FREMONT GENERALS

PARENT / STUDENT HANDBOOK

2021-2022

Empathy
Perseverance
Integrity
Community

We strive to be... **EPIC**

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2021-2022 BELL SCHEDULE

JOHN C. FREMONT MIDDLE SCHOOL

A Lunch

Period 1	7:35-8:25
Period 2	8:28-9:18
Period 3	9:21-10:14
Period 4	10:17-11:07
Lunch	11:10-11:40
Period 5	11:43-12:33
Period 6	12:36-1:26
Period 7	1:29-2:19

B Lunch

Period 1	7:35-8:25
Period 2	8:28-9:18
Period 3	9:21-10:14
Period 4	10:17-11:07
Period 5	11:10-12:00
Lunch	12:03-12:33
Period 6	12:36-1:26
Period 7	1:29-2:19

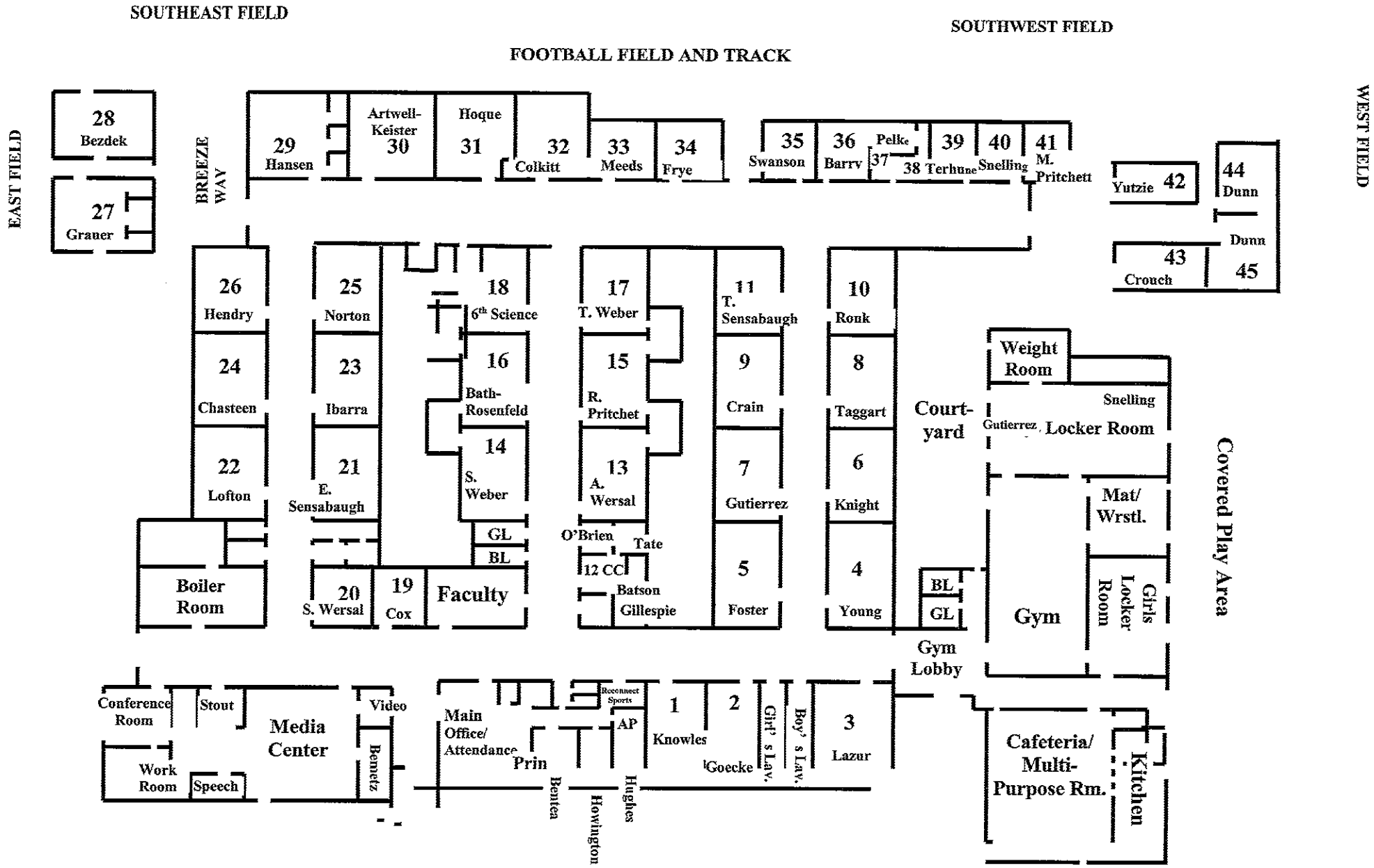
Wednesday Early Release
A Lunch

Period 1	7:35-8:14
Period 2	8:17-8:56
Period 3	8:59-9:58
Period 4	10:01-10:40
Lunch	10:43-11:13
Period 5	11:16-11:55
Period 6	11:58-12:37
Period 7	12:40-1:19

Wednesday Early Release
B Lunch

Period 1	7:35-8:14
Period 2	8:17-8:56
Period 3	8:59-9:58
Period 4	10:01-10:40
Period 5	10:43-11:22
Lunch	11:25-11:55
Period 6	11:58-12:37
Period 7	12:40-1:19

6/21/21



John C. Fremont Middle School

Roseburg Public Schools

2021-22 SCHOOL CALENDAR

Adopted: 3.17.2021
Revised: 5.12.2021

JULY

S	M	T	W	T	F	S
				1	2	3
4	5-H	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

AUGUST

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19 NO	20	21
22	23 AP	24 AP	25 AP	26 AP	27 NC	28
29	30	31				

E-2 S-2

SEPTEMBER

S	M	T	W	T	F	S
			1 ER	2	3	4
5	6 H	7	8 ER	9	10	11
12	13	14	15 ER	16	17	18
19	20	21	22 ER	23	24	25
26	27	28	29 ER	30		

E-21 S-21

OCTOBER

S	M	T	W	T	F	S
					1	2
3	4	5	6 ER	7	8	9
10	11	12	13 ER	14	15	16
17	18	19	20 ER	21	22	23
24/31	25	26	27 ER	28	29 AP	30

E-20 S-20

NOVEMBER

S	M	T	W	T	F	S
	1	2	3 ER	4 CONF	5 CONF	6
7	8	9	10 ER	11 H	12	13
14	15	16	17 ER	18	19	20
21	22	23	24 NC	25 H	26 H	27
28	29	30				

E-18 S-18

DECEMBER

S	M	T	W	T	F	S
			1 ER	2	3	4
5	6	7	8 ER	9	10	11
12	13	14	15 ER	16	17	18
19	20 V	21 V	22 V	23 CV	24 H	25
26	27 V	28 V	29 V	30 CV	31 H	

E-13 S-13

JANUARY

S	M	T	W	T	F	S
2	3	4	5 ER	6	7	1/8
9	10	11	12 ER	13	14	15
16	17 CV	18	19 ER	20	21	22
23	24 AP	25	26 ER	27	28	29
30	31					

E:19 S-19

FEBRUARY

S	M	T	W	T	F	S
		1	2 ER	3	4	5
6	7	8	9 ER	10	11	12
13	14	15	16 ER	17	18	19
20	21-NC Makeup	22	23 ER	24	25	26
27	28					

E-19 S-19

MARCH

S	M	T	W	T	F	S
		1	2 ER	3	4	5
6	7	8	9 ER	10	11	12
13	14	15	16 ER	17	18:NC Makeup	19
20	21 V	22 V	23 V	24 V	25 V	26
27	28	29	30 ER	31		

E-17 S-17

APRIL

	M	T	W	T	F	S
					1 AP	2
3	4	5	6 ER	7 CONF	8 CONF	9
10	11	12	13 ER	14	15	16
17	18	19	20 ER	21	22	23
24	25	26	27 ER	28	29	30

E-20 S-20

MAY

S	M	T	W	T	F	S
1	2	3	4 ER	5	6	7
8	9	10	11 ER	12	13	14
15	16	17	18 ER	19	20	21
22	23	24	25 ER	26	27	28
29	30 H	31				

E-21 S-21

JUNE

S	M	T	W	T	F	S
			1 ER	*2	3	4
	6	7	8 ER	9	10 AP	11
12	13 M	14 M	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

E-7 S-7

Last student day:
Elementary – June 9 / Secondary – June 9

- **H** Holiday for all Employees
- **V** School Vacation
- **C** Holiday - (12 Month Employees)
- **NC** Non-Contract Day for Teachers
- **M** Makeup Day to be used in the event of Emergency School Closure
- **NO** New Teacher Orientation
- **ER** 1-hour Early Release for students / Afternoon Staff Development
- **CONF** Conferences
- Roseburg High School Commencement: June 4, 2022
- **AP** All Teacher Planning Day (No school for students)

August	19	New Teachers Orientation	February	21	Makeup Day / Non-Contract Day for Teachers
August	23	All Teachers Report to Work	March	21-25	Spring Break
August	27	Non-Contract Day	March	28	Classes Resume
August	30	Classes Begin	March	31	End of Third Report Period (41 Days)
October	29	End of First Report Period (43 Days)	June	4	RHS Graduation
December	20	Winter Break Begins	June	9	Last Pupil Day (48 Days)
January	3	Classes Resume	June	10	Last Teacher Contract Day
January	17	Martin Luther King, Jr Day (School Vacation)	June	13+14	Makeup Day / Non-Contract Day for Teachers
January	24	End of First Semester (45 Days)			

Elementary

Planning/Grading days	(8)	August 23, 24, 25, 26; Oct. 29; Jan. 24; April 1; June 10
Conference days	(4)	Nov. 4 and 5; April 7 and 8

Middle School

Planning/Grading days	(8)	August 23, 24, 25, 26; Oct. 29; Jan 24; April 1; June 10
Conference days	(4)	Nov. 4 and 5; April 7 and 8

High School

Planning/Grading days	(8)	August 23, 24, 25, 26; Oct. 29; Jan 24; April 1; June 10
Conference days	(4)	Nov. 4 and 5; April 7 and 8

Paid Holidays

September 6	Labor Day
November 11	Veterans Day
November 25, 26	Thanksgiving
December 24	Christmas Eve (Christmas falls on Saturday)
December 31	New Year's Eve (New Year's Day falls on Saturday)
May 30	Memorial Day

(7 days total)

Collaboration Time

Students will be released one-hour early each Wednesday, September 1, 2021, through June 8, 2022, to provide weekly professional development activities for staff. (37 days total)

[1] OAR 581-022-1620(8) The instructional time requirement for twelfth-grade students may be reduced by action of a local school board for an amount of time not to exceed 30 hours of instructional time.

FREMONT GENERALS

CALENDAR 2021-2022

August 2 School Office Opens 19 Registration 7:30-6:00 23 Teachers Return to work 23 Non sport specific workouts begin 27 Non Contracted day for Teachers 30 Classes begin 30 Fall Sports Practice begins	**September** 6 Labor Day 13 Open House-6:30 pm 13 Fall sports 1st game week
October Picture Retakes 29 End of 1st Quarter 29 Grading Day, No School	**November** 3 PM Conferences 4 Conferences All Day, No School 5 No School 11 Veterans Day, No School 24-26 Thanksgiving, No School
December 20- 31 Winter Break, No School	**January** 3 Classes Resume 17 Martin Luther King's Birthday, No School 24 End of 2nd Quarter 24 Grading Day, No School
February 21 President's Day, No School/ Make up day if needed	**March** 18 No school /Make up day if needed 21-25 Spring Break, No School 28 Classes Resume 31 End of 3rd Quarter
April 1 Grading Day, No School 6 PM Conferences 7 Conferences All Day, No School 8 No School	**May** 30 Memorial Day, No School
June 9 End of 4th Quarter 9 Last Day of School for Students 10 Last Contracted Day for Teachers 13-14 Makeup day if Needed	**July** School Closed **August 2022** 1 School Reopens

JOHN C. FREMONT MIDDLE SCHOOL

Mission Statement

Fremont will collectively build positive relationships while providing a safe learning environment where students are empowered to develop skills, knowledge, efficacy and citizenship through rigorous curriculum and outstanding teaching.

Superintendent of Schools
Jared Cordon

Administration
Principal- Ben Bentea
Assistant Principal- Jake Hughes

Instructional and Behavior Support
Karen Howington

Counselors
Buffie Gillespie
Jason Tate

Address
850 West Keady Court
Roseburg, Oregon 97471

Phone
541-440-4055
Fax
541-440-4060

Web Page-https://fremont.roseburg.k12.or.us
Facebook- Fremont Middle School
Instagram- fremontgenerals

School Mascot- The Generals
School Colors- Royal Blue and Gold

Roseburg School District

Strategic Plan

Equitable Student Experiences: Our Students will master grade-level academic standards, attain the behavioral and social-emotional skills needed to thrive and graduate from high school with a plan to achieve success.

Roseburg Public Schools

Mission Statement

A community partnership dedicated to the academic and personal growth of every student...whatever it takes!

PARENT / SCHOOL COMMUNICATION

Communication is critical to student success. Fremont parents can stay informed about our school and their students in the following ways:

- **Website:** Daily updates, calendar of school events, staff directory, links to useful resources: https://fremont.roseburg.k12.or.us
- **Email:** Your staff member's first initial and last name @roseburg.k12.or.us (i.e.bbentea@roseburg.k12.or.us) Please identify your student in the subject line.
- **ParentVue & StudentVue:** Allows parents or students to monitor their child's performance in all classes.
- **Facebook:** Fremont Middle School
- **Instagram:** fremontgenerals
- **Peach Jar:** Email notification regarding school news
- **Canvas:** Roseburg School Districts Adopted Learning Management System
- **Onecall:** Phone, email and text communication system

Effective communication with students, parents and community members is a top priority for the staff at Fremont Middle School. Please contact us with questions, suggestions or concerns.

Main Office	541-440-4055
Ben Bentea, Principal	
Kelly Lucido, Office Manager	
Selena Kelly, Attendance/ Records Secretary	
Student Services	541-440-4067
Jake Hughes, Assistant Principal	
Karen Howington, Instructional & Behavior Support	
Taryn Stribling, Reconnect/ Athletics Secretary	
Counseling Office	541-440-4062
Jason Tate, Counselor	
Buffie Gillespie, Counselor	
Toni Batson, Secretary	
Bus Information	
First Student Transportation	541-672-4191
District Transportation Office	541-440-4048

John C. Fremont Middle School
VOICEMAIL- PHONE NUMBERS
2021-2022 School Year

Main Office/ Attendance ...440-4055
Reconnect/ Athletics... 440-4067
Fremont Website: https://fremont.roseburg.k12.or.us

Voicemail for Staff ...440-4056
Counseling Center...440-4062
Staff E-Mail Address: name@roseburg.k12.or.us
I.e. bbentea@roseburg.k12.or.us

ADMINISTRATION: # 440-4055

5457.....Ben Bentea, Principal
5455.....Jake Hughes, Assistant Principal
5456.....Karen Howington, Instructional & Behavior Support
5400.....Kelly Lucido, Office Manager
5464.....Selena Kelly, Secretary (attendance/ records)

RECONNECT/ ATHLETICS: # 440-4067

5454....Taryn Stribling, Secretary

COUNSELING CENTER: #440-4062

5462....Jason Tate, Counselor
5463....Buffie Gillespie, Counselor
5472....Toni Batson, Secretary
5465....Therese Hadden, Mental Health Therapist

MEDIA CENTER: #440-4063

5461....Check-out Desk
5459....Judy Wilton, Associate Librarian

SUPPORT SERVICES: #440-4055

5446....Karen O'Brien, School Psychologist
5447....Heather Bemetz, Skills Trainer

DEVELOPMENTAL LEARNING CENTER

5444...David Dunn, DLC Teacher #440-4094
Inst. Asst.: Erica White, Becky Killgore, Brianne Perrengill, Cherie Troutman

LEARNING RESOURCE CENTER: #440-4041

5401....Lina Knowles, 7th/8th Math LRC
5479....Season Cox, 7th/8th Language Arts LRC
5402....Caitlyn Goecke 6th grade LRC

SECONDARY RESOURCE CENTER:

5443....Megan Crouch, SRC Teacher,
Inst. Asst.: Jamie Banta, Kara Rosemeyer
5438....Leeza Pelke, IA/ paperwork manager
.... Johnna Vannek, Lia Reynolds-Bain, Lisa Ewens, Julia Henry, Gretchen Lucido,

ALTERNATIVE LEARNING CENTER: #440-4071

5442....Tyler Yutzie, TAP Teacher
Inst. Asst.: Kyle Hansen, Kristin Flynn

TECHNOLOGY COORDINATOR:

5448....Jason Stout, Computer Tech.

CUSTODIAL OFFICE: Day 440-4055
Night 440-4056

5452....Scott Gilley, Day Site Operator
Tim Shultz, Andrew Mcintosh

STAFF VOICEMAIL

5430....Stacey **Atwell Keister,** Choir/ Drama
5436....Shonna **Barry.** 8th Language Arts
5476....Robyn **Bath-Rosenfeld,** 7th Science/ Standard Support
5428....Eric **Bezdek,** Applied Arts
5424....Megan **Chasteen,** 7th Language Arts
5432....Steven **Colkitt,** 8th Math
5479....Season **Cox,** 7th / 8th Language Arts LRC
5409....Lisa **Crain,** 6th Language Arts
5443....Megan **Crouch,** SRC
5444....David **Dunn,** DLC
5405....Al **Foster,** 6th Language Arts
5434....Curt **Frye,** 8th Social Studies
5402....Caitlyn **Goecke,** 6th LRC
5427....Tracy **Grauer,** Intro. to Woods
5407....Albert **Gutierrez,** 6th PE/Health
5429....Ross **Hansen,** Band
5426....Evan **Hendry,** 7th Social Studies/ Leadership
5431....Mike **Hoque,**7th Social Studies/Leadership
5423....Rebecca **Ibarra,** 7th Math
5406....Daron **Knight,** 6th Social Studies/ Film
5401....Lina **Knowles,** 7th/8th Math LRC
5403....Emily **Lazur,** Graphic/ Fine Arts/ Yearbook
5422....Chris **Lofton,** 7th Math
5433....Jeffrey **Meeds,** 8th Math
5425....Blake, **Norton,** 8th Social Studies
5441....Makenzie **Pritchett,** Health/ PE
5475....Rhiana **Pritchett,** 8th Science, Natural Resources
5470....Kris **Ronk,** 6th Social Studies/ Art
5421....Elise **Sensabaugh,** Technology/ Robotics
5471....Tim **Sensabaugh,** 6th Math/ Science
5467....Randy **Snelling,** 7th PE/ Strength & Cond.
5435....Kathi **Swanson,** 8th Language Arts/ Instruction Coach
5408....Kari **Taggart,** 6th Math/ Science
5439....Emily **Terhune,** 8th Language Arts
5474....Samantha **Weber,** 7th/8th Science
5477....Tim **Weber,** 6th Math/ Science
5473....Austin **Wesal,** 8th Science
5420....Sara **Wersal.** 7th Language Arts
5404....Sara **Young,** 6th Math/ Science
5442....Tyler **Yutzie,** Turnaround Program

CAFETERIA: #440-4070

5453....Jody Albertus, Cafeteria Manager
Angie Hall, Leann Loomis, Holly Foley, Nicole Trimnel

GENERAL INFORMATION

EQUALITY OF OPPORTUNITY

The School District shall provide programs and activities based on equality for all students. No persons shall on the basis of religion, race, creed, color, personal life orientation, national origin, sex, marital status or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any educational program or activity administered or authorized by the Roseburg School Board. Distinctions on the basis of age are permitted where district policy, statutes, regulatory agencies and the welfare of the child or other children dictate.

The district will maintain and publish grievance procedures in the student handbook providing for prompt and equitable resolution of student complaints.

While parents have the option of placing their children in private schools or obtaining additional services (such as tutoring) from a private individual or organization, the district is not obligated to cover the resulting tuition or costs. If a parent wishes the district to consider a publicly funded private placement or private services, the parent must give the district notice and opportunity to propose other options available within the public school system before the private placement or services are obtained. Therefore, for any regular education, 504, or IDEA student, a parent must give notice either at the last IEP meeting prior to obtaining private services or in writing at least 10 business days prior to obtaining private service. The notice must include the parent's intent to obtain private services, the parent's rejection of the educational program offered by the district, and the parent's request that private services be funded by the district. Failure to meet these notice requirements may result in a denial of any subsequent reimbursement requests.

INSTRUCTIONAL PROGRAMS

Fremont Middle School student body is composed of 6th, 7th and 8th grade students. We understand that middle school level students are undergoing many intellectual, physical, social and emotional changes during this stage of development. Our Staff welcomes the opportunity to assist in this transition to adulthood.

To support the transition of 6th grade students, teachers are assigned in teams. Each teacher team consists of a math/ science teacher, a language arts and social studies teacher. The team classrooms are close in proximity to allow for cooperative activities and to assist students by providing easy access to both teachers throughout the school day. These teacher teams work in tandem to address the needs of the students by fostering a smaller learning community. Students also have the opportunity to participate in classes outside assigned core teams. Elective class offerings in drama, art, technology, band and choir. In addition to, or in lieu of electives, students may be provided targeted support programs to boost language arts, reading, behavior/ social skill and/ or math skill.

The 7th and 8th grade students are provided a program of instruction that includes core program courses (math, science, social studies and language arts) with elective options (band, choir, drama, wellness, technology, fine/applied arts, leadership, journalism and yearbook). Students have the opportunity to participate in physical education and health, as well as provided opportunities to experience the arts and/ or music. In addition to, or in lieu of electives, students may be offered targeted support classes to boost language arts, reading, behavior/ social skills and/ or math skills.

GENERAL INFORMATION

PERSONAL DEVELOPMENT PROGRAMS

Students receive instruction designed to address various social/ behavioral issues. Instruction is given to teach strategies to increase school success.

CLOSED CAMPUS

Fremont is a closed campus. Students are not permitted to leave campus without parent or guardian permission verified through the front office. Students who go home daily for lunch may do so only with the consent of their parents and notification to the front office.

VISITORS

Visitors must obtain permission to be on campus and check in at the Main Office before visiting any location on campus. Students from other schools are not permitted to be guests during the school day.

FREMONT ORGANIZATIONS

Ways for Parents/ Guardians to become involved:

Volunteer- There are many areas of the school where volunteers are needed in classrooms and at after school activities. Look for information at registration in August to sign up for specific activities or tasks.

Attend School Events- You are encouraged to attend and participate in decisions that affect the parents, students and programs at Fremont. Reminders about scheduled meetings will be published in the school's newsletter.

Support and Participate in Fund-Raisers- The annual Walk-a-Thon in the fall is the main school-wide fundraiser used to support various programs and activities at Fremont.

PSA- Parents are encouraged to support Fremont's PSA. For more information contact our PSA at fremontpsa@gmail.com

HELPFUL INFORMATION

COUNSELING CENTER

Counseling Center Staff are available to serve you in the following areas: academic and personal counseling, student schedules, medications/first aid, homework issues, academic monitoring devices, problem solving and conflict resolution. Students requiring first aid should report to the Counseling Center for assistance.

DAILY BULLETIN

The bulletin will be read daily. The goal of the bulletin is to inform students and staff of celebrations and upcoming events. Item submission can be done through email or dropped off in written form to the Reconnect Office.

EMERGENCY PROCEDURES

Fire drills are held monthly without warnings as required by law. In the event of a fire or earthquake drill, or an evacuation drill, a loud buzzer will sound in the halls. Students are to pay close attention to directions given by the adult in charge. Students and staff will exit the building in an orderly fashion through the emergency exit as posted in each classroom. Students will remain in the designated areas away from the building until an "all clear" bell sounds or verbal announcement to return to the building is given. Other emergency procedures will be taught and practiced throughout the school year.

Individuals involved with initiating or setting off false school alarms will be referred to local law enforcement agencies for appropriate action under the city's Uniform Fire and Criminal Code. School disciplinary procedures will also be enforced.

SCHOOL CLOSURE

Occasionally during the winter, school is closed or delayed due to snow/icy conditions. As soon as the superintendent determines that schools will be closed or delayed due to weather, a call will go out to all families via the One Call System, and local radio and television stations will be notified. Parents are encouraged to check the District website and click on FlashAlert for the most accurate information. Television and radio may also be a reliable source to obtain closure information.

FOOD SERVICE / LUNCH PROGRAM

Breakfast and lunch are available to Middle School students for no charge and includes an entrée and milk or juice. If you do not want your student eating meals provided by Roseburg School District, please complete the Parental Authorization to Withhold Meals form and return it to Fremont Middle School. If your student choses to have a second meal charges will be as follows: second breakfast $1.50, second lunch $3.50 and second milk $.50.

IMMUNIZATIONS

Parents must submit documentation of immunization against specified diseases for their child. Immunizations against diphtheria/tetanus/whooping cough (D.P.T.), polio, hepatitis A, hepatitis B, and measles/mumps/rubella (MMR) are required by law for all children under age 14 who attend an Oregon public school. Varicella immunizations are also required unless the child has had chicken pox. In such cases, the month/year of when the child had the disease needs to be reported to the school. Check with the local health department or your pediatrician for more information. School administrators are required by Oregon law to deny admission to children who are not immunized or who do not have completed exemption documentation.

HELPFUL INFORMATION

INJURIES AT SCHOOL

If your student is injured on the school grounds, immediately report it to his/her coach, supervising teacher or the nearest staff member. This is important as student accident insurance (which is an optional purchase) may not cover the treatment of injuries which are not promptly reported.

ILLNESS AT SCHOOL

Should your student become ill at school, we ask that they do the following:

1. If in class, ask the teacher for a pass to the counseling center. If between classes, report to the next class to get a pass (unless it is an emergency).
2. Check in with the counseling center secretary.
3. If the parent/guardian approves the release from school, the student will be checked out by the parent/guardian.
4. If the parent/guardian does not approve the student's release from school, the student will be asked to return to class.
5. Students going home during the day due to illness must check out through the attendance office.

LOCKERS

Lockers will not be used for the 2021-2022 school year.

LOST AND FOUND

Articles found around school should be turned in to the Main Office or placed on the lost & found cubbies located by the cafeteria. Lost items may be claimed in the office or by the cafeteria. Students are advised to mark all belongings. Lost and found clothing will be on display during parent conferences.

MEDIA CENTER

The Media Center is open daily during official school hours for student use, as well as before and after school. The Media Center is for individual and class study, research and reading. It is a quiet place. The Associate Librarian will aid students in processing and checking out materials. Check out is up to three items for a two-week loan. Items may be renewed. Students are required to complete an internet ethics course before being permitted to use the technology loaned for educational purposes only. In addition, all students will be asked to complete the "Google Apps for Education-Student Permission Form" this form requires a parent/guardian signature.

MEDICATIONS

Medications of any kind, including aspirin, may not be provided by the school according to Oregon State Law. Written authorization from a Parent and/or physician make it possible for a student to take medicine during school hours. Please note that prescription medicines must be in the original prescription bottle. Only parents/guardians can drop off and pick-up medications from the Counseling Center. Arrangements must be made through the Counseling Office for the storage and dispensing of medication.

HELPFUL INFORMATION

SCHOOL FEES

Required:

-Instrument Rental Fee - $25.00 (per quarter)
This fee covers the cost for repair and maintenance of school instruments used by students for band.
-Non-returned athletic uniforms - $25.00 - $80.00
-Replacement of Student ID - $4.00

Optional:

Wellness (PE) Clothes — (optional) $15 for dry-fit shirt, and $15 for shorts
Students may purchase workout clothes designed with the school logo. A white plain T-shirt and dark shorts are the required dress for class.

Pictures - $6.00 to $44.00
Yearbook/ Annual - $30.00 to $35.00

Accident Insurance - $17.00 to $48.00*
24 Hour Accident Insurance - $80.00 to $196.00*
Dental Insurance (24 hr. accident) - $19.00*
Health Insurance - $138.00*

*Fees subject to change by insurance carrier. Charges are set by insurance carrier and the district does not receive any of the premium fees. JPC/jlk/wpdocs/documents/Student Fees/ Recommended Student Fees 20-21

STUDENT ACTIVITIES

Fremont offers many opportunities for students to become involved in school activities, meet new friends, and have fun.

Grade Level Celebrations
Spirit Days/ Week
Leadership
FBLA
Appreciation Activities
School Assemblies
National Honor Society
Band/ Choir Concerts, Drama Productions

STUDENT EXPECTATIONS

Expectations

Empathy, Perseverance, Integrity, and Community is always expected from students, staff, and visitors at Fremont. Expectations for classroom and school wide behavior are clearly defined by the Rules and Behavior Expectation matrix. Students are responsible for understanding and following all school rules throughout the school day, in the time traveling to and from school, and during school sponsored activities on and off the Fremont campus.

Student Rights:

1. To learn in a supportive environment.
2. To have their property and feelings respected.
3. To have clean and safe surroundings.
4. To share their feeling and perceptions in an appropriate manner.

Student Responsibilities:

1. To accept consequences for their own behavior
2. To respect and support the rights and feeling of others.
3. To put forth their best effort
4. To help maintain a safe and clean environment.
5. To respect school and other people's property.
6. To follow directions courteously and respectfully
7. To obey all school and district rules and policies.
8. To make choices which promote the well-being of themselves and others.
9. To refrain from public displays of affection such as hand holding and kissing.
10. To refrain from cheating. Cheating/ plagiarism is the act of knowingly submitting the work of others represented as his/her own. Cheating also includes the aiding and abetting of cheating by others. Students will be referred to an administrator for any act of cheating or plagiarism.

Fremont Middle School students and parents should note that the above information only highlights detailed policies taken from the Student Rights and Responsibilities Handbook published by the Roseburg Public Schools. Major offenses and other serious infractions, as well as the potential consequences for student offenders, are more fully described in the district handbook. Copies of the District Behavior Standards and Expectations book are given to students in early September. Additional copies may be obtained in the Counseling Center.

STUDENT EXPECTATIONS

MAJOR/SEVERE VIOLATIONS:

Major violations include the following: arson, fire alarm, and bomb threats
Assault (physical attack on another person)
Open defiance/insubordination to adults in the building
Possession of fireworks-including lighters, matches, smoke/stink bombs, firecrackers
Forgery of school documents.
Harassment including sexual, threatening, intimidating, and badgering.
Theft
Vandalism
Gambling
Directed obscenity.
Possession of lewd or inappropriate magazines or pictures
Lying/ cheating
Use of or possession of tobacco.
Repetitious minor violations

ALCOHOL, DRUGS AND DRUG PARAPHERNALIA:

No student is to be in possession of, or under the influence of drugs, alcohol, or drug paraphernalia (pipes, containers, etc.) at any time while on or within 1000 feet of the school grounds or at any school sponsored activity. Students found to be in possession, selling, buying, or distributing drugs or alcohol on or adjacent to school grounds, or at any school sponsored activity, will be subject to suspension, notification of parents and policy, and expulsion to the maximum extent of the law.

PROGRESSIVE CONSEQUENCES

Consequences assigned for behavior infractions are designed to deter behaviors that interfere with establishing a safe and productive learning environment.
Lunch Detentions- reserved for lunch time behavior.
In-School Detentions- During lunch time.
After School Detentions- 30 minutes to be served immediately after school Monday through Friday.
Thursday School- 1–2-hour detention
Saturday School- 4 hours starts at 8 am and ends at 12pm.
In School Suspension: major violations
Out of School Suspension: major violations
Expulsion: major/ severe violations

CHEATING

Cheating/plagiarism is the act of knowingly submitting and claiming the work of others represented as one's own. Cheating also includes the aiding and abetting of cheating by others. Students involved in cheating or plagiarism will be referred to an administrator.

STUDENT EXPECTATIONS

DANGEROUS/DEADLY WEAPONS

Students are not to be in possession of any weapons or any item that is used as a weapon. These include knives of any kind, guns, or any object perceived to cause physical harm. Toys that resemble weapons are also prohibited. A student in violation of this policy may be expelled.

BULLYING AND/OR CYBERBULLING

Bullying and/or cyberbullying will not be tolerated. Students engaged in bullying will face consequences up to and including removal from school. Law enforcement may also be involved. Off campus bullying causing a disruption at school may be addressed by school officials.

ATTENDANCE

ABSENCES from class are recorded in the Attendance Office for every period of the school day. When you have been absent, bring a note from home signed by your parent or have your parent phone the Front/Attendance Office at 440-4055 x5464 to verify your absence. A voicemail system is also available during peak hours and for calls made after school hours. When utilizing the voicemail system, please remember to state your student's full name, the date, and the specific reason for the absence. Parents will be contacted if absences are not verified.

PREARRANGED & EXCESSIVE ABSENCES

The principal or designee has the authority to excuse students for absences due to illness of the student, illness in the family, emergencies or for the purposes of religious instruction as described in policy JEFB. Students may also be excused for other reasons deemed appropriate by the principal/designee or Board when satisfactory arrangements have been made in advance. Please contact the attendance secretary to communicate a planned absence at least three days in advance. All work can be accessed and completed on canvas our Learning Management System. Students with ten (10) consecutive days of absence will be dropped from school enrollment as per School Board Policy #JEFB and state law.

LEAVING SCHOOL FOR BUSINESS OR ILLNESS

Students who must leave school during the regular school day must be checked out and cleared to leave by a parent, legal guardian, or authorized emergency contact listed on the registration form. When returning to school or entering late, all students shall check in through the Attendance Office.

UNEXCUSED ABSENCES

Absences not cleared within two (2) days are unexcused per state regulations. Students receiving unexcused absences will be referred to administration. Please note that regular school attendance is necessary to be successful in school.

STUDENT EXPECTATIONS

TARDY POLICY

If you arrive late to school, report to the Front/Attendance Office to check in. Excused tardies (verified by parent note/call) include medical appointments, family emergencies or illness. State guidelines determine the conditions for which a tardy may be excused.

A pass stating the location and reason for the tardiness is required. A student is considered skipping class if he/she is more than 10 minutes late to class with an unverified tardy pass.

The consequences for unexcused tardies to class per quarter will be as follows:

- Tardy1-4 receive no school assigned consequences.
- Tardy 5 you will receive a note informing you that you are very close to receiving an in-school detention.
- Tardy 6-9 you will receive an in-school detention and be required to meet with your counselor.
- Tardy 10 you will lose privileges to attend dances scheduled within the quarter.
- Tardy 10-11 you will receive a 30 minute after school detention.
- Tardy 12-15 you will receive a 1-hour Thursday School detention
- Tardy 16-19 you will receive a 2-hour Thursday School detention
- Tardy 20 and above a referral to Mrs. Howington or Mr. Hughes and a meeting will be scheduled between the student, parent, and administrator.

PERSONAL ITEMS

Personal items not necessary for use during the learning environment should stay at home. Personal items that cause a disruption to the learning process may be taken away to avoid distraction and lost instructional time. At the discretion of the teacher, items may be returned to the student at the end of the class period or at the end of the school day. Chronic disruptions may be referred to administration and students may lose the privilege to bring personal items to school. The school is not responsible for lost, damaged, or stolen items. Therefore, students are discouraged to bring personal items and valuables to school.

OUTSIDE FOOD & DRINK

To maximize student learning, disruptions interfering with instruction are discouraged. We ask that parents refrain from delivering food and drinks to school during instructional times. Coffee and blended drinks will not be delivered to students by staff. Energy drinks are not allowed on campus at any time. If found, it will be confiscated and kept until the end of the day. Students are asked to keep such food items in their backpack after the start of the school day. For safety reasons, food items are not to be purchased or shared with others. Parents cannot purchase food for other students. Water bottles may be permitted in the classroom per teacher approval. Water bottles cannot be shared and must be marked with students' names.

PHONE USE AT SCHOOL

School phones are available for students' use during school hours in the Counseling Center. The permitted use time for cell phones and personal technology devices is before school, during transitions, at lunch, and after school. Phones are not allowed out during instructional time. Violations for cell phone and technology devices will result in a referral to the Reconnect Office.

STUDENT EXPECTATIONS

Consequences are assigned as follows:

- First violation is a warning. The student will call home from the Reconnect Office and notify parents. The device can be picked up at the end of the school day in the front office by the student.

- Second violation - the student will call home from the Reconnect Office and notify the parent that it is his/her second offense. The student will also inform the parent that the phone must be picked up in the front office by a parent or guardian.

- Third violation - the student will call home and notify the parent that a meeting is required with an administrator to retrieve the device. At the discretion of the administrator, the student could be assigned a consequence and/or not be permitted to bring the device back to school.

BUS TRANSPORTATION

Students being transported by the Roseburg Public Schools are under the authority of the bus driver. Those who refuse to obey directions of the driver, or abide by bus regulations, may receive a bus citation, and may forfeit their right to ride on the bus (OAR 581-53-010). Parents with questions regarding bus routes may contact First Student Transportation at 541-672-4191.

School buses are equipped with a video-recording device. Review of the recorded tape will be conducted when needed/requested. Students who engage in inappropriate or illegal activities on the bus and at bus stops are subject to disciplinary procedures and possible police involvement if criminal activity is determined.

Students wanting to ride a bus other than their assigned bus **MUST** have a bus pass. Please send a note with your student. Your student will then need to get a bus pass from Toni Batson in the counseling center prior to 2:00pm.

BIKES / SKATEBOARDS / ROLLERBLADES

As required by Oregon law, individuals riding bicycles and skateboards must wear a protective helmet. Students riding bikes, scooters, skateboards and/or rollerblades, must dismount before coming on to school property. Bikes ridden to school are to be parked and locked in the rack immediately upon arrival. Scooters, skateboards, and rollerblades and/or like modes of transportation must be kept in the office during the school day. Violations may result in confiscation.

BEFORE AND AFTER SCHOOL

Fremont is a closed campus after 3:00pm except for those that are involved in extracurricular activities. Other students are asked to not be on campus until no sooner than 30 minutes before an event they want to spectate unless they are in a designated supervised area. If students are on campus as spectators, they must stay in the location of the event.

STUDENT EXPECTATIONS

STUDENT DRESS/ PERSONAL ITEMS GUIDELINES

Although the responsibility for personal dress and grooming rests primarily with students and their parents, clothing that is comfortable, clean, and modest is most conducive to a productive educational climate. The following guidelines will not cover every situation or clothing option; however, it will give students and parents the overall expectations for dress at Fremont:

1. Clothing must be worn as intended, not modified.
2. Loose fitting or see-through garments which show underclothing or exposed private areas of the body are a distraction and are prohibited.
3. Shorts and skirts must be modest, cover private areas and conceal underwear.
4. Wallet/similar chains and barbed/studded jewelry are safety concerns and not allowed.
5. Sleepwear: slippers, robes, and blankets are not appropriate school attire.
6. Appropriate footwear is to be worn at all times. Periodically, science, P.E. and/or other classes may suggest an appropriate type of footwear.
7. Clothing, jewelry, and binders with inappropriate language, pictures, inferences, symbols, intended to mock, ridicule, demean, or display words and pictures associated with alcohol, tobacco products, weapons, violence, sexual nature, or drug use, are not allowed.
8. Head coverings and sunglasses are not to be worn in the building including lunch, unless a medical or religious reason is provided in writing.
9. Dress or appearance should not lead school administrators to believe that a student's hairstyle, make-up, apparel, body art or accessories are gang related, promoting illegal or discriminatory activity, disrupting, or interfering with the educational process.

A student who violates the dress code will be expected to immediately comply with the request to change attire. Chronic failure to comply with the dress code policy may result in a referral to an administrator or progressive discipline.

STUDENT ID CARDS

Student ID cards will be provided to all students for library material check-out. A picture of the ID on their phone or the ID card via StudentVue is appropriate substitutes. Students are expected to keep their ID free of markings, graffiti, stickers and/or damage. Replacement cards are $4.00 and can be ordered from the Counseling Center on Wednesdays to be delivered to the student no later than the following Monday.

FREMONT GENERALS

OUR MISSION IS TO:

Promote a safe and positive school environment that enhances learning and citizenship through recognizing and teaching positive behavior.

We strive to be... EPIC

EMPATHY

I can put myself in someone else's shoes.

PERSEVERANCE

I keep trying and strive to do my best.

INTEGRITY

I am aware of myself and do what is right.

COMMUNITY

I work with staff and my peers to keep Fremont awesome.

ACADEMIC INFORMATION

GRADES

Courses are either a semester or full year and there are no cumulative semester grades given. Academic progress is reported on a quarterly basis. Report cards are mailed home at the end of each quarter (nine-week period). The academic grade indicates the student's progress in gaining subject information, acquiring, or improving skills and abilities, and growth in desirable attitudes. Academics are graded as follows:

A	Excellent Work	I	Incomplete
B	Above Average	N	Needs Improvement
C	Average	S	Satisfactory
D	Minimum Passing Grade	P	Pass
F	Failing	X	Not enrolled Long Enough.

PROGRESS REPORTS

Mid-term progress reports will be mailed home at the 5th week each quarter. When significant changes in school achievement or behavior occur, parents may be informed of concerns by means of a progress report. These reports may be mailed or sent home on an as needed basis. Some progress reports may also be communicated by a phone call from the teacher.

ParentVUE / StudentVUE / CANVAS

ParentVUE is a tool to help families stay informed about student progress. This tool can be used to access your student's grades, attendance information, and to communicate with teachers. Students will have access to the same information using StudentVUE. Canvas also has a Parent and Student tool to provide students and parents academic progress in our Learning Management System. If you need ParentVue login information or your login information has expired, please contact Toni Batson in the counseling center at 541-440-4062.

HOMEWORK

Homework is an important part of our educational program. Homework supports classroom instruction and activities. It is intended to reinforce student learning. The amount of homework will vary according to students' abilities, interests, and class assignments. Please report homework or progress concerns directly to the classroom teacher.

MAKE-UP WORK

If your child misses' class, it is his/her responsibility to arrange for making up the assignments. A student whose absence is excused must still fulfill the classroom requirements. It is the student's responsibility to check in with their teachers upon returning from an absence to determine a plan for making up missed assignments. At the discretion of the teacher, assignments may be waived or modified without penalty.

ACADEMIC INFORMATION

STUDENT RECOGNITION

We enjoy celebrating the accomplishments and contributions of our students throughout the school year.

Our recognition programs include academic, citizenship, and involvement in co-curricular activities:

1. High Honor Roll for students who attain a 4.00 GPA
2. Honor Roll for students who attain a 3.50 GPA or higher
3. 5 STAR Tokens (redeem tokens for student store items, and other prizes)
4. Club/Activity Service Recognition
5. National Junior Honor Society

Since its inception in 1962, over thousands of students have become members of the Douglas Chapter of the National Junior Honor Society. Membership is based upon scholarship, citizenship, service, leadership, and character. Once a member, a student must maintain and extend those qualities. Membership is both an honor and a commitment. To maintain membership, students must complete a minimum of ten hours of community service. Invitations for membership will take place in the spring.

WITHDRAWING FROM SCHOOL

When withdrawing a student from school, the parent/guardian may make a personal visit, call, or send a note to inform the school office as soon as possible. Students leaving Fremont are required to return all textbooks and library books, pay any fees owed. A checkout sheet should be completed as the student moves through the regular class schedule. Helping students with this checkout process will make the transfer of records to another school more efficient.

SCHOOL RECORDS

No part of records personally identified with a student will be released to any unauthorized person without permission from a parent/guardian. Unless notified in writing to the contrary, student pictures will automatically appear in annuals, newsletters, and news releases. Should a child enroll in another school system, a copy of the progress record will be sent to the school upon receipt of a notice of enrollment. Should you need to enroll your student at another school within our school district, please complete a "Student Records Request". For more details about your rights regarding student records and information please ask for "Annual Notification of Rights" from the counseling center.

Parents are asked to assist the school in ensuring that phone numbers and addresses are current. Should you move out of the Fremont boundaries, please complete the contract requesting enrollment outside your home school area online. Before a parent/guardian withdraws a student from our district, s/he has a right to see the student's records. A Parent may receive a copy of the child's records with 24 hours' notice.

Student registration information must be made out with the legal name given at birth or court decree. However, a student may use an alternative name if requested by the parent/guardian on the registration form. It will be necessary for parents who have a post office box address to also provide the school with the street address of their residence.

ACADEMIC INFORMATION

HEALTH RELATED CURRICULUM

Your student will have the opportunity to learn about specific topics related to health as required by Oregon Law. The curriculum and instruction are focused on helping students understand the physical, emotional, mental, and social changes that adolescents experience during their development. The instruction varies according to the grade level and student readiness. For questions or to exempt your student from the unit (or specific topic), please complete the form in this packet.

TEXTBOOKS

Each student is responsible for all books, locks, and equipment that are issued to him/her. If items are lost or damaged, a charge may be issued for replacement of materials. If the lost material is later found, present the receipt to the Main Office for a refund.

Roseburg Public Schools

Middle School Health Related Curriculum

Dear Parent and/or Guardian,

Your child will have the opportunity to learn about specific topics related to health as required by Oregon Law. The curriculum and instruction are focused on helping students understand the physical, emotional, mental, and social changes that adolescents experience during their development. The instruction varies according to the grade level and student readiness. The projected curriculum for the Middle School students is as follows:

All 6th, 7th, and 8th grade students will receive instruction in Nutrition and Physical Activity, Substance Abuse, Abstinence/Sexual Health and Human Immuno-deficiency Virus (HIV).

The 6th grade Oregon Health Standards for HIV and Abstinence include instruction in: abstinence, the physical, social, emotional and mental aspects of puberty, and sexually transmitted diseases/HIB/Hepatitis. They will also receive instruction in Personal Wellness, Personal Safety, and Tobacco.

The 7th grade Oregon Health Standards for HIV and Sexual Health include instruction in: abstinence, sexually transmitted diseases/HIV/Hepatitis, stages of pregnancy, facts about sexual intercourse, contraceptives, identifying community resources, and refusal skills. They will also receive instruction in Mental, Social and Emotion Health and Alcohol.

The 8th grade Oregon Health Standards for HIV and Sexual Health include instruction in: abstinence, sexually transmitted diseases/HIV/Hepatitis, stages of pregnancy, contraceptives, demonstration of steps using a condom, identifying community resources, decision making and refusal skills. They will also receive instruction in Violence/Suicide Prevention and Drugs.

Parents may excuse their child(ren) from any part of the health instruction and an alternative activity will be provided to the exempted student. Should you have any questions, please do not hesitate to contact school staff or complete the following section below and we will assist you in answering your question and ore reviewing curriculum.

Joseph Lane Middle School 541-440-5356	Fremont Middle School 541-440-5472

Parent Name _____ Date _____

Student Name _____ Grade _____

*Circle the areas of instruction listed above for which you desire more information/conversation.

Exemption – To exempt your child from this unit (or specific topic), we ask that you sign in the space provided below and indicate the portion of which you wish your child to be removed from class.

Parents Name _____ Date _____

Students Name _____ Grade _____

Topic/unit requesting exemption from _____

FREMONT
GENERALS

Fremont Middle School offers a wide selection of athletic opportunities. Students in 7th and 8th grades may choose from volleyball, football, cross-country, basketball, wrestling, and track and field. 6th graders may participate in cross country, track and field, and wrestling. Currently football, volleyball, and basketball are offered by the Boys and Girls Club of Roseburg for 6th graders. To participate in a Fremont sponsored sport athletes must have a completed sports packet. Packets can be found on our website at https://fremont.roseburg.k12.or.us or picked up in person. The district does not charge a fee for any of the sports listed. **Fall sports are scheduled to start on August 23rd.** No students will be allowed to participate until the sports packet has been approved by the athletics office. Any questions can be directed to the athletic director at 541-440-4055.

Roseburg Public Schools

Permissions Form

Field Trips

◯ **I Do** / ◯ **I Do Not Give** permission for my child to go and participate in off campus activities or field trips. These field trips are part of their learning program, and will primarily be within the community, although some may be to destinations that are more distant. Trips long enough to require transportation will be made in regular school buses or in some instances in parents' automobiles. You will be notified in advance regarding the time and destination of these field trips.

Consent to treatment of minor on field trip

◯ **I Do** / ◯ **I Do Not Give** permission for the school to obtain medical attention for my child in the event of a serious injury or accident. Your permission will authorize the school to call emergency services which may result in your child being taken to the hospital for emergency care. If circumstances allow, we will make every effort to contact you or your emergency person on file before contacting emergency services. Our first priority though, will be your child's immediate wellbeing. You will be financially responsible for medical treatment given to your child.

Movie Permission

◯ **I Do** / ◯ **I Do Not Give** permission to watch PG rated movies during class time. The movies are specifically chosen to coordinate with curriculum for each grade level. The teacher will have previewed the movies to ensure their appropriateness for a school showing.

Student Name	Grade
Signature of Parent or Guardian	Date
Printed Name of Parent or Guardian	Relationship to student

!! PLEASE COMPLETE AND RETURN TO THE SCHOOL YOU ARE REGISTERING WITH - REQUIRED FOR ALL STUDENTS !!

DOUGLAS
EDUCATION SERVICE DISTRICT
LISTEN • LEARN • LEAD

AUTHORIZATION FOR MEDICATION ADMINISTRATION

School: _____

Student's name:_____ DOB:_____Grade:_____

I am giving school personnel permission to administer medication(s) to my child per the following instructions:
Parent/Guardian must complete: (Please do not skip any questions)

Medication: _____ _____Non Prescription

Dose (strength/how much): _____ Prescription RX number: _____

Frequency (how often): _____ Pharmacy Name: _____

Time of day for meds at school: _____

Please allow my child to self-administer this medication. *Requires self-medication agreement form to be signed by parent, school administrator, and if prescription, consent of physician.*

Route (circle one):
Mouth Ear Eye Nose Skin

Yes _____ No _____

Start date:_____End date: _____

Reason for medication:

Special Instructions:

ALL MEDICATION MUST BE IN ITS NEWEST ORIGINAL CONTAINER WITH AN ACCURATE LABEL

****The written instructions from the physician for the administration of the prescription medication to the student must include the following:**

- Name of student, name of medication, route, dosage, frequency of administration, and other special instructions. This can be a prescription label if complete.

Important information for parents/guardians:

- I understand I am responsible to provide this medication and maintain the supply as needed.
- All medication must be provided from home and must be contained in its original-labeled container.
- Please include liquid measuring device. A teaspoon or tablespoon *cannot* be used for dispensing medication. If medication is to be cut in half, parents must do so before bringing to school. If medication is to be crushed, parents please provide crusher.
- I understand that I am responsible to notify the school in writing of any medication changes, and that all medications are to be brought to and from school by a parent or guardian.
- Parents are required to pick up all unused medication by the last day of school. I understand that any medication left at school will be discarded.

Parent/Guardian Signature _____**Date:** _____

(This authorization applies only to the medication listed above for the duration of treatment or school year.) My signature also authorizes an exchange of information as necessary between the school nurse, appropriate school personnel, and/or my child's health provider.

DOUGLAS
EDUCATION SERVICE DISTRICT
LISTEN • LEARN • LEAD

SELF-MEDICATION AGREEMENT

Students who are developmentally and/or behaviorally able, will be allowed to self-administer prescription and nonprescription medication, subject to the following:

1. A permission form must be submitted for all self-medication of prescription and nonprescription medication.
   - Self-medication of prescription medication requires permission from parent, school administrator and physician. Physician consent is to be included on the prescription label or on the medication consent form.
   - Self-administration of non-prescription medication requires permission from parent and school administrator.
2. All prescription and nonprescription medication must be kept in its appropriately labeled, original container as follows:
   - Prescription labels must specify the name of the student, name of the medication, dosage, route, and frequency or time of administration and any other special instructions.
3. Physician's consent for self-administration must either be on the prescription label or on this form.
4. Sharing and/or borrowing of medication with another student is strictly prohibited.
5. Permission to self-medicate may be revoked if the student violates school district policy governing administration of non-injectable medication and/or these regulations. Additionally, the student may be subject to discipline, up to and including expulsion, as appropriate if the self-medication policy is violated.

Student Name:_____

I have read and agree to the above criteria and give permission for my child to self-administer:

Name of medication: _____

Parent/Guardian Signature: _____ Date: _____

(My signature authorizes an exchange or information as necessary between the school and my child's health provider for the purpose of information relating to this medication.)

I agree to comply with the above criteria:

Student Signature:_____ Date: _____

Please allow this student to self-administer this medication. (Student must be developmentally and behaviorally able to self-administer.)

Physician Signature: _____ Date:_____
(Required for prescription medications)

____ This student may carry and self-administer this medication as prescribed

____ This student may self-administer this medication as prescribed, but the medication will be kept in the office.

School Administrator's Signature:_____Date: _____

1871 NE STEPHENS STREET | ROSEBURG, OR 97470 | OFFICE 541.440.4777 | FAX 541.440.4771
www.douglasesd.k12.or.us

ED 506 Form
Indian Student Eligibility Certification Form for Title VI Indian Education Formula Grant Program

Parent/Guardian: This form serves as the official record of the eligibility determination for each individual child included in the student count for the Title VI Indian Education Formula Grant Program. If you choose to submit a form, your child could be counted for funding under the program. The grantee receives the grant funds based on the number of eligible forms counted during the established count period. You are not required to complete or submit this form unless you wish for your child(ren) to be included in the Indian student count. This form should be kept on file with the grant applicant and will not need to be completed every year. Where applicable, the information contained in this form may be released with your prior written consent or the prior written consent of an eligible student (aged 18 or over), or if otherwise authorized by law, if doing so would be permissible under the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and any applicable state or local confidentiality requirements.

Student Information

Name of the Child _____ Date of Birth _____ Grade level _____

Name of School _____ School District _____

Tribal Membership

The individual with Tribal membership is the (select only one): ___ child ___ child's parent ___ child's grandparent

If the individual with Tribal membership is **not** the child listed above, name the individual (parent/grandparent) with tribal membership: _____

Name and address of Tribe or Band that maintains updated and accurate membership data for the individual listed above:

Name _____ Address _____

City _____ State _____ Zip Code _____

The Tribe or Band is (select only one):

- ○ Federally Recognized Tribe
- ○ State Recognized Tribe
- ○ Terminated Tribe
- ○ Alaska Native
- ○ Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

Proof of membership in Tribe or Band listed above, as defined by Tribe or Band is:

- ○ Membership or enrollment number establishing membership (if readily available) or
- ○ Other evidence establishing membership in the Tribe listed above (describe and attach)

Membership or enrollment number establishing membership (if readily available) or other evidence establishing membership in the Tribe listed above (describe and attach). _____

Attestation Statement

I verify that the information provided above is true and correct to the best of my knowledge and belief.

Printed Name of Parent/Guardian _____ Signature _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Email _____ Date _____

For Parent/Guardians:

Definitions:
Indian means an individual who is (1) A member of an Indian Tribe or Band, as membership is defined by the Indian Tribe or Band, including any Tribe or Band terminated since 1940, and any Tribe or Band recognized by the State in which the Tribe or Band resides; (2) A descendant of a parent or grandparent who meets the requirements described in paragraph (1) of this definition; (3) Considered by the Secretary of the Interior to be an Indian for any purpose; (4) An Eskimo, Aleut, or other Alaska Native; or (5) A member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect on October 19, 1994.

Student Information: Write the name of the child, date of birth, grade level, name of school and school district. Only name one child per form.

Tribal Membership: Write the name of the individual with the tribal membership, if it is not the child listed. Only one name is needed for this section, even though multiple persons may have tribal membership. Select only one identifier: the child, child's parent or grandparent, for whom you can provide membership information.

Write the name and address of the organization that maintains updated and accurate membership data for such Tribe or Band of Indians. The name does not need to be the official name as it appears exactly on the Department of Interior's list of federally recognized Tribes, but the name must be recognizable and be of sufficient detail to permit verification of the eligibility of the Tribe. Check only one box indicated whether it is a Federally Recognized, State Recognized, Terminated Tribe or Organized Indian Group. Write the enrollment number establishing the membership for the child, parent or grandparent, if readily available, or other evidence of membership.

Attestation Statement: Provide the printed name of parent/guardian and signature, address, phone number and email of the parent or guardian of the child. The signature of the parent or guardian of the child verifies the accuracy of the information supplied.

Paperwork Burden Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1810-0021. The time required to complete this portion of the information collection per type of respondent is estimated to average: 15 minutes per Indian student certification (ED 506) form; including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Office of Indian Education, U.S. Department of Education, 400 Maryland Avenue, S.W., LBJ/Room 3W238, Washington, D.C. 20202-6335

Roseburg Public Schools

ANNUAL NOTIFICATION OF RIGHTS:

The following is a notice to parents and eligible students (who are 18 years of age or older) of their rights regarding student records and information.

I. Annual Notification of Your Rights Under FERPA

As a parent/guardian of a Roseburg Public Schools (RPS) student you have certain rights regarding your child's education records under the Family Education Rights and Privacy Act (FERPA), and applicable state law. The rights are summarized below.

1. **Review of Student Records:** You have the right to inspect and review your child's education record. You may contact the principal of the student's school to request an appointment to review the records. The school will make arrangements for access and notify you of the time and place where your child's records may be inspected.
2. **Amendment of Student Records:** If you believe your child's records are inaccurate or misleading, you have a right to make a written request for the school to amend the records.
3. **Disclosure of Student Records:** Without your prior written consent, only individuals having a legitimate educational interest, officials in the school systems in which a student intends to enroll, and certain authorized officials may have access to your child's educational records. However, certain routine information, called *directory information*, may be disclosed without your consent. See Parental Privacy below.
4. **Right to File a Complaint:** If you believe your rights under FERPA have been violated you have the right to file a complaint with the Family Policy Compliance Office in the U.S. Department of Education.

All of the rights described above transfer to a student who is 18 years old or is attending a post-secondary education institution.

II. Student and Parent Information and Image Disclosure (Directory Information)

FERPA allows the District to provide *directory information* upon request without the prior permission of parents or students.
Directory Information includes the following items:

- Student's name, address and telephone listing
- Student's image (ex. photo, print, video)
- Student's grade level, teacher(s), class(es) and/or classroom(s)
- Student's gender
- Most recent previous school or program attended
- Parent(s) name and email address
- Date of birth
- Participation in sports and activities
- Weight and height of athletic team members
- Dates of attendance
- Degrees or awards received

The primary use of *directory information* is to allow for the inclusion of your child's information and image for school district use in publications such as yearbooks, class composites, playbills or other programs showing participation in athletics or activities, teacher and curriculum websites, and the District and school websites and social media.

Video and/or photographs of our students, their class activities, and their student work may be displayed in our buildings, on our websites, and used outside the District for District-authorized purposes.

We occasionally will release directory information upon request to third parties such as parent organizations and news media for directories or other means of supporting schools and school programs.

If you do NOT want the District to disclose directory information to include photo and video from your child's education records, you must notify the office at your child's school in writing within two (2) weeks of starting school. This notification must be submitted on an **annual** basis.

Classroom Internet Use - After being trained by school staff on the acceptable and appropriate use of technology, students will make use of the Internet on a regular basis for classroom instruction and online assessments. Student Internet use is monitored by staff and web content is filtered by Children's Internet Protection Act (CIPA) compliant tools. If you do not want your student to access the Internet at school **you must notify the office at your child's school in writing, prior to the start of school.** This notification must be submitted on an **annual** basis.

Additional forms may be required to complete your students registration, and can be located on our website by clicking on Registration Forms. From there you will be able to print, complete and sign any remaining forms. You will have the option to upload through ParentVue, or hand deliver to the school on their registration dates.

Temporary Guardianship Agreement

I, _____, of _____
(print your full name) (street)

_____, as the custodial parent of:
(city, state, zip)

List the full names of each child	List each child's birth date

Do hereby grant temporary guardianship of the above listed children to:

List the full names of the individual (s) to whom you are granting temporary custody	List person's relationship to the child(ren)

Contact information of temporary guardians listed above:

Address: _____

Phone numbers: _____ Cell _____ Work

_____ Home _____ Other

- -

Statement of Consent: (To be signed in the presence of a legalized notary public.)

I, _____, *hereby grant temporary guardianship of the above children, whom I have legal custody of to* _____

☐ From _____ to _____
(mm/dd/yyyy) (mm/dd/yyyy)

☐ For as long as necessary, beginning on _____
(mm/dd/yyyy)

☐ Until the students turns 18 years old _____
Students date of birth

In addition, in the event of an emergency or non-emergency situation requiring medical treatment, I hereby grant permission for any and all medical and/or dental attention to be administered to my child/children, in the event of an accidental injury or illness. This permission includes, but is not limited to, the administration of first aid, and the use of an ambulance, and the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel. I also grant permission for the guardian(s) named above to make educational decisions for my child/children.

Signature: _____ Date: _____

Signature: _____ Date: _____

Notarization:

On this _____ day of _____, _____
(date) *(month)* *(year)*

_____
(name of parent)

personally appeared before me in _____, _____ and, in my presence,
(city) (state)

has/have satisfactorily identified him/her/themselves as the signer(s) of this Temporary Guardianship Form.

Name of Notary Official: _____

Signature: _____ Commission Expires: _____

Affix Notary

Seal Here

Roseburg Public Schools

Office Use: Enrollment Date _____ Record # _____ Date Requested _____ Date Received _____

STUDENT RECORDS REQUEST

Please CIRCLE the enrolling school:

Eastwood Elementary 2550 SE Waldon St Roseburg OR 97470 Phone: 541-440-4180 **Fax: 541-440-4182**	**Fir Grove Elementary** 1360 W Harvard Ave Roseburg OR 97471 Phone: 541-440-4085 **Fax: 541-440-4086**	**Fullerton IV Elementary** 2560 W Bradford Roseburg OR 97471 Phone: 541-440-40 **Fax: 541-440-4082**	**Green Elementary** 4498 SW Carnes Rd Roseburg OR 97471 Phone: 541-440-4127 **Fax: 541-440-4017**	**Hucrest Elementary** 1810 NW Kline St Roseburg OR 97471 Phone: 541-440-4188 **Fax: 541-440-4191**
Melrose Elementary 2960 Melrose Rd Roseburg OR Phone:541-440-4077 **Fax: 541-440-4078**	**Sunnyslope Elementary** 2230 SW Cannon Roseburg OR Phone: 541-440-41 **Fax: 541-440-948**	**Winchester Elementary** 217 Pioneer Way Roseburg OR 97495 Phone: 541-440-4183 **Fax: 541-440-4187**	**John C. Fremont Middle School** Attn: Registrar 850 W Keady Ct Roseburg OR 97471 Phone: 541-440-5400 **Fax: 541-440-4600**	**Joseph Lane Middle School** Attn: Registrar 2153 NE Vine St Roseburg OR 97470 Phone: 541-440-5300 **Fax: 541-440-4100**
Roseburg High School Attn: Susie Collins, Registrar 400 West Harvard Roseburg OR 97470 Phone: 541-440-4139 **Fax: 541-440-4156** Email: scollins@roseburg.k12.or.us		**Roseburg Virtual School** Attn: Missey Denzer 948 SE Roberts Roseburg OR 97470 Phone: 541-440-8278 **Fax: 541-440-4037** Email: mdenzer@roseburg.k12.or.us		**Phoenix Charter School** Attn: Kelli Traviss, Registrar 3131 NE Diamond Lake Blvd Roseburg OR 97470 Phone:541-673-3036 Fax:541-957-5906 Email:ktraviss@roseburgphoenix.com

The following student has enrolled in Roseburg Public Schools. Please forward the following requested records (if available):

- ✓ Cumulative File
- ✓ Key to your grading and credit system
- ✓ Behavior file
- ✓ Smarter Balanced & State Test Scores (overall and breakdown/strand scores)
- ✓ Health/Immunization/Birth Certificate
- ✓ Official Transcript/Academic Progress Records TAG records
- ✓ Withdrawal Grades/Current schedule
- ✓ IEP, Special Education Records, and/or 504 Plan **(if special education records are kept at a different location, please forward this request to that location).**

Students Full Legal Name _____ Grade _____ Preferred Name _____

Student Address/Phone _____

Gender _____ DOB _____ Place of Birth _____

Last School Attended _____

Address _____ Phone _____ Fax _____

*Parent/Guardian (or student over 18) Signature _____

***Print** Parent Name (or student over 18) _____ Date _____

Has your student been expelled from the previous school?_____Is your student on an IEP/504 (past or present)?_____

Do not write below this line.

Registrar _____ Date _____

Under ORS 326.575, both public and private schools must request student records from the youth's former school within ten days of when the student initially seeks enrollment. The former school has ten days after receipt of the request to transfer any education records.
Under ORS 339.260, a district may withhold records, diplomas, or grade reports until outstanding fees owed are paid, although not when an educational agency has requested the records for use in the appropriate placement of a student. Please Note: ORS 339-260, ORA581-21-340, and Federal Law 34CFR S 99 et.seq specifies that no parental signature is required for educational records to be released to another educational agency.

!! PLEASE COMPLETE AND RETURN TO THE SCHOOL YOU ARE REGISTERING WITH - REQUIRED FOR ANY STUDENT NEW TO THE DISTRICT !!

Roseburg Public Schools

Grade 6-12 Virtual School Application/Interest form

Student ID: _____ Current Grade: _____

Student Full Legal Name: _____

Preferred Name: _____

Student Address: _____

Date of Birth: _____ Gender: _____

Current School Attending: _____

Grade for 21-22 school year: _____

Parent or Legal Guardian Name: _____

Relationship to student: _____

Parent Address (if different than above): _____

Phone: _____

Email Address: _____

Why are you interested in the Virtual Option? _____

_____

_____

_____

_____

You can:

1. **Download, complete, upload and submit during your online registration process for the 2021-22 school year.**
2. **Download, complete, and hand deliver to your school once you have completed the online registration process.**

Roseburg Public Schools

Middle Schools Admission Contract for Students requesting enrollment outside of their home school

Requested School of enrollment _____

Student Name _____ Grade _____

Dear Parents and Student:

Welcome! You will find that we are schools committed to your student having a successful education experience. Because your child is requesting enrollment outside your home address attendance area, we would expect the following conditions to be met in order for your child to remain in attendance at our school.

1. Parents have the responsibility to provide transportation to and from school as long as your residence is outside of the school's attendance area. Your child must be on time for school and be properly supervised after school dismissal.
2. Regular school attendance is expected unless your child is too ill to attend. **Attendance rates for every class/period will be monitored every three weeks. If your child's attendance rate falls below 90% they may be asked to return to their home school.**
3. Your student's behavior (academic and social) will be evaluated regularly and could result in reconsideration of your request. Of course, your student will be expected to follow school rules and maintain passing grades in all classes.

Failure to adhere to any of the conditions listed above may result in the student immediately being dropped from our enrollment. **This decision, which is at the sole discretion of the principal, would result in your student being required to return to their home school.**

.....

We have read and understand the above conditions and agree to abide by them. We also understand that if any of the conditions listed above are not met, our student will be withdrawn as a student and must immediately return to their home school.

_____ _____

Student Signature Date

_____ _____

Parent Signature Date

_____ _____

Principal Signature Date

Oregon Certificate of Immunization Status
Oregon Health Authority, Immunization Program

Oregon law requires proof of immunization be provided or an exemption be signed prior to a child's attendance at school, preschool, child care or home day care. This information is being collected on behalf of the Oregon Health Authority Immunization Program and may be released to the Authority or the local public health department by the school or children's facility upon request of the Authority. Please list immunizations in the order they were received.

Complete for all | Up-to-date | Medical | Non-medical

Child's Last Name *Apellido*	First *Primer Nombre*	Middle Initial *Segundo Nombre*	Birthdate *Fecha de Nacimiento*
Mailing Address *Dirección*	City *Ciudad*	State *Estado*	Zip Code *Codigo Postal*
Parents' or Guardians' Names *Nombre de los padres o guardian*		Home Telephone Number *Número de Teléfono*	

Vaccines	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5
Diphtheria/Tetanus/Pertussis (DTaP, Tdap, Td)	(mm/dd/yy)	(mm/dd/yy)	(mm/dd/yy)	(mm/dd/yy)	(mm/dd/yy)
Booster Dose Tdap					
Polio (IPV or OPV)					
Varicella (Chickenpox) [VZV or VAR] ☐ Check here if child has had chickenpox disease _____ (mm/dd/yy)					
Measles/Mumps/Rubella (MMR) *or*					
Measles vaccine only					
Mumps vaccine only					
Rubella vaccine only					
Hepatitis B (Hep B)					
Hepatitis A (Hep A)					
Haemophilus Influenzae Type B (Hib) (Only children less than 5 years)					

I certify that the above information is an accurate record of this child's immunization history.

Signature* _____ Date

Update Signature _____ Date

Update Signature _____ Date

Update Signature _____ Date

*Parent, guardian, student at least 15 years of age, medical provider or county health department staff person may sign to verify vaccinations received.

For school/facility use only
School/facility Name
Student ID Number
Grade

Continued On Reverse Side

Oregon Certificate of Immunization Status, Page 2
Oregon Health Authority, Immunization Program

Child's Last Name *Apellido*	First *Primer Nombre*	Middle Initial *Segundo Nombre*	Birthdate *Fecha de Nacimiento*

Recommended Vaccines	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5
Pneumococcal (PCV7, PCV13) (Only children less than 5 years)					
Meningococcal (MCV4, MPSV4)					
Human Papilloma Virus (HPV) (9 years or older)					
Influenza (Flu)					
Other Vaccine Please specify:					
Other Vaccine Please specify:					

For medical exemptions:
Please submit a *letter* signed by a licensed physician stating:

- Child's name
- Birth date
- Medical condition that contraindicates vaccine
- List of vaccines contraindicated
- Approximate time until condition resolves, if applicable
- Physician's signature and date
- Physician's contact information, including phone number

For Immunity Documentation (history of disease or positive titer): **Please submit a *letter* signed by a licensed physician stating:**

- Child's name and birth date
- Diagnosis or lab report
- Physician's signature and date

Nonmedical Exemption:
I have received information regarding the benefits and risks of immunizations. I understand that my child may be excluded from school or child care attendance if there is a case of disease that could be prevented by vaccine. I have attached the required document from (check one):

☐ A health care practitioner
☐ The vaccine educational module approved by the Oregon Health Authority

I understand that I may decline one or more vaccinations for my child and request that my child be exempted from the following required immunizations (check all that apply):

☐ Diphtheria/Tetanus/Pertussis ☐ Hepatitis B
☐ Polio ☐ Hepatitis A
☐ Varicella ☐ Hib
☐ Measles/Mumps/Rubella

Signature of Parent or Guardian Date

Optional:
ORS 433.267 states that this document may include the reason for declining the immunization. Immunization is being declined because of:

☐ Religious belief ☐ Philosophical belief ☐ Other

I certify that the above information is an accurate record of this child's immunization history and exemption status.

Signature _____
Date

Update Signature _____
Date

Update Signature _____
Date

Instructions for completing the Certificate of Immunization Status

Contact information:

Complete information for your child including full name, birthdate, current mailing address, parents' or guardians' names and home telephone number. This information will be used to contact you if there are questions about your child's immunization history.

Required vaccines (Front):

Fill in the month/day/year that your child received each dose of vaccine. Doses must be listed in the order received. The shaded boxes on the form indicate doses that are not routinely given, however if your child received them, please write the date in the shaded box. Check with your child's school or daycare to find out which vaccines are required for your child's age or grade.

Required vaccines (Back):

These doses are not required by law, however these vaccines are recommended and most children receive them. Fill in the month/day/year that your child received each dose of vaccine. Doses should be listed in the order received. The shaded boxes on the form indicate doses that are not routinely given, however if your child received them, please write the date in the shaded box.

Signature:

The parent or guardian signature is a sworn statement that the child's record is accurate. The signature of a physician or local health department is not required but it is acceptable. **Every time you add on to your child's information you need to resign the form.**

REMEMBER TO COMPLETE BOTH SIDES OF FORM

Exemptions:

Oregon allows medical and nonmedical exemptions.

For a nonmedical exemption, check the appropriate box and submit one of the following required documents:

1. A certificate signed by a health care practitioner verifying discussion of the benefits and risks of immunization, or
2. A certificate of completion of the vaccine educational module about the benefits and risks of immunization.

Indicate which vaccines you are exempting your child from by checking the boxes. Sign and date on the indicated line.

For a medical exemption or proof of immunity, submit a letter from your child's physician to the school or child care.

Instrucciones para llenar el Certificado de Estado de Vacunación

Información de contacto:

Dé la siguiente información sobre su hijo: nombre completo, fecha de nacimiento, dirección postal actual, nombres y números de teléfono de los padres o tutores. Usaremos esta información para comunicarnos con usted si hay preguntas sobre los datos de vacunación de su hijo.

Vacunas requeridas (adelante):

Escriba el mes/día/año en que su hijo recibió cada dosis de vacuna. Las dosis se deben enumerar en el orden en que fueron recibidas. Los casilleros sombreados del formulario indican las dosis que no se dan rutinariamente. Sin embargo, si su hijo las recibió, escriba la fecha en el casillero sombreado. Averiguar con la escuela o guardería cuales son las vacunas requeridas para la edad y grado escolar de su niño.

Vacunas recomendadas (atrás):

Estas dosis no son obligatorias por ley, pero son recomendadas y la mayoría de los niños las reciben. Escriba el mes/día/año en que su hijo recibió cada dosis de vacuna. Las dosis se deben enumerar en el orden en que fueron recibidas. Los casilleros sombreados del formulario indican las dosis que no se dan rutinariamente. Sin embaro, si su hijo las recibió, escriba la fecha en el casillero sombreado.

Firma:

La firma del padre, madre o tutor es una declaración jurada de que la historia de vacunas del niño esta correcta. La firma del médico o del departamento de salud local no son requieridas, pero son aceptable. **Cada vez que agregue datos a la información sobre su hijo debe volver a firmar el formulario.**

RECUERDE LLENAR AMBOS LADOS DEL FORMULARIO

Excepciones:

Oregon permite excepciones médicas y no médicas.

Para una excepción no médica, marque la casilla adecuada y presente uno de los siguientes documentos requeridos:

1. Un certificado firmado por un proveedor de atención de salud verificando la discusión de los beneficios y riesgos de la vacunación, o
2. Un certificado de terminación del módulo educativo de la vacuna sobre los beneficios y riesgos de la vacunación.

Indique para cuáles vacunas quiere que su hijo(a) sea exento(a) al marcar las casillas. Firme y feche la línea indicada.

Para una excepción médica o un comprobante de inmunidad, presente una carta del doctor de su hijo(a) a la escuela o cuidado infantil.