**Select Sample Forms and Documents**

from *Lifeline: A Handbook for Small School Success*. North American Division Office of Education. 2011

The sample forms and documents listed below are found on the pages that follow. There are no page numbers to allow customization of the online forms for your school. The documents are in alphabetical order and in Word format.

Acceleration Request

Acceptable Use Policy

Application for Admission

Budget

Consent to Treatment

Daily Schedule Analysis

Field Trip and Outing Planner

Field Trip Permission Form

Financial Agreement

Incident Report Form

Lesson Plans

Medication Authorization and Administration Form

Over-the-Counter Medication Permission to Administer Form

Parent Release Form for Students with Special Academic Needs

Photo Release

Release of Student Records (transferring students)

Retention Request

Room Parent Request

School Handbook

Student Led Conference Narrative Form

Unit Plans

Yearly Plans



**Acceleration Request**

(See Union Education Code Book for complete instructions)

|  |  |  |
| --- | --- | --- |
| Student Name | Birthdate | Present Grade |

|  |  |
| --- | --- |
| Present Age (Years/Months) | Age When Entered 1st Grade (Years/Months) |

|  |  |
| --- | --- |
| 1. Reason for acceleration:
 |  |
| 1. Last achievement test administered:
 |  |
|  Date administered: |  |
|  Composite Grade Equivalent: |  |
|  Composite Percentile: |  |
| A student is expected to have 90th percentile or above in each sub-test.Attach copy of student’s Individual Performance Profile. |
|  |
| 1. Teacher evaluation of daily work, tests, etc.:
 |
| 1. Teacher evaluation of present social and emotional development:
 |

**Acceleration Request – Page 2**

1. Survey of past history in school:
2. Teacher evaluation of physical development:
3. Report of communication with parents (include dates, parents’ reactions, etc.):
4. Recommendation of teacher:
5. Brief summary of suggested acceleration program:

|  |  |
| --- | --- |
| Teacher’s Signature Date | Principal’s Signature Date |
| *We have discussed our child’s academic achievements with the classroom teacher and understand that this is not to be interpreted as “skipping a grade,” since all levels of academic work are to be covered. We support the placement of our child in an accelerated program, understanding that such a placement is subject to approval by the Conference Office of Education and the school leadership.* |
| Parent or Guardian Signature Date | Parent or Guardian Signature Date |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Education Committee Action: |  | Approved |  | Denied |
| Date | Superintendent’s Signature |

**Acceptable Use Policy**

**Information Technology Resources**

**Anytown Adventist School**

The Anytown Seventh-day Adventist School is pleased to offer students access to the school’s information technology resources, including the computer and Internet, for educational purposes. To gain access to these resources, the legal parent/guardian and student must sign and return this form to the school.

The Internet is a powerful resource for expanding the educational experience of each student. Access to the Internet will enable students to explore thousands of libraries, databases, and bulletin boards while exchanging messages with internet users throughout the world. Unfortunately, it is true that some materials accessible via the Internet may contain items that are illegal, defamatory, inaccurate, or offensive. We believe, however, that the benefits to students in the form of information resources and opportunities for collaboration exceed any disadvantages and, therefore, choose to make the Internet available to our students. But because parents and guardians are ultimately responsible for setting and conveying the standards that their children should follow when using media and information sources, we respect each family’s right to decide whether or not to apply for access.

The school’s information technology resources are for educational purposes only. Since they are provided for students to conduct research and communicate with others, access is given to students who agree to act in a considerate and responsible manner. Parental permission is required. Access is a privilege—not a right. Access entails responsibility. School staff may review files and communications to maintain system integrity and ensure that users are using the system responsibly.

Students will adhere to Christian principles and will:

* Respect and safeguard the privacy of themselves and others.
	+ Use only assigned accounts.
	+ Not view, use, or copy passwords, data, or networks to which they are not authorized.
	+ Not share private information about others or themselves.
* Respect and safeguard the integrity, availability, and security of all electronic resources.
	+ Observe all posted security practices.
	+ Report security risks or violations to a teacher.
	+ Not destroy or damage data, networks, or other resources that do not belong to them, without clear permission of the owner.
	+ Conserve, protect, and share these resources with other students and internet users.
* Respect and safeguard the intellectual property of others.
	+ Not infringe copyrights.
	+ Not plagiarize.
* Respect and practice the principles of community.
	+ Communicate only in ways that are kind and respectful.
	+ Report threatening or discomforting materials to the teacher.
	+ Not intentionally access, transmit, copy, or create materials that violate Christian principles or that are illegal (such as messages that are threatening, rude, discriminatory, harassing, stolen, illegal copies of copyrighted works, etc.).
	+ Not use the resources to further other acts that are criminal or violate the school’s principles.
	+ Not send spam, chain letters, or other mass unsolicited mailings.
	+ Not buy, sell, advertise, or otherwise conduct business, unless approved as a school project.

**Acceptable Use Policy – Page 2**

Violations of these rules may result in a loss of a student’s privileges to use the school’s information technology resources, as well as other disciplinary or legal action.

School administrators and other authorized individuals monitor the use of information technology resources to help confirm that uses are secure and in conformity with this policy. Administrators reserve the right to examine, use, and disclose any data found on the school’s information technology resources in order to further safeguard the health, safety, discipline, or security of any student or other person, or to protect property. They may also use this information in disciplinary actions, and will furnish evidence of crime to law enforcement.

Your signature below affirms your understanding of, and agreement to abide by, this Acceptable Use Policy. Any violation of the standard as set forth herein may result in the immediate termination of the student’s access to the school’s information technology resources and/or other disciplinary action.

|  |  |  |  |
| --- | --- | --- | --- |
| Student Name (please print) | Student Signature | Grade | Date |

|  |  |  |
| --- | --- | --- |
| Parent/Guardian Name (please print) | Parent/Guardian Signature | Date |

**Application for Admission**

**Anytown Adventist School**

|  |
| --- |
| Today’s Date |

Child’s Full Legal Name:

|  |  |  |
| --- | --- | --- |
| Last | First | Middle |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Grade Entering | Gender | Child’s NAD Student ID | Place of Birth | Date of SDA Baptism |

|  |  |  |
| --- | --- | --- |
|  / / Month/Day/YearDate of Birth |  / Years/MonthsAge | Ethnic Origin(For Federal Government and North American Division purposes only)  |

Family Information:

|  |  |  |
| --- | --- | --- |
| Legal name of parent or guardian with whom the student is living: | Father | Mother |
| Home Address |  |  |
| City, State/Province, Zip |  |  |
| Phone andEmail | Home | Business | Home | Business |
| Mobile | Email | Mobile | Email |
| Occupation |  |  |  |  |
| Church Membership | Denomination/Church | Denomination/Church |
| Brothers and Sisters | Full Name | Birth Date |
|  |  |
|  |  |

|  |  |
| --- | --- |
| Initial | In case of emergency, accident, or serious illness, if the school is unable to contact me, I hereby authorize the school to take my child to the physician, emergency room, and/or to the relative or neighbor indicated. |

|  |  |  |
| --- | --- | --- |
| Doctor’s name | Phone | Address |
| Relative’s or Neighbor’s Name | Phone | Address |

**Application for Admission – Page 2**

|  |
| --- |
| References: Please give two (2) references (pastor, friend, neighbor, nonrelative, etc.): |
| Reference #1 (Name, Address, Phone) |
|  |
|  |
|  |
|  |
| Reference #2 (Name, Address, Phone) |
|  |
|  |
|  |
|  |

Please initial each line below:

|  |  |
| --- | --- |
|  | I agree to meet my monthly financial obligations to the school. |
|  | I agree to cooperate with the school board and teachers by avoiding adverse criticism of any teacher or school policy in the presence of the students. |
|  | I have read the school handbook and agree to support each regulation of the school. |
|  | I hereby authorize the school board to send, upon request, the permanent records to the next school to which my child may enroll. |

|  |  |
| --- | --- |
| Signature of Parent or Legal Guardian | Date |



**Budget**

**Anytown Adventist School**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Year**

**Anticipated Enrollment by Grade:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **K \_\_\_\_** | **1 \_\_\_\_** | **2 \_\_\_\_** | **3 \_\_\_\_** | **4 \_\_\_\_** | **5 \_\_\_\_** | **6 \_\_\_\_** | **7 \_\_\_\_** | **8 \_\_\_\_** | **9 \_\_\_\_** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **2010-2011****Budget** | **2009-2010****Actual** | **2009-2010****Budget** |
| **Annual Income:** |
| Entrance Fees | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Special Fees  (music, art, etc.) | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Tuition | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Church(es) Subsidy | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Special Projects | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Other | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Total Income** | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **(should equal or exceed total expenses)** |  |  |  |
| **Annual Expenses:** |
| Conference Education Fund  | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Locally Funded Employees | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Utilities (Heat, Electricity, Water, etc.) | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Telephone | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Custodial Equipment and Supplies | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Budget – Page 2** |
| **ANNUAL EXPENSES (CONTINUED):** |
|  | **2010-2011****Budget** | **2009-2010****Actual** | **2009-2010****Budget** |
| Textbooks | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Media Center—Books, Periodicals, Software (Minimum $35/student) | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| School/Office Supplies | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Technology Plan (Upgrades/Purchases) | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| New Equipment and Furniture | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Plant and Grounds Improvement | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Plant Insurance | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Student Accident Insurance | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Miscellaneous Expenses | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Other Expenses(Please specify) |  |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Bad Debt (Anticipated Delinquent Accounts) | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Total Expenses** | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |  |



**Consent to Treatment**

**Anytown Adventist School**

**Only designated staff will have access to the completed form. This form will be stored in a locked file.** This form must be filled out at the beginning of each school year to cover the activities for the school year. A copy of each student’s form must be taken on off-campus activities.

Student’s Full Name:

|  |  |  |
| --- | --- | --- |
| \_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Age | Date of Birth (month/day/year) | Social Security Number (United States) |

Address:

Parent/Guardian Information:

Father/Guardian:

|  |  |  |  |
| --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Business Phone | Home Phone | Mobile Phone | Social Security Number |

Email:

Mother/Guardian:

|  |  |  |  |
| --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Business Phone | Home Phone | Mobile Phone | Social Security Number |

Email:

Please describe allergies to substances and medications:

|  |  |
| --- | --- |
| If on regular medication, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | Date of Last Tetanus Shot |

Please give the name of your local family physician to be called in case your child becomes ill or has an accident at school and you cannot be reached:

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Family Physician Name | Office Phone |

Physician’s Office Address:

|  |  |
| --- | --- |
| Hospital Preference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Hospital Phone |

Please give the name of a relative or friend who has consented to assume the responsibility of your child in case of illness or accident until you can be reached. In case of any changes in the named person, notify the school in writing.

|  |  |
| --- | --- |
| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Phone |

Address:

The above named student is \_\_\_\_\_\_ is not \_\_\_\_\_\_ covered by health insurance.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Present Health Insurance Company | Policy Number |

If emergency service involving medical action or treatment is required and neither the parent not the family physician can be reached for consent, the parents hereby consent to the rendering of such emergency medical service for the above named student as shall be necessary in the medical opinion of the doctor rendering service.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature of Parent or Guardian | Date |

**Daily Schedule Analysis**

**(Grades 1-2)**

Name

School

Conference

Grades or Subjects Taught

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Total Minutes****Per Week** | **Recommended Minutes** | **Recommended****Number of Days** |
| **Weekly** | **Daily** |
| **Worship** | **\_\_\_\_\_\_\_\_\_\_** | **50** | **10** | **5** |
| **Bible** | **\_\_\_\_\_\_\_\_\_\_** | **200** | **40** | **5** |
| **Mathematics** | **\_\_\_\_\_\_\_\_\_\_** | **250** | **50** | **5** |
| **Pathways** | **\_\_\_\_\_\_\_\_\_\_** | **725** |  |  |
| **Daily Routine** | **\_\_\_\_\_\_\_\_\_\_** | **285** |  |  |
| Daily Read Aloud | \_\_\_\_\_\_\_\_\_\_\_ | 75 | 15 | 5 |
| Daily Oral Language | \_\_\_\_\_\_\_\_\_\_\_ | 50 | 10 | 5 |
| Phonics/Word Study | \_\_\_\_\_\_\_\_\_\_\_ | 60 | 15 | 4 |
| Handwriting | \_\_\_\_\_\_\_\_\_\_\_ | 40 | 10 | 4 |
| Spelling | \_\_\_\_\_\_\_\_\_\_\_ | 60 | 15 | 4 |
| **Reading Instruction** | **\_\_\_\_\_\_\_\_\_\_** | **300** |  |  |
| Thematic Instruction | \_\_\_\_\_\_\_\_\_\_\_ | 150 | 30 | 5 |
| Guided Reading | \_\_\_\_\_\_\_\_\_\_\_ | 150 | 30 | 5 |
| **Workshops** | **\_\_\_\_\_\_\_\_\_\_** | **140** |  |  |
| Reading | \_\_\_\_\_\_\_\_\_\_\_ | 80 | 20 | 4 |
| Writing | \_\_\_\_\_\_\_\_\_\_\_ | 60 | 15 | 4 |
| **Science** | **\_\_\_\_\_\_\_\_\_\_** | **160** | **40** | **4** |
| **Social Studies** | **\_\_\_\_\_\_\_\_\_\_** | **160** | **40** | **4** |
| **Fine Arts** | **\_\_\_\_\_\_\_\_\_\_** | **80** |  |  |
| Art | \_\_\_\_\_\_\_\_\_\_\_ | 40 | 40 | 1 |
| Music | \_\_\_\_\_\_\_\_\_\_\_ | 40 | 40 | 1 |
| **Physical Education** | **\_\_\_\_\_\_\_\_\_\_** | **100** | **20** | **5** |
| **Recess** | **\_\_\_\_\_\_\_\_\_\_** | **75** | **15** | **5** |
| **Grand Total** | **\_\_\_\_\_\_\_\_\_\_** | **1800** |  |  |

Minimum 1800 minutes weekly required

Lunch is not included in the minimum required minutes and must be at least 30 minutes per day

**Daily Schedule Analysis**

**(Grades 3-4)**

Name

School

Conference

Grades or Subjects Taught

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Total Minutes****Per Week** | **Recommended Minutes** | **Recommended****Number of Days** |
| **Weekly** | **Daily** |
| **Worship** | \_\_\_\_\_\_\_\_\_\_ | **50** | **10** | **5** |
| **Bible** | \_\_\_\_\_\_\_\_\_\_ | **200** | **40** | **5** |
| **Mathematics** | \_\_\_\_\_\_\_\_\_\_ | **250** | **50** | **5** |
| **Pathways** | \_\_\_\_\_\_\_\_\_\_ | **725** |  |  |
| **Daily Routine** | \_\_\_\_\_\_\_\_\_\_ | **225** |  |  |
| Daily Read Aloud | \_\_\_\_\_\_\_\_\_\_ | 75 | 15 | 5 |
| Daily Oral Language | \_\_\_\_\_\_\_\_\_\_ | 50 | 10 | 5 |
| Focus on Words | \_\_\_\_\_\_\_\_\_\_ | 20 | 5 | 4 |
| Handwriting | \_\_\_\_\_\_\_\_\_\_ | 40 | 10 | 4 |
| Spelling | \_\_\_\_\_\_\_\_\_\_ | 40 | 15 | 4 |
| **Reading Instruction** | \_\_\_\_\_\_\_\_\_\_ | **300** |  |  |
| Thematic Instruction | \_\_\_\_\_\_\_\_\_\_ | 150 | 30 | 5 |
| Guided Reading | \_\_\_\_\_\_\_\_\_\_ | 150 | 30 | 5 |
| **Workshops** | \_\_\_\_\_\_\_\_\_\_ | **200** |  |  |
| Reading | \_\_\_\_\_\_\_\_\_\_ | 80 | 20 | 4 |
| Writing | \_\_\_\_\_\_\_\_\_\_ |  120 | 30 | 4 |
| **Science** | \_\_\_\_\_\_\_\_\_\_ | **160** | **40** | **4** |
| **Social Studies** | \_\_\_\_\_\_\_\_\_\_ | **160** | **40** | **4** |
| **Fine Arts** | \_\_\_\_\_\_\_\_\_\_ | **80** |  |  |
| Art | \_\_\_\_\_\_\_\_\_\_ | 40 | 40 | 1 |
| Music | \_\_\_\_\_\_\_\_\_\_ | 40 | 40 | 1 |
| **Physical Education** | \_\_\_\_\_\_\_\_\_\_ | **100** | **20** | **5** |
| **Recess** | \_\_\_\_\_\_\_\_\_\_ | **75** | **15** | **5** |
| **Grand Total** | \_\_\_\_\_\_\_\_\_\_ | **1800** |  |  |

Minimum 1800 minutes weekly required

Lunch is not included in the minimum required minutes and must be at least 30 minutes per day

**Daily Schedule Analysis**

**(Grades 5-8)**

Name

School

Conference

Grades or Subjects Taught

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Total Minutes****Per Week** | **Recommended Minutes** | **Recommended****Number of Days** |
| **Weekly** | **Daily** |
| **Worship** | **\_\_\_\_\_\_\_\_\_** | **50** | **10** | **5** |
| **Bible** | **\_\_\_\_\_\_\_\_\_** | **200** | **40** | **5** |
| **Mathematics** | **\_\_\_\_\_\_\_\_\_** | **300** | **60** | **5** |
| **Pathways** | **\_\_\_\_\_\_\_\_\_** | **620** |  |  |
| **Daily Routine** | **\_\_\_\_\_\_\_\_\_** | **180** |  |  |
| Daily Read Aloud | \_\_\_\_\_\_\_\_\_\_\_ | 50 | 10 | 5 |
| Daily Oral Language | \_\_\_\_\_\_\_\_\_\_\_ | 50 | 10 | 5 |
| Focus on Words | \_\_\_\_\_\_\_\_\_\_\_ | 20 | 5 | 4 |
| Handwriting | \_\_\_\_\_\_\_\_\_\_\_ | 20 | 5 | 4 |
| Spelling | \_\_\_\_\_\_\_\_\_\_\_ | 40 | 10 | 4 |
| **Reading Instruction** | **\_\_\_\_\_\_\_\_\_** | **200** |  |  |
| Thematic Instruction | \_\_\_\_\_\_\_\_\_\_\_ | 100 | 20 | 5 |
| Guided Reading | \_\_\_\_\_\_\_\_\_\_\_ | 100 | 20 | 5 |
| **Workshops** | **\_\_\_\_\_\_\_\_\_** | **240** |  |  |
| Reading | \_\_\_\_\_\_\_\_\_\_\_ | 120 | 30 | 4 |
| Writing | \_\_\_\_\_\_\_\_\_\_\_ |  120 | 30 | 4 |
| **Science** | **\_\_\_\_\_\_\_\_\_** | **188** | **47** | **4** |
| **Social Studies** | **\_\_\_\_\_\_\_\_\_** | **188** | **47** | **4** |
| **Fine Arts** | **\_\_\_\_\_\_\_\_\_** | **80** |  |  |
| Art | \_\_\_\_\_\_\_\_\_\_\_ | 40 | 40 | 1 |
| Music | \_\_\_\_\_\_\_\_\_\_\_ | 40 | 40 | 1 |
| **Physical Education** | **\_\_\_\_\_\_\_\_\_** | **100** | **20** | **5** |
| **Recess** | **\_\_\_\_\_\_\_\_\_** | **75** | **15** | **5** |
| **Grand Total** | **\_\_\_\_\_\_\_\_\_** | **1801** |  |  |

Minimum 1800 minutes weekly required

Lunch is not included in the minimum required minutes and must be at least 30 minutes per day

******

***FIELD TRIP/OUTING PLANNER***

|  |  |  |  |
| --- | --- | --- | --- |
| **Class/Organization** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Number of Attendees** | \_\_\_\_ |
|  | (3rd Grade, Pathfinders, English Dept., etc. |  |  |
| **Outing/Destination** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | (Museum, Sea World, Zoo, Yosemite National Park, London, etc.) |
| **Planned Activities** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (List all planned activities: museum study, concert, camping, day hike, rock climbing, bicycling, etc.) |

|  |  |  |
| --- | --- | --- |
| ***TRANSPORTATION*** | ***√ All that Apply*** | ***NOTES*** |
| **Public Transportation** |  |  |
| **Rental Vehicle** |  |  |
| **School/Church Vehicle** |  |  |
| **Private (Personal) Auto *(Not Recommended)*** |  |  |
| **Note: *A “NO” response may indicate a need for additional safety/risk management measures.*** |
|  | **YES** | **NO** | **N/A** |  |
| **Qualified Drivers** |  |  |  |  |
| (Good driving record/current MVR, Age 21+, valid and current license per type of vehicle, etc. See *NAD Working Policy* –P50 26) |
| **Vehicles(s) – Safe, Well-Maintained Condition** |  |  |  |  |
| **Tires – Proper Size and Rating** |  |  |  |  |
|  **Meet Safe, Legal Tread Wear Limits** |  |  |  |  |
| **Vehicle Properly Insured** |  |  |  |  |
| * **Special Vehicle Insurance Coverage (Mexico)**
 |  |  |  |  |
| **Fire Extinguisher** |  |  |  |  |
| **Emergency Road Kit** (Reflectors, etc.) |  |  |  |  |
| **First Aid Kit** |  |  |  |  |
| **Seat Belts Required** |  |  |  |  |
| **Seating and Load Capacity Adhered To** |  |  |  |  |
| **Transportation in the Back of Open Vehicles *Prohibited*** (Pickup Trucks, Flat Beds, etc.) |  |  |  |  |
| **Follow-up Vehicles Provided** (Bike and Walkathons, etc.) |  |  |  |  |
| ***ADMINISTRATIVE*** |  |  |  |  |
| **Permission Slips** |  |  |  |  |
| **Medical Release Forms** (Available for all children under 18) |  |  |  |  |
| **Volunteer Ministry Forms Signed/Filed** (child abuse) |  |  |  |  |
| **Activity/Site Approval by Proper Authorities** (State/Province, County, City, Fire Marshal, Park Service, etc.) |  |  |  |  |
| **Requirements by Proper Authorities Met** |  |  |  |  |
| **Certificates of Insurance Obtained as Needed** |  |  |  |  |
| **Accident Medical Insurance** |  |  |  |  |
| * **Miscellaneous Accident**
 |  |  |  |  |
| * **Volunteer Labor Construction** (as needed)
 |  |  |  |  |
| * **Short Term Travel** (If outside U.S. and Canada)
 |  |  |  |  |
| **Traveler’s Advisory Checked** |  |  |  |  |

Retrieved 02/07/2011 from <http://www.adventistrisk.org/files/FIELD%20TRIP%20FORM.pdf>. Minor adaptations were made.

***FIELD TRIP/OUTING PLANNER – Page 2***

|  |
| --- |
| **Note: *A “NO” response may indicate a need for additional safety/risk management measures.*** |
|  | **YES** | **NO** | **N/A** |  |
| ***SUPERVISION*** |  |  |  |  |
| **Adequate Number of Supervisors\*** (Minimum of two required and at then one for every 10 students or more if activity requires) |  |  |  | **Number Required \_\_\_\_\_\_\_\_** |
| **Supervision Qualified for Activity** |  |  |  |  |
| **First Aid Trained Staff** |  |  |  |  |
| **Current CPR and Lifeguard Certification** |  |  |  |  |
| ***EMERGENCY PLANNING***(NOTE: In many regions, *weather* conditions can change dramatically in a short period of time – clear and warm to blizzard, cool to extreme heat. Check weather advisories and always plan for any potential weather extremes for the area visited.) |  |  |  |  |
| **Emergency/Disaster Plan Prepared** |  |  |  |  |
| **Cellular Phone** |  |  |  |  |
| **Portable Two-way Radios** |  |  |  |  |
| **Citizen Band and/or Marine Radio** |  |  |  |  |
| **AM/FM or Weather Band Radio** |  |  |  |  |
| **Additional clothing Requirements** |  |  |  |  |
| **Shelter Requirements** |  |  |  |  |
| **Emergency Water** |  |  |  |  |
| **Emergency Food** |  |  |  |  |
| **Wool or Space Blankets** |  |  |  |  |
| **Clothing and Equipment Lists Distributed** |  |  |  |  |
| ***ACTIVITY SAFETY*** |  |  |  |  |
| **Safety Equipment *Available* for All Participants** (Life Jackets, Safety Harnesses, Helmets, Knee and Elbow Pads, etc.) |  |  |  |  |
| **Safety Equipment *Required* for All Participants** |  |  |  |  |
| **Safety Equipment *Inspected* Before Each Use** |  |  |  |  |
| **All Work Projects Adhere to OSHA or CCOSH and International Standards** (Strongest Shall Be Used) |  |  |  |  |
| **All Child Labor Laws Observed** |  |  |  |  |
| ***ADDITIONAL NOTES AND COMMENTS:*** |  |  |  |  |
|  |  |  |  |  |

\*See supervision attachment pertaining to examples of supervision requirements for various activities.

|  |  |
| --- | --- |
| Requested by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Approved by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**NOTE:** Safety elements included in this form are suggested as minimal considerations. Other additional measures will generally be required for every activity. The maintenance of safe premises, operations, activities and equipment are the legal responsibility of the insured. Adventist Risk Management assumes no responsibility for the management or control of the insured’s premises, operations and activities or for the safety elements or procedures used by the insured. Liability on the park of Adventist Risk Management for loss is hereby disclaimed.

**Field Trip Permission Form**

Dear Parent or Guardian,

A field trip has been planned for your child’s class. Please read the information at the top of this form, then sign and return the permission slip at the bottom of this form by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Field Trip Information:

Name of Event:

Date of Event:

Time Leaving:

Time Returning:

Leaving From:

Returning To:

Cost:

Transportation:

Sponsor

Description of Event: (place(s), activities, supervision, other pertinent data)

Special Instructions:

*Cut here Cut here*

I give permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to attend the

(Student’s full name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20

 (Name of Event) (Date)

***I give consent for necessary first aid or any emergency medical attention.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20

 (Parent or Legal Guardian’s Signature)

On the day of the field trip I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, can be reached at

Parent’s Phone: (\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name) (Relationship to student)

Phone: (\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Financial Agreement**

**Anytown Adventist School**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Students** | **Fees** | **Per Student Amount** | **Total** |
| \_\_\_\_\_\_\_\_\_\_\_ | Registration Fees | $200.00 | $\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_ | Annual Tuition – 1st Child | $2220.00 | $\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_ | Annual Tuition – 2nd Child | $2075.00 | $\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_ | Annual Tuition – 3rd Child | $1925.00 | $\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_ | Annual Tuition – 4th Child or more | $0.00 | $\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |  |
|  | **Total Tuition Charges** | $\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  | **Average Monthly Tuition Charges** **(Total Tuition Charges ÷ 10 months)** | $\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  | **Full Year Payment Discount (5% of Total Tuition Charges)** | $\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  | **Total Due at Registration** **(Registration Fees + 1st Month Tuition Charges)** | $\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Student Names** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| I attest that there is no outstanding amount due to any other Adventist school. |  |  |
| I agree that monthly payments will be made in accordance with financial policies outlined in the student handbook. |  |  |
| I have read and understand the financial policies outlined in the student handbook, including delinquent account policies. |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| Parent/Guardian/Responsible Party Signature | Date |



**Incident Report Form**

**Anytown Adventist School**

 Date of Incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time:

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Classroom Teacher:

Name of student(s) involved:

Type of incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Was there an injury? Yes No

If there was an injury, describe the injury and treatment:

Describe in detail the incident, including where the incident occurred, names of witnesses, supervision at the time of the incident, and who was in charge of the activity:

Were the parents contacted? How? By whom? When?

Were there any special circumstances to this incident?

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Teacher’s Signature | Date |

***All serious incidents should be reported to the Local Conference Office of Education***

**Lesson Plans – Sample Template**

**Teacher:** Mr. Joe Brown **Grades:** 1-4 **Week of:** Sept. 10-14

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Bible** | **Math** | **Science (M W)/****Social Studies (T TH)** |
| **MONDAY** | “Be Like Jesus” TE 22-24Do Lesson StarterRead story, Discuss “Discussion Questions”Begin learning MVListen to Steve Green song, “Fruit of the Spirit” | 1 – Before, After, Between p. 149-1502 – Ordinal Numbers p. 59-60(Gr. 3-4 review X flashcards while waiting)3 – x w/7 p. 150-151 4 – x/÷ facts to 5 p. 142-143 | SMART p. 110Identify mixtures & compoundsDefine mixture/solutionMake & vegetable salad mixture and have students tell why it is a mixture/not a solution. |
| **TUESDAY** | Review & say MVDo Classroom Activity #5Create bulletin board from TRM28Level A – p 14-16Level B – p 28-32Level C – p 27-29 | 1 – 1 Less/1 More p. 151-1522 – Compare Numbers p. 61-623 – x w/8 p. 152-1534 – x/÷ facts to 10 p. 144-147 | Explore the impact of immigration1-2 Rd gr 2 p. 250-2533 – Rd p. 72-774 – Rd p. 132-133Discuss why people immigrate & Ellis IslandRole-play journey to Ellis Island |
| **WEDNESDAY** | “The First Fruit” TE26-28Do Lesson Starter (need a banana)Read Story & answer Discussion Questions as classFinish Sentence StemsBegin learning MV | 1 – 10 Less/10 More p. 153-1542 – Order Numbers p. 63-643 – Draw a Picture p. 154-1554 – x/÷ facts to 12 p. 148-149 | SMART p. 110Identify mixtures & compoundsRd 1-2 gr. 1 science ref p. 40,3 – science ref p. 40, 4 – p. B10-B11Define mixture/solutionIdentify substances what would be mixture or solution |
| **THURSDAY** | Review & say MVMake a list of Bible stories that show examples of loveLevel A – p 17-19Level B – p 24-26Level C – p 32-35 | 1 – Do Ch. 10 Review p. 155-1562 – Even/Odd p. 65-663 – Review x to 8 p. 156-1594 – x 3 factors p. 150-151 | Explain the meaning of national & patriotic symbols of the US/Bermuda/Canada.Review national symbols as a group (refer to Gr. 1 p. 208-211, Gr. 2 p. 180-183)Make crafts of national symbols |
| **FRIDAY** | “Fruits” Lab: Choose one of the “fruit of the Spirit” and decide on a good deed that would exemplify that “fruit” and go do it for someone in the classroom or school | 1 – Chapter 10 Test2 – Skip-Count p. 67-683 – Ch. 9 Review p. 160-1614 – x 3 factors p. 150-151 | **ART** Arts Attack TE 69My familyMaterials – potatoes, tempera paints, brushes, sponges, water, 12”x18” white paperMake portrait using potato prints. |

**Medication Authorization and**

**Administration Form**

**Anytown Adventist School**

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Student’s Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth:

 Street Address Month/Day/Year

City, State, Zip or Postal Code

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name(s):

Doctor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Doctor’s Phone:

I hereby request and authorize school personnel to administer the prescribed medication as directed by our doctor.

 Parent or Guardian Signature

Cut here Cut here

**Doctor’s Orders**

You are hereby directed to give

 Name of Child

their medication,

 Name of Medication

in the amount of \_\_\_\_\_\_\_\_\_\_ tablets/capsules at \_\_\_\_\_\_\_\_\_\_ a.m./p.m. daily or as follows,

 .

Duration:

Possible Side Effects:

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Doctor’s Signature | Date | Phone |

**Over-the-Counter Medication**

**Permission to Administer Form**

**Anytown Adventist School**

Name of Student:

Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dosage:

Purpose of Medication:

Time of day medication is to be given:

Possible side effects:

Anticipated number of days it needs to be given at school:

It is understood that the medication is administered solely at the request of and as an accommodation to the undersigned parent or guardian. In consideration of the acceptance of the request to perform this service by any person employed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adventist School, the undersigned parent or guardian hereby agrees to release the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adventist School and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Conference and its personnel from any legal claims which they now have or may thereafter have arising out of the administration of or failure to administer the medication to the student.

I agree that I will provide the medication, properly labeled and in the original container, and that the dosage listed above is in harmony with the regular dosing listed on the bottle. I understand that any change to regular dosing (as indicated on the medication bottle) will require a doctor’s order.

I hereby give my permission for my child (named above) to take the above medication as ordered. I understand that it is my responsibility to furnish this medication and agree (by my signature below) that my child is competent to self-administer his/her medication.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature of Parent/Guardian | Date |

**Parent Release Form for Students with Special Academic Needs**

**Anytown Adventist School**

We the parents of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, desiring a Christian environment for our

 Name of Child

child and understanding that the Anytown Adventist School is not able to meet all of the special academic needs of our child, do hold harmless the school from all liability in its efforts to provide an education for our child.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Parent/Guardian Signature | Date |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Parent/Guardian Signature | Date |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| School Administrator Signature | Date |



**Photo Release Form**

**Anytown Adventist School**

I hereby consent and authorize ANYTOWN ADVENTIST SCHOOL or its assigns to use my name and/or the names of my family members who are minors, as listed below, as well as my likeness, photos, videos, and other information (or that of family members who are minors) for the purpose of school news releases, publicity, advertising, publication, or distribution as ANYTOWN ADVENTIST SCHOOL believes appropriate. I further consent to such use in their present form and to any changes, alterations, or additions thereto.

I hereby release ANYTOWN ADVENTIST SCHOOL from all liability in connection with all such uses.

Additional comments (if any):

Dated this \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

(Please **Print** Name)

(Please **Sign** Name)

Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:

Additional Minor Family Members to Whom the Release Applies:

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Witness:

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (Please **Print** Name) | (Please **Sign** Name) | (Date) |

**Release of Student Records for**

**Transferring Students**

**Anytown Adventist School**

Please give the contact information for the school that your child is currently attending or last attended:

School:

Address:

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number:

To Whom It may Concern:

The following students has enrolled in, or been accepted to, Anytown Adventist School.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Student | Date of Birth |

Please forward all school records that are needed for this change of schools.

* Cumulative Folder and/or report cards
* Withdrawal Grades – with your grading key
* Health and Psychological Records
* Academic Testing Information

If for any reason your school is not able to release these records, please advise us immediately.

Thank you for your assistance.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Parent’s Signature | Date |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| School Official’s Signature | Date |



**Retention Request**

**(See Union Education Code Book for complete instructions)**

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Student’s Full Name | Date of Birth | Present Grade |

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Present Age (Years/Months) |  | Age Entered 1st Grade (Years/Months) |

1. Reason for requesting retention:
2. Last achievement test administered:

 Date administered:

 Composite Grade Equivalent:

 Composite Percentile:

Attach copy of student’s Individual Performance Profile

1. Teacher evaluation of scholastic needs:
2. Methods and materials used to meet special needs:

**Retention Request – Page 2**

1. Teacher’s evaluation of social and emotional development, including attitudes and home background:
2. Survey of past history in school:
3. Physical development of student (including any health concerns)
4. Dates of communication with parents and their reactions:
5. Recommendation of teacher:

|  |  |  |  |
| --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| Teacher’s Signature | Date | Principal’s Signature | Date |

*We have discussed our child’s academic needs with the classroom teacher and have been made aware of the necessity for more instruction. We agree that our child should be retained understanding that such a placement is subject to approval by the Conference Office of Education and the school leadership.*

|  |  |  |  |
| --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_ |
| Parent or Guardian Signature | Date | Parent or Guardian Signature | Date |

|  |
| --- |
| Education Committee Action (circle one) Approved Denied |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date | Superintendent’s Signature |



**Room Parent Request**

**Anytown Adventist School**

Dear Parents:

Each year our class has Room Parents to assist the teacher in the following types of classroom projects:

1.
2.
3.
4.

If you would like to help us this year, please complete and return the bottom portion of this form.

Sincerely,

Ms. Jane Doe

Lower Grades Teacher

Cut Here Cut Here

Yes, I can be a Room Parent this year.

I would be interested in helping with:

1.
2.
3.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature | Date |

**SCHOOL HANDBOOK**

**Anytown Adventist School**

**![C:\Users\lohoward\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\DNN2WEBW\MP910220965[1].jpg]()**

**Insert Current School Year**

**Insert Address**

**City, State/Province, Zip/Postal Code**

**(555) 555-5555**

“True education means more than pursuing a certain course of study. It has to do with the whole person, and with the whole period of existence possible to human beings. It is the harmonious development of the physical, the mental, and the spiritual powers.”

Ellen G. White

*True Education*, p. 9

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1

**Directory**

**Anytown Adventist School Personnel**

**TEACHERS**

Sue Jones, Grades 5-8 (899) 555-1111

 George Smith, Grades 1-4 and Principal (899) 555-1122

**SCHOOL BOARD CHAIR**

Rhoda Burns (899) 555-1133

**SCHOOL TREASURER**

Mike Apple (899) 555-2233

**PASTOR**

Ken Leader (899) 555-1234

**HOME AND SCHOOL LEADER**

 Sarah Williams (899) 555-2345

**SUPERINTENDENT OF EDUCATION**

 Ron Burkside (202)333-4444

**SCHOOL BOARD**

 Mike Apple Term Ends 6/11 (899) 555-4848

 Mark Brown Term Ends 6/11 (899) 555-2923

 Lynn Coe Term Ends 6/13 (899) 555-3432

 John Doe Term Ends 6/12 (899) 555-3221

 Howard Edwards Term Ends 6/12 (899) 555-3333

 Doug Parr Term Ends 6/11 (899) 555-3232

 Candy Peoples Term Ends 6/12 (899) 555-2345

 Carol Summer Term Ends 6/12 (899) 555-8789

 Tim Thomas Term Ends 8/13 (899) 555-7892

 **Ex-officio Members:** Superintendent of Schools, School Principal, School Treasurer, Pastor, Home and School Leader.

2

**Philosophy**

The Seventh-day Adventist Church recognizes God as the ultimate source of existence and truth. In the beginning God created in His image a perfect humanity, a perfection later marred by sin. Education in its broadest sense is a means of returning human beings to their original relationship with God. The distinctive characteristics of this Adventist worldview, built around creation, the fall, and redemption, are derived from the Bible and the inspired writings of Ellen G. White.

The aim of true education is to restore human beings into the image of God as revealed by the life of Jesus Christ. Only through the guidance of the Holy Spirit can this be accomplished. An education of this kind imparts far more than academic knowledge. It fosters a balanced development of the whole person—spiritual, physical, intellectual, and social—a process that spans a lifetime. Working together, homes, schools, and churches cooperate with divine agencies to prepare students to be good citizens in this world and for eternity.

**Mission Statement**

The Anytown Adventist School provides Christ-centered education where students can develop a closer relationship with Jesus. Biblical teaching, academic excellence, civic duty, and service are all emphasized in a safe environment.

**Objectives**

Each teacher strives to create a learning climate that is loving—yet firm, accepting—yet challenging. Every child is special and will be given individual attention. Students will be taught personal responsibility and respect for the rights and privileges of others. This includes respect for the home, school, and government. The teachers strive to help each student develop a high degree of academic achievement as well as a personal relationship with God, preparing them for a life of service.

**Accreditation**

The Accrediting Association of Seventh-day Adventist Schools, Colleges, and Universities, Inc. (AAA) accredits Anytown Adventist School. The North American Division Commission on Accreditation serves as the agent of AAA for all North American Division schools. AAA is accredited by the National Council of Private School Accreditation.

Anytown Adventist School is recognized as an approved school by the state/province.

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**Admission**

**Agreement**

By registering at Anytown Adventist School, the student(s), parent(s), and/or guardian(s) agree to abide by the judgment of the school board as it applies to standards of dress and conduct. Registration implies an obligation to meet on time the financial responsibilities that accrue out of tuition, fees, or other applicable charges approved by the School Board. Only students who desire a Christian education and who are willing to live in harmony with the standards of Anytown Adventist School will be admitted or retained.

**Entrance Policy**

Anytown Adventist School is pleased to welcome young people who desire a Christian education and who agree to abide by the rules and guidelines set up by the school. Students who wish to attend must complete the application form and submit it to the school for review by the Admissions Committee. Students may be allowed to enter on probationary status pending the application review by the Admissions Committee.

Anytown Adventist School does not have the necessary equipment or staff to provide extraordinary special education services. Therefore, the school is unable to accept pupils who require such services.

**Non-discrimination Policy**

Anytown Adventist School admits students of any race, color, sex, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, sex, national or ethnic origin in the administration of its educational policies, financial policies, extra-curricular, or other school administered programs.

**Entrance Age**

First grade students must be 6 (six) years of age on or before September 15 and must successfully pass readiness testing before entrance to first grade is granted. Anytown Adventist School strongly recommends that a child be about seven years of age before beginning first grade.

**How to Apply**

Parents who wish to enroll their children in Anytown Adventist School may come to the school and complete the application and registration forms. After the application/registration forms have been completed, they will be forwarded to the Admissions Committee for review.

**Transfers**

Parents who wish to transfer their children from another school to Anytown Adventist School after the school term has started must complete the regular registration forms. A student may be allowed to attend classes on probationary status pending a decision by the Admissions Committee. However, there is no assurance of the student’s acceptance until notification is received from the Admissions Committee. All new students will be tested to determine final grade placement.

**Medical**

**Physical Examinations**

The following students must have a physical examination before being admitted to the school:

1. All **new students** entering or transferring to the school. The completed physical examination form must be returned to the school office within 30 (thirty) days after the student enters school.
2. All **fourth** graders.
3. All **seventh** graders.

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Physical examination forms will be sent to the homes of returning students before registration and are also available in the school office. A physical examination given with the past six months is acceptable.

**Immunizations**

Immunizations are required of all students per state/provincial statute. Current immunization cards for each student must be on file in the school office. Students may be exempt from this immunization requirement if their lives or health would be endangered or if their parents follow a religious belief whose teachings are opposed to such immunizations. If this is the case, an exempt card for the student must be on file in the school office. All immunization cards must be filled out **completely** and returned to the school office by **October 15**. Immunization records are audited annually to assure compliance with the statute.

All new or transferring students will have 30 days after beginning school to return the completed immunization card. Failure to have a current immunization card on file will require that the student be suspended until immunization records are complete and on file in the school office.

**Medication**

Whenever a student needs medication, these guidelines are to be followed:

* The medication must be in its original container.
* Prescription medication must be accompanied with written instructions from the doctor indicating the method, amount, and time the medicine is to be administered.

All medication should be given to the teacher upon arrival at school. The student’s teacher will administer the medication according to the written direction provided with the medication.

No over-the-counter medications will be administered unless they have been provided by the student’s parent/guardian with proper written authorization as to the amount and time for administering the medication.

**Emergencies**

In case of serious emergency, such as injury, accident, or sickness, the school will attempt to contact the student’s parent or guardian. If this individual cannot be reached, and in the judgment of the teacher or principal immediate medical attention is needed, the teacher or principal will summon or take the student to receive medical aid. All students must have a *Consent to Treatment* form, signed by the parent or guardian, on file in the school office.

**School Accident Insurance**

The School provides limited accident insurance for each student. The insurance covers accidents resulting while students are participating in regular school activities or while in transit to or from school-sponsored activities. Specific information regarding school accident insurance will be provided to each parent/guardian.

**Attendance**

**School Hours**

 Monday-Thursday: 8:00 AM – 3:15 PM

 Friday: 8:00 AM – 12:00 PM

Students should **arrive and leave within 30 minutes of the scheduled school hours** unless other arrangements are made with the principal. Students remaining more than 30 minutes following dismissal will be charged a $10.00 per ½ (half) hour babysitting fee that will be added to the school bill.

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**Attendance Policy**

The school calendar is provided in the registration packet. There are 178 pupil-student contact days.

Parents are expected to ensure that their children attend school regularly and on time. All students are encouraged to schedule non-emergencies (dental appointments, doctor appointments, etc.) outside of school hours.

When a student is absent, parents are required to contact the school office by **8:00 AM** on the day of the absence. A parent should also send a **written excuse** with the child on the day he/she returns to school. Parents are encouraged to contact the teacher and make arrangements to pick up assignments immediately after dismissal.

**Field Trips**

Off-campus educational activities are sometimes coordinated with the school program. Notices regarding each field trip are sent home informing parents and guardians of these planned activities. Written permission will be required for each trip. If no written permission slip is returned to the school, the student will remain at the school. In some instances, a small fee may be necessary to defray trip expenses.

**Unscheduled School Closings**

When severe weather conditions threaten, parents should tune in to WWG radio (1240 AM) or WWG-TV (Channel 4) for school closure announcements. Any unscheduled school delays or closings will be broadcast on these two networks.

**Finances**

**Introduction**

As a Christian educational institution, Anytown Adventist School has as its primary goal the uplifting of Jesus Christ. This involves both desire and responsibility on the part of the school in handling its finances in a positive Christ like manner as well as promoting Christian values. It is the commitment of the school to operate financially as Scripture admonishes in Romans 13:7-8, *“Give everyone what you owe him: if you owe taxes, pay taxes; if revenue, then revenue; if respect, then respect; if honor, then honor. Let no debt remain outstanding, except the continuing debt to love one another...”* As a Christian institution, we feel the responsibility of keeping all bills current and as such, depend upon the timely payment of tuition and other appropriate fees by parents who have chosen to enroll their children at Anytown Adventist School.

To keep the cost as low as possible and to furnish the funds necessary for the school to meet its operating expenses, the following financial policies have been adopted:

**Registration Fee**

The registration fee is $135.00 per student. It is due at the time of registration.

**Tuition Rates**

* Annual tuition for the first child in a family is $1500.00.
* Annual tuition for the second child in a family is $1400.00.
* Annual tuition for the third child in a family is $1300.00.
* There is no tuition for the fourth or more children in a family.

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**Method of Payment**

Anytown Adventist School operates on a ten-month payment schedule, August – May. Tuition is due by the 10th of each month. Checks or money orders should be made payable to Anytown Adventist School. Payments can be mailed to the school or given to the teacher, principal, or school treasurer.

**Discounts**

There is a $5.00 on-time discount per student when payment is made by the 10th of the month. This discount will only be offered if the account is current and the student is not receiving financial assistance.

A discount of 5% is available when the full year’s tuition is paid by September 1.

**Late Fee**

A late fee of $15.00 will be billed to each family’s account if payment is not received by the 15th of the month.

**Delinquent Accounts**

It is the responsibility of the parent or guardian to pay the child’s tuition by the 10th of each month. If an account is 5 days past due a written reminder will be sent. If the account remains unpaid after the 30th of each month a second written notice will be sent. If the financial obligation is 30 days in arrears and payment or financial arrangements have not been initiated by the parent/guardian, the child(ren) will be temporarily suspended until the account is current or satisfactory arrangements have been made with the School Finance Committee.

**Unpaid Prior Balances**

Registration for a new school year is contingent on the previous year’s account being paid in full.

**Financial Assistance**

Limited financial assistance is available for families of the Anytown Seventh-day Adventist Church showing financial need. Applications for financial assistance may be obtained from the church office. All financial assistance applications should be submitted to the church office

**Late Enrollment**

Students enrolling after school has begun will be responsible for the registration fee and for a prorated portion of the total tuition, based on the number of school days missed. The registration fee must accompany the application for admission and be received by the principal before the student attends class.

**Withdrawal from School**

Students are considered enrolled in school and will continue to be responsible for all tuition payments until they have officially withdrawn at the school office. Any refund of tuition payments will be prorated. Registration fees are non-refundable.

**General Information**

**Curriculum**

Curriculum taught in Seventh-day Adventist Schools is based on the Word of God, is rooted in the belief that God created us with minds that can grasp spiritual and intellectual truths, and aims first to lead the student to accept Christ as his/her personal Lord and Savior. The curriculum stresses educating students for a life of worship, growth, and service, places a high estimate on the worth of the individual student, and dictates that Seventh-day Adventist values be developed in every subject area at all grade levels.

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Teachers will offer a cohesive curriculum enabling students to see connections between the many fields of learning by integrating faith throughout the curriculum, building connections within a subject area and to other related areas including co-curricular activities, and cooperating with other teachers in integrating curriculum between subject areas and grade levels.

Typical course of study includes Art, Bible, Computers, Integrated Language Arts (English, Handwriting, Reading, and Spelling), Mathematics, Music, Physical Education, Science and Health, and Social Studies.

**Discipline**

Anytown Adventist School promotes Christian values and character building. Students who do wish to maintain these standards are accepted or retained in the school. Both printed and stated regulations hold equal values. The school board has designated that the principal is responsible for the interpretation and enforcement of school regulations:

* Respect the spiritual ideas of the Seventh-day Adventist church.
* Show respect to and cooperate with all school personnel and volunteers.
* Show respect for and protect school property and the rights of others.
* Abstain from those activities that destroy the development of the physical, mental, or spiritual life.
* Obey any regulations adopted and announced during the school year.

In any group, it is always necessary to have rules to provide for the rights, health, safety, and general welfare of all. The classroom teacher is the sole authority in the classroom and develops/enforces classroom rules and regulations. The next level of discipline is the principal. The principal has the right to temporarily suspend students who refuse to cooperate with the classroom teacher or do not follow the policies outlined in the handbook.

The Discipline Committee will consider situations where students continually refuse to follow the standards and policies of the school and/or classroom. This committee makes a recommendation to the School Board concerning whether the student should be expelled. The School Board will expel students who continually refuse to follow the policies and rules. The student is invited to appear before the School Discipline Committee or School Board when expulsion is being considered. The possibility of reinstatement at a later time is subject to review by the School Board.

**School Board**

The members of the Anytown Seventh-day Adventist Church elect the School Board. The Superintendent of Education of the Anystate Conference advises the Board in planning and operating the school program.

The School Board usually meets on the second Tuesday of each month. These meetings are normally open meetings and parents, church members, or other friends of the school are welcome to attend. Occasionally, when sensitive or personnel items are discussed, the attendance at the meeting is restricted to the School Board members.

An individual who desires to address the School Board on a certain topic should contact the School Board chair with that request.

**Student Appearance**

Appearance not only tells a lot about a person, but it affects how we feel about ourselves. It not only shows what we are interested in and what matters to us, but appearance helps mold our mood and thus impacts the educational process.

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Each student should have a neat, clean, modest, and simple appearance that is in good taste and appropriate for the occasion. The principal will handle any questions regarding specific articles of clothing. To help in making decision, use the following guidelines as clothing is chosen:

1. Any writing or pictures on clothing must be in harmony with Seventh-day Adventist Christian standards. (Examples to avoid: rock star association, alcoholic/caffeine beverage association, and suggestive phrases.)
2. Students may not wear sleeveless shirts, dresses, or blouses.
3. Students may not wear tight-fitting pants or tops.
4. Bermuda type shorts and split skirts are permissible.
5. A student’s clothing is to cover the midriff at all times.
6. Clothing may not be ragged or torn.
7. Students may not wear ornamental jewelry, unnatural appearing make-up, or nail polish.
8. Students are to wear shoes at school, and if the shoes have laces, the laces are to be kept tied. Only sandals that have a strap fastened to the ankle may be acceptable. Flip flops are not allowed.
9. Hair should be kept neatly cut and groomed.
10. If a teacher deems it proper to allow athletic-style clothing on a special day, parents and students will be notified.

**Student Responsibility**

“In perfecting a Christian character, it is essential to persevere in right doing. I would impress upon our youth the importance of perseverance and energy in the work of character-building...They should ever keep the fact before their eyes that they have been bought with a price, and should glorify God in their bodies and spirit, which are His.” *Messages to Young People, p. 45*

These school policies are listed for reference when questions arise. They are intended to make the students’ year as enjoyable as possible.

**Students are expected to:**

1. Avoid chewing gum on school grounds.
2. Be honest. Abstain from cheating, stealing, gambling, or betting.
3. Promote safety. Abstain from having at school: firearms, explosives, knives, dangerous animals, or other unsafe things.
4. Live wholesome lives. Abstain from wearing, displaying, or having in their possession anything that indicates affiliation with atheism, spiritualism, cults, rock groups, intemperance, or other unfavorable groups or objectionable affiliations.
5. Keep their minds pure. Abstain from the use of profane or lewd language and actions and the possession of suggestive materials. They should not discuss things that are not in harmony with Christian standards.
6. Live healthfully. Abstain from using, possessing, or supplying to others tobacco, drugs, or alcohol in any form.
7. Display Christian courtesy. Abstain from bullying, ridiculing, harassing, or disgracing others.
8. Help maintain a desirable learning atmosphere in school by not bringing radios, cell phones, skateboards, toys, pets, electronic devices, etc., unless permission is obtained in advance from the teacher.
9. Protect and care for the property of the school, themselves, and others. Damages will be charged accordingly. The student shall immediately report any damages or misuse to the teacher, whether it is accidental or intentional.

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1. Refrain from any non-school-sponsored selling on school grounds.
2. Maintain an atmosphere conducive to study. Students are expected to maintain a *hands off* policy towards the opposite sex. This includes, but is not limited to, holding hands, kissing, and hugging.

**Telephone**

The school telephone is not to be used by students during school hours except under special circumstances and with the teacher’s permission. Pagers or cell phones are not allowed to be turned on during school hours.

If a student brings a cell phone or any other electronic device to school, he/she is to turn it in to the office or the teacher before school begins. If the teacher sees that a student has not turned in an electronic device, the item will be confiscated and held until the student’s parent comes to retrieve it.

Students will not be called from their classes to the telephone except in an emergency or when called by their parents.

**Visitors**

Parents are always welcome at the school and are encouraged to visit the classroom. It is requested that all visits be made by appointment with the teacher. For the security of the students, all visitors to the school are asked to announce their presence by first reporting to the school office before proceeding to the classroom. Students wishing to bring a friend to school should inquire with his/her teacher and must make these arrangements at least a day in advance.

**Harassment**

**Policy**

It is the policy of the Anytown Adventist School to strive for a learning environment for students that is free from sexual, racial, and religious harassment. This policy will be enforced before, during, and after school hours on all school property, including school functions and events held at other locations. Any action toward or by a student of this school to harass through conduct or communication of a sexual, racial, and religious nature shall be a violation of this policy. The staff of the Anytown Adventist School will be guaranteed the same environment free of sexual, racial, or religious harassment as due the student body.

In carrying out this policy, the Anytown Adventist School Board recognizes that sexual, racial, and religious harassment are subject to the General Conference of Seventh-day Adventist policies and applicable state and federal statutes.

The Anytown Adventist School Board will act to investigate all complaints, formal or informal, verbal or written of sexual, racial, or religious harassment and take appropriate action against any person who is found to have violated this policy.

**Definitions**

1. Sexual harassment consists of unwelcome sexual advances, requests for sexual favors, sexually motivated physical conduct, or other verbal or physical conduct or communication of a sexual nature when:
	1. Submission to that conduct or communication is made a term or condition, either explicitly or implicitly, of an individual’s obtaining or retaining employment or of obtaining an education; or

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* 1. Submission to or rejection of that conduct or communication by an individual is used as a factor in decisions affecting that individual’s employment or education; or
	2. That conduct or communication has the purpose or effect of substantially or unreasonably interfering with an individual’s employment or educational environment.
1. Other types of harassment could be physical intimidation, racial degradation, or teasing regarding an individual’s personal characteristics. Some examples of such unwelcome conduct include the following:
2. Referring to another student as “gay,” or synonyms thereof
3. Derogatory comments implying ability or lack thereof being related to gender, race or religion
4. Derogatory notes, comments, epithets or “jokes” toward another gender, race or religion
5. Comments about male or female body parts in a crude context
6. Visually leering
7. Displaying sexually suggestive objects, pictures or cartoons
8. Physically touching another in a sexually suggestive way or in a private area
9. Obscene gestures or hand signals
10. Threatening to cause harm to another or to the property of another

These other areas of behavior are considered harassment when the conduct:

* 1. Has the purpose or effect of creating an intimidating, hostile, or offensive working or academic environment.
	2. Has the purpose or effect of substantially or unreasonably interfering with an individual’s work or academic performance; or
	3. Otherwise adversely affects an individual’s employment or academic opportunities.
	4. Harassment includes but is not limited to the following: subjecting students to derogatory remarks, insults, slurs, jokes, or tricks based on race, ethnicity, or gender.

**Procedures**

Any student who believes he or she has experienced any sexual, racial, or religious harassment by a student or an employee of the Anytown Adventist School or any unpaid instructor or volunteer, or any third person with knowledge or belief or conduct that may constitute harassment should report the alleged acts immediately to the principal, a teacher, school board member, or pastor.

***A verbal report in the presence of two authority figures will be required of a student reporting harassment.***

When reporting an incident, it is helpful to provide as much information as possible, including the following:

1. A description of the event(s)
2. The number of occurrences, with dates and places
3. The names of any witnesses
4. Any documents or other exhibits, if appropriate

Students may receive guidance, advice, support and/or advocacy from school staff, including administrators, counselors, teachers, or other staff.

The privacy and data privacy rights of all persons involved will be respected in accordance with the appropriate statutes. Upon completion of the investigation, a representative of the Education Board of the Conference will meet with the complainant and discuss the outcome. The outcome will include disciplinary action when discipline is appropriate. Students who engage in any activity of a sexual nature are subject to expulsion.

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There will be no retaliation against any person who reports harassment or participates in an investigation. The willful filing of a false report will be considered a violation of the Student Responsibility Policy.

**Note to Parents**

The success of the school depends largely upon the full cooperation between parents and teacher. It sometimes happens that students make complaints to their parents concerning school matters, especially when measures for discipline are involved. In such cases, parents are urged to withhold judgment until the teacher is contacted and an investigation of the matter is made. Following this plan can prevent unhappy consequences.

Parents should discuss policies, problems, or complaints with the teacher rather than with other parents or members of the community.

A parent who has a question regarding something at school should contact the teacher or school principal. If the issue is still not resolved it should be taking to the School Board Chairperson.

**Handbook Revised by School Board Action on 0/00/00**

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**Student-led Narrative Form**

**Student-Parent-Teacher Conference**

**Anytown Adventist School**

Student’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date

My grades for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ grading period are:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bible | \_\_\_\_\_\_\_\_\_\_\_\_ | Language Arts | \_\_\_\_\_\_\_\_\_\_\_\_ | Art | \_\_\_\_\_\_\_\_\_\_\_\_ |
| Math | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | Music | \_\_\_\_\_\_\_\_\_\_\_\_ |
| Science | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | P. E. | \_\_\_\_\_\_\_\_\_\_\_\_ |
| Social Studies | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | Other | \_\_\_\_\_\_\_\_\_\_\_\_ |

These are the things I do well:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ because
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ because
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ because

The one thing from above that I need to continue working on the most is:

These are the things I struggle with:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ because
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ because
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ because

The one thing from the above list that I am going to work on the most is:

This is what I am going to do to improve this subject’s grade:

**Student-led Narrative Form – Page 2**

You can help me to improve by doing this:

My goal next quarter is to

Thank you for

When we get home, I want you to look at my work with me and notice these things about it:

 Signed

**Unit Plan**

|  |  |  |
| --- | --- | --- |
| **Subject:** | **Unit:**  | **Grade(s):** |
| **Unit Summary:** |
| **Essential Learnings, Standards, and/or Objectives for Unit:** | **Assessment** |
| **Page(s)** | **Lesson Summary** | **# of Days** |
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|  |  |  | **Materials Needed** |
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**Yearly Plan – One Subject per Page**

**Sample 1**

**Subject:**

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|  | **WEEK** | **DAYS** | **CONCEPTS, UNITS, AND/OR TEXTBOOK PAGES** |
| **FIRST QUARTER** |  |  |  |
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| **SECOND QUARTER** |  |  |  |
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| **THIRD QUARTER** |  |  |  |
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| **FOURTH QUARTER** |  |  |  |
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**Yearly Plan – 3 Subjects per Page**

**Sample 2**

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|  | **WEEK** | **DAYS** | **PATHWAYS** | **MATH** | **BIBLE** |
| **FIRST QUARTER** |  |  |  |  |  |
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**Yearly Plan – 3 Subjects per Page – Page 2**

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|  | **WEEK** | **DAYS** | **SOCIAL STUDIES** | **SCIENCE** | **FINE ARTS** |
| **FIRST QUARTER** |  |  |  |  |  |
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| **FOURTH QUARTER** |  |  |  |  |  |
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 **Yearly Plans – 1st Quarter Sample 3**

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| Name: | Write Actual Dates for Week above the Number of the Week |
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| Grade: | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Pathways** |  |  |  |  |  |  |  |  |  |  |
| **Math** |  |  |  |  |  |  |  |  |  |  |
| **Social Studies** |  |  |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |  |  |
| **Bible** |  |  |  |  |  |  |  |  |  |  |
| **Fine Arts****Physical Education** |  |  |  |  |  |  |  |  |  |  |

**Yearly Plans – 2nd Quarter**

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| Name: | Write Actual Dates for Week above the Number of the Week |
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| Grade: | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Pathways** |  |  |  |  |  |  |  |  |  |  |
| **Math** |  |  |  |  |  |  |  |  |  |  |
| **Social Studies** |  |  |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |  |  |
| **Bible** |  |  |  |  |  |  |  |  |  |  |
| **Fine Arts****Physical Education** |  |  |  |  |  |  |  |  |  |  |

**Yearly Plans – 3rd Quarter**

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| Name: | Write Actual Dates for Week above the Number of the Week |
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| Grade: | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Pathways** |  |  |  |  |  |  |  |  |  |  |
| **Math** |  |  |  |  |  |  |  |  |  |  |
| **Social Studies** |  |  |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |  |  |
| **Bible** |  |  |  |  |  |  |  |  |  |  |
| **Fine Arts****Physical Education** |  |  |  |  |  |  |  |  |  |  |

**Yearly Plans – 4th Quarter**

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| Name: | Write Actual Dates for Week above the Number of the Week |
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| Grade: | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Pathways** |  |  |  |  |  |  |  |  |  |  |
| **Math** |  |  |  |  |  |  |  |  |  |  |
| **Social Studies** |  |  |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |  |  |
| **Bible** |  |  |  |  |  |  |  |  |  |  |
| **Fine Arts****Physical Education** |  |  |  |  |  |  |  |  |  |  |