type="checkbox"/> Yes, other: _____	
<input type="checkbox"/> Yes, epinephrine auto injector 0.3 mg: <i>refer to anaphylaxis plan</i> <input type="checkbox"/> No	
<input type="checkbox"/> Yes, albuterol sulfate 90 mcg/inh: <i>refer to asthma action plan</i>	
Name and strength of medication:	Dose/route:
Time and Frequency at School (e.g. 10am and 2pm every day; as needed if standing order)	
If a reaction can be expected, please describe:	

Additional instructions or emergency procedures:

Part 2b: Student's Medical Procedure Treatment Plan | To be completed by licensed health care provider.

Diagnosis:	This procedure is: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Change
Treatment:	
When should treatment be administered at school? (e.g. 10am and 2pm every day)	
End date for school administration of this treatment:	
Additional instructions or emergency procedures:	

Has the student's Universal Health Certificate form been updated to reflect new health concerns? ☐ Yes ☐ No

Licensed Health Care Provider Office Stamp

Provider Name:

Provider Phone:

Provider Signature:

Date:

OFFICE USE ONLY | Medication and/or treatment plan received by Health Suite Personnel.

Name: _____ Signature: _____ Date: _____



St. Coletta of Greater Washington

Seeing possibilities beyond disabilities

Authorization for Feeding Tube Procedures at School

Healthcare provider: Please complete and sign the following order.

Student name: _____ Date of birth: ____/____/____

Student diagnosis: _____

Student address: _____

Student telephone number: _____

Please specify which of the following are indicated for this student while at school.

☐ Replace g-tube as needed OR ☐ Do not replace g-tube

Reason for procedure: _____

Precautions, possible adverse reactions: _____

☐ Tube feeding

Formula: _____

Route of administration: _____

Quantity: _____

Time: _____

Delivery (bolus, pump, etc.), given over how many minutes: _____

Flush: _____

Reason for procedure: _____

Precautions, possible adverse reactions: _____

☐ Oral intake (NPO, pureed, thickened liquids, etc.): _____

Date of authorization: ____/____/____

Order expiration date: ____/____/____

Healthcare provider name: _____

Healthcare provider telephone number: _____

Healthcare provider signature: _____ Date: ____/____/____

Parent/guardian: Please complete and sign the following.

I hereby authorize the school nurse/trained school personnel to perform enteral tube feeding procedures as directed by the physician for my child (insert name here) _____. I have read and agree to comply with the District of Columbia School Health Program regulations regarding authorization for specific health assistance in school.

Parent/guardian name: _____

Parent/guardian signature: _____ Date: ____/____/____

School nurse signature: _____ Date: ____/____/____



St. Coletta School
Parent Handbook and Policies
(for review)

Parent Handbook

2022-2023



St. Coletta School

1901 Independence Avenue, SE
Washington, DC 20003

TABLE OF CONTENTS

School Calendar.....	3-4
The People of St. Coletta	5
ANSWERS TO FREQUENTLY ASKED QUESTIONS	6
Tell me about St. Coletta.....	6
What is the history of St. Coletta?	6
What are the facilities like and what special equipment is available?	6-7
What does a typical classroom look like?	7
What is the tuition at St. Coletta? Are there any other fees I'll need to pay?	7
What services does St. Coletta offer?	7-8
How is my child's IEP developed and who participates at the meeting?	8
How is my local school jurisdiction involved in my child's education?	8
How do we know our child is progressing? Will my child receive grades?	8
Will my child have to participate in State-wide testing?	8
If I am dissatisfied with some part of my child's IEP what can do I?	9
What will my child receive when he or she graduates?	9
How is the St. Coletta program structured?.....	9
How is St. Coletta handling educational services in light of COVID-19?	9
How will I know what is going on in my child's classroom?	9
Am I allowed to visit my child's classroom?	9
What else is provided; will my child participate in community-based activities?	9-10
How is my child transported to school and community-based instruction outings?	10
What is the length of the school day?	10
What if I have to pick-up or drop off my child?	10
Do you offer before and after school care?	10
What are the policies regarding attendance?	10-11
What are the policies regarding truancy?	11-12
What is the school's policy on bullying?	12
What is the school's policy on reporting abuse/neglect?	12
Does my child need a physical exam before he or she can attend school?	12
What happens in the event of inclement weather?	13
My child takes medication. How are medications administered?	13
Are meals provided?	13
How is student behavior managed?	13-14
What is St. Coletta's policy on student suspension?	14-15
My child has difficult behaviors. Can they be discharged because of them?	15
What is the school's weapons/drug policy?	15
Does the school have an emergency preparedness plan?	15-16
Why can't I send my child to school when he is sick?	16
Can teachers help me with child care at home?	16
Who is allowed to see my child's records?	16
What about photographs?	17
What is the school's policy on cell phones and electronic devices?	17
Can I learn about the qualifications of my child's teacher?	17
What is the State Education Agency Complaint Resolution Policy?	17
Is there a dress code?	17
Can my child participate in Special Olympics	18
More questions?	18



ST. COLETTA SCHOOL CALENDAR 2022-2023 (TENTATIVE)

SCHOOL INSTRUCTIONAL HOURS: MON/TUES/THURS/FRI (8:30AM TO 3PM); WED (8:30AM TO 12:30PM)*

*AFTER CARE IS NOT AVAILABLE THROUGH THE SCHOOL ON EARLY DISMISSAL DAYS

AUGUST 2022

Wednesday, August 17: New Hire Orientation Begins

Wednesday, August 24: Returning Staff Orientation

Monday, August 29: First Day of School

SEPTEMBER 2022

Monday, September 5: Labor Day (School Closed)

Wednesday, September 21: Staff Development Day (No School for Students)

OCTOBER 2022

Monday, October 10: Indigenous Peoples Day (School Closed)

Wednesday, October 26: Staff Development Day (No School for Students)

NOVEMBER 2022

Friday, November 11: Veterans Day (School Closed)

Wednesday, November 23 – Friday, November 25: Thanksgiving Holiday (School Closed)

DECEMBER 2022

Wednesday, December 21 – Monday, January 2: Winter Break (School Closed)

JANUARY 2023

Tuesday, January 3: Students/Staff Return from Winter Break

Monday, January 16: Martin Luther King Jr. Day (School Closed)

FEBRUARY 2023

Wednesday, February 8: Staff Development Day (No School for Students)

Monday, February 20: Presidents Day (School Closed)

MARCH 2023

Wednesday, March 15: Staff Development Day (No School for Students)

SY 22-23 Calendar Continued

APRIL 2023

Monday April 17 – Friday, April 21: Spring Break (School Closed)

MAY 2023

Wednesday, May 17: Staff Development Day (No School for Students)

Friday, May 26: Half Day Dismissal for Students

Monday, May 29: Memorial Day (School Closed)

JUNE 2023

Monday, June 19: Juneteenth (School Closed)

JULY 2023

Monday, July 3 and Tuesday, July 4: Independence Day (School Closed)

Friday, July 28: Last Day for Students (1/2 Day Dismissal for Students)

In the event of school closure:

In the event virtual instruction cannot be delivered on days impacted by inclement weather or other emergencies, the school may use Staff Development Days, scheduled breaks, or federal holidays to make up instructional time as needed.



Important People of St. Coletta of Greater Washington

Main: (202) 350-8680

Fax: (202) 350-8699

President, St. Coletta Board of Trustees
Chief Executive Officer
President, St. Coletta Special Education PCS
Board of Trustees
Charter Board Parent Representatives

Chief Financial Officer
Chief Operating Officer
Chief Development Director

Principal (ext. 1051)
Assistant Principal- Houses 1 and 2 (ext. 1039)
H1 Administrative House Assistant
H2 Administrative House Assistant (Lead AHA)

Assistant Principal- Houses 3, 4, and 5 (ext. 1031)
H3 Administrative House Assistant
H4 Administrative House Assistant
H5 Administrative House Assistant

Behavior Department

Director of Therapeutic Services (ext. 1038)
Therapy Leads

Vocational Coordinator (ext. 1074)
*also serves as Title IX Coordinator

IEP and Assessment Coordinator (ext. 1004)
Special Education Coordinators

Director of Admissions (ext. 1002)
Attendance Coordinator
Transportation Coordinator
Front Desk Manager

Sue Goodhart (ext. 1001)
Michael Rodrigues (ext. 1001)
Peggy O'Brien (ext. 1001)

Josh Lewis, Carla Ware-Easterling (ext. 1001)

Michael Olivarri (ext. 1001)
Kaiheem Mason (ext. 1001)
Rebecca Hill (ext. 1001)

Amy Warden
Shannon Ball
Shanae Carter (ext. 1012)
April Adams Fowler (ext. 1017)

Dave Knight
Julian Dixon (ext. 1020)
Sharmarte Banks (ext. 1075)
Tashana Rose (ext. 1079)

Ester Pline (ext. 1122)
Susan Kloha (ext. 1059)

Loni Licuanan
Katherine Chappell (ext. 1073)- OT/PT
Jessica Venglarcik (ext. 1073)- Social Work
Amanda Soper (ext. 1071)- Speech/AT
Jehan Jones (ext. 1022- Nursing Dept)

Lucas LaFaver

Robert Blessing (x1012)
Krista Dews (ext. 1017)
Devin McGrath (ext. 1020)
Nicole Aaron (ext. 1075)
Lisa Melbourne-Smith (ext. 1079)

Catherine Decker
Judyvette Acevedo (ext. 1005)
Shandell Matthews (ext. 1024)
Gwen Green (ext. 1000)

IMPORTANT CURRENT PHONE NUMBERS

TRANSPORTATION SERVICES

D.C. Transportation	202-576-5000
Alexandria City Transportation	703-461-4169
Montgomery County Transportation.	301-840-8130
Prince George's County Transportation.	301-952-6572/6579
Fairfax County Transportation	703-446-2031

ANSWERS TO FREQUENTLY ASKED QUESTIONS

Here are some questions that have been raised by parents over the years. We think you will find the answers helpful. Of course, your own questions are always welcome as we work together to serve your child.

Tell me about the school my child is now attending.

St. Coletta of Greater Washington is an independent, non-sectarian, non-profit organization whose mission is to serve children and adults with intellectual disabilities. Individuals may also have diagnoses of autism and other primary or secondary disabilities. At St. Coletta, we believe in the immeasurable value of the human spirit and in the right of each individual to live as full and independent a life as possible. We respect the dignity of all persons entrusted to our care and our goal is to serve them in an atmosphere that encourages their talents, celebrates their successes and builds their self-esteem. At St. Coletta, each person is recognized for personal strengths rather than by needs and is evaluated by their potential rather than by our expectations. Our goal is to give individuals with intellectual disabilities every chance to show the world what they can do.

St. Coletta, an 11-month program including six weeks of Extended School Year, focuses on the individual and what they need to learn in order to be successful in school and in the wider community. We believe that individuals learn best through hands-on, exploratory experiences. Teachers and therapists plan an integrated theme-based approach and develop a series of learning experiences that allow children to explore a subject while working on skills and competencies spelled out in their Individualized Education Program (IEP). St. Coletta is an ungraded, full-time special education program serving students aged 3 to 22. The basic program includes: functional academics (linked to Common Core Standards), skills of daily living, community-based instruction, adaptive physical education, arts education, computer skills and vocational training.

What is the history of St. Coletta School?

St. Coletta was founded in 1959, in Arlington, Virginia, by Joe and Hazel Hagarty. Their daughter had Down Syndrome, and they were not satisfied with programs offered by the local public schools and were unwilling to send their daughter to an institution. Before acquiring the new DC site in September, 2006, to open the St. Coletta Special Education Public Charter School, the school occupied space at St. Coletta School on Peyton Street in Alexandria, St. Charles School in the Clarendon Presbyterian Church, and at Marymount University.

What are the facilities like and what special equipment is available?

St. Coletta School is located in a beautiful, state-of-the-art facility, which occupies 99,000 square feet at 19th Street and Independence Avenue, SE, in the District. Students have access to a variety of technology including computers, touchscreen monitors, and tablet devices (e.g., iPads). Assistive technology and adaptive devices are available to all students with a need for such devices. There are studios for art, music, physical therapy, and horticulture. A sensory room and hydrotherapy pool are available as per student need. A full-sized gymnasium and outdoor basketball court are available for students, as well as an adapted playground, an amphitheater for outdoor arts and a school garden.

Kitchen facilities are included in each house. Outdoor cameras and round-the-clock security are available to ensure the safety of staff and students, and assist in maintaining a secured environment.

What does a typical classroom look like?

At St. Coletta, a typical classroom consists of 9-12 students, a teacher, and paraprofessional staff. Paraprofessional staff support students as specified on IEPs.

What is the tuition at St. Coletta? Are there any other fees I'll need to pay?

All students at St. Coletta are publicly funded. Periodically, the school may request money for special activities; however, no student is ever denied an opportunity to participate in an activity due to lack of funds. St. Coletta does not accept private pay tuition.

What services does St. Coletta School offer?

The program of services is developed, and is always evolving, as an extension of the IEP for each student. The program is planned with a vision that St. Coletta graduates are happy, productive individuals living as independently as possible.

BASIC PROGRAM

The goal of the basic educational program is to help students achieve their (IEP) goals, increase their independence, utilize their community, express themselves in a variety of ways, promote their health and well-being, and encourage their peer relationships. The basic program can include:

Functional Academics	Daily Living Skills	Behavior Support Services
Community-Based Instruction	Adaptive Physical Education	Computer/Keyboard Skills
Music and Art Classes	Hydrotherapy	Horticulture

SPEECH/LANGUAGE THERAPY

Speech/language therapy is provided to the students as indicated on their IEPs. Speech/language therapy focuses on providing each student with a functional system of communication using speech, sign, picture symbols, assistive devices, or a combination of these so that the student can express their feelings, wants, and needs, as well as participate in their educational program.

OCCUPATIONAL AND PHYSICAL THERAPIES

Occupational and/or physical therapy is provided to students as indicated on their IEPs. The therapists work with the classroom teachers, the PE teacher and the vocational staff on a regular basis. The goal of physical and/or occupational therapy is to help the student access the educational environment. The physical therapist focuses on improving gross motor skills, balance, and range of motion, and the occupational therapist focuses on improving fine motor, eye-hand coordination and management of the sensory environment, so that the student is better able to perform functional academics and the tasks of daily living, hands-on classroom projects, and eventually vocational skills, as possible.

COUNSELING

Counseling is provided to students as indicated on their IEPs. Students who require counseling may receive these services at St. Coletta School. Counseling focuses on helping students improve their social-emotional skills and improve peer interactions within their educational environment.

VOCATIONAL PROGRAM

The Individuals with Disabilities Education Improvement Act (IDEIA) regulations require that all persons with disabilities age fourteen and older receive transitional and vocational services. All students that are DC residents begin transition planning at age twelve. To this end, St. Coletta provides pre-vocational skills and career-based training preparation. The goal of the career-based program is to help students learn about the world of work and provide them with the skills and support to make a successful transition to employment, supported employment or an appropriate post-secondary program, upon graduation. In order to provide guidance and instruction, any of the

following staff may accompany students into the community: teachers, therapists, and paraprofessionals (job coaches and teacher assistants). In addition, if a student has a dedicated aide, an aide will accompany them into the community.

BEHAVIOR SUPPORT SERVICES

Our Behavior Team provides positive behavior support strategies designed to help students with challenging behaviors have a safe and successful experience at school. The team, made up of Board Certified Behavior Analysts (BCBAs), Board Certified Assistant Behavior Analysts (BCaBA), and Registered Behavior Technicians (RBTs), conduct Functional Behavior Assessments and from them, develop Positive Behavior Support Plans designed to teach students appropriate and effective alternatives to behaviors of concern. Through the use of its Positive Behavior Training Suite, students may receive additional instructional support through individual work systems focusing on specific IEP objectives which employ the principles of TEACCH and the fundamentals of Applied Behavior Analysis. These systems can then be generalized to the classroom or other settings to further support student instruction.

ASSISTIVE TECHNOLOGY

St. Coletta believes that each student has the right to assistive technology devices that may remove a barrier to learning and increase access to the educational curriculum and/or educational environment. The Multidisciplinary Team will work together to make data-driven decisions to help with the selection of appropriate assistive technology for each individual student. Assistive technology devices may include adaptive equipment, hearing aids, an augmentative communication device, or a computer program or adaptation.

How is my child's IEP developed and who participates at the meeting?

If a child/student enrolls with a valid IEP, an IEP review is held; then at a minimum annually thereafter. We expect the LEA representative, the parent or guardian, the transition-aged student, and the teachers and therapists to be active participants in the scheduling and development of the IEP. Re-evaluation meetings are held at least once every three years by the IEP team to determine whether further individualized testing is indicated for the purpose of determining the student's eligibility for special education services. If a student enters without an initial IEP a parent or school staff can refer the student for an evaluation to determine eligibility for special education services.

Besides participating at the IEP, how will my local school jurisdiction be involved in my child's education?

The administration of St. Coletta keeps in close contact with the school jurisdictions responsible for each student. It is our goal to work as a team in providing the best possible services for our students. St. Coletta staff members inform the jurisdictions of progress or any other matters of concern involving students.

How do we know our child is progressing? Will my child receive grades?

Progress is noted on the IEP goals four times per year, as well as during IEP meetings which at a minimum must be held annually. These progress reports are sent home to parents and guardians. Parents/guardians are encouraged to make appointments at any time of the year to review their child's progress. Parents/Guardians are invited to the school to participate in mid-year parent teacher conferences to discuss your child's progress in more detail. St. Coletta does not use a traditional grading system. Data is maintained for each student, by the classroom teacher, to provide additional documentation of progress.

Will my child have to participate in the State-wide testing initiatives?

Decisions regarding student assessment are part of the IEP process. St. Coletta students often are not able to participate in the general statewide assessment, even with the maximum amount of testing accommodations allowed; thus, students typically participate in an alternate assessment, as prescribed by the jurisdiction, during those grade equivalent years in which students are required to be tested.

If I am dissatisfied with some part of my child's IEP what recourse do I have?

A parent or guardian can ask for a meeting of the Multidisciplinary Team to review the IEP and discuss their child's program at any time during the school year. The goal of the team, including the parent and the student of transition age, is to collaborate to create an educational program which meets the student's needs and provides the student with a free and appropriate public education. If the parent, guardian, or student who is their own guardian, does not agree with the recommendations of the team, the parent, guardian or student can initiate their due process rights and/or notify the local education agent (LEA) representative, as needed. You may call to schedule a meeting with your child's teacher and/or therapist(s) to discuss program concerns at any time.

What will my child receive when he or she graduates from St. Coletta?

Graduating students receive a High School Certificate at a graduation ceremony, if the IEP team has determined that a certificate is indicated. A student may graduate from St. Coletta at the end of the semester or year in which he or she turns twenty-two, depending upon the jurisdiction. Students who are at least eighteen years of age may choose to graduate sooner. Students and families work with appropriate adult agencies from their respective jurisdictions to aid in the transition process and/or identify appropriate programming and/or support for employment after graduation.

How is the St. Coletta program structured?

The St. Coletta program is ungraded and structured by age level. Each age level is a designated house. The upper ages of each designated age level may vary slightly depending on the individual needs of the students. Your child will be assigned a classroom and teacher. The primary contact for day to day communication is the classroom teacher. Teachers are supervised by Assistant Principals. Every house has a Special Education Coordinator who oversees the IEP process.

How is St. Coletta handling education services in light of COVID-19?

St. Coletta worked with the DC Department of Health and other stakeholders to develop an educational plan that meets instructional requirements as well as health regulations. Given the fluidity of the public health pandemic, future changes to guidance could occur and will subsequently be reflected in updates to the school's plan. For specifics related to the precautions currently being taken by the school to prevent the spread of COVID-19, please refer to St. Coletta's Re-Opening plan by visiting our website (www.stcoletta.org) or requesting a copy be mailed/emailed to you. Questions regarding this plan can be directed to a school administrator.

How will I know what is going on in my child's classroom?

Each student will be given a communication book on the first day of school which will go from school to home and back each day. The book provides a means of communication between parents/guardians and teachers. Parents or guardians are asked to read the book daily and either initial the latest entry or enter a comment. The communication book is a valuable aid to the home-school partnership. The books will be collected at the end of the school year and will become part of the student's anecdotal record. In addition, parents receive quarterly newsletters informing them of house activities.

Am I allowed to visit my child's classroom?

The school welcomes scheduled parent/guardian visits. However, to ensure the safety, privacy and well-being of our students we must know who is in the building at all times. All daily visitors must first sign-in at the school's front desk then wait for a school personnel escort before going any other place on school premises. The school may not be able to accommodate unannounced visits.

Note: All visits (including observations of in-person instruction) must be completed in compliance with all local health regulations related to preventing the spread of COVID-19.

Will my child participate in Community-Based Instructional (CBI) activities?

One of the primary components of the St. Coletta program is community-based instruction. Community-based instructional activities include frequent trips to area museums, parks, libraries, restaurants and

other community resources. Generally, community-based instruction is tied directly to the theme or lessons addressed within the classroom to allow for experiential learning to reinforce concepts taught in the classroom. Included in the Back-to-School packet is a Neighborhood Community-Based Instruction (CBI) Permission Form. This form is intended for a select group of commonly visited sites that are a regular part of the day-to-day school programming. For any other CBI outings, a separate permission form will be sent home and must be signed and returned to the teacher in order for the student to participate in that CBI. If parents/guardians do not sign the CBI form, their child will not be included on the outing. Verbal permission, for the most part, will not be accepted unless as authorized by an Assistant Principal under special circumstances.

How is my child transported to school and on community-based instruction outings (CBIs)?

Children are transported to and from school by their local public school jurisdiction. Transportation is a related service and must be provided in accordance with the child's IEP. Problems with transportation should be referred to the local jurisdiction, as well as to the school office. In the event that a student is unable to be transported home from school at the end of the day via bus due to illness or unsafe behavior, it is the responsibility of the parent/guardian to provide transportation home for their child in a timely manner.

The school owns passenger vans that may be used to transport students during the school day on CBIs. Only employees on the insurance policy for these vans may drive them. For school-wide trips, St. Coletta usually hires buses. Staff and students frequently utilize the metro and bus systems. Permission slips for community-based instruction will specify travel arrangements and modes of transportation.

What is the length of the school day?

School will be in session from 8:30 a.m. until 3:00 p.m. Monday, Tuesday, Thursday, and Friday. Students will attend according to a half day schedule on Wednesday (8:30am to 12:30pm). Students not being transported by bus are expected to be picked-up from the school no later than 3:30pm (Monday, Tuesday, Thursday, Friday) and 1:00pm on half day dismissals (Wednesdays or other designated half day dismissal days).

What if I have to pick-up or drop off my child at school?

If you bring your child to school, you must come in with your child and sign them in via the front desk after parking in the school's lot. Visitors may not park along Independence Avenue. Those dropping students off are asked to remain with their student in the lobby area until a staff is available to escort the student to class. Students with a fever or presenting symptoms of illness may not be permitted to attend class in-person until cleared by a health provider.

Parents must also sign students out at the school's front desk when picking students up from school. If you are picking up your child early or have pre-planned appointments, parents/guardians are expected to notify the Front Desk staff and child's teacher by 2:00 p.m.

Do you offer before and after school care?

There is no before school care or after care available. Parents may drop off students beginning at 8 a.m. and may pick students up beginning at 3 p.m. Monday, Tuesday, Thursday, and Friday and at 12:30pm on Wednesdays.

What are the policies regarding attendance?

Regular attendance is critical to ensure that students have every opportunity to progress academically. St. Coletta's school day begins promptly at 8:30 a.m. Students who arrive after 8:30 a.m. are documented as tardy (excused or unexcused) and, currently, students must attend for 80% of the school day to be considered "present."

Parents are responsible for communicating their child's absence to the school. Place a call to our student absence line at: (202)350-8680ext. 1101 or select option #3 when prompted. If the school does not receive a call from a parent/guardian, our attendance manager will call home to inquire as to the reason for the student's absence from school. **A written note by the parent/guardian must be received by the school within 5 days upon the student's return to school, as per DC regulations.** If a student is absent for 3 consecutive days or 10 cumulative days, further documentation, from a doctor or other staff from an agency or organization, may be requested in order to excuse the absence(s). At 4 unexcused absences, the school social worker calls the home to discuss attendance regulations and inform parent of accrued absences.

The reason for each absence is recorded. Valid excuses for absences include: illness (a doctor's note may be required), death in a student's family, observance of a religious holiday, required court appearances, lawful suspension or exclusion from school by school authorities, medical or dental appointments, and other absences approved in advance by the principal upon the written request of a parent or guardian. Any absence that does not meet the criteria of an excused absence or fails to satisfy the documentation requirement of an excused absence within the allowable timeframe will be classified as an unexcused absence. If a student or parent anticipates an absence not covered by the excused absences listed above, they may submit a request for an excused absence due to a special circumstance to the school principal.

Withdrawal or disenrollment will be considered for students with a history of non-attendance and/or disengagement. Disengagement includes extended absence from school without communication/notification/documentation as well failure to complete required paperwork (such as residency verification). Disenrollment will only occur once the school team has made sufficient attempts to reengage the family, obtain documentation supporting extended absences, and provided notice of withdrawal by way of a Prior Written Notice.

What are the policies regarding truancy?

District of Columbia Students

DC's Compulsory Education and School Attendance law requires youth ages 5 to 17 to be in school. Current DC regulations stipulate that in order for a student to be marked present for the school day, he or she must be present for at least 80% of the day. Students who are tardy or leave early for more than 20% of the day will be counted as absent.

If a student reaches 3 unexcused absences, a letter is sent home alerting the parent of attendance concerns. If a student accrues 5 unexcused absences an attendance conference will be scheduled with the parent and school social worker. The purpose of the conference will be to **review educational and attendance concerns, develop attendance intervention strategies, and identify local community resources to improve school attendance. If a student accrues 10 unexcused absences, a report of educational neglect will be made to CFSA, as required per DC regulations.** When a student accrues 15 unexcused absences, a referral will be made to Court Services Division of the Family Court and to the Juvenile Student Division of OAG.

Further information may be found at:

https://dcps.dc.gov/sites/default/files/dc/sites/dcps/page_content/attachments/FINAL%20DCPS%20Attendance%20and%20Truancy%20Policy%2008-21-18.pdf

<http://www.lexisnexis.com/hottopics/dccode/>

<http://www.dcregs.org/Gateway/ChapterHome.aspx?ChapterID=230295>

Maryland Students

The *Code of Maryland Regulations (COMAR)* requires students ages 5 to 16 to attend school (some jurisdictions specify 18 years). If a student has 3 unexcused absences, a letter will be sent home alerting the parent of attendance concerns. If a student accrues 5 unexcused absences, an attendance conference will be scheduled with the parent and school social worker. Students who are habitually

truant, or miss more than 20% of days within a school year, will be referred to the Department of Juvenile Services.

Further information may be found at:

<http://www.oag.state.md.us/Opinions/2010/95oag191.pdf>

Virginia Students

The Commonwealth of Virginia's Compulsory Attendance Law, Code of Virginia, 22.1-254 requires students ages 5 to 18 to attend school. If a student has 3 unexcused absences, a letter will be sent home alerting the parent of attendance concerns. If a student accrues 5 unexcused absences, an attendance conference will be scheduled with the parent and school social worker. If attendance does not improve, the family will be referred to Juvenile Court.

Further information may be found at:

<https://law.lis.virginia.gov/vacode/title22.1/chapter14/section22.1-254/>

<https://www.fcps.edu/about-fcps/policies-regulations-and-notice/attendance-policies>

<https://www.acps.k12.va.us/site/handlers/filedownload.ashx?moduleinstanceid=4160&dataid=4258&FileName=13-Attendance%20Policy.pdf>

What is the school's policy on bullying?

St. Coletta is committed to creating a safe learning environment for all students. It is the policy of St. Coletta to prohibit bullying, harassment or intimidation of any person on school property, school-sponsored functions, while in transit to school or school-sponsored functions, or by the use of electronic technology. Students who are found in violation of St. Coletta's bullying policy will be subject to consequences that are consistent with the school's bullying and discipline policy.

What is the school's policy on reporting suspected abuse or neglect?

In accordance with DC Code (§ 4-1321.02) and St. Coletta policy, all school staff are considered mandated reporters. As such, any person who knows or has cause to suspect that a child has been or is in immediate danger of being abused or neglected must immediately report it to School Administrators. Training on these requirements is reviewed with all St. Coletta staff annually.

Should a parent suspect abuse or neglect, they may also contact the Metropolitan Police Department (MPD), Adult Protective Services (APS), or Child Protective Services (CPS) to make a report. CPS can be reached at (202) 671-7233. APS may be reached at (202) 541-3950 and MPD may be reached at (202) 727-9099.

Does my child need a physical exam before he or she can attend the school?

District of Columbia regulations require that a physical and dental exam and a current record of immunization be on file for each student. This means, EACH AND EVERY YEAR, students are required to have a new physical and dental exam. St. Coletta may require more frequent physical exams for children with serious health and medication issues. DC students must comply with OSSE's Immunization Policy in order to attend school in-person. Students without current immunizations will have 20 school days to submit proof of required immunizations once notified by the school of non-compliance. If proof of immunization has not been provided within 20 school days, your child will not be allowed to return to school until documentation of needed immunizations is provided to the school. Each missed school day will be an "unexcused absence" until the proof of immunization is submitted. These absences will be "excused" once the proof of immunization is provided. Information about OSSE immunization policy can be found at the following link:

https://osse.dc.gov/sites/default/files/dc/sites/osse/page_content/attachments/Immunization%20FAQ%20for%20Families_061422_0.pdf

NEW FOR SY 22-23: Any student age 16 or older at the start of the 22-23 school year must have received their primary COVID-19 vaccination series (or be proceeding in accordance with the series) or they will be subject to OSSE's immunization attendance policies. Vaccination for students ages 5 through

15 years is strongly recommended.

https://osse.dc.gov/sites/default/files/dc/sites/osse/page_content/attachments/FINAL_COVID%20Requirements_042722.pdf

What happens in the event of inclement weather or school closures?

During inclement weather days, St. Coletta will notify families of the school's operating status through the school's website, text alerts, social media platforms (Facebook and Twitter), and local news stations. To receive texts from the school, families must first provide the school with a phone number and/or email. Families will then "opt-in" by responding "YES" to a text sent to their mobile device.

MD and VA Students:

Parents should attend to their individual jurisdictional weather-related decisions on closures, delays and early dismissals.

St. Coletta plans to implement distance learning instruction to all students for days in which travel to/from school are impacted by inclement weather. If the school is unable to implement distance learning on these days, the school will make-up instruction on days that were originally scheduled as non-instructional days (e.g. Staff Development Days, breaks).

My child takes medication. How are medications administered?

All medication, both prescription and over-the-counter (Tylenol, cough drops, etc.), must be in the original labeled container accompanied by an Authorization of Administration of Medication form. The form must be signed by the physician and the parent/guardian, and is required for all medicines administered at school. Medicines **cannot be transported to school by the student, nor by the bus driver/aide.** Medications may only be brought by the parent/guardian or sent through the mail. The school needs to know what additional medications are administered in the home, in the event an emergency occurs during school hours. Medication procedures are overseen by the school nurse. Individual medications can be administered by staff that are medication trained. If a student requires a nursing procedure such as g-tube feeding or suctioning, an authorization form is required from the health care provider. In addition, parent/guardian permission is required in writing to apply sunscreen or any other lotion to a child.

Are meals provided?

St. Coletta School stresses healthy meals and snacks. All students receive hot breakfasts and lunches (multiple options are available) which are prepared daily in a USDA-approved kitchen. Students are also provided with snacks on an as needed basis. As all meals and snacks are provided by the school, and since many of our students have specific food allergies, outside food is not permitted. This includes all bottled drinks or packaged snacks. Students on special dietary restrictions must have permission from the school and a doctor's order specifying the nature of the medical necessity in order to bring their own lunches. Student birthdays are celebrated on a monthly basis in their individual houses. Parents will be notified of the date when these celebrations will take place and can provide store-bought items only. St. Coletta does not permit snacks or meals containing peanut products.

How is student behavior managed?

It is the philosophy of St. Coletta School to foster productive student behavior. Toward this goal, staff are expected to provide: clear rules for student conduct, collegiality among staff members, a pervasive caring environment for students, effective instruction, and a focus on providing positive reinforcement and options for students.

Effective methods for responding to disruptive student behavior include:

- Using positive redirection and reinforcement whenever appropriate;
- Developing positive personal relationships with students that indicate high teacher expectations and respect for students;
- Closely monitoring performance and behavior;
- Using brief, non-disruptive interventions;

- Handling conflicts calmly and avoiding engaging in power struggles;
- Clarifying students' choices so that options are clear and students are responsible for the consequences of their choices;
- Using effective listening skills to help students identify problems and gain insight.

When students exhibit serious behavioral difficulties, a Functional Behavior Assessment (FBA) and Positive Behavior Support Plan (PBSP) may need to be developed. St. Coletta School has Board Certified Behavior Analysts (BCBAs) to support this process. The development process should include the multidisciplinary team involved with the student and the following six steps:

- Attempt to determine the function(s) of the behavior through an FBA;
- Focus on one or two specific student behaviors that need to change in order for the student to have a successful school experience;
- Determine specific interventions to bring about these changes;
- Assign responsibility to staff for implementing each intervention;
- Determine the data to be collected to test the effectiveness of the intervention; and,
- Review the program at a minimum annually, or as determined by the IEP team.

Copies of the FBA and PBSP are discussed with and given to parents/guardians and staff working with the child. A copy is placed in the student's record.

St. Coletta staff members are trained in the Mandt System. All staff receive training in the Relational Section (Building Healthy Relationships, Communication, and Conflict Resolution). Depending on the specific needs of the school program, selected staff members receive training in the Conceptual and Technical Sections (Medical Risks of Restraint, Assisting and Supporting, Separating and Restraining.) Only staff members trained in the Conceptual and Technical level are allowed to intervene using this system. The Mandt System teaches a graded system of interventions, beginning with non-physical options and gradually moving towards physical options.. Physical intervention is used only as a matter of last resort when someone is a danger to themselves or others and the attempted non-physical interventions have not been successful. Parents must be notified if a restraint is utilized and a behavior plan must be developed.

There are quiet rooms at St. Coletta that are available for students to use if they need to calm themselves. These rooms are unlocked and students are never left alone. Use of the quiet room requires that an administrator be notified, an incident report written and the parent notified. St. Coletta policy prohibits the use of mechanical and chemical restraints.

The St. Coletta School Behavior Management Plan **strictly prohibits**:

- Corporal punishment
- Deprivation of drinking water or food necessary to meet daily nutritional needs;
- Denial of the use of toilet facilities;
- Any action humiliating, degrading or abusive;
- Deprivation of health care including counseling;
- Intrusive aversive therapy;
- Use of mechanical and/or chemical restraints.

If abuse or neglect is suspected, the school will contact Child Protective Services (CPS), Adult Protective Services (APS) or the Metropolitan Police Department (MPD). Before CPS/APS comes, a parent/guardian may be notified, unless the parent/guardian is the suspect. CPS/APS or the MPD may interview the child without consent from the parent or guardian. The parent may also contact any of these entities should they suspect any abuse or neglect. CPS may be reached at (202) 671-7233. APS may be reached at (202) 541-3950 and MPD may be reached at (202) 727-9099.

What is St. Coletta School's policy on student suspension?

While St. Coletta School is dedicated to serving students with challenging behaviors by providing

intensive behavior supports, there may be incidents where suspension is deemed necessary. In accordance with the “Student Fair Access to School Act of 2017”, no student under the eighth grade equivalent will be subject to an out-of-school suspension. This includes, but is not limited to: drug and/or weapon possession, incidents that may result in serious bodily injury, and other incidents of such nature in which it is felt the safety of the student and others is at risk. . Dependent on the seriousness of the offense and/or danger to others, outside authorities may also be contacted. Further disciplinary action, up to and including expulsion, may be considered. Parents will be notified via certified mail and phone of this decision within 24 hours of the suspension.

If suspension equals ten consecutive or cumulative days over the school year (five, if the student is a DCPS student), then a Manifest Determination IEP meeting must be held. A Manifest Determination Meeting, per DCPS and other jurisdictional regulations, will be scheduled within ten days to determine if the behavior was a manifestation of the child’s disability. Depending upon the outcome of this meeting, the recommendations of the IEP team will be implemented. Please refer to the Discipline Policy within your yearly Back-to-School packet for additional details.

My child has difficult behaviors. Can he/she be discharged from the program?

Although St. Coletta is committed to serving difficult-to-place children, there are times when we feel we cannot provide the intensity of service that a child requires. An IEP to discuss placement would be held in these circumstances and our recommendations of such would be made. DCPS or other jurisdictions would then provide alternate placement options. In terms of day-to-day behavior difficulties, we are dedicated to providing students the needed supports to be successful in the classroom.

What is the school’s weapons/drug policy?

Any student who brings a weapon or an object that could be used as a weapon to school, brings drugs to school, or is involved in a situation that causes serious bodily injury can be suspended or expelled immediately. Depending upon the seriousness of the offense or the danger to others, outside authorities may be called. Further disciplinary action as noted under the student suspension policy section and within the Discipline Policy will be followed.

Does the school have an emergency preparedness plan?

St Coletta staff has a safety plan to be implemented in the event of a chemical or biological attack. If a terrorist action should materialize, we will immediately go into a lockdown mode. This means that parents and guardians should not come to the school, but should wait by the phone. If you have a cell phone number that we do not have, please provide it to the school by calling the Front Desk or notifying your student’s teacher. The building occupied by St. Coletta has windows that are sealed. In case of a biological or chemical event, we would shut down our air handlers and close off the ventilation systems to the best of our ability. We will not open the doors to anyone except official security or police personnel since to do so would compromise the air in the building. No one should come before they are notified. Emergency water and food supplies are stocked in the building. There will be enough food and water to last three to four days.

The school has a delineated plan for fire and other emergency-related events (e.g. earthquake, tornado, violent intruder). All staff are trained in emergency procedures. Students and staff practice drills throughout the year as prescribed by regulations.

Regarding transportation and emergency planning: Though this is largely in the hands of the local school jurisdictions, we have communicated to them our suggestions. If buses, taxis and vans are in route and close to the school, students will be delivered to the school. If transportation has recently departed the school with students, they will return students to the school. If buses, taxis or vans are close to students’ homes for pick-up in morning or delivery in afternoon, students will be taken to their home. If students are at a career-based training site and the event is chemical or biological they will have to remain there with the staff that accompanied them. We will work with employers to discuss their safety procedures. If the event is not chemical or biological, students will be retrieved from training sites and brought back to St. Coletta. Parents/guardians will be notified when it is safe to come and get their

children. In the event of an emergency or crisis-related event, St. Coletta will send a text message and/or e-mail to parents notifying them of the emergency. To receive this message, a cell phone number and/or e-mail, must first be provided by the parent/guardian to the school. Once the school has a number on file, families need to "opt-in" in order to receive text messages. Families may opt-in by responding "YES" to a text message sent to their device. This text message system will only be used in the event of an unusual circumstance.

As you are well aware, there are no guarantees in these situations and we will all do whatever we can to ensure the safety of our students first and everyone involved.

Parent/Guardian phone numbers/e-mails:

It is critical that you provide us with current phone numbers, in case of an emergency. If your phone number changes, it is your responsibility to call and update us so we can update our records. Your phone number (and e-mail if you have one) will be added to our emergency text notification system so that in an event of an unusual occurrence, we can notify you and provide instructions, if needed. If you do not want your information in this system, please call the school to inform us.

Why can't I send my child to school when they are sick?

Health regulations require that a child with a contagious illness, a severe cold, sore throat or cough, or who has a badly upset stomach must be kept home. A child with a fever must be kept at home for 24 hours after the temperature has returned to normal. The office should be immediately informed regarding a child who has a contagious illness or infection. **If your student is exhibiting any symptoms of illness, please do not send them to school.**

Students exhibiting symptoms of illness or with a temperature above 100.4 degrees will not be permitted to remain at school. Once contacted, parents/guardians must make arrangements to pick students up as soon as possible, if and when they become ill.

Since the staff members know my child so well can teachers and assistants provide services to me at home?

Due to the family atmosphere fostered at St. Coletta and the needs of the students, the staff may become well-acquainted with the parents/guardians. While such relationships are wholly acceptable, and are in fact necessary to successful education, professional integrity and confidentiality must be maintained at all times. In keeping with this standard, staff may not babysit, provide respite care, or transport students for pay in their own vehicles. All communication regarding the student is relayed through your child's teacher or related service provider working with your child.

Who is allowed to see my child's records?

All data in your child's educational record is available for parents' and guardians' inspection and review. Student educational records includes a cumulative file and incident reporting file kept onsite at school in a secure space as well as electronic records kept by your child's jurisdiction (e.g. EasyIEP or Maryland Online). Records specific to medical needs (e.g. visit notes, medication/feeding logs, authorizations/orders) are also electronically maintained by the school's nursing team.

Parents/Guardians have the right to:

- Inspect and review the student's scholastic records within a reasonable period, but not to exceed 45 days from the day the school receives a request for access;
- An explanation and interpretation of records;
- Copies of records and names of people who have seen the records;
- Give or withhold consent to other people seeing their child's records except to the extent that The Family Educational Rights and Privacy Act (1993) (FERPA) authorizes disclosure without consent;
- Request destruction of records which are no longer needed;
- Request that information be amended that is inaccurate, misleading or violates privacy or rights;

- File a complaint with the U.S. Department of Education concerning alleged failures by the school to comply with the requirements of FERPA (1993) and Health Insurance Portability and Accountability Act HIPAA(1996);
- Review only records pertaining to their child.

No one else, other than authorized school and LEA level personnel, may review the student's records without a Release of Information form signed by the parent or guardian, unless as authorized by FERPA. Please see the FERPA Guidelines as provided as part of your yearly back-to-school packet.

What about photographs?

St. Coletta School uses student photos for instructional and classroom purposes throughout the school year. In addition, sometimes pictures are needed for school publicity purposes (including social media platforms or other community outreach purposes). Student photos will not be released publicly without permission from the parent/guardian. A photographic release form is provided for this purpose. If you wish to change the level of permission for your child, please contact the school and request a new photo permission form.

Please be advised that parents desire to take pictures/videos during special holiday or other performances. Additionally, students take a class photo each school year on our scheduled Picture Day. If you do not want your child's photograph or video taken in either circumstance, let your teacher know that you do not want your child to participate. It is reasonable to expect that parents/guardians want pictures/videos of their children performing in special activities and many students/families enjoy receiving annual class photos.

What is the school's policy on cell phones and electronic devices?

The use of cell phones and electronic devices are not allowed in the classroom. If you need to contact your child, please call the main office and they will be notified. Students who participate in our independent work and travel program as indicated on their IEP or appropriate permission forms will sign out school provided phones. If a student continuously disregards school policy on personal cell phone and electronic device use, the school will require that the device is placed in a secure location during the day to be returned to the student at the end of the day. The parent/guardian will be notified. A meeting will be scheduled with the parent/guardian, teacher and school administrator as necessary. The school is not responsible for any electronic devices students bring to school.

Chromebooks provided to students are the property of St. Coletta and are intended to be used only for instructional purposes while engaging in distance learning. Parents/Guardians must notify the school should a device become lost, stolen, or damaged. Distributed Chromebooks should be returned to the school at the conclusion of distance learning. More information about the school's technology policy is available on the school's website (www.stcoletta.org).

Can I learn about the qualifications of my child's teacher?

A parent/guardian may inquire about the qualifications of their child's teacher at any time. All inquiries may be directed to the school principal or assistant principals.

How will the school inform the parents about the State Education Agency Complaint Resolution Policy?

St. Coletta will send a copy of the District of Columbia State Education Agency Complaint Policy to families annually. Families may also use the school's board as one avenue for conflict resolution if an issue cannot be resolved between the family and school-based leadership. Contact information for the school's board can be found in the "People of St. Coletta" portion of this handbook. Information about St. Coletta's complaint policy can be viewed by visiting the school's website (www.stcoletta.org).

Is there a dress code?

St. Coletta students are not required to wear uniforms. Clothing should be safe, comfortable and not restrictive to learning activities. Open-toed shoes, high heels, and heavy work/hiking boots are not permitted. Clothing should be free of loose strings around the neck or other items that could cause injury during active play; this includes, but is not limited to, heavy chains (worn as necklaces, belts, or hanging from belt loops). Short skirts and dresses should be an appropriate length and blouses must have no less than a two inch strap. In the event your child needs a change of clothing, it is requested that you send an extra pair of clothing to school (labeled with your student's name), including underwear.

Can my child participate in Special Olympics?

Interested students aged 8 years and older may participate in Special Olympics provided that appropriate paperwork has been supplied to the school. Special Olympics provides opportunities for peer social interaction and exposure to life-long leisure and healthy lifestyles. A separate medical form and permissions are required to be completed, if you want your child to participate. Please contact Shandell Matthews at (202)350-8680 ext. 1024 or smatthews@stcoletta.org to obtain the required forms.

CHARITABLE CONTRIBUTIONS

Charitable Contributions are essential to sustain the quality of services at St. Coletta School because tuition and fees cover only a portion of the cost needed to meet the needs of each child in our care. Each year we must raise approximately \$500,000 to meet our general operating expenses. Achieving this goal requires the support of foundations, corporations, organizations and hundreds of individuals in the metropolitan area. Contributions allow us to bring special services such as community-based instruction, participation in Special Olympics, adaptive equipment in Assistive Technology, arts programs and field trips to our children and young adults. St Coletta invites and appreciates your support.

More Questions?

Please call 202-350-8680

St. Coletta of Greater Washington admits students and clients of any race, color, religion, nationality, ethnic origin, gender or age to all the rights, privileges, programs and activities generally accorded to or made available to students and clients of St. Coletta. It does not discriminate on the basis of race, color, religion, nationality, ethnic origin, gender, sexual orientation, age or veteran's status in educational programs or in other school-administered activities. St. Coletta does not discriminate on the basis of race, color, religion, nationality, ethnic origin, gender, sexual orientation, age, disability, veteran's status, or any other factor protected by local, state, or federal law with regard to employment.

School employees are required by law to report suspected cases of child abuse or neglect to Child Protective Services or Adult protective Services.

*Handbook Revised January 2022
Handbook Available on line at www.stcoletta.org and is subject to revision*



FERPA NOTIFICATION (rev. 6/2022)

The Family Educational Rights and Privacy Act (FERPA) is the federal law designed to protect the privacy of a student's education records. Schools are required to notify parents and eligible students annually of their rights under FERPA. Upon request, St. Coletta discloses education records without consent to officials of another school or school district in which a student seeks or intends to enroll, or is already enrolled if the disclosure is for the purposes of the student's enrollment or transfer.

FERPA grants five rights to parents with respect to their children's scholastic records. These rights transfer to the student, or former student, upon reaching the age of 18. These rights are as follows:

- **The right to inspect and review the student's scholastic records** within a reasonable period but not to exceed 45 days after the day the school receives a request for access. Parents or eligible students should submit to the school principal or assistant principal a written request that identifies the record(s) they wish to inspect. The school principal or other appropriate school official will make arrangements for access and notify the parent or eligible student of the time and place where records may be inspected.
- **The right to request the amendment of a student's scholastic records** that the parent or eligible student believes are inaccurate or misleading. Parents or eligible students may write the school principal, clearly identify the part of the record they want changed, and specify why it should be changed. If St. Coletta decides not to amend the record as requested by the parent or eligible student, the school will notify the parent or eligible student of the decision and advise them of their right to a hearing regarding the request for amendment.
- **The right to consent to disclosures of personally identifiable information contained in a student's scholastic records**, except to the extent that FERPA authorizes disclosure without consent. For example, FERPA authorizes disclosure without consent to school official whom St. Coletta has determined to have legitimate educational interests. A school official is a person employed by St. Coletta as an administrator, supervisor, instructor, or support staff member; an official of another school system where a student seeks or intends to enroll, or where the student is already enrolled. A school official has a legitimate education interest if the official needs to review an education record in order to fulfill his or her professional responsibility.
- **The right to withhold disclosure of directory information.** At its discretion, St. Coletta may disclose basic "directory information" that is generally not considered harmful or an invasion of privacy without the consent of parents or eligible students in accordance with the provisions of District law and FERPA. Directory information includes:
 - A. Student Name
 - B. Student Address
 - C. Student Telephone Listing
 - D. Name of Attending School
 - E. Participation in Officially Recognized Activities and Sports
 - F. Student's Date and Place of Birth
 - G. Names of Schools Previously Attended
 - H. Dates of Attendance

If you do not want St. Coletta School to disclose directory information from your child's education records without your prior written consent, you must notify the LEA within two months of your child's enrollment in the school.

- **The right to file a complaint with the U. S. Department of Education concerning alleged failures by the school to comply with the requirements of FERPA.** The name and address of the office that administers FERPA are: Family Policy Compliance Office, U.S. Department of Education, 400 Maryland Ave, SW, Washington, DC 20202.



Eligible students and parents of minor students have the right to see their records. In general, parental consent is required for others to access information in a student's records. Below are some circumstances under which consent is not required (See 20 USC §1232g (b)-(j) and 34 C.F.R. §99.31):

- In an emergency “ if knowledge of the information is necessary to protect the health and safety of the student or other individuals (See 34 C.F.R. §99.36(a));
- Instances of abuse or neglect;
- Mandatory reporting of communicable diseases as required by local and federal requirements;
- Disclosure to “school officials, including teachers, within the agency or institution whom the agency or institution has determined to have legitimate educational interests (§ 99.31.(1)(i)(A);
- Certain legal situations including subpoenas or investigations of criminal offenses.

Should you have any questions, please do not hesitate to call me.

Sincerely,

Catherine Decker
Director of Admissions
St. Coletta Special Education PCS



St. Coletta School serves students with significant disabilities, which may include students that present with behavior challenges. All students are managed on an individual basis to determine the level of supports and/or consequences required to address severe behaviors that may disrupt the classroom environment or put themselves and/or others at risk of harm. While a majority of behaviors are able to be addressed through the use of positive behavior supports, there are instances when alternate consequences, such as suspension, are deemed necessary.

PROCEDURE

Positive Behavior Supports

It is the philosophy of St. Coletta School to foster productive student behavior. Toward this goal, staff are expected to provide: clear rules for student conduct; collegiality among staff members; a pervasive caring for students; effective instruction; and a focus on providing positive reinforcement and options for students.

Effective methods for responding to disruptive student behavior include:

- *Using positive redirection and reinforcement whenever appropriate.
- *Developing positive personal relationships with students that indicate high teacher expectations and respect for students.
- *Closely monitoring performance and behavior.
- *Using brief, non-disruptive interventions.
- *Handling conflicts calmly and avoiding engaging in power struggles.
- *Clarifying students' choices so that options are clear and students are responsible for the consequences of their choices.
- *Using effective listening skills to help students identify problems and gain insight.

When students exhibit serious behavioral difficulties such as aggression, self-injury, significant property destruction and elopement (running away), a Functional Behavior Assessment (FBA) and Positive Behavior Support Plan (PBSP) may need to be developed. The development process should include the multidisciplinary team involved with the student and the following six steps:

- *Attempt to determine the function(s) of the behavior through an FBA;
- *Focus on one or two specific student behaviors that need to change in order for the student to have a successful school experience;
- *Determine specific interventions to bring about these changes;
- *Assign responsibility to staff for implementing each intervention;
- *Determine the data to be collected to test the effectiveness of the intervention; and,
- *Review the program at a minimum annually, or as determined by the IEP team.

Copies of the FBA and BIP are discussed with and given to parents/guardians and affected staff. A copy is placed in the student's record.

St. Coletta staff members are trained in the Mandt System. All staff receive training in the Relational Section (Building Healthy Relationships, Communication, and Conflict Resolution). Depending on the specific needs of the school program, selected staff members receive training in the Conceptual and Technical Sections (Medical Risks of Restraint, Assisting and Supporting, Separating and Restraining.) Only staff members trained in the Conceptual and Technical level are allowed to intervene using this system. The Mandt System teaches a graded system of interventions, beginning with non-physical options and gradually moving towards physical options.. Physical intervention is used only as a matter of last resort when someone is a danger to themselves or others and the attempted non-physical interventions have not been successful. Parents must be notified if a restraint is utilized and a behavior plan must be developed.

There are Quiet Rooms at St. Coletta that are available for students to use if they need to calm themselves. These rooms are unlocked and students are never left alone. Use of the Quiet Room requires that an administrator be notified, an incident report be written and the parent notified and provided a copy of the incident report. St. Coletta policy prohibits the use of mechanical and chemical restraints.

The St. Coletta School Behavior Management Plan **strictly prohibits:**

- Deprivation of drinking water or food necessary to meet daily nutritional needs.
- Denial of the use of toilet facilities.
- Any action humiliating, degrading or abusive.
- Deprivation of health care including counseling.
- Intrusive aversive therapy.
- Use of mechanical restraints, chemical restraints, or seclusion.

Corporal punishment will never be administered by any staff person. If abuse or neglect is suspected, the school will contact Child Protective Services (CPS). Before CPS comes, a parent/guardian must be notified. If the parent/guardian objects, the child will not be interviewed. This does not apply if the parent/guardian is the suspect. In such a case, CPS may interview the child without consent from the parent or guardian.

Student Suspension/Disciplinary Unenrollment/Emergency Removal

While St. Coletta School is dedicated to serving students with challenging behaviors by providing intensive behavior supports, there may be incidents where suspension is deemed necessary. All cases are determined on a student by student basis and take into consideration their specific circumstances such as cognitive skill level and social awareness. In some situations suspension/disciplinary unenrollment is deemed necessary if the safety of others or the student involved is put at risk. Dependent on the seriousness of the offense and/or danger to others, outside authorities may also be contacted and the Public Charter School Board notified.

St. Coletta School employs the following levels of suspension:

Level I:

In School Disciplinary Action: disciplinary actions to include exclusion from school common areas and required participation in conflict resolution or peer mediation sessions, or similar actions of short duration that do not result in the student's loss of academic instruction time.

OR

In-House suspension: When a student continues to attend school with provisions made to their program that includes 1:1 supervision and suspension of all community outings. Instruction and related services will be conducted in a designated environment separate from the student's classroom.

Level II:

Short Term Out of school suspension: When a student is to remain home for the duration of the suspension to exceed no more than 5 school days. Students in KG through grade 5 cannot be suspended for a period greater than 5 days.

Level III:

Long Term Suspension/ Disciplinary Unenrollment/Emergency Removal: When a student is suspended out of school for a period of 6 consecutive school days or more (for students in grades 6 through 12 only). Students cannot be suspended for more than 10 consecutive days.

This level of suspension is reported to appropriate school jurisdictions and, by the 10th day of suspension or if a disciplinary unenrollment has been recommended, a manifestation determination meeting must be held to determine the relationship of the behavior to the disability

of the student, update or create behavior plans/functional behavior assessments and possibly determine an alternate placement.

Behaviors Resulting in Suspension include but are not limited to:

Level I:

- *Fighting
- *Stealing
- *Smoking
- *Intentionally destroying school property
- *Threatening others with bodily harm
- *Running away from staff in the community

Level II:

- *Drugs on premises
- *Alcohol on premises
- *Possession of a dangerous object
- *Causing bodily harm to others

Level III:

- *Possession of weapons
- *Significant aggressive/destructive behavior posing an immediate threat of severe injury to others and/or self

In accordance with the Student Fair Access to School Amendment Act of 2018, no student in grades kindergarten through 5 shall be subject to an out-of school suspension or disciplinary unenrollment, unless a school administrator determines that the student has willfully caused, attempted to cause, or threatened to cause bodily injury or emotional distress, to another person.

Process for Notification of Suspension:

Once an infraction has been reported, the student(s) will meet with a school administrator to discuss their side of the incident. Incident reports will be written and submitted to the school administrator by witnesses of the incident.

In the event of a suspension/disciplinary unenrollment recommendation, parents/guardians will be informed immediately via telephone call (see also **Long Term Suspension Due Process Procedures** below). If parents/guardians are unable to be contacted, the student will be sent home with a letter of suspension/disciplinary unenrollment to be signed with a request that the letter be signed and returned. Parents/guardians and/or students, if they are 18 and their own guardian, will also be notified via certified mail and phone of this decision (preferably immediately as noted above), but no later than within 24 hours of the suspension/disciplinary unenrollment. In the case of a short term suspension, parents/guardians or students who are their own guardians will be extended the opportunity to meet with school administrators and can request to appeal the short-term suspension decision. The request for an appeal or a hearing can be made to the Principal or an Assistant Principal. This appeal will be reviewed by the school's discipline committee.

Long Term Suspension Due Process Procedure

If a suspension equaling more than six consecutive or cumulative days over the school year occurs, or an disciplinary unenrollment is recommended, then, according to the *Individuals with Disabilities Improvement Act (IDEIA)*, a Manifest Determination and placement review IEP meeting must be held. In addition, all disciplinary unenrollment recommendations must be made by the Principal or in their absence, appropriate designee (Assistant Principal) and communicated as required to the St. Coletta Public Charter School Board. A Manifest Determination Meeting, per DCPS and other jurisdictional regulations, will be scheduled within ten days. Further steps taken will be determined by the IEP team at the Manifestation Determination meeting. Parents

and/or students also have the right to have an advocate or attorney present at any Disciplinary Unenrollment/Emergency Removal hearing or meeting.

The St. Coletta Public Charter School Board reviews all suspensions at each board meeting and can make recommendations regarding policy. Suspensions extending beyond 5 school days and disciplinary unenrollments are also required to be reported to the DC Public Charter School Board. Parents and/or students have the right to appeal any decision to the school's discipline committee or the St. Coletta Public Charter School Board. Disciplinary Unenrollment/Emergency Removal recommendations will be reported immediately to the St. Coletta Special Education Public Charter School Board chairperson and the CEO of St. Coletta of Greater Washington.

Philosophy

St. Coletta of Greater Washington is committed to ensure the safety of all students by encouraging a school climate where everyone is free to learn. Students who are bullied and those who bully others are at a significant risk of health, safety and educational risks.

Policy

It is the policy of St. Coletta of Greater Washington to prohibit bullying, harassment or intimidation of any person on school property, school-sponsored functions, while in transit to school or school-sponsored functions, or by the use of electronic technology. Using electronic technology to bully includes any incident that occurs on school property with school technology, or that otherwise adversely affect a student's ability to participate or benefit from the school's educational programs or activities. It is also the policy to prohibit reprisal or retaliation against anyone who reports reliable information about acts of bullying, harassment, or intimidation or who are victims.

As used in this policy, "bullying" means any severe, pervasive, and persistent act or conduct whether physical, electronic, or verbal that:

1. May be based on youth's actual or perceived race, color, ethnicity, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, intellectual ability, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income, status as a victim of intrafamily offense, place or residence of business, or any other distinguishing characteristic, or on a youth's association with a person, or group with any person, with one or more of the actual or perceived foregoing characteristics; and
2. Can reasonably be predicted to:
 - a. Place the youth in reasonable fear of physical harm to his person or property;
 - b. Cause a substantial detrimental effect on the youth's physical or mental health;
 - c. Substantially interfere with the youth's academic performance or attendance; or,
 - d. Substantially interfere with the youth's ability to participate in or benefit from the services, activities, or privileges provided by an agency, educational institution, or grantee.

"Electronic communication" means a communication transmitted by means of an electronic device, including but not limited to a telephone, cellular phone, computer, or pager.

“Harassment” means perceived or actual experiences of discomfort with identity issues in regard to race, color, national origin, gender, disability, sexual orientation, religion, or other identifying characteristics by a student which adversely affects that student’s ability to participate in or benefit from the school’s educational programs or activities.

“Intimidation” means subjection of a student to intentional action that seriously threatens and induces a sense of fear and/or inferiority which adversely affects that student’s ability to participate in or benefit from the school’s educational program or activities.

“Retaliation” means an act of reprisal or getting back at a person for an act he /she has committed.

Procedure

This policy will be made available within the front office. Additionally, it will be distributed to staff and students annually and students and staff will be reminded that these policies extend to school sponsored functions.

Code of Conduct

St. Coletta School serves students with significant disabilities, which may include students that present with behavior challenges. All students are managed on an individual basis to determine the level of supports and/or consequences required to address severe behaviors that may disrupt the classroom environment or put themselves and/or others at risk of harm.

Prevention

All school staff will participate in annual professional development to increase awareness of the prevalence, causes, and consequences of bullying and to increase the use of evidence-based strategies for preventing bullying, as well as the procedure for reporting incidences of bullying. Additional professional development may be provided for new employees who are hired after the start of the school year.

Students will participate in learning about their rights to an environment free from bullying and the appropriate responses.

All school staff will promote student involvement in the anti-bullying efforts, peer support, mutual respect, and a culture which encourages students to report incidents of bullying to adults.

Procedure for Reporting Acts of Bullying, Harassment or Intimidation

1. Students, staff, parents, and guardians may report any incident of bullying, harassment, or intimidation to assistant principals or Lead Social Worker at 1901 Independence Ave SE, Washington, DC 20003 or at (202)350-8680.
2. Incidences of bullying may be reported anonymously; however, disciplinary action cannot be taken solely on the basis of the anonymous report. The anonymous report may trigger an investigation that will provide actionable information.
3. An employee or youth who promptly and in good faith reports an incident of, or information on, bullying in compliance with the policy of the agency, educational institution, or grantee shall be immune from a cause of action for damages arising from the report.
4. If a student complains that he/she is currently the victim of bullying, harassment, or intimidation, the staff member will respond quickly and appropriately to investigate and intervene, as safety permits.
5. If a student expresses a desire to discuss an incident of bullying, harassment, or intimidation with a staff member, the staff member will make an effort to provide the student with a practical, safe, private, and age-appropriate way of doing so.

Procedures for Investigation

1. All reports of bullying will be documented using the *Incident Report Form*. They must then be promptly and appropriately investigated by school administrators or the administrative designee, consistent with due process rights, using the *Incident Report Form* within 2 school days after receipt of a reporting form or as timely as possible for school administration.
2. School administrators or the administrative designee will determine whether bullying, harassment, or intimidation actually occurred by taking steps to verify who committed the act of bullying, harassment, or intimidation and whether others played a role in perpetuating this act. Other related complaints, if any, will be reviewed in making this determination.
3. Efforts will be made to ensure the safety of the alleged victim of the reported bullying incident. For instance, administrators may alter the bully's seating or schedule to reduce access to the alleged victim.
4. School administrators or the administrative designee will immediately notify parents of the victim and offender of the incident.
5. School administrators or the administrative designee will apply consequences and/or remedial actions consistent with the school's discipline policy. St. Coletta School is dedicated to serving students with challenging behaviors by providing

intensive behavior supports; however, there may be incidents where further disciplinary action is necessary. All cases are determined on a student by student basis and take into consideration their specific circumstances such as cognitive skill level and social awareness. Possible consequences include: in-school disciplinary action, in-house suspension, short term out-of-school suspension, or long-term suspension or expulsion. Please see the discipline policy for a further description of each consequence. The offender will be informed that retaliation against a victim or bystander is strictly prohibited and that progressive consequences will occur if the activity continues. These consequences may include in-school disciplinary action, in-house suspension, short term out-of-school suspension, or long-term suspension or expulsion.

6. Additionally, bullies and victims of bullying may be referred to appropriate support services, such as counseling.
7. The administrator/designee will create a written record of the bullying, harassment, or intimidation incident and any disciplinary actions taken, as well as obtain the statements of the victim, witnesses, and offender. Discussions with all parties should be documented as soon as possible after the event.
8. If parties are dissatisfied with the outcome of a bullying investigation, an appeal may be made in writing to the school's principal at 1901 Independence Ave SE, Washington, DC 20003, (202)350-8680. This appeal must be submitted no later than 30 days after the initial determination. Upon receipt of an appeal, the Principal must conduct a secondary investigation within 30 days of the receipt of the appeal. This 30 days may be extended up to an additional 15 days if the Principal sets forth in writing the reasons why more time is needed to conduct an investigation. Additionally, upon the receipt of an appeal, the Principal must inform the party making the submission of their ability to seek additional redress under the DC Human Rights Act (ohr@dc.gov) at 441 4th Street NW, Suite 570 North, Washington, DC 20001, (202)727-4559.

Resources:

Board of Education of Montgomery County. Montgomery County Public Schools. Special Education and Student Services. *Policy-Bullying, Harassment, or Intimidation*. <http://www.montgomeryschoolsmd.org/departments/policy/pdf/jhf.pdf>

District of Columbia. *Bullying and Intimidation Prevention Act of 2011 (B19-11)*. <http://dctranscoalition.files.wordpress.com/2011/04/dc-b19-11-one-pager-update.pdf>

District of Columbia. *District-wide Model Bullying Prevention Policy*. http://ohr.dc.gov/sites/default/files/dc/sites/ohr/publication/attachments/DCBullyingPreventionPolicy_PressQ_022513.pdf

Prince George's County Public Schools. *Administrative Procedure (5143) - Bullying, Harassment or Intimidation (October 27, 2017)*.

[http://www1.pgcps.org/uploadedFiles/Schools_and_Centers/High_Schools/High_Point/
Admin%20Policy%20Bullying.pdf](http://www1.pgcps.org/uploadedFiles/Schools_and_Centers/High_Schools/High_Point/Admin%20Policy%20Bullying.pdf)

School-Parent/Guardian Compact (PARENT COPY)

St. Coletta School and the parents/guardians of the students participating in activities, services, and programs funded by Title I, Part A of the Elementary and Secondary Education Act (ESEA) agree that this compact outlines how the responsibility for improved student achievement will be shared by all parties to build and develop a partnership that will help the students achieve.

This school-parent compact is in effect during the 2022-2023 school year.

School/Teacher Responsibilities

St. Coletta School will:

- 1. Provide high-quality curriculum and instruction in a supportive and effective learning environment that enables the participating students to achieve in the school setting as follows:**
 - a. Provide specialized instruction and related services to all students in accordance with their Individualized Education Program (IEP) document.
 - b. Provide parents opportunities to discuss their child's achievement through participation in annual IEP meetings, mid-year parent-teacher conferences, scheduled observations and trainings pertinent to instructional activities for carryover between home and school.
 - c. Provide comprehensive staff development training in the area of education to promote school-wide student achievement and IEP goal progress.
- 2. Communicate with parents/guardians as follows:**
 - a. Provide written communication regarding the educational program, FLS curriculum, and teaching strategies utilized through school newsletters, the parent handbook, and Open House events.
 - b. Provide quarterly student progress reports and results of statewide testing, as appropriate.
 - c. Provide classroom specific information and via the home-school communication book.
 - d. Contact parent/guardian via phone as needed to discuss student programming, inform of upcoming events, and relay other pertinent student information.
 - e. Include updated school information and showcase school-wide activities on social media platforms.
- 3. Monitor and track student attendance.**
 - a. The school will provide information on attendance and truancy guidelines.
 - b. Attendance calls will be made when a student is absent.
 - c. The school will contact parents to discuss attendance concerns and provide information on relevant resources.
- 4. Provide parents/guardians opportunities for involvement in their child's achievement**
 - a. Parent/teacher trainings provided by the classroom teacher and/or therapists focused on specific student skills included on their IEP.
 - b. Parent trainings provided by special education teachers, therapists, and specialists on topics such as communication, behavior management, and transition planning.
 - c. Opportunities to provide input for IEPs and attend mid-year parent teacher conferences.

Parent/Guardian Responsibilities

We, as parents/guardians, will support our children's learning in the following ways:

- 1. Promote my child's educational progress by:**
 - a. Being an active participant in the development of my child's IEP.
 - b. Attending and participating in IEP and eligibility meetings.
 - c. Participating in mid-year parent conferences or other meetings scheduled to discuss my child's progress.
 - d. Participating in at least one Parent Training
- 2. Regularly communicate with school in such areas as:**
 - a. Completion of necessary school documents and permission forms so that my child can fully participate in their educational program.
 - b. Inform the school and classroom teacher of any attendance issues and provide documentation as needed.
 - c. Include important information pertinent to my child for the school day through their home-school communication book.
 - d. Parent will inform school of circumstances that may impact the child's day-to-day functioning in the school program.
- 3. Ensure that my child attends school.**
 - a. I will communicate my child's absence by calling the school attendance line and provide excuses to the school in writing
 - b. I will provide documentation supporting my child's absences to the school
 - c. I will make efforts to schedule doctor and therapy appointments outside of my child's instructional hours
- 4. Be involved in school-wide events, training opportunities offered by the school and any other parent involvement opportunities, as much as possible.**

*****Parent/Guardian- keep this copy for your records. The version titled "School Copy" should be returned to the school with the rest of the Back to School documents.**