

EXPLANATION: THE "EVERY STUDENT SUCCEEDS ACT OF 2015 (P. L. 114-95)" ONLY ALLOWS PARENTS/GUARDIANS OF STUDENTS OR STUDENTS WHO HAVE REACHED AGE 18 TO OPT-OUT OF RELEASE OF INFORMATION TO MILITARY RECRUITERS AND INSTITUTIONS OF HIGHER EDUCATION.

FINANCIAL IMPLICATIONS: POSSIBLE COSTS OF REPRINTING OF FORMS

STUDENTS

09.14 AP.111

Notification of FERPA Rights

Distribute this notice annually to parents and students.
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The Family Educational Rights and Privacy Act (FERPA) affords parents and "eligible students" (students 18 years of age or older or students who are attending a postsecondary institution) certain rights with respect to the student's education records. They are:

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

Parents or eligible students should submit to the school Principal/designee a written request that identifies the record(s) they wish to inspect. The Principal will make arrangements for access and notify the parent or eligible student of the time and place where the record(s) may be inspected.

2. ***The right to inspect and review logs documenting disclosures of the student's education records.***

Except for disclosure to school officials, disclosures related to some judicial orders or lawfully issued subpoenas, disclosures of directory information, and disclosure to the parent or eligible student, FERPA regulations require the District to record the disclosure.

3. ***The right to request the amendment of the student's education records that the parent or eligible student believes are inaccurate, misleading, or in violation of the student's privacy or other rights.***

Parents or eligible students may ask the District to amend a record that they believe is inaccurate, misleading, or in violation of privacy or other rights. They should write the school Principal, clearly identify the part of the record they want changed, and specify why it is inaccurate, misleading, or in violation of their privacy or other rights.

If the District decides not to amend the record as requested by the parent or eligible student, the District will notify the parent or eligible student of the decision and advise him/her of the right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the parent or eligible student when notified of the right to a hearing.

Notification of FERPA Rights

4. *The right to provide written consent prior to disclosure of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.*

Exceptions that permit disclosure without consent include:

- a. Disclosure to school officials with legitimate educational interests. A "school official" is a person employed by the District as an administrator, supervisor, instructor, or support staff member (including health or medical staff and law enforcement unit personnel); a person serving on the school Board; a volunteer, or an outside person or company with whom the District has contracted to perform a special task (such as an attorney, auditor, medical consultant, or therapist); or a parent or student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his/her tasks.

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

This may include contractors, consultants, volunteers, and other parties to whom the District has outsourced services or functions.

- b. Upon request, disclosure of education records without parent/eligible student notice or consent to officials of another school district or post-secondary institution in which a student seeks or intends to enroll or is already enrolled or to other entities authorized by law so long as the disclosure is for purposes related to the student's enrollment or transfer.
- c. Disclosure of information to those whose knowledge of such information is necessary to respond to an actual, impending, or imminent articulable and significant health/safety threat.
- d. Disclosure to state and local educational authorities and accrediting organizations, subject to requirements of FERPA regulations.

Designated Kentucky State agencies may be permitted access to student record information, which will depend on the authority granted to their particular agency.

5. *The right to notify the District in writing to withhold information the Board has designated as directory information as listed in the annual directory information notice the District provides to parents/eligible students.*

To exercise this right, parents/eligible students shall notify the District by the deadline designated by the District.

Notification of FERPA Rights

6. *The right to prohibit the disclosure of personally identifiable information concerning the student to recruiting representatives of the U. S. Armed Forces and its service academies, the Kentucky Air National Guard, ~~and the Kentucky Army National Guard~~ and institutions of higher education.*

Unless the parent or ~~secondary school~~ student who has reached age 18 requests in writing that the District not release information, the student's name, address, and telephone number (if listed) shall be released to Armed Forces recruiters and institutions of higher education upon their request.

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7. *The right to file a complaint with the U.S. Department of Education concerning alleged failures by the District to comply with the requirements of FERPA.* The name and address of the Office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202-4605

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FINANCIAL IMPLICATIONS: POSSIBLE COSTS OF REPRINTING OF FORMS

STUDENTS

09.14 AP.12

Student Directory Information Notification

Consistent with the Family Educational Rights and Privacy Act (FERPA), parents (or students 18 or older) may direct the District not to disclose directory information listed below. We are required to disclose a student's name, address, and telephone listing at the request of Armed Forces recruiters or institutions of higher education, unless a parent or ~~secondary-school~~ student who has reached age 18 regardless of age, requests that this information *not* be disclosed.

Date

Dear Parent/Eligible Student,

This letter informs you of your right to direct the District to withhold release of student directory information for _____. Following is a list of items that the District considers

Student's Name

student directory information. If you wish information to be withheld, please choose one (1) of the two (2) options below in both Sections I and II. Choose Option 1 if the District may not release any item of directory information; Option 2, if the District may release only selected items of information. Then check those items that may be released. Please be advised that parents cannot prevent the school from using directory information on District-issued ID cards or badges.

If we receive no response within thirty (30) days of the date of this letter, all student directory information will be subject to release without your consent. If you return this signed form on time, we will withhold the directory information consistent with your written directions, unless disclosure is otherwise required or permitted by law. Once there has been an opt-out of directory information disclosure, the District will continue to honor that opt-out until the parent or the eligible student rescinds it, even after the student is no longer in attendance.

<u>Student Directory Information Listing</u>	
Section I <u>Third Parties, Limited to Institutions of Higher Education & Potential Employers</u> <u>Release to Third Parties other than Armed Forces Recruiters and Institutions of Higher Education</u> (Parent or student 18 or older <u>who has reached age 18</u> may sign below to direct the District to withhold information in this section.)	Section II <u>Armed Forces Recruiters & Institutions of Higher Education</u> (Parent or secondary-school <u>student who has reached age 18, regardless of age</u> , may sign below to direct the District to withhold information in this section.)
CHOOSE ONE OF THE OPTIONS BELOW: <input type="checkbox"/> Option 1: The District MAY NOT RELEASE ANY information listed below. <input type="checkbox"/> Option 2: The District MAY RELEASE ONLY the information checked below.	Choose one of the Options below: <input type="checkbox"/> Option 1: The District MAY NOT RELEASE ANY information listed below. <input type="checkbox"/> Option 2: The District MAY RELEASE ONLY the information checked below.
<i>If you choose Option 2, check the item(s) of information listed below that the District may release.</i>	<i>If you choose Option 2, check the item(s) of information listed below that the District may release.</i>
<input type="checkbox"/> Student's name <input type="checkbox"/> Student's address <input type="checkbox"/> Student's school email address <input type="checkbox"/> Student's telephone number <input type="checkbox"/> Student's date and place of birth <input type="checkbox"/> Student's major field of study <input type="checkbox"/> Information about the student's participation in officially recognized activities and sports	<input type="checkbox"/> Student's weight and height (if a member of an athletic team) <input type="checkbox"/> Student's dates of attendance <input type="checkbox"/> Degrees, honors and awards the student has received <input type="checkbox"/> Student's photograph/picture <input type="checkbox"/> Most recent educational institution attended by the student <input type="checkbox"/> Grade level
NOTE: IF DIRECTED TO WITHHOLD A STUDENT'S NAME, GRADE LEVEL, OR PHOTOGRAPH, THAT INFORMATION WILL NOT BE INCLUDED IN ANY SCHOOL OR DISTRICT PUBLICATION RELEASED TO THE PUBLIC. A PARENT WISHING TO PERMIT SUCH INFORMATION ABOUT HIS/HER CHILD (NAME, PICTURE, ETC.) TO BE INCLUDED IN A SCHOOL OR DISTRICT PUBLICATION (YEARBOOK, SPORTS PROGRAM, ETC.) THAT IS SOLD FOR FUND-RAISING PURPOSES MUST PROVIDE WRITTEN CONSENT FOR SUCH PURPOSES.	

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Parent/Student Signature

Date

EXPLANATION: EFFECTIVE WITH THE 2015 SCHOOL YEAR, THE ONLY MEDICAID CONSENT FORMS ACCEPTED FOR MONITORING ARE LOCATED ON KDE'S WEBSITE.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

EXPLANATION: STUDENT RECORDS ARE OFTEN REQUESTED ELECTRONICALLY. THIS ADDRESSES SUCH.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.14 AP.24

Release/Inspection of Student Records/Medicaid Consent
TO THIRD PARTY

Date: _____

Name of School: _____

The _____ Schools are hereby authorized to:

☐ Release or copy

☐ Permit the inspection of

the records listed below for _____, who was born on

Student's Name

_____. The individual or agency to whom this information is to be released is _____.

I understand that the records affected are checked below, along with the reason(s) for the requested release or authorization to inspect.

RECORDS (including electronic)	PURPOSE
<input type="checkbox"/> All cumulative records	
<input type="checkbox"/> Attendance record only	
<input type="checkbox"/> Grade records only	
<input type="checkbox"/> Standardized test data only	
<input type="checkbox"/> Special education records only	
<input type="checkbox"/> Other: _____	

This release is effective only for the specified records or types of records (including electronic) on hand as of the date you sign below UNLESS you specifically authorize further release of the specified records or types of records as follows. (Check and initial ONE of the following.)

- ☐ I authorize **on-going release** of the specified records or types of records to the entity/individual specified until student reaches age of 18 unless earlier revoked in writing. (Initials _____)
- ☐ I authorize release of the specified records or types of records until the end of the present school year (June 30th) unless earlier revoked in writing. (Initials _____)

*Signature of Parent/Guardian or Individual Acting as Parent under FERPA**

Date

Signature of Student, 18 or Older or Attending Post-secondary Institution

Date

*Living in the student's home in the absence of the parent on a day-to-day basis

MEDICAID CONSENT

☐ I have received my Annual Notification of Parent Rights regarding Medicaid billing, and I understand and agree that the District may access my child's or my public benefits or insurance to pay for services under the Individuals with Disabilities Education Act. (This also authorizes release of education records as specified above.)

Signature of Parent/Guardian

Date

EXPLANATION: THIS PROCEDURE MAY BE UTILIZED FOR SUPERVISION WHEN A REQUEST FOR SPECIAL TREATMENT IS MADE DUE TO TRANSGENDER IDENTITY OR OTHER ISSUES WHICH MIGHT REQUIRE SPECIAL SUPERVISION CONSIDERATIONS.
FINANCIAL IMPLICATIONS: NONE ANTICIPATED.

STUDENTS

09.221 AP.1

Supervision of Students

RESPONSIBILITY

Principals shall develop and implement a plan of supervision for their schools to address the following areas:

1. Bus loading and unloading;
2. Meals;
3. Halls, restrooms, and playgrounds;
4. Time before and after the school day; ~~and~~
5. Field trips and other school activities; ~~and~~
- 5-6. Other Issues.

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Prior to the opening of school each year, the Principal shall submit the plan to the Superintendent/designee for review and to the Board for its approval.

EXPLANATION: SCHOOL OFFICIALS SHALL FOLLOW DIRECTIONS PROVIDED BY THE INVESTIGATING OFFICER OR CABINET FOR HEALTH AND FAMILY SERVICES AS TO WHETHER TO CONTACT A PARENT REGARDLESS OF WHOM THE ALLEGED PERPETRATOR IS.
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.4361 AP.21

Record of Student Arrest at School

This form shall be kept in the school office, and a duplicate copy shall be forwarded to the Central Office.

Student's Name _____			
Last Name		First Name	Middle Initial
Student's Address _____			
City		State	ZIP Code
Student's Age _____	Date of Birth _____	Student's Phone Number _____	
School _____	Grade _____	Teacher/Classroom _____	
Date of Arrest _____			

LAW ENFORCEMENT AGENCY: (Check one)

☐ City Police ☐ County Sheriff ☐ Kentucky State Police ☐ Other: _____

ARRESTING OFFICER: _____

NATURE OF THE OFFENSE CHARGED: _____

ISSUING AUTHORITY OF ARREST WARRANT: _____

PLACE OF CUSTODY: _____

PARENTS NOTIFIED BY: _____ at: _____ on _____
Employee Time Date

NOTE: If a student is an alleged victim of abuse or neglect ~~by a parent~~, school officials shall follow directions provided by the investigating officer or Cabinet for Health and Family Services ~~Families and Children~~ representative as to whether to contact a parent.

PARENT/GUARDIAN NOTIFIED: _____

Principal/Designee's Signature

Date

EXPLANATION: SB 228 AMENDED KRS 158.148 TO REQUIRE THE STUDENT DISCIPLINE CODE TO SPECIFICALLY PROHIBIT BULLYING.

FINANCIAL IMPLICATIONS: REPRINTING DISTRICT CODE OF ACCEPTABLE BEHAVIOR AND DISCIPLINE

STUDENTS

09.438 AP.1

Reporting of Code Violations

Students wishing to report bullying or other violation of the Code of Acceptable Behavior and Discipline may report it to a classroom teacher, who shall take appropriate action as defined by the code. The teacher shall refer the report to the Principal/designee for further action when the report involves an offense that may warrant suspension or expulsion of a student, any felony offense, or a report that may be required by law, including reports to law enforcement.

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RETALIATION PROHIBITED

Employees and other students shall not retaliate against a student because s/he reports a bullying or other violation of the code or assists or participates in any investigation, proceeding, or hearing regarding the violation. The Superintendent/designee shall take measures needed to protect students from such retaliation.

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EXPLANATION: THIS RECOMMENDATION DIRECTS SCHOOL STAFF THAT OUTSIDE SERVICE PROVIDERS ARE ALLOWED INTO THE SCHOOLS ONLY TO PROVIDE THERAPY OR DESIGNATED SERVICES TO STUDENTS IF THE OUTSIDE SERVICE PROVIDER HAS BEEN SOUGHT OUT AND CONTRACTED BY THE SCHOOL DISTRICT FOR SERVICES. OUTSIDE SERVICE PROVIDERS NOT SOUGHT OUT AND CONTRACTED BY THE DISTRICT WHO MEET SPECIFIED REQUIREMENTS MAY BE ALLOWED INTO SCHOOLS FOR OBSERVATION ONLY.
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

COMMUNITY RELATIONS

10.5 AP.1

Visitors to the Schools

CLASSROOM VISITATION

Requests for classroom observation by parents, educators, or other local citizens with legitimate interests shall be made to the Principal with reasonable notification. The Principal may grant the request if:

1. The teacher involved is notified in advance of the arrangement.
2. The number in the group is small enough to be accommodated in the classroom without interfering with the class.
3. The frequency of the visits does not interfere with the scheduled instructional program in the classroom.

SPECIAL INVITATION

A special invitation for parents and other interested persons to visit the schools may be extended during appropriate school programs or activities and special occasions.

OBSERVATION BY OUTSIDE AGENCIES

These procedures are established for the purposes of observation only.

NOTE: Unless an outside provider has been sought out and contracted for a needed service by the District, no private therapy or service shall be provided to a student during the school day, within a District School.

The following information/documentation is required by the District before a private, outside therapist/service provider can observe its private client within a District School. Information must be sent to the Director of Special Education (special education students) or to the Director of Health and Family Resource Youth Service Center (FRYSC) Services (regular education students):

- Background check clearance on file with District Schools Central Office;
- Individual liability insurance certificate or worker's compensation insurance certificate;
- A copy of credentials in the form of certification/license for the purpose of the observation; and
- A signed release (form can be requested from the school) by the parent/guardian noting that the therapist/outside service provider has been given permission to observe their child during the school day.

Once this information is received, the therapist/service provider may be allowed to come and observe the identified student as follows:

- At a time/day designated and assigned by the Principal/designee (to cause as little disruption to the class or school/learning environment as possible);

COMMUNITY RELATIONS

10.5 AP.1
(CONTINUED)

Visitors to the Schools

OBSERVATION BY OUTSIDE AGENCIES (CONTINUED)

- The therapist is to observe only during these designated times, in an education setting (or activity such as lunch or social gathering) and only if confidentiality of other students/parents and disruption of the educational process in these settings can be adequately addressed by the Principal/designee;
- At any time the school or District needs to cancel an appointment or not allow an outside agency/therapist/service provider to return to the school setting, the outside agency will be notified; and
- The outside service providers MUST provide a photo I.D. as well as sign in and out at the school office any time they are on school property during a school day.

Application and Permit for Use



SPENCER COUNTY PUBLIC SCHOOLS
207 WEST MAIN STREET
TAYLORSVILLE, KY 40071
(502) 477-3250 (502) 477-3259

Date of Application: _____ **Building and areas requested:** _____
Date of requested: _____ Number of Hrs. Needed: _____
Time to be opened: _____ Ending time: _____
Use of building/description of activities (Please Specify): _____

Description of equipment, apparatus, animals, etc., which will be brought into the school's building or upon the school's grounds: _____

As an authorized representative of the applicant, the undersigned agrees to use the above named school facilities in accordance with the policies of the Spencer County Board of Education.

Organization: _____ Phone: _____

Telephone: _____ Group Name: _____

Representative's Name(s): _____

Signature of person in charge of the group: _____

SCHOOL BUILDING/FACILITIES

Taylorsville Elementary _____
Spencer County Elementary _____
Spencer County Middle School _____
Spencer County High School _____
Classroom(s) _____
~~\$5.00~~ \$10.00 per hour/per room
Gym \$14.00 per hour
Auditorium \$50.00 per hour _____
Other _____

CAFETERIA/KITCHEN

Taylorsville Elementary _____
Spencer County Elementary _____
Spencer County Middle School _____
Spencer County High School _____

MUST HAVE FOOD SERVICE PERSONNEL

WHEN USING KITCHEN

Kitchen Rent: (\$14 \$50 per hour/non-school function
Dining Area \$14 per hour/non-school function
*Plus Non-Kitchen-Use/School Employee Rent: (\$14)
and/or Employee Time and 1/2 X Hourly Rate (cook)

TO BE FILLED OUT BY ~~SCHOOL OFFICE~~ CENTRAL OFFICE

(per hour/non-school function)

*Plus Employee/Time and 1/2 X Hourly Rate

	Rent: _____	Rent: _____
(Custodian)	Flat Hourly Rate: <u>\$24.00</u>	1 1/2 Hourly Rate: _____ (Café Worker) Flat Hourly Rate \$24.00
	Matching 17%: _____	Matching 17%: _____
	Hours: _____	Hours: _____
	Total Charges: _____	Total Charges: _____

Approved/Disapproved: _____
NAME TITLE

Note: Non Profit group use must clean up area used or will be charged for future use.

*Applicant has been given Liability Waiver/Information Sheet: _____

Make Checks payable to **Spencer County Schools Board of Education

BOARD POLICY – MUST HAVE SCHOOL EMPLOYEE AT ALL EVENTS

Liability Waiver

The _____ do hereby hold the Superintendent, Principal, school staff member,
(Name of Organization, Group, Individual, Etc.)

Spencer County Board of Education, board members, and council members individually and collectively harmless from any loss or damage to persons or property resulting from the use of and entrance to the facility and/or grounds, and equipment or vehicles being used in _____

(Name of Organization, Group, Individual, Etc.)

The _____ do hereby assume all responsibility including liability for loss or
(Name of Organization, Group, Individual, Etc.)

damage to persons or property resulting from the use of and entrance to the facility and/or grounds, and equipment or vehicles being used in: _____

(Name of Activity.)

The _____ do hereby provide the following assurances regarding the use
(Name of Organization, Group, Individual, Etc.)

of specified rental property:

1. Cause the facilities to be used in a safe manner without damage or injury to any property or person.
2. Hold the Superintendent, Principal, Spencer County Board of Education, Board members, **employees** and council members individually and collectively harmless from any loss or damage to persons or property resulting **for** its use.
3. Abide by all rules and regulations governing the use of school buildings and facilities.
4. Permit supervision of the facilities during use by the building custodian or person designated by the Principal and to pay the cost of cleaning.
5. If kitchen facilities are to be used, food service personnel employed by the Board of Education will be used to supervise the activities and will agree to pay the cost of cleanup.
6. To acknowledge that approval of this request does not signify District sponsorship, endorsement or approval of your organization or the activity.
7. To pay rental fees as designated by Director of Operations.

Under certain circumstances specified in District policy and/or procedure, the renting organization is required to provide liability insurance consisting of an insurance rider for the following amounts:

- 1) Insurance liability waiver of **one million dollars** with Spencer County Schools as additional insured.

The rider shall be for the time period of use of the building. You can obtain riders of this nature from your present insurance agency or perhaps one of the local insurance agencies in Spencer County.

The rider shall be given to the Spencer County Board along with the application. Please have the insurance agents name, address, and phone number on the waiver attachment.

Applicant agrees by the submission of this application that if it is accepted the following will be done:

Insurance Company _____

Phone _____

**All applications must be signed by a resident of Spencer County or responsible member of the organization, eligible to affix signature in the name of the organization, group, individual, etc.*

Applicant: _____

Approved by: _____

Address: _____

(Director of Operations)

Telephone: _____

Date: _____

Date: _____

Officer in Charge: _____

Signature _____

Position _____

**Application must be approved by Director of Operations, and a copy forwarded to the Building Principal.*

Nondiscrimination Policy Statement

The Spencer County School District does not discriminate on the basis of sex in the educational programs or activities that it operates and is required by TITLE IX of the educational Amendments of 1972 (P.L. 92-138), to discriminate in such a manner. Further, the school district does not discriminate on the basis of handicap, in treatment, admission or access to, or employment in, its programs or activities as required by Section 504 of the Rehabilitation Act of 1973 (P.L. 93-112), nor does the school district discriminate in any of the educational programs or activities it operates, on the basis of race, color, national origin, religion, marital status, which is required by Title VI, Civil Rights Act of 1964, the Age Discrimination Act of 1974.

The Director of Pupil Personnel for the Spencer County School District, Main Street, 207 West Main St., Taylorsville, Kentucky 40071 (502) 477-3250), has been designated to coordinate Spencer County's efforts and carry out its responsibilities under Title IX, Title VI, and Section 504.

EQUAL EDUCATIONAL AND EMPLOYMENT INSTITUTION**DAMAGE TO FACILITY AND EQUIPMENT:**

1. In the event of damage to building or equipment by groups using the building, the Principal shall immediately send a report to the Superintendent and to the responsible person of the group using the facility. Settlement, agreeable to the Board of Education, shall be prerequisite to additional use by the community group. Party using facility shall be responsible for any damage incurred.
2. Disregard of the policies governing the use of school buildings and facilities shall result in the refusal of the Board of Education to grant the offending organization or group further use of them.

CARE AND USE:

1. No property or equipment may be placed in the school or on school property that is hazardous or potentially hazardous.
2. No furniture or equipment shall be moved without authorization of the Principal.

UNAUTHORIZED USES:

1. The use of intoxicating liquor or harmful drugs, the carrying of firearms, deadly weapons or explosives, use of tobacco, nicotine, or vapor products as defined in KRS 438.305 ~~smoking~~ in any areas, and the sale of un-approved food items shall be prohibited on school premises. (KRS 438.050, KRS 437.095, KRS 437-012C, Board Policy 05.31 – 05.3)
2. Unauthorized personnel shall not enter any boiler room or tamper with any mechanical ventilation, or heating equipment, nor shall the cafeteria or cafeteria equipment be used without a staff member present.
3. The Board of Education does not permit the use of any facility beyond 12:00 midnight unless prior approval has been obtained from the Superintendent or his designee. However, this time limit does not include cleanup time by the organization.
4. The use of tobacco products, alternative nicotine products, or vapor products as defined in KRS 438.305 is prohibited twenty-four (24) hours a day, seven (7) days a week in any building and on any property owned or operated by the Board of Education. This will apply to indoor and outdoor facilities, inside Board-owned vehicles, stadiums/athletic fields and during school-sponsored trips and activities.

Nondiscrimination Policy Statement

~~4. Smoking is not permitted in the school buildings of Spencer County Schools. (Federal Regulations)~~

SECURITY:

The District shall furnish adequate security for the events.

PRESENCE OF AN EMPLOYEE DURING USE:

No school building shall be opened for use by groups when normally closed without the presence of an employee designated by the Director of Operations. The employee shall in no way be responsible for the conduct of persons present.

OFFICER IN CHARGE:

Groups using school facilities will provide adequate supervision of the event and will designate an officer of the organization who will be in charge of the event.

SCHEDULING OF FACILITIES:

No school facilities shall be used unless the use is scheduled through the Principal of the school. Normally, school facilities will not be scheduled unless the group applies three (3) days in advance.

Nondiscrimination Policy Statement

Dear Applicant for Rental of School Property,

The liability insurance waiver shall consist of an insurance rider for the following amount:

Insurance liability waiver of **one million dollars** with Spencer County Schools as additional insured.

The rider shall be for the time period of use of the building. You can obtain riders of this nature from your present insurance agency or perhaps one of the local insurance agencies in Spencer County.

The rider shall be given to the Spencer County Board along with the applications, Please have the insurance agents name, address, and phone number on the waiver attachment.

Thank you

SCHOOL FACILITIES

05.31 AP.21
(CONTINUED)

Community Inspection Report

GROUP NAME: _____

DATE OF USE: _____

HOURS:

FROM: _____ To: _____

AREAS USED:

CLEAN/ACCEPTABLE FOR NEXT DAY STUDENT USE

CAFETERIA _____

YES

NO

ROOM # _____

RESTROOMS _____

OTHER _____

INSPECTED BY: _____

DATE: _____ TIME: _____

*TURN REPORT INTO THE SUPERINTENDENT/DESIGNEE THE MORNING OF THE FOLLOWING SCHOOL DAY.

School Event Facility Usage Procedures

- 1) This form **MUST** be filled out at least one **WEEK** before any event.
- 2) This form must be emailed or printed and turned into the daytime school custodian.
- 3) If you choose **NOT** to clean the facilities yourself after the event, custodial services are required. **Note: Custodial services require a fee.**
- 4) If you choose to clean the facilities yourself, then you must contact the daytime custodian for cleaning supplies.
- 5) During and after event, building doors must be locked and secure at all times. **(DO NOT PROP DOORS OPEN)**
- 6) All lights must be turned off when leaving the building.

ATTENTION: If this form is not filled out and submitted to custodian, the HVAC (heating, ventilation, & Air-condition/Cooling) will be in unoccupied mode during your event.

School Name:

Date of Event:

Start Time:

End Time:

Person Responsible:

Group Name:

I am requesting Custodial services:

I am declining Custodial services:

Areas/locations occupied during event

Please list below all areas of event such as hallways room NUMBERS and restrooms:

For Custodian use only:

Inspected By:

Date:

Bus Driver's Report of Student Conduct

For behavior that requires a student to be removed from the bus, also complete Form 09.425 AP.21.

Date: _____ To: _____
Principal's Name

Student's Name _____
Last Name First Name Middle Initial
School _____ Bus Number _____ Trip Number, if applicable _____

STATEMENT OF MISCONDUCT: The student named above has violated the following rule or standard of conduct and has demonstrated the behavior described below, which constitutes cause for discipline including, but not limited to, suspension of bus-riding privileges.

- | | |
|---|---|
| <input type="checkbox"/> Violation of safety procedures | <input type="checkbox"/> Tobacco, <u>Vapor</u> , Nicotine Use |
| <input type="checkbox"/> Destruction of property | <input type="checkbox"/> Eating/Drinking/Littering |
| <input type="checkbox"/> Fighting/Pushing/Tripping | <input type="checkbox"/> Rude/Discourteous/Annoying behavior |
| <input type="checkbox"/> Excessive mischief | <input type="checkbox"/> Unacceptable language |
| <input type="checkbox"/> Graffiti/Defacing the bus | <input type="checkbox"/> Other _____ |

Incident reported by: _____ on _____ at approximately ____ ☐ AM ☐ PM

Incident investigated by: _____ on _____ at approximately ____ ☐ AM ☐ PM

Bus Driver's Signature

Date

DISCIPLINARY ACTION TAKEN:

The above disciplinary action shall begin on _____

The above disciplinary action shall end on _____

Principal/designee's Signature

Date

PARENTAL NOTIFICATION

This report informs you of student misconduct on the bus. We encourage you to discuss the problem with the student and solve it before further disciplinary action is required. Students whose bus-riding privileges have been withheld shall not be eligible to transfer to another bus.

Emergency Medical Care Procedures

The emergency medical care procedures listed below are to be followed in case of serious accidents and/or sudden illnesses occurring in the schools:

EMERGENCY INFORMATION

Emergency care information for each student shall be filed in the Principal's office. This information is to include:

1. Student's name, address and date of birth.
2. Parents' names, addresses and home, work and emergency phone numbers.
3. Name and phone number of family physician and permission to contact health care professionals in case of emergency.
4. Name and phone number "emergency" contact (person other than parent/guardian) to reach, if necessary.
5. Unusual medical problems, if any.

MEDICAL EMERGENCY PROCEDURES

The following procedures shall be used in a medical emergency:

1. Administer first aid by a school employee trained in first aid and CPR in accordance with state regulation.
2. Contact the child's parent or other authorized person(s) listed on the school emergency card to:
 - a) Inform parent or authorized contact that the child is not able to remain at school.
 - b) Indicate the apparent symptoms; however, do not attempt to diagnose.
 - c) Advise the contact that s/he may want to contact a health care practitioner regarding the child's condition.
3. Take care of child until parent, health care practitioner or ambulance arrives.
4. Use emergency ambulance service if needed.
5. Administer medication in accordance with District policy and procedure when ordered by the student's personal health care practitioner.
6. Keep the student in a first aid area if s/he appears to be unable to return to the classroom.
7. Do not allow the student to leave school with anyone other than the parent/guardian/designee after an accident or when ill.
8. After a child has an accident or becomes ill at school, arrange transportation home with the parent/guardian/designee.
9. Report all emergency situations to the building administrator.
10. Treat students with contagious diseases, including AIDS, according to state guidelines.
11. Employees shall follow the District's Exposure Control Plan when clean-up of body fluids is required.

Emergency Medical Care Procedures**SUPPLIES/PERSONNEL**

1. Each school shall have an approved first aid kit and designated first aid area.
2. At least two (2) adult employees in each school shall have completed and been certified in a standard first aid course, including but not limited to, CPR.
3. Each school shall maintain epinephrine in a minimum of two (2) locations in the school, including but not limited to the school office and the school cafeteria for administration to students or staff who may have a life-threatening allergic reaction but have no written individual health plan in place, and shall have at least two (2) employees in addition to the school nurse trained to administer epinephrine by auto-injector.
4. As provided by Policy 09.224, any school that has a student enrolled with diabetes or seizure disorders shall have on duty during the school day or during any school-related activities in which the student is a participant, at least one (1) school employee who is a licensed medical professional, or has been appropriately trained to administer or assist with the self-administration of glucagon, insulin or FDA approved seizure rescue medication as prescribed by the student's health care practitioner.

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DOCUMENTATION

A complete record of any emergency care provided shall be made and filed with the student's health record. The following information shall be recorded:

1. Time and place accident or illness occurred.
2. Causative factors, if known.
3. Type of care provided and name(s) of person(s) who gave emergency treatment.
4. Condition of the student receiving emergency care.
5. Verification of actual contacts and attempts to contact parent/guardian.
6. List of names of persons who witnessed the accident or illness and the treatment rendered, as appropriate.

RELATED POLICIES:

09.224
09.2241

RELATED PROCEDURES:

09.224 AP.21
09.2241 AP.21
09.2241 AP.22
09.2241 AP.23

1

Draft 04/28/16) Send with Update
per District

09.2241 AP.22

STUDENT
PICTURE
HERE

 1 car.

Student Name: _____ School _____

DOB: _____ School: _____

Allergies: _____ Grade/Teacher: _____

Medication: _____ Dosage: _____

*Note: Medications given more than three (3) consecutive days require a physician signature on the “Permission Form for Prescribed or Over-the-Counter Medications”.

[illegible]

Signature/Initials of school staff giving medication

STUDENTS

09.2241 AP.22

(CONTINUED)

Student Medication Administration Record

STUDENT
PICTURE
HERE

(DAILY MEDICATIONS)

Student Name: _____ School Year: _____ DOB: _____

School: _____ Grade: _____

Medication Name and Strength (mg) and Dosage (# of pills): _____

Route: _____ Time(s) Given at School (Per Prescription/Medication Permission form): _____

Student Allergies: _____

Preference for notification of need for refill of medication at school: _____

Health Care Provider Name and Phone Number: _____

Emergency Contact Name and Phone Number: _____

DIRECTIONS: Initial with time of administration. Complete signature and initials required at the bottom of this log.

Codes: (A) Absent (W) Withheld Dose (F) Field trip (X) No school (N) No medication available

Date	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
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Signature/Initials of school staff giving medication

_____/_____/_____
_____/_____/_____

STUDENTS

09.2241 AP.22
(CONTINUED)

Student Medication Administration Record

(DAILY LOG)

Medication brought in by Parent/Guardian

Date	Name, Strength (mg), number of pills counted/received by school staff	Staff Signature*	Parent/Guardian Signature

* A Spencer County Board of Education staff signature confirms:

The "Permission Form for Prescribed or Over-the-Counter Medication" has been reviewed by SCBE staff regarding the receipt of the above prescribed medication and there is "No Change" regarding the Name of the Medication, Strength, Dosage, or Time this medication is to be administered by school staff.

Special Notes:

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Purchasing**SCHOOL PURCHASING**

1. Funds for expenditures authorized by the approved budget are allocated to each Principal and school council who will advise staff of the available appropriations.
2. Principal/School Council shall budget the allocations available to the school. All purchases made from Board allocations shall be on Board purchase orders.
3. Purchase orders shall be completed by the department head or teacher and sent to the Principal /designee for approval.
4. If the purchase order is approved, the Principal/designee shall record the date, vendor and amount of the purchase on the appropriate record form (computer or binder).
5. The purchase order is then forwarded to the school/Central Office designee.
6. Unless otherwise specified, copies of the purchase order shall be forwarded to the vendor, the school/District finance officer and the person who placed the order.
7. When an order arrives, the person who placed the order checks the items received, signs and dates the receiving report or packing slip. A notation is made on the receiving report or packing slip as to the condition of the items received and any shortage in the shipment. The receiving report or packing slip is then returned to the school/District finance officer to be matched with the invoice.
8. The school/District finance officer clears the invoice for payment and charges the expenditure to the appropriate school account. The Superintendent/designee shall send a budget update to each school at once each month.
9. If a purchase needs to be made on an emergency basis as defined by the Principal/designee, the employee shall complete a purchase order, obtain the signature of the Principal/designee, and arrange for the purchase. The employee shall then complete all other purchasing procedures.
10. If a purchase order must be amended, the requestor must complete a Purchase Order Amendment Request and submit it to the School Bookkeeper.
11. All orders for the current fiscal year must be approved by the Principal/designee by April 30.
12. All invoices for the current fiscal year must be presented to the school/Central Office designee by the close of business May 30.

Purchasing**DISTRICT PURCHASING**

1. Expenditures authorized in the approved budget are allocated to authorized Central Office personnel who make purchases. All purchases made from these allocations shall be on Board purchase orders.
2. Purchase orders shall be completed and sent to the Superintendent/designee for approval.
3. If approved, the order is placed, copies of the purchase order are distributed, as appropriate, and a record of the purchase is completed.
4. When an order arrives, the person who placed the order checks the items received, signs and dates the appropriate copy of the purchase order. A notation is made on the receiving report as to the condition of the items received and any shortage in the shipment. The receiving report is then returned to the District finance officer for payment.
5. If a purchase needs to be made on an emergency basis as defined by the Superintendent/designee, the employee shall complete a purchase order, obtain the signature of the Superintendent/designee, and arrange for the purchase. The employee shall then complete all other purchasing procedures.
6. If a purchase order must be amended, the requestor must complete a Purchase Order Amendment Request and submit it to the Central Office Finance Dept.
7. All orders for the current fiscal year must be approved by the Superintendent/designee by May 15.
8. All invoices for the current fiscal year must be presented to the Central Office designee by the close of business June 15.

Review/Revised:8/26/13

Purchasing

SPENCER COUNTY BOARD OF EDUCATION

PURCHASE ORDER AMENDMENT REQUEST

Please make the following additions, deletions and/or corrections on

Purchase Order # _____

Authorized Purchaser Signature / Date

Approved and change made in MUNIS	
Initials _____	Date _____

Community Use of School Facilities

PRIMARY PURPOSE

School facilities are for the primary purpose of meeting the educational needs of school-age youth in the district. However, with reasonable policies and procedures, the school can assist the community in meeting social, civic, recreational and cultural needs by effective utilization of school facilities.

PRIORITY FOR USE OF SCHOOL FACILITIES

Priority	Examples of Groups	Approval	Scheduling	Fees Charged	Proof of Liability Insurance
I - School Groups	Educational programs that are an outgrowth of classroom instruction including, but not limited to, science fairs, plays, exhibits and concerts. Interscholastic activities including athletic teams, speech and debate, band competition and academic competition. Any school group that requires a faculty sponsor including, but not limited to, all school-sponsored clubs, homerooms, honor societies and student council.	Principal/ designee	Principal/ designee	None	None required

Community Use of School Facilities**PRIORITY FOR USE OF SCHOOL FACILITIES (CONTINUED)**

Priority	Examples of Groups	Approval	Scheduling	Fees Charged	Proof of Liability Insurance
II - School-Related Community Groups and Not-for-Profit Groups (See footnotes below.)	District Adult/Community education programs Parent-Teacher Association/ Organization ¹ Booster Groups - academic, athletic and band ¹ 4-H Clubs ¹ Scout groups ¹ County Recreation Programs ⁴ Little League and/or comparable groups including, but not limited to, YMCA Spencer County Parks and Recreation ⁴ Adult farmers Civic clubs Industrial groups Church groups Homemakers Farm Bureau Historical Society	Superintendent/ designee	Principal/ designee (working with the Supt./ designee)	2 Custodial fee for school/student related groups waived if cleanup provided by the group is adequate, as determined by District representative. All other groups will be charged custodial fees. A custodian on-site is required for events that occur outside normal custodial hours and the group or organization must pay a custodial fee for times beyond normal custodial hours.	None required Organizations will be required to sign a release and indemnity agreement relieving the Board of any liability in accordance with Board policy 05.3. NOTE: All external support/booster organizations are required to carry separate insurance for general liability with appropriate coverage to operate their organization. (Accounting Procedures for Kentucky School Activity Funds)
III - Meetings of General Public ³	General meetings of various community groups including, but not limited to, political parties, and admission-charging activities.	Superintendent/ designee	Superintendent/ designee (working with the Principal /designee	Usage and custodial fees, as designated in contract.	As specified in the contract for high risk, profit-making, advertised, and/or admission-charging activities. Organizations will be required to sign a release and indemnity agreement relieving the Board of any liability in accordance with Board policy 05.3.

FOOD SERVICE

Eligible groups may contract for meals to be served in school dining areas. Use of kitchen equipment requires the presence of a School Food Service employee.

Community Use of School Facilities

PUBLIC ELECTIONS

School facilities may be used for public elections without charge.

SPECIAL/EMERGENCY USE

Special/emergency use of facilities may be approved by the Superintendent/designee with explanation made to the Board at its next regular meeting.

FOOTNOTES

¹Any group or organization that contracts to use school district facilities on a frequent and on-going basis (more than once each month) will be placed in category III.

²All custodial fees will be charged at time and one-half plus all benefits.

³Supervision shall be provided as directed by Board policy 05.3.

⁴Groups or organizations may use **inside** school district facilities on a frequent and on-going basis (more than once each month) without being placed in category III. **A custodian on-site is required for events that occur outside normal custodial hours and t**~~The~~ **group or organization must pay a custodial fee for times beyond normal custodial hours.**

Review/Revised:8/26/13