A. OPENING
   1) Call to order
   2) Pledge of Allegiance
   3) Approval of Board of Education Minutes – March 14, 2016 A – 3
   4) Board Appreciation

B. COMMITTEE REPORTS
   1) Personnel & Finance Committee Minutes – March 15, 2016 B – 1
   2) Building & Sites Committee Minutes – March 23, 2016 B – 2
   3) Policy Committee Minutes – April 6, 2016 B – 3

C. CONSENT CALENDAR
   1) Personnel Information C – 1
   2) Transfer of Funds C – 2
   3) Approval of State Dept. of Education Addendum to Agreement for Child Nutrition Programs (ED-099) – Healthy Food Certification Statement C – 3
   4) Establish an appropriation for FY16/17 in the amount of $15,312 for the Manchester Head Start Training and Technical Assistance grant C – 4
   5) Establish an appropriation for FY16/17 in the amount of $11,137 for the Enfield Head Start Training and Technical Assistance grant C – 5
   6) Establish an appropriation for the period 3/1/16-2/28/17 in the amount of $813,097 for the Enfield Board of Education’s Head Start Program C – 6
   7) Establish an appropriation for the period 3/1/16-2/28/17 in the amount of $1,169,102 for the Manchester Board of Education’s Head Start Program C – 7
   8) Establish an appropriation for FY15/17 in the amount of $611,500 for an additional award for General Improvements to Alliance Districts’ Building Grant Program C – 8
   9) Item to amend, Appropriation Instructors of the Handicapped (IOH) Pool Repairs at Manchester High School for FY15/17 in the amount of $229,000 C – 9

D. REPORT FROM STUDENT REPRESENTATIVE
   1) Ms. Lori Fogg and Ms. Shania Stanton

E. PUBLIC COMMENTS (any item before the board)
F. **SUPERINTENDENT’S REPORT**  
1) School Improvement Plan – Ms. Beth Hayes, Principal, Illing Middle School  
2) Superintendent’s Proposed Budget Reductions - 2016-17, Mr. Matthew Geary

G. **UNFINISHED BUSINESS** – None

1) **Policy Recommendation:**  
The Policy Committee submits to the full Board its recommended revision for a second reading and approval in accordance with its policy on policy changes:

Policy Revisions  
a. Board Policy 1330 – Community Use of School Facilities  
b. Board Policy 5142 – Administration of Medication by Personnel  
c. Board Policy 5121 – Wearing of Photo Identification Badges  
d. Board Policy 3110 – Budget

Policy Deletions  
e. Board Policy 6143 – Physical Education External Credit  
f. Board Policy 3150 – Adoption of the Budget

H. **NEW BUSINESS** –  
1) **Policy Recommendation**  
The Policy Committee submits to the full Board its recommended revision for the first reading and approval in accordance with its policy on policy changes:

Policy Revisions  
a. Board Policy 5131.1 – Bullying  
b. Board Policy - Use of Therapy Dogs in Schools

I. **PUBLIC COMMENTS** (comments limited to items on tonight’s agenda)

J. **COMMUNICATIONS**

K. **ITEMS FOR FUTURE AGENDAS**

L. **ADJOURNMENT**

Welcome to the Manchester Board of Education meeting. Observers are always welcome. The following instructions are to assist those who wish to speak during the Public Comment session(s):

1) Print your name and address on the sign-in sheet at the podium for accurate record keeping.  
2) State your name and address for the record. Students state name only.  
3) First Session: Three minute time limit for any item that may come before the Board. Listen for the bell.  
4) Second Session: Comments must be limited to items on the Board’s agenda for this meeting. The Board Chair has the discretion to limit comment time.  
5) Written statements may be substituted for Board members if time runs out for speaker.  
6) Immediate replies to questions/concerns should not be expected (Board Chair/Superintendent’s discretion).  
7) Inappropriate topics: Confidential information, personal issues and legal concerns. Please avoid derogatory and profane language. Board of Education Policy #1220.
Attendees: Deb Hagenow, Susan Jacobsen, Pat Brooks, Nick Aldi

Mr. Aldi shared the State of Connecticut, Department of Education, Operational Memorandum #38-15, regarding Paid Lunch Equity: School Year 2015-16 Calculations and Tool. Each year, school lunch program regulations require school districts participating in the National School Lunch Program to ensure that sufficient funds are provided to the nonprofit school food service account for meals served to students not eligible for free or reduced price meals.

Mr. Aldi reviewed the Paid Lunch Equity Calculations. The District weighted average is $2.19. Current lunch prices are Elementary $2.05; Middle $2.30; High School $2.45. Mr. Aldi recommended a $.10 increase at all levels bringing the 2016-2017 School Year prices to Elementary $2.15; Middle $2.40; High School $2.55. The Committee agreed and will recommend to the full Board to increase lunch prices for the 2016-2017 School Year by $.10 at all levels.

Mrs. Jacobsen led a discussion regarding the cost of adult lunches. It was determined that the adult lunch price would also increase to $4.00 beginning with the 2016-2017 School Year.

Mr. Aldi provided the Committee with background on the Healthy Food Certification program. Healthy Food Certification was first introduced for the 2006-2007 school year. This initiative was the start of promoting “school wellness.” School Districts were encouraged to focus on promoting healthy, well-balanced meals as opposed to selling snack and beverage items that are high in fat and sugar. The Department of Education was giving districts the option to sign up and receive an additional $.10 for each lunch served.

Manchester Public Schools joined the program and has participated each school year since 2007-2008. The Board of Education has approved participation with the stipulation that the district is allowed to sell food that does not meet the nutritional standards at an event that occurs at the end of the school day. The Department of Education continues to pay the District an additional $.10 for each lunch served, this equates to approximately $72,000 for the 2016-2017 school year.

The Committee will recommend to the full Board that the District participate in the Healthy Food Certification program during the 2016-2017 school year with the stipulation that the district be allowed to sell food that does not meet the nutritional standards at an event that occurs at the end of the school day.

Mrs. Brooks reviewed the February 29, 2016, Year-to-Date Budget Status Report with the Committee.

The next meeting will be May 23, 2016, 5:30 p.m., in the Director’s Room, Lincoln Center.

Respectfully submitted,

Patricia F. Brooks
Assistant Superintendent
Finance and Management
Manchester Board of Education  
Building and Sites Committee  
Central Office – Board Room A  
March 23, 2016

Attendees: Deborah Hagenow, Matthew Geary, Susan Jacobsen, Peter Staye, Randall Luther (Tai Soo Kim Architects,) Christopher Till (Town of Manchester Facilities.)

Mr. Luther, Project Architect of Tai Soo Kim, presented the conceptual designs for the Waddell Elementary School renovation. Redesign of the site and location of the addition are very interrelated and will drive the location of play areas, the circulation pattern for drop off and pick up functions as well as the location of the building’s main entrance and academic spaces within the building. Four options for locating the 18,000 to 20,000 square foot addition on the building were presented, and two options for site designs were presented.

Ultimately, the committee concluded that the design process should continue based on a new main entrance being located in the south west corner of addition.

Mr. Staye presented a list of projects from the 3-Year Capital Plan that are proposed to be funded through a bond. The list is devoted to projects at schools that are not currently in a “like new” renovation schedule. These projects are not currently included in any funding plan and due to their cost are beyond the scope of Buildings & Grounds’ Capital budgets.

In addition to large site projects, like replacing the parking lot at Illing, the list includes an asbestos abatement effort to be undertaken over the next 6 years. The abatement is needed before other improvements to classrooms may be undertaken. The abatement projects would qualify for state reimbursement, currently 67%, which would reduce the final cost to the town by a considerable amount.

The committee recommended that the plan be submitted to the full board at its June meeting.

The committee discussed the request of the MHS class of 2018 to locate 3 clothing collection boxes on the site of MHS. The student proposal is intended to generate potentially $150 / month from the sale of clothing deposited in the boxes from the community, however, that amount is not guaranteed. The students propose to use the funds to reduce the cost of prom tickets, and other student functions. Mr. Staye indicated that similar proposals at several schools had been discussed by the committee in the past and all had been denied.

The committee admired the initiative of the class and was very impressed by their ambition, however, denied the request due to past experience and multiple concerns including safety, security, maintenance, etc.

The next meeting is currently scheduled to be held at 5:30 on Monday, May 9, 2016, at the high school.

Respectfully Submitted,

Peter Staye - Facilities Director
Manchester Public Schools
Board of Education
Policy Committee
Minutes
Wednesday, April 6, 2016
Board Room A
Kennedy Education Center
45 North School Street
5:30 PM

The meeting was called to order at 5:35 PM.

Members Present: Deb Hagenow, Mary-Jane Pazda, Darryl Thames, Sr.
Others Present: Matt Geary

1. The committee members discussed the proposed Use of Therapy Dogs in Schools policy and requested that the benefits of using a therapy dog be added to the draft. The revised draft will be sent to the full Board for a first reading at their next meeting. Community member and therapy dog handler Sandra Lok has assisted with the development of the policy and was in attendance at the meeting.

The revised policy is attached. This is a new policy.

Use of Therapy Dogs in Schools

2. The committee reviewed the current policy on Kindergarten Enrollment, specifically the requirement that children turn 5 prior to January 1 in order to enroll in Kindergarten. The committee will make a recommendation on this policy following the April 25 meeting.

3. The committee members worked on proposed revisions to the Bullying policy. The revised draft will be sent to the full Board for a first reading at their next meeting. The members also directed the Superintendent of Schools to prepare a one page document that explains the process for parents / guardians. That document will not be included in the policy and will be brought back to the committee at their April 25 meeting for review. Community member and parent Candy Lopez was in attendance and assisted.

The revised policy is attached with new language noted in red and language that is already in the existing policy but was moved in green.

Bullying Policy (Proposed)

Bullying Policy (Current)

On the advice of JoAnn Freiberg, Education Consultant School Climate, Bullying and Character Education, the committee will develop a policy focused on school climate which will ultimately encompass the existing Bullying Policy.

4. The discussion of the School Wellness Policy and the Transfer and Non-Resident Students Policy was tabled until the April 25 meeting.

A draft agenda for that meeting is below.

Policy Committee Agenda April 25 Draft

The meeting adjourned at 8:20 PM.

Submitted by: Matt Geary
PERSONNEL ACTION

APPOINTMENTS

Nicole Rubino to be a Grade 1 teacher at Robertson Elementary School. Ms. Rubino received a Master of Arts Teacher in Education degree at Sacred Heart University. Ms. Rubino resides in Tolland. It is recommended that her appointment be approved effective February 18, 2016 (MA/Step 1, $46,228).

RESIGNATIONS

Patricia F. Brooks, Assistant Superintendent of Finance and Management has submitted a letter of resignation for retirement purposes effective the end of business on July 31, 2016. Mrs. Brooks has been with Manchester Public Schools since December 13, 2004. It is recommended that her request be approved.

Uyi Osunde, Assistant Principal at Illing Middle School has submitted a letter of resignation for personal reasons effective the end of business on June 30, 2016. Mr. Osunde has been with Manchester Public Schools since September 24, 2013. It is recommended that his request be approved.

Christopher Driscoll, Special Education teacher at Manchester High School has submitted a letter of resignation for personal reasons effective the end of business on June 30, 2016. Mr. Driscoll has been with Manchester Public Schools since August 24, 2015. It is recommended that his request be approved.

Steven Schroth, Mathematics teacher at Manchester High School has submitted a letter of resignation for personal reasons effective the end of business on June 30, 2016. Mr. Schroth has been with Manchester Public Schools since November 17, 2014. It is recommended that his request be approved.

Colleen Kubinski, ESOL teacher at Robertson Elementary School has submitted a letter of resignation for retirement purposes effective the end of business on June 30, 2016. Ms. Kubinski has been with Manchester Public Schools since August 26, 2013. It is recommended that her request be approved.

Morgan Gallant, Grade 1 teacher at Bowers Elementary School has submitted a letter of resignation for personal reasons effective the end of business on June 30, 2016. Ms. Gallant has been with Manchester Public Schools since October 23, 2012. It is recommended that her request be approved.

Patricia Reinwald, Grade 4 teacher at Waddell Elementary School has submitted a letter of resignation for personal reasons effective the end of business on April 29, 2016. Ms. Reinwald has been with Manchester Public Schools since August 27, 2014. It is recommended that her request be approved.
Town of Manchester  
Board of Education

To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 30, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Music Education Professional Development account to Systemwide Music Education Dues and Fees account. A total transfer of $350 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
Manchester Public Schools  
Manchester, Connecticut

To: Accounting Department

Date: 03/30/2016

School: District Music
Principal's Sign: Keith Berry
Date of Approval: 03/30/2016

JUSTIFICATION (Required Field):
Funds needed for WCSU Jazz Festival Registration

---

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE In whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$350.00</td>
</tr>
<tr>
<td>$</td>
</tr>
<tr>
<td>$</td>
</tr>
<tr>
<td>$350.00 TOTAL DECREASE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$350.00</td>
</tr>
<tr>
<td>$</td>
</tr>
<tr>
<td>$</td>
</tr>
<tr>
<td>$350.00 TOTAL INCREASE (Must match total decrease)</td>
</tr>
</tbody>
</table>

Board Approval Needed: Yes[ ] No[ ]

Date of Board Approval: 

Date Transfer Completed 
Name: 

Accounting Department Only
To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 29, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Social Studies Contracted Kelly Subs ($8,500) and Travel/Lodging ($3,000) accounts to Systemwide Language Arts Instructional Supplies and Materials account. A total transfer of $11,500 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
Transfer to cover costs for Reading Units of Study orders.

<table>
<thead>
<tr>
<th>SUBJECT</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language Arts</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DECREASE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 8,500.00</td>
<td>Account #: 142 99100 5432</td>
</tr>
<tr>
<td>$ 3,000.00</td>
<td>Account #: 142 99100 5580</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 11,500.00</td>
<td>Account #: 128 99222 5611</td>
</tr>
<tr>
<td>$</td>
<td>Account #:</td>
</tr>
<tr>
<td>$</td>
<td>Account #:</td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: X Yes No

Date of Board Approval: ______________________

Date Completed: _______________ Name: __________________
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 29, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide World Language Contracted Kelly Subs account to Systemwide Language Arts Instructional Supplies and Materials account. A total transfer of $3,000 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
TRANSFER
Manchester Public Schools
Manchester, Connecticut

To: Accounting Department
School: C&I - Humanities

Date: March 29, 2016
Approval Signature: 
Date of Approval: 3.29.16

JUSTIFICATION:
Transfer to cover costs for Reading Units of Study orders.

<table>
<thead>
<tr>
<th>SUBJECT: Language Arts</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>DECREASE: World Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 3,000.00</td>
</tr>
<tr>
<td>$</td>
</tr>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE: Language Arts</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 3,000.00</td>
</tr>
<tr>
<td>$</td>
</tr>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: X Yes   No
Date of Board Approval: ____________________________
Date Completed: ____________________________ Name: ____________________________

U:\Cherie Forms\Budget Transfer Form.docx
Town of Manchester
Board of Education

To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 23, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Verplanck Software License/Fee account to Verplanck Admin Professional Development ($2,000) and Admin General Supplies/Materials ($2,000) accounts. A total transfer of $4,000 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department  
Date: 3-23-16

JUSTIFICATION (Required Field):  
To order more supplies for the end of the year.

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE in whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$4,000.00</td>
<td>Account #31812220 5535</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$</td>
<td>TOTAL DECREASE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE in whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000.00</td>
<td>Account #42312221 5320</td>
</tr>
<tr>
<td>$2,000.00</td>
<td>Account #42312240 5610</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$4000.00</td>
<td>TOTAL INCREASE (Must match total decrease)</td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: Yes ☑  No ☐

Date of Board Approval: __________________________

Date Transfer Completed: _________________________ Name: __________________________
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 10, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Medical Services General Supplies/Materials account to Systemwide Medical Services Travel/Lodging account. A total transfer of $1,050 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department
Date: 3/10/2016

School: Kennedy Education Center
Principal's Sign: Barbara Hodgins
Date of Approval: 3/10/16

JUSTIFICATION (Required Field): Move money from Medical Services general supplies and materials account to increase the Medical Services travel/lodging account to cover cost for Nurses to provide medical assistance on a 3 day/2 night eighth grade class trip to Washington DC.

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

DECREASE In whole dollars only:

$1,050.00  Account # 31299210 5610  Description: General Supplies & Materials
$___  Account # ____  Description: ___
$___  Account # ____  Description: ___

$1,050.00 TOTAL DECREASE

INCREASE In whole dollars only:

$1,050.00  Account #31299210 5580  Description: Travel/Lodging
$___  Account # ____  Description: ___
$___  Account # ____  Description: ___

$1,050.00 TOTAL INCREASE (Must match total decrease)

Accounting Department Only

Board Approval Needed: Yes ☑ No □

Date of Board Approval: _____________________

Date Transfer Completed _____________________ Name: _____________________

2-10
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 10, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Washington Math Instructional Supplies/Material account to Washington Social Studies Field Trips account. A total transfer of $892 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department

Date: 3/17/16

School: Washington

Principal's Sign: 

Date of Approval: 3/18/16

JUSTIFICATION (Required Field):
To fund field trips for K and Gr 2.

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE</th>
<th>In whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$892</td>
<td>Account # 130 14100 5611</td>
</tr>
<tr>
<td>$____</td>
<td>Account #_____</td>
</tr>
<tr>
<td>$____</td>
<td>Account #_____</td>
</tr>
<tr>
<td>$____ TOTAL DECREASE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE</th>
<th>In whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$892</td>
<td>Account # 142 14810 5512</td>
</tr>
<tr>
<td>$____</td>
<td>Account #_____</td>
</tr>
<tr>
<td>$____</td>
<td>Account #_____</td>
</tr>
<tr>
<td>$____ TOTAL INCREASE (Must match total decrease)</td>
<td></td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: Yes [ ] No [ ]

Date of Board Approval: 

Date Transfer Completed ______________________ Name: ______________________
Town of Manchester
Board of Education

To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 21, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Social Studies Professional Development account to Systemwide Language Arts Instructional Supplies and Materials account. A total transfer of $8,020 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
TRANSFER
Manchester Public Schools
Manchester, Connecticut

To: Accounting Department
School: C&I - Humanities

Date: March 14, 2016
Approval Signature: [Signature]
Date of Approval: 3.21.16

JUSTIFICATION:
Transfer to cover cost of instructional supplies (Reading Libraries)

SUBJECT: From Social Studies to Language Arts

DECREASE: Social Studies
$ 8,020.00 Account #: 142991005320 Description: Professional Development

INCREASE: Language Arts
$ 8,020.00 Account #: 128991005611 Description: Instructional Supplies

Accounting Department Only

Board Approval Needed: X Yes
No

Date of Board Approval:

Date Completed: _____________ Name: _____________
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 21, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Mathematics Printing and Advertising ($1,372) and Instructional Supplies and Materials ($315) accounts to Systemwide Mathematics Professional Development account. A total transfer of $1,687 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
TRANSFER
Manchester Public Schools
Manchester, Connecticut

To: Accounting Department

School: Central Office

Date: 3/18/16

Approval Signature:

Date of Approval: 3/21/16

JUSTIFICATION:
Transfer for professional development expenses

SUBJECT: Mathematics

DECDEAS:

$ 1372.00 Account #: 130991005540 Description: Printing/Advertising Instructional Supplies

$ 315.00 Account #: 130991005611 Description:

$ 1687.00 Account #: 130992215320 Description: Professional Development

$ 0.00 Account #: Description:

Accounting Department Only

Board Approval Needed: X Yes No

Date of Board Approval:

Date Completed: __________________ Name:

Z:\Budget Transfer Form.docx
Town of Manchester
Board of Education

To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 9, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from MHS Technology Education Periodicals ($65), AV Supplies and Materials ($194) and Instructional Supplies and Materials ($60) accounts to MHS Technology Education Repairs account. A total transfer of $319 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department

Date: 03/09/2016

School: Manchester High School

Principal's Sign: 

Date of Approval: 

JUSTIFICATION (Required Field): To fund inspection cost for automotive shop lifts

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 65 Account # 14861100 5643</td>
<td>Description: Tech Ed Periodicals</td>
</tr>
<tr>
<td>$194 Account # 14861100 5614</td>
<td>Description: Tech Ed AV Supplies</td>
</tr>
<tr>
<td>$60 Account # 14861100 5611</td>
<td>Description: Tech Ed Inst Supplies</td>
</tr>
</tbody>
</table>

$319 TOTAL DECREASE

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$319 Account # 14861100 5435</td>
<td>Description: Tech Ed Repairs</td>
</tr>
<tr>
<td>$ Account #</td>
<td>Description:</td>
</tr>
<tr>
<td>$ Account #</td>
<td>Description:</td>
</tr>
</tbody>
</table>

$319 TOTAL INCREASE (Must match total decrease)

Accounting Department Only

Board Approval Needed: Yes[✓] No[ ]

Date of Board Approval: 

Date Transfer Completed ___________ Name: ___________________________
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 17, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Bowers Admin Repair ($400) and Library/Media Software Licenses/Fees ($80) accounts to Bowers Library/Media Computer Supplies and Materials account. A total transfer of $480 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department

Date: March 17, 2016

School: Bowers
Principal’s Sign: [signature]
Date of Approval: 3/17/16

JUSTIFICATION (Required Field):
Funds are needed to purchase toner cartridges

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE In whole dollars only:</th>
<th>Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$400.00</td>
<td>repair of equipment</td>
</tr>
<tr>
<td>$80.00</td>
<td>software licenses</td>
</tr>
<tr>
<td>$480.00</td>
<td>TOTAL DECREASE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
<th>Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$480.00</td>
<td>computer supplies and materials</td>
</tr>
<tr>
<td>$____</td>
<td>____</td>
</tr>
<tr>
<td>$____</td>
<td>____</td>
</tr>
<tr>
<td>$480.00</td>
<td>TOTAL INCREASE (Must match total decrease)</td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: Yes [ ]  No [ ]

Date of Board Approval: ____________________________

Date Transfer Completed ____________________________  Name: ____________________________
Town of Manchester
Board of Education

To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 16, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Illing Admin Contracted Services account to Illing Admin Professional Development account. A total transfer of $434 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department

School:

Illing Middle School

Date: March 15, 2016

Approval Signature:

Date of Approval: 3/16/16

**JUSTIFICATION:**
Funds needed for Professional Development

**SUBJECT:** TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER

**DECREASE:** ADMINISTRATION

<table>
<thead>
<tr>
<th>$</th>
<th>Account #:</th>
<th>Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>434.00</td>
<td>423 53 100 5430</td>
<td>Contracted Services</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**INCREASE:** ADMINISTRATION

<table>
<thead>
<tr>
<th>$</th>
<th>Account #:</th>
<th>Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>434.00</td>
<td>423 53 221 5320</td>
<td>Professional Dev</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: X Yes No

Date of Board Approval: 

Date Completed: Name: 

C:\Users\blindark\Documents\Budget\2015-2016 Transfers\Dues & Fees to PD.doc
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 16, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Waddell Admin Contracted Services account to Waddell Admin Office Supplies and Materials account. A total transfer of $1,000 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
TO: Accounting Department  
Date: 3/16/16

School: Waddell  
Principal's Sign: J. Raveland  
Date of Approval: 3/16/16

JUSTIFICATION (Required Field):

Replenish [Account]

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,500</td>
<td>Account # 42313100 - 5430 Description: Contracted Services</td>
</tr>
<tr>
<td>$500</td>
<td>Account # ______</td>
</tr>
<tr>
<td>$500</td>
<td>Account # ______</td>
</tr>
<tr>
<td>$1,000 TOTAL DECREASE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,000</td>
<td>Account # 42313240 - 5680 Description: Office Supplies - Admin</td>
</tr>
<tr>
<td>$500</td>
<td>Account # ______</td>
</tr>
<tr>
<td>$500</td>
<td>Account # ______</td>
</tr>
<tr>
<td>$1,000 TOTAL INCREASE (Must match total decrease)</td>
<td></td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: Yes [X]  No [ ]
Date of Board Approval: ____________________________
Date Transfer Completed ____________________________ Name: ____________________________

2-10
To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 16, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Waddell Admin Professional Development account to Waddell Admin Contracted Kelly Subs PS account. A total transfer of $3,500 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department
Date: 3/16/16

School: Waddell
Principal's Sign: K. Pomerland
Date of Approval: 3/16/16

**JUSTIFICATION (Required Field):**

Replenish Accnt

**SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:**

<table>
<thead>
<tr>
<th>DECREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$3500</td>
<td>Account #: 42313221 - 5320</td>
</tr>
<tr>
<td>____</td>
<td>Account #: ____</td>
</tr>
<tr>
<td>____</td>
<td>Account #: ____</td>
</tr>
</tbody>
</table>

$3500 TOTAL DECREASE

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$3500</td>
<td>Account #: 42313221 - 5432</td>
</tr>
<tr>
<td>____</td>
<td>Account #: ____</td>
</tr>
<tr>
<td>____</td>
<td>Account #: ____</td>
</tr>
</tbody>
</table>

$3500 TOTAL INCREASE (Must match total decrease)

**Accounting Department Only**

Board Approval Needed: Yes [✓] No [ ]

Date of Board Approval: __________________________

Date Transfer Completed: __________________________ Name: __________________________

2-10
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 18, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from MHS Science Repairs account to MHS Science Instructional Supplies and Materials account. A total transfer of $490 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department
Date: 03/18/2016

School: Manchester High School
Principal's Sign:
Date of Approval: 03/18/2016

JUSTIFICATION (Required Field): To fund additional microscopes that can no longer be repaired

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE in whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 490</td>
<td>Account # 14061100 5435</td>
</tr>
<tr>
<td>$___</td>
<td>Account # ___</td>
</tr>
<tr>
<td>$___</td>
<td>Account # ___</td>
</tr>
<tr>
<td><strong>$490</strong> TOTAL DECREASE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$490</td>
<td>Account # 14061100 5611</td>
</tr>
<tr>
<td>$___</td>
<td>Account # ___</td>
</tr>
<tr>
<td>$___</td>
<td>Account # ___</td>
</tr>
<tr>
<td><strong>$490</strong> TOTAL INCREASE (Must match total decrease)</td>
<td></td>
</tr>
</tbody>
</table>

**Accounting Department Only**

Board Approval Needed: Yes[ ] No[ ]
Date of Board Approval: ____________________________
Date Transfer Completed ____________________________ Name: ____________________________
To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 18, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from MHS Music Education Repairs account to MHS Music Education Instructional Supplies and Materials account. A total transfer of $1,500 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary  
Superintendent of Schools  
Manchester, Connecticut  
April 18, 2016
To: Accounting Department

Date: 3/18/16

School: Manchester High School
Principal's Sign: 
Date of Approval: 3/18/16

JUSTIFICATION (Required Field): Projected music department expenses in the 5611 account exceed the current balance.

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE in whole dollars only:</th>
<th>INCREASE in whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1500  Account # 5435 (13261) CO</td>
<td>$1500  Account # 5611 (13261100)</td>
</tr>
<tr>
<td>$_____ Account # _____</td>
<td>$_____ Account # _____</td>
</tr>
<tr>
<td>$_____ Account # _____</td>
<td>$_____ Account # _____</td>
</tr>
</tbody>
</table>

$1500 TOTAL DECREASE
$1500 TOTAL INCREASE (Must match total decrease)

Accounting Department Only

Yes\(\checkmark\) No\(\square\)

Date of Board Approval: __________________________
Date Transfer Completed __________________________ Name: __________________________

2-10
Town of Manchester  
Board of Education

To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 18, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from MHS Family & Consumer Science Periodicals account to MHS Family & Consumer Science Repairs account. A total transfer of $300 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary  
Superintendent of Schools  
Manchester, Connecticut  
April 18, 2016
To: Accounting Department
Date: 03/18/2016

School: Manchester High School
Principal's Sign: 
Date of Approval: 03/18/2016

JUSTIFICATION (Required Field): To fund unanticipated repairs to commercial refrigerator in FCS room

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

DECREASE in whole dollars only:

$300 Account # 12061100 5643 Description: FCS Periodicals
$___ Account # ___________ Description: 
$___ Account # ___ Description: ___

$300 TOTAL DECREASE

INCREASE in whole dollars only:

$300 Account #12061100 5435 Description: FCS Repair of Equipment
$___ Account #___ Description: ___
$___ Account #___ Description: ___

$300 TOTAL INCREASE (Must match total decrease)

Accounting Department Only

Board Approval Needed: Yes[ ] No

Date of Board Approval: ____________________________

Date Transfer Completed ___________________________ Name: ____________________________
Town of Manchester
Board of Education

To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: April 4, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Enrichment Field Trip to Systemwide Enrichment Instructional Supplies & Materials account. A total transfer of $2,100 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
Manchester Public Schools
Manchester, Connecticut

To: Accounting Department
Date: 4/4/2016

School: Kennedy Education Center
Principal's Sign: [Signature]
Date of Approval: 4.4.16

JUSTIFICATION (Required Field): Move money from Enrichment Program Field & Trip to Instructional Support & Material to cover CogAT Scoring expense.

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE</th>
<th>In whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 2,100.00</td>
<td>Account # 17020100 5512</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$ 2,100.00 TOTAL DECREASE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCREASE</th>
<th>In whole dollars only:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 2,100.00</td>
<td>Account # 17020100 5611</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$</td>
<td>Account #</td>
</tr>
<tr>
<td>$ 2,100.00 TOTAL INCREASE (Must match total decrease)</td>
<td></td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: Yes [ ] No [ ]

Date of Board Approval: ________________

Date Transfer Completed ________________ Name: ____________________________

2-10
Town of Manchester
Board of Education

To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: March 30, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Keeney Admin Professional Development account to Keeney Admin Contracted Kelly Subs account. A total transfer of $3,140 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department
Date: 3/30/16

School: Keeney School
Principal’s Sign:
Date of Approval:

JUSTIFICATION (Required Field):
Money being transferred to accommodate Admin Contracted Subs Account

<table>
<thead>
<tr>
<th>SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:</th>
</tr>
</thead>
<tbody>
<tr>
<td>DECREASE in whole dollars only:</td>
</tr>
<tr>
<td>$ 3140. Account # 42306221-5320 Description: Admin PD Account</td>
</tr>
<tr>
<td>$ Account # Description:</td>
</tr>
<tr>
<td>$ Account # Description:</td>
</tr>
<tr>
<td>$ 3140. TOTAL DECREASE</td>
</tr>
<tr>
<td>INCREASE in whole dollars only:</td>
</tr>
<tr>
<td>$ 3140. Account # 42306221-5432 Description: Admin Contracted Subs Account</td>
</tr>
<tr>
<td>$ Account # Description:</td>
</tr>
<tr>
<td>$ Account # Description:</td>
</tr>
<tr>
<td>$ 3140. TOTAL INCREASE (Must match total decrease)</td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: Yes [✓] No [ ]
Date of Board Approval: ____________________________
Date Transfer Completed __________________________ Name: __________________________

4/5/16
To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: April 4, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Science General Supplies & Materials account to Systemwide Science Contracted Kelly Subs account. A total transfer of $821 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
**TRANSFER**

Manchester Public Schools  
Manchester, Connecticut

To: Accounting Department  

Date: 4/1/16

School: Central Office  
Approval Signature:  
Date of Approval: 4.4.16

**JUSTIFICATION:**
Transfer to pay for the cost of subs

**SUBJECT:**  
Science 140

<table>
<thead>
<tr>
<th>DECREASE:</th>
</tr>
</thead>
</table>
| $ 821.00 | Account #: 14099100 5610  
Description: General Supplies |

<table>
<thead>
<tr>
<th>$</th>
<th>Account #:</th>
<th>Description:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>INCREASE:</th>
</tr>
</thead>
</table>
| $ 821.00 | Account #: 14099100 5432  
Description: Kelly Subs |

<table>
<thead>
<tr>
<th>$</th>
<th>Account #:</th>
<th>Description:</th>
</tr>
</thead>
</table>

**Accounting Department Only**

Board Approval Needed: **Yes**  
No

Date of Board Approval:  

Date Completed:  
Name:  

Z:\Budget Transfer Form.docx
Town of Manchester
Board of Education

To: Manchester Board of Education

From: Mr. Matthew Geary, Superintendent of Schools

Subject: Transfer of Funds

Date: March 30, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Music Education Assist Other Events account to Systemwide Music Education Contracted Services ($28) and Repair ($672) accounts. A total transfer of $700 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
To: Accounting Department
Date: 03/30/2016

School: District Music
Principal's Sign: Keith Berry
Date of Approval: 03/30/2016

JUSTIFICATION (Required Field):
Increase funding for equipment repair account and correct a balance overage in contracted services.

SUBJECT: TRANSFER BUDGET MONIES FROM ONE LINE ACCOUNT TO ANOTHER:

<table>
<thead>
<tr>
<th>DECREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$700.00 Account # 13299100 5342</td>
<td>Description: Assist Other Events</td>
</tr>
<tr>
<td>$____ Account # _____</td>
<td>Description: _____</td>
</tr>
<tr>
<td>$____ Account # _____</td>
<td>Description: _____</td>
</tr>
</tbody>
</table>

$700.00 TOTAL DECREASE

<table>
<thead>
<tr>
<th>INCREASE In whole dollars only:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$28.00 Account # 13299100 5430</td>
<td>Description: Contracted Services</td>
</tr>
<tr>
<td>$672.00 Account # 13299100 5435</td>
<td>Description: Repair of Equipment</td>
</tr>
<tr>
<td>$____ Account # _____</td>
<td>Description: _____</td>
</tr>
</tbody>
</table>

$700.00 TOTAL INCREASE (Must match total decrease)

---

Accounting Department Only

Board Approval Needed: Yes[✓] No[ ]
Date of Board Approval: ______________________
Date Transfer Completed ______________________ Name: ______________________
Manchester Board of Education

To: Manchester Board of Education
From: Mr. Matthew Geary, Superintendent of Schools
Subject: Transfer of Funds
Date: April 6, 2016

Background: In accordance with Board of Education Policy 3160, Transfer of Funds between Categories, I am requesting the Board approve the following transfers in the FY 2015-2016 Budget.

Discussion/Analysis: Transfer from Systemwide Science General Supplies & Materials to Systemwide Science Contracted Kelly Subs account. A total transfer of $750 is being requested.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent of Schools recommends that the Board of Education approve these transfers in the FY 2015-2016 Budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
TRANSFER
Manchester Public Schools
Manchester, Connecticut

To: Accounting Department
School: Central Office

Date: 4/7/16
Approval Signature: [Signature]
Date of Approval: 4/6/16

JUSTIFICATION:
Transfer to pay for the cost of subs

SUBJECT: Science 140

DECREASE:

<table>
<thead>
<tr>
<th>$</th>
<th>Account #:</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>750.00</td>
<td>14099100 5610</td>
<td>General Supplies</td>
</tr>
</tbody>
</table>

INCCREASE:

<table>
<thead>
<tr>
<th>$</th>
<th>Account #:</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>750.00</td>
<td>140991005432</td>
<td>Kelly Subs</td>
</tr>
</tbody>
</table>

Accounting Department Only

Board Approval Needed: X Yes No

Date of Board Approval: 

Date Completed: ______________________ Name: ______________________

Z:\Budget Transfer Form.docx
Section 1 – Background

Section 10-215e of the Connecticut General Statutes (C.G.S.) directs the Connecticut State Department of Education (CSDE) to develop and publish nutrition standards (hereinafter, Connecticut Nutrition Standards (CNS)) for food items offered for sale to students at school separately from reimbursable meals sold as part of the National School Lunch Program (NSLP) and School Breakfast Program (SBP). Section 10-215f of the C.G.S. requires that each participant in the NSLP, including each local and regional board of education, the Connecticut Technical High School System and the governing authority for each state charter school, interdistrict magnet school and endowed academy, must certify each year in its annual application to the CSDE whether all food items made available for sale to students will meet the CNS. Section 10-215b of the C.G.S. further provides additional funding to NSLP participants who annually certify compliance with the CNS.

Section 2 – Certification Statement

Must be completed by all Connecticut public school districts that participate in the NSLP.

On behalf of the __________________________ and __________________________

(Name of the Board of Education or Governing Authority)

pursuant to Section 10-215f of the Connecticut General Statutes, I hereby certify that all food items offered for sale to students in the school(s) under our jurisdiction, and not exempted from the Connecticut Nutrition Standards published by the Connecticut State Department of Education, (select appropriate box)

☐ will (must complete Sections 3 and 4 on page 2)

☐ will not (sign below and return form)

comply with the CNS during the period of July 1, 2016 through June 30, 2017. Such certification shall include all food offered for sale to students separately from reimbursable meals at all times and from all sources, including but not limited to, school stores, vending machines, school cafeterias, and any fundraising activities on school premises, whether or not school sponsored.

Local or Regional Board of Education or Governing Authority

Signature: ________________________________  (Signature of the Authorized Representative)  ________________________________  (Printed Name of the Authorized Representative)

Title (Superintendent of Schools, President or Chairperson of the Board)  Date of Authorization

Page 1 of 2
Section 3 – Exemption Statement
► To be completed only by districts/schools choosing the healthy food option, i.e., those districts/schools that checked “will” in Section 2.

Pursuant to Section 10-215f of the Connecticut General Statutes, I hereby acknowledge that the board of education or governing authority, (select appropriate box)

☐ will exclude from certification food items that do not meet the CNS, provided that (1) such food is sold in connection with an event occurring after the end of the regular school day or on the weekend, (2) such sale is at the location of the event, and (3) such food is not sold from a vending machine or school store.

☐ will not exclude from certification food items that do not meet the CNS.

Section 4 – Amendment to Agreement for Child Nutrition Programs (ED-099)
► To be completed only by districts/schools choosing the healthy food option, i.e., those districts/schools that checked “will” in Section 2.

Pursuant to Section 10-215f of the Connecticut General Statutes, the Agreement for Child Nutrition Programs (ED-099) with

(Name of the Board of Education or Governing Authority)

is hereby amended to include the above certification statement of compliance with the CNS and application for funding related to those standards. This addendum covers the period from July 1, 2016 through June 30, 2017.

Local or Regional Board of Education or
Governing Authority

Signature: ____________________________
(Signature of the Authorized Representative) (Printed Name of the Authorized Representative)

Title (Superintendent of Schools, President or Chairperson of the Board) ____________________________ Date of Authorization ____________

FOR STATE USE ONLY • DO NOT SIGN BELOW THIS LINE

Connecticut State Department of Education

Signature: ____________________________
(Signature of State Agency Representative) Kathy Demsey (Printed Name of State Agency Representative)

Chief Financial Officer
Title ____________________________ Date ____________
Federal Regulations at 7CFR 210.14 require school districts participating in the *National School Lunch Program* to ensure sufficient funds are provided to the nonprofit food service account for meals served to students *not eligible for free or reduced priced meals*.

In order to be in compliance with this regulation, school districts must raise the cost of paid lunch or consider using funds from a non-federal source.

**Meals sold in the Paid Category October 2015**

<table>
<thead>
<tr>
<th>Monthly # of Paid Lunches</th>
<th>Paid Lunch Price</th>
<th>Monthly Revenue</th>
<th>SY 2015-16 Weighted Average Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>20,340</td>
<td>$ 2.05</td>
<td>$ 41,697.00</td>
<td></td>
</tr>
<tr>
<td>7,229</td>
<td>$ 2.30</td>
<td>$ 16,626.70</td>
<td></td>
</tr>
<tr>
<td>8,172</td>
<td>$ 2.45</td>
<td>$ 20,021.40</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>35,741</td>
<td></td>
<td>$ 78,345.10</td>
<td>$ 2.19</td>
</tr>
</tbody>
</table>

*Note: SY 2015-16 Weighted Average Price equal to or above $2.78 are compliant for SY 2016-17. $2.78 is the difference between the Free and Paid reimbursement rates for SY 2015-16.*

---

<table>
<thead>
<tr>
<th>Total Price Increase for SY 2016-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0.06</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Required price increase for SY 2016-17 (with 10 cent cap)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2.25</td>
</tr>
</tbody>
</table>
### SY 2016-17 Weighted Average Price Requirement

<table>
<thead>
<tr>
<th>Requirement price to the nearest cent</th>
<th>Optional price requirement ROUNDED DOWN to nearest 5 cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2.29</td>
<td>$2.25</td>
</tr>
</tbody>
</table>

*Note: Above prices are based on adjusting SY 2015-2016 price requirement by the 2% rate increase plus the Consumer Price Index (2.97%)*

Below is a tool allowing users to manipulate prices to achieve the required new weighted average price.

<table>
<thead>
<tr>
<th>Monthly # of Paid Lunches</th>
<th>Paid Lunch Price</th>
<th>Monthly Revenue</th>
<th>Weighted Average Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>20,340 $2.15</td>
<td>$43,731.00</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>7,229 $2.40</td>
<td>$17,349.60</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>8,172 $2.55</td>
<td>$20,838.60</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>35,741</td>
<td>$81,919.20</td>
<td>$2.29</td>
</tr>
</tbody>
</table>
Meal Participation 2015-2016

As of February 29, 2016, 54% of the students enrolled in Manchester Public Schools are eligible for free or reduced priced meals. Listed below is a summary of the eligibility and number of meals served during the operating month of February 2016.

<table>
<thead>
<tr>
<th>Student Enrollment</th>
<th>5,971</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible Students Free Meals</td>
<td>2,853</td>
</tr>
<tr>
<td>Eligible Students Reduced Priced Meals</td>
<td>399</td>
</tr>
<tr>
<td>Eligible Students Paid Meals</td>
<td>2,719</td>
</tr>
<tr>
<td>Lunch Meals Served February 2016</td>
<td>71,534</td>
</tr>
<tr>
<td>Free</td>
<td>39,480</td>
</tr>
<tr>
<td>Reduced</td>
<td>5,181</td>
</tr>
<tr>
<td>Paid</td>
<td>26,873</td>
</tr>
</tbody>
</table>

The figures above represent the total number of meals served during the month of February. The average number of meals served each day was 4,207, which equates to a participation rate of 70%. Of the total number of lunches served, 38% were from the paid meal category.
# Lunch Price Comparisons

## 2015-2016

<table>
<thead>
<tr>
<th></th>
<th>Elementary</th>
<th>Middle School</th>
<th>High School</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manchester</td>
<td>$2.05</td>
<td>$2.30</td>
<td>$2.45</td>
</tr>
<tr>
<td>Putnam*</td>
<td>$2.35</td>
<td>$2.50</td>
<td>$2.75</td>
</tr>
<tr>
<td>East Hartford</td>
<td>$2.40</td>
<td>$2.80</td>
<td>$2.95</td>
</tr>
<tr>
<td>Plainfield*</td>
<td>$2.40</td>
<td>$3.00</td>
<td>$3.00</td>
</tr>
<tr>
<td>Torrington*</td>
<td>$2.40</td>
<td>$2.50</td>
<td>$2.60</td>
</tr>
<tr>
<td>Stratford*</td>
<td>$2.45</td>
<td>$2.70</td>
<td>$2.85</td>
</tr>
<tr>
<td>Bolton</td>
<td>$2.50</td>
<td>$2.50</td>
<td>$2.70</td>
</tr>
<tr>
<td>East Haven*</td>
<td>$2.50</td>
<td>$3.00</td>
<td>$3.00</td>
</tr>
<tr>
<td>Hamden*</td>
<td>$2.50</td>
<td>$2.75</td>
<td>$2.75</td>
</tr>
<tr>
<td>Killingly*</td>
<td>$2.50</td>
<td></td>
<td>$3.00</td>
</tr>
<tr>
<td>Middletown*</td>
<td>$2.50</td>
<td>$2.75</td>
<td>$3.00</td>
</tr>
<tr>
<td>Vernon*</td>
<td>$2.50</td>
<td>$2.75</td>
<td>$2.95</td>
</tr>
<tr>
<td>Winchester</td>
<td>$2.50</td>
<td>$2.50</td>
<td>$2.50</td>
</tr>
<tr>
<td>Naugatuck*</td>
<td>$2.55</td>
<td>$2.70</td>
<td>$2.80</td>
</tr>
<tr>
<td>Bloomfield*</td>
<td>$2.75</td>
<td>$3.00</td>
<td>$3.00</td>
</tr>
<tr>
<td>South Windsor</td>
<td>$2.75</td>
<td>$2.85</td>
<td>$3.00</td>
</tr>
<tr>
<td>Groton*</td>
<td>$2.80</td>
<td>$2.80</td>
<td>$2.80</td>
</tr>
<tr>
<td>Bristol*</td>
<td>$3.00</td>
<td>$3.00</td>
<td>$3.25</td>
</tr>
<tr>
<td>Glastonbury</td>
<td>$3.00</td>
<td>$3.50</td>
<td>$3.50</td>
</tr>
</tbody>
</table>

*District Reference Group
Town of Manchester
Board of Education

To: Manchester Board of Education

From: Matthew Geary, Superintendent of Schools

Subject: Item for Appropriation Head Start Training FY 16-17

Date: April 7, 2016

Background: The Manchester Board of Education receives an annual grant from the Federal Government in order to provide operating funds for the Manchester Head Start program's Training and Technical Assistance activities. This award is for the period 3/1/16 - 2/28/17.

Discussion/Analysis: These funds are used to pay for the various training activities for all certified and non-certified staff.

Financial Impact: Without these supplemental funds, Head Start would be forced to take already scarce funds from its program operating budget.

Other Board/Commission Action: None

Recommendation: The Superintendent recommends that the Board of Education request the Board of Directors to create the Manchester Head Start Training and Technical Assistance appropriation for the fiscal year 2016-2017 in the amount of $15,312.

Attachments: None

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
Town of Manchester
Board of Education

To: Manchester Board of Education

From: Matthew Geary, Superintendent of Schools

Subject: Item for Appropriation Enfield Head Start Training FY 16-17

Date: April 7, 2016

Background: The Manchester Board of Education receives an annual grant from the Federal government in order to provide operating funds for its delegate, the Enfield Board of Education’s Head Start Training and Technical Assistance activities. This new award will be for the period 3/1/16 - 2/28/17.

Discussion/Analysis: These funds are used to pay for the various training activities for all certified and non-certified staff.

Financial Impact: Without these supplemental funds, Head Start would be forced to take already scarce funds from its program operating budget.

Other Board/Commission Action: None

Recommendation: The Superintendent recommends that the Board of Education request the Board of Directors to create an Enfield Head Start Training and Technical Assistance appropriation for the fiscal year 2016-2017, in the amount of $11,137.

Attachments: None

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
Town of Manchester  
Board of Education

To: Manchester Board of Education  
From: Matthew Geary, Superintendent of Schools  
Subject: Item for Appropriation Enfield Head Start FY 16-17  
Date: April 7, 2016

Background: The Manchester Board of Education receives an annual grant from the Federal Government in order to provide operating funds for its delegate, the Enfield Board of Education's Head Start Program. This award is for the period 3/1/16-2/28/17.

Discussion/Analysis: These funds are used to prepare three and four-year-old students for kindergarten.

Financial Impact: Grant funds cover 80% of the cost of implementation for this program, with the remaining 20% coming from the Enfield Board of Education, in the form of real dollars and in-kind services.

Other Board/Commission Action: None

Recommendation: The Superintendent recommends that the Board of Education request the Board of Directors to create the Enfield Head Start appropriation for fiscal year 2016-2017 in the amount of $813,097.

Attachments: None

Matthew Geary  
Superintendent of Schools  
Manchester, Connecticut  
April 18, 2016
Town of Manchester  
Board of Education

To: Manchester Board of Education

From: Matthew Geary, Superintendent of Schools

Subject: Item for Appropriation Manchester Head Start 
FY 16-17

Date: April 7, 2016

Background: The Manchester Board of Education receives an annual grant from the Federal Government in order to provide operating funds for the Manchester Head Start program. This award is for the period 3/1/16-2/28/17.

Discussion/Analysis: These funds are used to prepare three and four-year-old students for kindergarten.

Financial Impact: Grant funds cover 80% of the cost of implementation for this program, with the remaining 20% coming from the Manchester Board of Education, in the form of real dollars and in-kind services.

Other Board/Commission Action: None

Recommendation: The Superintendent recommends that the Board of Education request the Board of Directors to create the Manchester Head Start appropriation for fiscal year 2016-2017 in the amount of $1,169,102.

Attachments: None.
Town of Manchester  
Board of Education

To: Manchester Board of Education  
From: Matthew Geary, Superintendent of Schools  
Subject: Item for Appropriation FY15-17 General Improvements to Alliance Districts' School Buildings Grant Program  
Date: March 17, 2016

Background: Public Act 15-1 created the General Improvements to Alliance Districts' School Buildings Grant Program to help maintain or repair school buildings in Alliance Districts. The program goal is to assist districts unable to keep up with ongoing demands of maintaining and updating their facilities.

Discussion/Analysis: This grant is intended to fund projects beginning in FY 15-16 and concluding in FY 16-17 that would not otherwise qualify as school construction grant projects under Chapter 173 of the Connecticut General Statutes. All projects must be completed by June 30, 2017.

Financial Impact: None

Other Board/Commission Action: None

Recommendations: The Superintendent recommends that the Board of Education request the Board of Directors establish an appropriation for an additional award for FY15/17 General Improvements to Alliance Districts’ School Building Grant Program in the amount of $611,500.

Matthew Geary  
Superintendent of Schools  
Manchester, Connecticut  
April 18, 2016
March 8, 2016

Mr. Matthew A. Geary
Superintendent of Schools
Manchester Public Schools
45 North School Street
Manchester, CT 06040-2022

Subject: Alliance Grant

Dear Mr. Geary:

We have received your application for the Alliance Grant, submitted under the provisions of Section 59 of Public Act 15-1 of the June Special Session. The purpose of this letter is to inform you that we have conducted our review of your Alliance Grant application.

We will be processing your payment in the amount of $611,500. Please note your available balance is $0. The distribution will tentatively occur by the end of June. If you have any questions regarding the Alliance Grant, please call Michelle Dixon at (860) 713-6477 or Tom Reault at (860) 713-6469.

Sincerely,

[Signature]

Kosta Diamantis, Director
Office of School Construction Grants

KD/jn

cc: Michelle Dixon
    Thomas Reault
<table>
<thead>
<tr>
<th>Town</th>
<th>School</th>
<th>Project Name</th>
<th>Date of Application</th>
<th>Total Estimated Cost</th>
<th>Unapproved Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manchester</td>
<td>Keeny Elementary School</td>
<td>Floor Tile Replacement and Exterior Door Replacement</td>
<td>1/27/2016</td>
<td>$63,000.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Manchester</td>
<td>Washington Elementary School</td>
<td>Floor Tile, Carpeting, Exterior Wall Panel Repair</td>
<td>1/27/2016</td>
<td>$34,500.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Manchester</td>
<td>Manchester High School</td>
<td>Parking lot repaving, replacing basketball backstops, replacing deteriorated concrete sidewalk and stairways</td>
<td>1/27/2016</td>
<td>$268,500.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Manchester</td>
<td>Illing Middle School</td>
<td>Locker replacement, upgrading of parking area(patching existing asphalt)</td>
<td>1/27/2016</td>
<td>$103,000.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Manchester</td>
<td>Martin Elementary School</td>
<td>Replacing rotted exterior doors, replacing deteriorated concrete sidewalk</td>
<td>1/27/2016</td>
<td>$18,000.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Manchester</td>
<td>Robertson Elementary School</td>
<td>Replacing rotted exterior doors, replacing carpet, replacing window shades</td>
<td>1/27/2016</td>
<td>$99,500.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Manchester</td>
<td>Bowers Elementary School</td>
<td>Replacing window shades</td>
<td>1/27/2016</td>
<td>$25,000.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Total $611,500.00 $0.00
Town of Manchester
Board of Education

To: Manchester Board of Education

From: Matthew Geary, Superintendent of Schools

Subject: Item to amend Appropriation Instructors of the Handicapped (IOH) Pool Repairs at Manchester High School for FY15-17

Date: March 16, 2016

Background: The IOH Program is nearly 60 years old and teaches handicapped individuals from dozens of towns around the region how to swim; the pool is also used by Manchester Senior Citizens.

Discussion/Analysis: This grant is funding repairs to the IOH pool at Manchester High School, including installation of gas service, a new boiler, new water heater, water distribution loop and reheat coils, as well as, repairs to and repainting of the pool and related work.

Financial Impact: None

Amendment: Amendment to adjust fiscal year to cover grant award period 10/1/2015-6/30/2017

Other Board/Commission Action: None

Recommendations: The Superintendent recommends that the Board of Education request the Board of Directors to amend the appropriation for the Instructors of the Handicapped (IOH) Pool Repairs at Manchester High School in the amount of $229,000 for FY15-17

Attachments: Award letter and budget.

Matthew Geary
Superintendent of Schools
Manchester, Connecticut
April 18, 2016
GRANT AWARD NOTIFICATION

1 Grant Recipient
MANCHESTER PUBLIC SCHOOLS
45 NORTH SCHOOL STREET
MANCHESTER, CT 06040-2022

4 Award Information
Grant Type: BOND
Statute: CGS 4-66c OPM/Urban Bonds
CFDA #: None
SDE Project Code: SDE000000000002
Grant Number: 077-000 13019-43600-2016-82010-170062-SDE00024

2 Grant Title
(I0H) Pool Repairs at Manchester H.S.

5 Award Period
10/1/2015 - 6/30/2017

3 Education Staff
Program Manager:
Lynn Nauss PM (860) 713-6457
Payment & Expenditure Inquiries:
Karen Calabrese 860-713-6472

6 Authorized Funding
Grant Amount: $229,000
Funding Status: Final

7 Terms and Conditions of Award
This grant is contingent upon the continuing availability of funds from the grant’s funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2015 and June 30, 2016 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2016. For grants awarded for two-year periods beginning July 1, 2015, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2017. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant is pursuant to Section 4-66c of the Connecticut General Statutes, as approved by the State Bond Commission (meeting July 28, 2015).

This grant has been approved.
Kathy Demsey

10/22/2015
**ED 114**

**Fiscal Year:** 2016  
**Grantee Name:** MANCHESTER  
**Grant Title:** (IOH) Pool Repairs at Manchester H.S.  
**Project Title:** Instructors of the Handicapped (IOH)  
**Fund:** 13019  
**SPID:** 41600  
**Year:** 2016  
**PROG:** 82010  
**CF1:** 170062  
**CF2:** SDE00024  
**Grant Period:** 10/1/2015 - 6/30/2017  
**Project Code:** SDE000000000002  

**Authorized Amount by Source:**

**Authorized Amount:** $229,000

**Local Balance:**

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTIONS</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>300</td>
<td>PURCHASED PROP/TECH SERVICES</td>
<td>19,085</td>
</tr>
<tr>
<td>450</td>
<td>CONSTRUCTION SERVICES</td>
<td>177,415</td>
</tr>
<tr>
<td>700</td>
<td>PROPERTY</td>
<td>32,500</td>
</tr>
<tr>
<td>800</td>
<td>MISCELLANEOUS</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>$229,000</td>
</tr>
</tbody>
</table>

**Current Due:** $229,000

**Original Request Date:** 10/21/2015

---

This budget was approved by Lynn Nauss PM on 10/21/2015.
Illing Middle School Core Values

Illing will engage and challenge all students in the highest quality 21st century education. Through an active partnership with students, staff, families and community, we strive daily to ensure that Illing is a safe, inclusive school where equity is the norm and excellence is the goal. All students will be confident, lifelong learners who are contributing members of society and are prepared for high school and beyond.
At Illing, we promote a climate that fosters learning and high achievement characterized by mutual respect, care and concern for all students, staff and families. Our goal is to actively involve all parents and families in their children’s educational success, including increased engagement in school activities and community participation in social and civic events.

- Parent Teacher Association
- School Governance Council
- Open House with free babysitting and transportation
- Learning links on our website and other materials
Positive School Climate: Engaging Students

- Behavioral STARS expectations
- Recognizing students throughout the school year for good attendance, honor roll and good citizenship
- Student of the Month Breakfast with administration acknowledging students for STARS behaviors
- STARS Coins distributed by all staff to acknowledge positive STARS behaviors
- Code of Conduct aligned to high school
- Develop opportunities for youth leadership
  - Student council
  - NJHS
  - Community service recognition
  - Over thirty clubs and sports teams
  - Pinwheels for Peace
  - Assemblies (Calvin Terrell, Hip Pickles, China Day)
  - Seventh Grade First Day
  - Open Mic and Poetry Slams twice a month
  - Lip Dub
  - Dress Down Days for a Cause (student/staff choice)
Positive Climate: Staff Development, Capacity Building and Recognition

All faculty and staff will develop capacity through reflection, professional learning opportunities including coaching, job embedded professional development, participation in workshops and support from school leaders and colleagues over time

• Professional development based on teacher identified need
• Monthly Teacher of the Month based on MPS core tenants
• High 5 Recognition
• Regular sharing of staff “good news”
Academic Goals: Achievement and Engagement

- All students will achieve mastery in literacy and numeracy as articulated in the Common Core
- Demonstrate the skills and competencies required for success in learning and work beyond school
Curriculum and Instruction

- All staff trained in Understanding by Design by June, 2016 to create curricular units aligned to CCSS and related state standards in all core areas including Social Studies, Science, and Elective Areas
- Working closely with central office, Bennet and MHS to ensure coherency and vertical alignment of curricular and instructional goals
  - 6-8 STEAM coach
  - 6-8 Humanities coach
  - 7-12 Math coordinator
  - Lit Life/Workshop Model
Instructional Practices

- Strengthen instruction using research-based instructional practices (workshop model / personalized learning)
  - All staff participated in differentiated instruction training with Dr. Carolyn Coil
  - All staff participated in discourse and questioning training with Dr. David Cormier
  - All certified staff assigned to an instructional coach
  - Staff collaboration to create expectations that clarify essentials of effective instruction that will be distributed 2016-17 school year
  - Learning walk schedule will be put in place for 2016-17 school year
  - Common assessments
Academics: The Schedule

Common Planning Time
• Professional Learning Communities (team or department every day)

Student Support/Intervention
• Reading support for all students who are reading below grade level
• Math support
• Before and After School Support

Enrichment for All
• Exposure to all electives in 7th Grade: Art, Family Consumer Science, Music, PE, World Language & Technology
• Choice in 8th Grade: Multiple music and other offerings including beginning band, orchestra, guitar, robotics, video, ceramics
• Chinese program Introduced
• More Students taking HS World Language for HS credit
• Formal Enrichment Classes for all students reading at grade level
Experiential Learning Opportunities: Learning by Doing

- Science Fair/Invention Convention
- History Day
- Washington, DC
- Science Bowl
- Community Service Club
- Bird Banding
- Read Across America
- China Day
- Maker Space
Technology as a tool to Enhance Instruction

• Incorporate new resources and technology to engage students in their own learning
  • ALL students and staff issued a Chromebook
  • ALL students offered the opportunity to bring their Chromebooks home
• Teach students to be responsible digital citizens
**Systems**

**PLCs**
Department/Team Based Master Schedule modified to allow for common planning and working time with the intended outcome being change or improvement of instructor practice.

PLCs are largely centered on C/I/A/D

Structure- aligned to District Standards
- Norms
- Agenda
- Universal Minutes Template

Team based PLCs are largely driven by data:
- D/F
- Attendance
- Discipline
- Unique Circumstances

Cyclical District trainings –aggregating representatives from all 14 MPS buildings.

**SIT**
- Meet once per month
- WPI administered for improvement in Team efficacy
- Linked to DIT/DIP
- Convenes monthly to evaluate/modify progress in each area of the SIP
- Present school report each semester to faculty/staff at faculty meeting
- Administer SIP survey [in discussion]
Talent Recruitment & Retention

- Recruit teachers that represent and reflect the demographic makeup of our students
- Strengthen partnership with universities: Student teacher, interns, volunteers
- Variety of job advertisements:
  - University fairs
  - District and Building Web-page and Promotional Materials
Professional Development

- Specifically designed for new and veteran teachers
- Teachers surveyed to choose topics which interest them
- Instructional Coach identified for all certified staff
- Consultations
- Learning Walkthroughs
Illing: A great place to learn!!
# Superintendent’s Proposed Reductions
**Board of Education Budget**
**2016-17**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heat</td>
<td>$ 50,000</td>
</tr>
<tr>
<td>Contracted Services – Information Technology</td>
<td>$ 107,155</td>
</tr>
<tr>
<td>Capital Improvements (MHS Parking Lot)</td>
<td>$ 100,000</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>$ 92,845</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$ 350,000</strong></td>
</tr>
</tbody>
</table>
COMMUNITY RELATIONS

COMMUNITY USE OF SCHOOL FACILITIES

The Board of Education believes the schools belong to the people of Manchester. Funds that establish, maintain and operate these facilities are largely provided by local taxes. The Board accepts the responsibility for making its facilities available to responsible organizations, associations, and individuals of the community for appropriate civic, cultural, welfare or recreational activities as long as these activities do not interfere with school programs. Among responsible organizations shall be included employee organizations recognized by the Board. The Superintendent of Schools or designee shall have the authority to deny the use of school facilities for such activities that are judged inappropriate to take place in a school setting.

Conditions Applicable to All Groups

1) Use of the facilities is not to interfere with the school program.

2) Use of the facilities must be within the hours of regular custodial service. Otherwise, custodial fees apply.

Nonpaying groups only.

3) Use of facilities by nonpaying groups will not create unreasonable additional supervisory or custodial requirements. These groups will be required to provide and/or pay for supervisory and/or custodial coverage if the group exceeds 100 people or extends to periods of time when custodial coverage is not normally available.

4) Organizations will provide sufficient supervision to restrict use to permitted areas. It is required that all groups will set up and reset the facilities for school use.

5) Organizations will provide a Certificate of Insurance, in the amount of $2,000,000 single limit coverage, and name the Town of Manchester Board of Education as additional insured.

6) Requested use of a school facility is for the current school year. Users may reapply annually.

7) The Manchester High School Varsity Football/Soccer field will not be rented for any purpose. Any exception must be by written request to the Superintendent or his/her designee.

Fee Schedule for Use of Buildings, Grounds or Other Facilities of the School District

Free use of school facilities may be granted to the following Manchester organizations or groups provided that membership is composed of not less than 75% local residents and the activity is of a nonprofit nature.
COMMUNITY RELATIONS

COMMUNITY USE OF SCHOOL FACILITIES (2)

Group I - No Fee

a) PTA, Union activity associated with the school system, scholarship associations, school committees, booster clubs, and school staff functions directly related to education and student benefits.

b) Youth service - school sponsored scouting organizations, 4-H, YWCA, etc.

c) Officially appointed groups of municipal government, local citizen groups meeting for Town related business. Utility and custodial costs related to the activity are charged to the Town for reimbursement and insurance requirements still apply.

d) Afternoon nonpublic school athletics. Evening and days when school is not in session, practice sessions for local athletic groups are charged actual utility, labor and material costs.

Group I organizations are encouraged not to plan activities for Saturdays or Sundays. Any organizations in Group I contemplating a weekend activity must have clearance from Buildings and Grounds at least two (2) weeks prior to the date of the contemplated activity. Organizations in this group, using facilities for fund-raising purposes, will be required to pay service costs and custodial fees.

Group I organizations that request use of facilities for Saturdays, Sundays, holidays, or any other permit table time requiring extra custodial help, cafeteria help, police or technicians shall be charged the extra costs incurred.

Group II - Fee

a) Fees shall be charged for the use of school facilities by approved charitable, philanthropic, cultural groups, service clubs, fine arts associations, theater groups, and other organizations not operating for profit and devoted to community interest and child welfare (see schedule of fees).

b) Fees shall be charged for use of school facilities by organized groups and individuals within the community for profit when such profit is used by the group for advancement of the group or by individuals for personal gain (see schedule of fees).

Group III - Fee

a) Fees shall be charged for all approvable applicants not within the community. Fees for these applicants shall be at two times (2X) the rate shown on the fee schedule. Building use applications must be signed by a local individual or organization who will assume responsibility.
COMMUNITY USE OF SCHOOL FACILITIES  

b) In case of damage to the facilities of a religious group or while the planning for construction of new facilities is in progress, temporary use of school facilities may be permitted to local religious groups, a majority of whose membership is composed of Manchester residents. Fees shall be charged in accordance with the adopted schedule. At the time of reapplication, the religious group, as part of the application process, will attach a progress report indicating a tentative timetable when they will vacate to their own facility.

Miscellaneous:

Any activity where more than 250 people are involved will require a police officer. The cost for the officer will be the responsibility of the agency using the facility.

BAILEY AUDITORIUM—PUBLIC USE POLICY

The Auditorium, Choral Room, Orchestra Room, Band Room, Drama/Dance Room, Practice Rooms as well as the Performing Arts Wing will be made available for musical, theatre, social and community events subject to the regulations listed below.

A. Priority and Eligibility

1. Manchester High School's sponsored programs and activities
2. Illing Middle School, Bennet Academy, and the Elementary School's sponsored programs and activities
3. Activities that further the educational objectives of the public schools (e.g. PTO, Booster Clubs, Safe Graduation Committee and similar organizations)
4. Town department or agency activities
5. Activities of non-profit organizations operating within the Town, other than school-related organizations
6. Activities of for-profit organizations operating within the Town
7. Out-of-Town for-profit and/or non-profit groups and organizations

A. Regulations

1. Any organization or group who has been granted use of the Bailey Auditorium shall accept full responsibility for care of such property and the conduct of those in attendance. Costs incurred from property damage, theft or loss of supplies and equipment arising from occupancy of the school facilities will be charged against the permit holder. No tap shoes will be allowed unless the stage floor is protected by a spring floor or a floating floor. Failure to adhere to this regulation can result in the loss of the use of the facility.

2. **AT NO TIME** are you authorized to make any adjustments or modifications to this facility.
COMMUNITY USE OF SCHOOL FACILITIES (4)

3. Any agency renting the auditorium will be required to play electronically or announce the following statement: "Welcome to the Manchester High School's Bailey Auditorium. We are glad that you have joined us for this special event and we hope you will enjoy this evening's performance. We would like to request that members of the audience enter and exit the auditorium during intermissions only. We also ask that you disengage any cell phones, pagers, and wristwatch alarms to minimize the distractions for both the performers and the audience around you and to improve our chances of making a quality recording. In addition at this time, we ask you to please take a moment to locate any fire exits nearby. In the unlikely event of an emergency, move quickly and calmly to the nearest exit. Before we begin, we want to thank you for attending tonight's event and hope this visit for you is one of many. Enjoy the program." Upon the sounding of an alarm, the program will immediately stop and all individuals will exit the building. In the absence of police or fire personnel, the event coordinator will contact 911 to report the alarm. The Lessee must have adult staff available to help patrons leave in an orderly and safe manner.

4. The right is reserved to assess your event for the need to hire police and fire personnel for public safety matters, traffic and the monitoring of the facility during the event. Such hiring would be an additional cost to you.

5. Parking is allowed only in the designated areas located in the front of the school or the rear of the school, as well as legal parking on street parking areas. ABSOLUTELY NO PARKING will be allowed on the lawn, athletic field areas, or in the fire lanes. The Manchester Police Department will strictly enforce any violation.

6. If the school district personnel are required to be on duty outside of their normal work schedule when the auditorium is in use, the charges for such work time will include, in addition to the actual time of the event, the time to open, clean-up, and close the facility. The Auditorium Manager and the Buildings and Grounds Department shall make determination of the use of school personnel.

7. PROHIBITED ACTIVITIES:

The following ACTIVITIES ARE PROHIBITED and it will be the responsibility of the renter to make sure that they do not occur.

A) Gambling, intoxicating beverages and illegal or controlled substances

B) Activities advocating the overthrowing of the United States, the State of CT or local government.

C) Smoking and tobacco products are prohibited in all school buildings and on all school property.

D) Any activity that is inconsistent with the health and welfare of the public and/or the policies delineated by the Board of Education.

COMMUNITY RELATIONS 1330
COMMUNITY USE OF SCHOOL FACILITIES (5)

F) Any activity that promotes violence or violent behavior.

F) Any activity that is discriminatory in nature.

8. Activities must be confined to those parts of the facilities and to such equipment as specified on the permit and/or the Auditorium Stage Needs Request Form.

9. No food or beverages, other than bottled water, are allowed in the Auditorium during a rehearsal or production. No food or beverages, other than bottled water (in squat bottles, or water bottles) allowed on stage.

10. Arrangements for use or equipment used in connection with the auditorium, stage productions, musical productions, concerts, dance recitals, or other performances must be made in advance with the Auditorium Manager.

11. The Light Booth and Sound Booth are off limits to all except authorized personnel approved by the Auditorium Manager. Only trained Manchester High School students, faculty, and staff will operate and focus lights. A light technician is required when lighting changes are necessary. A sound technician is required when sound (mics, CDs, etc.) is required.

12. Five (5) working days notice is required to cancel a permit. Non-use or failure to secure cancellation does not excuse payment of costs that may be incurred in preparation of the facility use.

A. Application Procedures

1. Groups or Organizations desiring to use the Bailey Auditorium, Choral Room, Orchestra Room, Band Room, Drama Dance Room, Practice Rooms, or Performing Arts Wing shall file an application with the Building & Grounds Department at least 90 days prior to the date requested.

2. If approved, the permit holder who filed the application will be notified by the Building & Grounds Department and be required to sign the contract prior to use of the facility. In addition, proof of liability insurance (workers compensation if applicable), in an amount deemed as appropriate by the District, and in a format acceptable to the District, will be required.

3. In order to insure Bailey Auditorium's safe and well-maintained condition, the Auditorium Manager will conduct a pre-inspection, as well as a post-inspection after you have utilized the facility. In addition, a one hundred dollar maintenance fee will be applied to all users of the auditorium (see fee schedule). These funds will be used to offset the normal wear and tear on the facility.

4. Fees are assessed per event and must be paid when the bill is received. Fees will be assessed according to the auditorium and equipment use costs. Please refer to fee schedule.

COMMUNITY RELATIONS
COMMUNITY USE OF SCHOOL FACILITIES  (6)

FEE NOTES:

1. The fee schedule in effect at the time that an individual application is approved by the administration will prevail throughout the school year of the application. Any changes in fees will not go into effect until July 1 of the year following adoption.

2. The Board of Education will review the fee schedule for all facilities at least every two (2) years.

3. If the auditorium is used after 11:00 p.m., there will be an additional charge. Any extra custodial work before or after the event will be charged overtime rates.

4. If a group necessitates a complete tear down and set-up of the stage, they will be billed the current overtime rate in effect at that time.

Adopted: March 8, 1976
Revised: March 12, 1979
Revised: July 16, 1979
Revised: November 23, 1987
Revised: May 9, 1994
Revised: May 10, 2004
# SCHEDULE

## RECOMMENDED CHANGES

<table>
<thead>
<tr>
<th>ELEMENTARY SCHOOL</th>
<th>1ST 4 HOURS</th>
<th>EACH ADD HR</th>
</tr>
</thead>
<tbody>
<tr>
<td>KITCHEN (cafeteria worker required)</td>
<td>$60.00</td>
<td>$12.00</td>
</tr>
<tr>
<td>GYMNASIUM (extra charge set-up &amp; tear down)</td>
<td>$150.00</td>
<td>$36.00</td>
</tr>
<tr>
<td>CAFETERIA</td>
<td>$120.00</td>
<td>$24.00</td>
</tr>
<tr>
<td>CLASSROOM (only academic classrooms)</td>
<td>$42.00</td>
<td>$6.00</td>
</tr>
<tr>
<td>CONFERENCE &amp; FACULTY ROOMS</td>
<td>$30.00</td>
<td>$6.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MIDDLE SCHOOLS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>KITCHEN (cafeteria worker required)</td>
<td>$96.00</td>
<td>$18.00</td>
</tr>
<tr>
<td>CAFETERIA--AUDITORIUM @ ILLING</td>
<td>$150.00</td>
<td>$36.00</td>
</tr>
<tr>
<td>STAFF DINING ROOM</td>
<td>$36.00</td>
<td>$6.00</td>
</tr>
<tr>
<td>CAFETERIA--@ BENNET</td>
<td>$40.00</td>
<td>$6.00</td>
</tr>
<tr>
<td>GYMNASIUM</td>
<td>$150.00</td>
<td>$36.00</td>
</tr>
<tr>
<td>LOCKER &amp; SHOWFR ROOM</td>
<td>$48.00</td>
<td>$6.00</td>
</tr>
<tr>
<td>CLASSROOM (only academic classrooms)</td>
<td>$42.00</td>
<td>$6.00</td>
</tr>
<tr>
<td>CONFERENCE &amp; FACULTY ROOMS</td>
<td>$30.00</td>
<td>$6.00</td>
</tr>
<tr>
<td>CHORAL ROOM</td>
<td>$42.00</td>
<td>$12.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HIGH SCHOOL</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>GYMNASIUM</td>
<td>$210.00</td>
<td>$42.00</td>
</tr>
<tr>
<td>POOL (Lifeguards Required)</td>
<td>$168.00</td>
<td>$42.00</td>
</tr>
<tr>
<td>LOCKER/SHOWFR ROOM</td>
<td>$42.00</td>
<td>$12.00</td>
</tr>
<tr>
<td>CLASSROOM (only academic classrooms)</td>
<td>$42.00</td>
<td>$12.00</td>
</tr>
<tr>
<td>CAFETERIA (extra charge set-up &amp; tear down)</td>
<td>$168.00</td>
<td>$48.00</td>
</tr>
<tr>
<td>KITCHEN (cafeteria worker required)</td>
<td>$96.00</td>
<td>$30.00</td>
</tr>
<tr>
<td>G-47 GYM</td>
<td>$144.00</td>
<td>$36.00</td>
</tr>
<tr>
<td>PRESENTATION ROOM</td>
<td>$75.00</td>
<td>$18.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BAILEY AUDITORIUM</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AUDITORIUM - PERFORMANCE</td>
<td>$300.00</td>
<td>$72.00</td>
</tr>
<tr>
<td>AUDITORIUM - REHEARSAL</td>
<td>$144.00</td>
<td>$36.00</td>
</tr>
<tr>
<td>AUDITORIUM--MAINTENANCE (per performance)</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>AUDIO/LIGHTING TECH--HRLY RATE $70.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AUDITORIUM TECH--HRLY RATE $50.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LIGHT PANEL OPERATOR--HRLY RATE $30.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STUDENT ASSISTANT--HRLY RATE $16.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHORAL ROOM, ORCHESTRA ROOM</td>
<td>$42.00</td>
<td>$12.00</td>
</tr>
<tr>
<td>BAND ROOM, DRAMA/DANCE ROOM</td>
<td>$54.00</td>
<td>$12.00</td>
</tr>
<tr>
<td>PRACTICE ROOMS--PERFORMING ARTS WING</td>
<td>$42.00</td>
<td>$12.00</td>
</tr>
</tbody>
</table>
STUDENTS

ADMINISTRATION OF MEDICATION BY SCHOOL PERSONNEL

The Manchester Board of Education recognizes the need to administer medication as a program adjustment to meet the health needs of individual students. Medication prescribed by an authorized prescriber licensed in this state or any other state shall be given by a licensed registered nurse, or in his/her absence a trained principal or teacher and school personnel as designated in Connecticut General Statutes Sec. 10-212a and the Regulation Section 10-212a to 10-212a-10. Student may self-administer non-controlled medication with the written authorization of an authorized prescriber.

Medications will be administered in compliance with Connecticut General Statutes Sec. 10-212a and Regulations Section 10-212a to 10-212a-10 effective October 7, 2010.

Adopted: May 29, 1990
Reviewed: July 13, 1992
Reviewed: October 24, 1994
Revised: November 12, 1996
Reviewed: November 9, 1998
Revised: May 23, 2011
Administration Of Medication By School Personnel Guidelines (1):

Sec. 10-212a-2 Administration of Medication

I. Prescribed medications should be not administered during school hours if it is possible to achieve the desired effects by home administration. If such a medication is prescribed during the school day, the school nurse will contact the physician and parent to arrange for home administration.

II. If a prescribed medication must be given during the school day, it will be given by a licensed registered nurse (RN) or, in his/her absence, a trained principal or teacher. The prescribed medications include controlled drugs listed in Schedules II-V of the DEA. The trained principal or teacher may give oral, topical, intranasal or inhalant medications. Individuals who have had instruction in injectable medication will be allowed to give injectable medication for a medically diagnosed allergic condition only. All investigational drugs shall be administered only by the RN.

III. Students who meet the criteria for self-medication and have the appropriate medication authorization form completed by a physician may give their own medication with the guidance of the school nurse. See Section 10-212a-4

IV. A written order on a standard form must be completed by an authorized prescriber licensed to practice in this or any other state is required before a medication can be given. No telephone orders will be accepted.

This form shall include:

Name of Student
Diagnosis for which the medication is prescribed
Duration of order
Name of drug and method of administration
Dosage
Time of administration
Side effects to be observed
State DEA number if a controlled substance
Signature of the physician and parent

These forms shall be available in Manchester physician's offices, walk-in clinics and school health offices. (The prescribed medication shall be administered to and taken only by the person for whom the prescription is written. Siblings shall not share medication.) This form shall be renewed annually.
Administration Of Medication By School Personnel Guidelines (2):

V. Any drug listed in the PDR must be administrated under the Medication Administration Policy. If the substance is not found in the PDR, it is not a medication and it will be handled as a food substance.

VI. If a student has an adverse reaction to a medication, the following emergency procedures will be followed:

1. If anaphylaxis occurs, refer to emergency procedure. This procedure is outlined in the Manchester School Health Manual and shall be posted in the Health Office.

2. If the individual develops symptoms which are not life threatening, the following procedure will be used:

   The nurse will complete an evaluation of the student and contact the prescribing physician and parent.
   If the nurse is not available, the building administrator shall contact the backup nurse to complete the evaluation.
   If the physician is not available, the Poison Control Center (1-800-222-1222) shall be called and their advice shall be followed.
   If the nurse cannot reach anyone in the Poison Control Information Center, Manchester Memorial Hospital Emergency Room (647-4777) will be contacted.
   These emergency numbers shall be posted on the phone or adjacent to the phone.
   All information and actions shall be documented in the Cumulative Health Record.
   A written report shall be submitted to the School Nurse Supervisor.
Administration Of Medication By School Personnel Guidelines (3):

Section 10-212a-3 Training of School Personnel

All principals and teachers giving medications when the school nurse is not available shall complete a medication-training course provided by the school health coordinator or the school nurse.

I. Program content:

1. General overview of procedural aspects of medication administration.
2. Method of administration including oral, topical, and inhalants
3. Giving of injectable adrenalin for medically diagnosed anaphylaxis
4. The storage of medications
5. Recording of medications
6. Review of medication idiosyncrasies, adverse effect, contraindication and desired effects
7. Return demonstration for each method of administering medication

Upon completion of this program, the trained principal and teachers will meet with the school nurse in their building to review individual plans for students who receive medication.

II. Names of trained principals and teachers will be kept on file in the superintendent’s office.

Sec. 10-212a-4 Self-medications

The orders for self-administration of medications must be updated yearly.

I. The authorized prescriber and parent shall complete the form for self-administration of medication.

This form shall include:
8. Name of student
9. Condition for which medication is prescribed
10. Dose and frequency
11. Relevant side effects and management
12. Authorized prescriber’s statement that the student has been appropriately instructed regarding self-administration and that the authorized prescriber has conferred with the student’s parents.
13. Parent’s permission with a statement that the student has permission to self-administer medication.
Administration Of Medication By School Personnel Guidelines (4):

II. The school nurse shall evaluate the student’s ability to self-administer medications. This evaluation shall include, but not limited to, student’s age, development, type of medication and potential hazards to other students.

14. If the school nurse determines that the student can safely self-administer medication, a contract shall be developed. This contract shall include; when and where the student will keep the medications; backup medication if necessary; supervision schedule; and method of evaluation. A copy of the evaluation shall be sent to the parent and the authorized prescriber at the end of the school year.

2. If the nurse determines that the medication cannot be safely administered, the plan will be reviewed by the supervising school nurse. If the supervisor agrees, the authorized prescriber and parent will be notified. If the situation cannot be resolved, the school medical advisor will determine if the student can safely self-administer medication.

3. If, during the evaluation, the school nurse determines that the student is not continually in compliance, the school nurse shall contact the prescribing person and, if necessary, the order for self-medications may be withdrawn.

III. The school nurse will contact the student’s teachers that the student has permission to self-administer his/her medication. A list of students shall be submitted to the building administrator. This list shall be updated as necessary.

Sec. 10-212a-5 Handling, Storage and Disposal of Medication

I. All medications, except those approved for transporting by students for self-medication, shall be delivered to school by a responsible adult. If medication is brought in by the student, the school nurse shall contact the parent, and the parent must personally identify the medication brought in by the student.
II. All medication must be in a pharmacy labeled bottle, which includes:

15. Name of student  
16. Name of medication and method of administration  
17. Strength of medication and dosage  
18. Date of issue  
19. Instructions for administration  
20. Name of authorized prescriber

Any medication which is delivered in any other way than a properly labeled bottle shall not be given. The parent will be contacted and the medication guidelines shall be reviewed with the parent.

The medication will be returned to the parent or a responsible adult selected by the parent.

III. When the medication arrives at school, the school nurse shall examine on site the medication, medication order and permission form. If all is in order, the nurse shall develop a medication administration plan.

This plan shall include:
1. The medication  
2. Side effects  
3. Special directions  
4. Mode of administration  
5. Time of administration  
6. Backup system if nurse is absent

The school nurse shall count pills and record the amount on the documentation form.

IV. Storage

21. All medications, except those approved for keeping by the student for self-medication, shall be kept in their original containers in a locked area. The supervising nurse shall ensure that each school has a locked cabinet for the storage of medication only.

22. Controlled drugs shall be kept separate from non-controlled drugs in a permanently fixed cabinet. Only trained school personnel will have access to the keys to the storage areas.
Administration Of Medication By School Personnel Guidelines (6):

23. The school nurse shall keep a list of school personnel who are trained to give medication.
24. Medications requiring refrigeration shall be kept in a refrigerator in its original container and at a temperature 36 degrees - 46 degrees F. This refrigerator shall be in the school health office and not in a staff room.
25. No more than a forty-five (45) school day supply of medication shall be stored.
26. No medication shall be stored in school unless a current written order from an authorized prescriber is on file.

V. Disposal

27. All controlled, unused, discontinued or obsolete medications shall be returned to the parent. If the parent does not pick up the medication within three school days after discontinuance, the school nurse shall contact the Office of Consumer Protection (713-6065) and make arrangements for surrendering the controlled medication.
2. The School Health Coordinator will pick up any controlled drugs left over at the close of school. A Medication Destruction Form must be completed. The bottle will be numbered according to the line on the form. For example, if the student’s name is listed on line one, that student’s medication bottle will be labeled one.

Sec. 10-212a-6 Documentation and Record keeping

I. All medications given during the school day shall be recorded in the following manner:
28. Name of student
29. Name of medication
30. Dosage and frequency of medication
31. Route of administration
32. Name of the authorized prescriber
33. Date the medication was ordered
34. Quantity received
35. Date the medication is to be reordered
36. Student allergies to food or medicine
37. Date and time of administration or omission including the reason for the omission
Administration Of Medication By School Personnel Guidelines

38. Prescribed dosage
39. Full legal signature of the nurse or principal or teacher giving the medication

II. Transactions shall be recorded in ink and cannot be altered.

III. All medication records and permission forms shall be placed in a three-ring notebook which shall be made available to the State Health Department for their review. At the end of the school year, the medication record and all permission forms shall be placed in the Cumulative Health Record.

IV. The original prescription authorization form shall remain at the school. A copy will be sent to the transfer school. The copied prescription form will be attached to the copies of the documentation sheet.

V. For controlled medications, the school nurse shall keep the white copy of the documentation sheet. The yellow copy will be placed in the health record. For non-controlled medications, make a copy and attach the copy to the prescription authorization form. Document the medications on the health record. All documentation sheets must be kept for three years and then they may be destroyed.

VI. The same documentation sheet may be used until the prescription number changes. If the prescription number remains the same, one does not need to make out a new documentation sheet.

VII. Controlled medications do not have to be counted daily. However, the school nurse is accountable if any medications are missing or if there is an error in the number of pills. Each time a new supply arrives at school, the medication must be counted and the accurate number be inserted in the appropriate space on the documentation form. The number must be the same as the number of pills sent in by the parent. If there is a discrepancy in the number, contact the parent immediately. If the problem is not resolved, contact the School Health Coordinator immediately.

VIII. If one pill is dropped, it may be destroyed. The principal or teacher who is trained in medication administration must countersign the documentation sheet. A Medication Error Form must be completed. The original form is placed in the health record and a copy is sent to the School Health Coordinator. The parent is notified. If more than one pill is dropped the
Administration Of Medication By School Personnel Guidelines (8):

School Health Coordinator is notified and he/she will contact the Drug Enforcement Agency.

IX. An error in medication means that one failed to complete the order as written. Errors will be documented on the Cumulative Health records and a copy of the Error Report Form will be kept on file. If one of the following events occurs, a Medication Error Report Form shall be submitted to the nursing supervisor:

40. Failure to give the medication when student is present in school
41. Failure to give the medication within one-half hour before or one-half hour after the prescribed time
42. Failure to administer the specific medication prescribed for a student
43. Failure to administer the correct dosage of medication
44. Failure to administer the proper routine
45. Failure to administer according to generally accepted standards of practice.

The parent and, if needed, the prescribing physician shall be notified by telephone or by letter. A copy of the incident report may be sent to the authorized prescriber.

Sec. 10-212a-7 Supervision

I. The school nurse is responsible for general supervision of administration of medications in the schools to which the school nurse is assigned. When the school nurse is not in the building, the trained principal or teacher will be responsible for the daily administration of medications.

II. When a medication arrives at school, the principal or teacher shall contact the school nurse immediately. The school nurse will complete the following tasks prior to the person giving the medication.

The school nurse shall:

46. Review the medication forms
47. Check the medication bottle for proper label
48. Check the contents of the bottle to be sure it is the proper medication and note the amount of medication on the medication log
49. Initiate the individual medication log
STUDENTS

Administration Of Medication By School Personnel Guidelines (9):

50. Develop or review the drug data card with the person giving the medication
51. Develop a medication plan which includes the person responsible for the medication, the time the medication is given and a phone number where the trained principal or teacher can reach the school nurse

III. The school nurse shall review with the person responsible for giving the medication:

52. Proper handling and storage of medication
53. Proper documentation
54. Drug data card
55. Development of communication system for:
   - Questions about medication
   - Change in behavior or physical status
   - Error in administration of medication
   - Changes in appearance of medication
   - Failure of the student to comply with medication protocol
   - Missing medications

IV. The school nurse shall:

56. Observe the new person giving medication for the first time
57. Review monthly all medication documentation
58. Observe the effects of medication, especially medication given to alter classroom behavior
59. Communicate with the authorized prescriber

V. The school nurse shall attend CST/PPT meetings for any child placed on long-term medication.

The policy and administrative guidelines shall be reviewed biannually by the school medical advisor and the supervising school nurse. Whenever they are revised, the Director of Pupil Personnel Services shall forward them to the State Department of Health for review and approval.

Revised: March 10, 2003
STUDENTS 5142

ADMINISTRATION OF MEDICATION BY SCHOOL PERSONNEL

A. Definitions

Administration of medication means any one of the following activities: handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.

Authorized prescriber means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant, and, for interscholastic and intramural athletic events only, a podiatrist.

Before or After School Program means any child care program operated and administered by a local or regional board of education exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs do not include public or private entities licensed by the Office of Early Childhood or board of education enhancement programs and extra-curricular activities.

Cartridge Injector means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Coach means any person holding a coaching permit who is hired by a local or regional board of education to coach for a sport season.

Controlled drugs means those drugs as defined in Conn. Gen. Stat. Section 21a-240.


Director means the person responsible for the day-to-day operations of any school readiness program or before-and-after school program.

Eligible student means a student who has reached the age of eighteen or is an emancipated minor.

Error means:
(1) the failure to do any of the following as ordered:

(a) administer a medication to a student;
(b) administer medication within the time designated by the prescribing physician;
(c) administer the specific medication prescribed for a student;
(d) administer the correct dosage of medication;
(e) administer medication by the proper route;
(f) administer the medication according to generally accepted standards of practice; or

(2) the administration of medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student, except for the administration of epinephrine for the purpose of emergency first aid as permitted by state law and regulations and Section D below.

Guardian means one who has the authority and obligations of guardianship of the person of a minor, and includes: (1) the obligation of care and control; and (2) the authority to make major decisions affecting the minor's welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment.

Intramural athletic events means tryouts, competition, practice, drills, and transportation to and from events that are within the bounds of a school district for the purpose of providing an opportunity for students to participate in physical activities and athletic contests that extend beyond the scope of the physical education program.

Interscholastic athletic events means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests which are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills and transportation to and from such events.

Investigational drug means any medication with an approved investigational new drug (IND) application on file with the Food and Drug Administration (FDA), which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.

Licensed athletic trainer means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.

Medication means any medicinal preparation, both prescription and non-prescription, including controlled drugs, as defined in Conn. Gen. Stat. Section 21a-240. This definition includes Aspirin, Ibuprofen or Aspirin substitutes containing Acetaminophen.
Medication Emergency means a life-threatening reaction of a student to a medication.

Medication plan means a documented plan established by the school nurse in conjunction with the parent and student regarding the administration of medication in school. Such plan may be a stand-alone plan, part of an individualized health care plan, an emergency care plan or a medication administration form.

Medication order means the authorization by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indications for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period, and the written signature of the prescriber.

Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378, Conn. Gen. Stat.

Occupational Therapist means an occupational therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.

Optometrist means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.

Paraprofessional means a health care aide or assistant or an instructional aide or assistant employed by the local or regional board of education who meets the requirements of such board of employment as a health care aide or assistant or instructional aide or assistant.

Physical therapist means a physical therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes.

Physician means a doctor of medicine or osteopathy licensed to practice medicine in Connecticut pursuant to Chapters 370 and 371 of the Connecticut General Statutes, or licensed to practice medicine in another state.

Podiatrist means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.

Principal means the administrator in the school.
Research or study medications means FDA-approved medications being administered according to an approved study protocol. A copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.

School means any educational facility or program which is under the jurisdiction of the Board excluding extracurricular activities.


School nurse supervisor means the nurse designated by the local or regional board of education as the supervisor or, if no designation has been made by the board, the lead or coordinating nurse assigned by the board.

School readiness program means a program that receives funds from the State Department of Education for a school readiness program pursuant to subsection (b) of Section 10-16p of the Connecticut General Statutes and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.

Self-administration of medication means the control of the medication by the student at all times and is self-managed by the student according to the individual medication plan.

Teacher means a person employed full time by Board who has met the minimum standards as established by Board for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to the Regulations of Connecticut State Agencies Sections 10-212a-1 through 10-212a-7.

B. General Policies On Administration of Medications

(1) Except as provided below in Section D, no medication, including non-prescription drugs, may be administered by any school personnel without:

(a) the written medication order of an authorized prescriber;
(b) the written authorization of the student's parent or guardian or eligible student; and
(c) the written permission of a parent for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of such medication.

(2) Prescribed medications shall be administered to and taken by only the person for whom the prescription has been written.
Except as provided in Section D, medications may be administered only by a licensed nurse; or, in the absence of a licensed nurse, by:

(a) a full-time principal, a full-time teacher, or a full-time licensed physical or occupational therapist employed by the school district. A full-time principal, teacher, licensed physical or occupational therapist employed by the school district may administer oral, topical, intranasal or inhalant medications. Such individuals may administer injectable medications only to a student with a medically diagnosed allergic condition that may require prompt treatment to protect the student against serious harm or death.

(b) students with chronic medical conditions who are able to self-administer medication, provided all of the following conditions are met:

(i) an authorized prescriber provides a written medication order, including the recommendation for such self-administration;

(ii) there is a written authorization for self-administration from the student's parent or guardian or eligible student;

(iii) the school nurse has developed a plan for self-administration and general supervision, and has documented the plan in the student's cumulative health record;

(iv) the school nurse has assessed the student's competency for self-administration and deemed it safe and appropriate, including that the student: is capable of identifying and selecting the appropriate medication by size, color, amount or other label identification; knows the frequency and time of day for which the medication is ordered; can identify the presenting symptoms that require medication; administers the medication appropriately; maintains safe control of the medication at all times; seeks adult supervision whenever warranted; and cooperates with the established medication plan.

(v) the principal, appropriate teachers, coaches and other appropriate school personnel are informed the student is self-administering prescribed medication;

(vi) such medication is transported to school and maintained under the student's control in accordance with this policy;
(vii) controlled drugs, as defined in this policy, may not be self-administered by students, except in extraordinary situations, such as international field trips, with approval of the school nurse supervisor and the school medical advisor in advance and development of an appropriate plan.

(c) a student diagnosed with asthma who is able to self-administer medication shall be permitted to retain possession of an asthmatic inhaler at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:

(i) an authorized prescriber provides a written order requiring the possession of an inhaler by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student’s self-administration of medication, and such written order is provided to the school nurse;

(ii) there is a written authorization from the student’s parent or guardian regarding the possession of an inhaler by the student at all times in order to protect the child against serious harm or death and authorizing the student’s self-administration of medication, and such written authorization is provided to the school nurse;

(iii) the conditions set forth in subsection (b) above have been met, except that the school nurse’s review of a student’s competency to self-administer an inhaler for asthma in the school setting shall not be used to prevent a student from retaining and self-administering an inhaler for asthma. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student’s parent or guardian or eligible student;

(iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.

(d) a student diagnosed with an allergic condition who is able to self-administer medication shall be permitted to retain possession of an automatic prefilled injection cartridge or similar automatic injectable equipment at all times while attending school, in order to provide for
prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:

(i) an authorized prescriber provides a written order requiring the possession of an automatic prefilled injection cartridge or similar automatic injectable equipment by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student’s self-administration of medication, and such written order is provided to the school nurse;

(ii) there is a written authorization from the student’s parent or guardian regarding the possession of an automatic prefilled injection cartridge or similar automatic injectable equipment by the student at all times in order to protect the child against serious harm or death and authorizing the student’s self-administration of medication, and such written authorization is provided to the school nurse;

(iii) the conditions set forth in subsection (b) above have been met, except that the school nurse’s review of a student’s competency to self-administer cartridge injectors for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering a cartridge injector for medically-diagnosed allergies. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student’s parent or guardian or eligible student;

(iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.

(e) a coach of intramural or interscholastic athletic events or licensed athletic trainer, who has been trained in the administration of medication, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication administered with a cartridge injector for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, provided all of the following conditions are met:

(i) the school nurse has determined that a self-administration plan is not viable;
the school nurse has provided to the coach a copy of the authorized prescriber’s order and parental permission form;

(iii) the parent/guardian has provided the coach or licensed athletic trainer with the medication in accordance with Section H of this policy, and such medication is separate from the medication stored in the school health office for use during the school day; and

(iv) the coach or licensed athletic trainer agrees to the administration of emergency medication and implements the emergency care plan, identified in Section E of this policy, when appropriate.

(f) an identified school paraprofessional who has been trained in the administration of medication, provided medication is administered only to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition, except as provided in Section D below, and the following additional conditions are met:

(i) there is written authorization from the student’s parents/guardian to administer the medication in school;

(ii) medication is administered pursuant to the written order of (A) a physician licensed under chapter 370, (B) an optometrist licensed to practice optometry under chapter 380, (C) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a of the Connecticut General Statutes, or (D) a physician assistant licensed to prescribe in accordance with section 20-12d of the Connecticut General Statutes; and

(iii) medication is administered only with approval by the school nurse and school medical advisor, if any, in conjunction with the school nurse supervisor, and under the supervision of the school nurse; and

(iv) the medication to be administered is limited to medications necessary for prompt treatment of an allergic reaction, including, but not limited to, a cartridge injector; and

(v) the paraprofessional shall have received proper training and supervision from the school nurse in accordance with this policy and state regulations.
(g) a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional, provided medication is antiepileptic medication, including by rectal syringe, administered only to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student’s individual seizure action plan, and the following additional conditions are met:

(i) there is written authorization from the student’s parents/guardians to administer the medication; and

(ii) a written order for such administration has been received from the student’s physician licensed under Chapter 370 of the Connecticut General Statutes; and

(iii) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional is selected by the school nurse and school medical advisor, if any, and voluntarily agrees to administer the medication; and

(iv) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional annually completes the training program established by the Connecticut State Department of Education and the Association of School Nurses of Connecticut, and the school nurse and medical advisor, if any, have attested, in writing, that such training has been completed; and

(v) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional receives monthly reviews by the school nurse to confirm competency to administer antiepileptic medication.

(h) a director of a school readiness program or a before or after school program, or the director’s designee, provided that the medication is administered:

(i) only to a child enrolled in such program; and

(ii) in accordance with Section K of this policy.

(i) a licensed practical nurse, after the school nurse has established the medication plan, provided that the licensed practical nurse may not train
or delegate the administration of medication to another individual, and provided that the licensed practical nurse can demonstrate one of the following:

(i) training in administration of medications as part of their basic nursing program;

(ii) successful completion of a pharmacology course and subsequent supervised experience; or

(iii) supervised experience in the administration of medication while employed in a health care facility.

4. Medications may also be administered by a parent or guardian to his/her own child on school grounds.

5. Investigational drugs or research or study medications may be administered only by a licensed nurse. For FDA-approved medications being administered according to a study protocol, a copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.

C. Diabetic Students

(1) The Manchester Board of Education permits blood glucose testing by students who have a written order from a physician stating the need and capability of such student to conduct self-testing.

(2) The Board will not restrict the time or location of blood glucose testing by a student with diabetes on school grounds who has written authorization from a parent or guardian and a written order from a physician stating that such child is capable of conducting self-testing on school grounds.

(3) In the absence or unavailability of the school nurse, select school employees may administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death, under the following conditions:

(a) The student’s parent or guardian has provided written authorization.

(b) A written order for such administration has been received from the student’s physician licensed under Chapter 370 of the Connecticut General Statutes.
(c) The school employee is selected by either the school nurse or principal and is a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional.

(d) The school nurse shall provide general supervision to the selected school employee.

(e) The selected school employee annually completes any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment used to administer glucagon.

(f) The school nurse and school medical advisor have attested in writing that selected school employee completed the required training.

(g) The selected school employee voluntarily agrees to serve as one who may administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death.

D. Epinephrine for Purposes of Emergency First Aid Without Prior Authorization

(1) For purposes of this Section D, "regular school hours" means the posted hours during which students are required to be in attendance at the individual school on any given day.

(2) The school nurse shall maintain epinephrine in cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions and do not have prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine.

(a) The school nurse, in consultation with the school nurse supervisor, shall determine the supply of epinephrine in cartridge injectors that shall be available in the individual school.

(b) In determining the appropriate supply of epinephrine in cartridge injectors, the nurse may consider, among other things, the number of students regularly in the school building during the regular school day and the size of the physical building.

(3) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraprofessional(s) to maintain and administer
the epinephrine in cartridge injectors for the purpose of emergency first aid as described in Paragraph (1) above, in the absence of the school nurse.

(a) More than one individual must be selected by the school nurse or school principal for such maintenance and administration in the absence of the school nurse.

(b) The selected personnel, before conducting such administration, must annually complete the training made available by the Department of Education for the administration of epinephrine in cartridge injectors for the purpose of emergency first aid.

(c) The selected personnel must voluntarily agree to complete the training and administer epinephrine in cartridge injectors for the purpose of emergency first aid.

(4) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (2) above shall be on the grounds of each school during regular school hours.

(a) The school principal, in consultation with the school nurse supervisor, shall determine the level of nursing services and number of selected and trained personnel necessary to ensure that a nurse or selected and trained personnel is present on the grounds of each school during regular school hours;

(b) If the school nurse, or a substitute school nurse, is absent or must leave school grounds during regular school hours, the school nurse, school administrator or designee shall send an email to all staff indicating that the selected and trained personnel identified in Paragraph (2) above shall be responsible for the emergency administration of epinephrine;

(5) The administration of epinephrine pursuant to this section must be done in accordance with this policy, including but not limited to the requirements for documentation and record keeping, errors in medication, emergency medical procedures, and the handling, storage and disposal of medication; and the Regulations adopted by the Department of Education.

(6) The parent or guardian of any student may submit, in writing, to the school nurse or school medical advisor, if any, that epinephrine shall not be administered to such student pursuant to this section.
(a) The school nurse shall notify selected and trained personnel of the students whose parents or guardians have refused emergency administration of epinephrine;

(b) The Board shall annually notify parents or guardians of the need to provide such written notice.

(7) Following the emergency administration of epinephrine by selected and trained personnel as identified in this section:

(a) Such emergency administration shall be reported immediately to:

   (i) The school nurse or school medical advisor, if any, by the personnel who administered the epinephrine; and

   (ii) The student’s parent or guardian, by the school nurse or personnel who administered the epinephrine.

(b) A medication administration record shall be:

   (i) Submitted to the school nurse by the personnel who administered the epinephrine as soon as possible, but no later than the next school day; and

   (ii) filed in or summarized on the student’s cumulative health record, in accordance with Section E of this policy.

E. Documentation and Record Keeping

(1) Each school or before-and-after school program and school readiness program where medications are administered shall maintain an individual medication administration record for each student who receives medication during school or program hours. This record shall include the following information:

   (a) the name of the student;
   (b) the student’s state-assigned student identifier (SASID);
   (c) the name of the medication;
   (d) the dosage of the medication;
   (e) the route of the administration, (i.e., oral, topical, inhalant, etc.);
   (f) the frequency of administration;
   (g) the name of the authorized prescriber;
   (h) the dates for initiating and terminating the administration of medication, including extended year programs;
(i) the quantity received at school and verification by the adult delivering the medication of the quantity received;
(j) the date the medication is to be reordered (if any);
(k) any student allergies to food and/or medication(s);
(l) the date and time of each administration or omission, including the reason for any omission;
(m) the dose or amount of each medication administered; and,
(n) the full written or electronic legal signature of the nurse or other authorized school personnel administering the medication;
(o) for controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness.

(2) All records are either to be made in ink and shall not be altered, or recorded electronically in a record that cannot be altered.

(3) Written orders of authorized prescribers, written authorizations of parent or guardian, the written parental permission for the exchange of information by the prescriber and school nurse to ensure safe administration of such medication, and the completed medication administration record for each student shall be filed in the student's cumulative health record or, for before-and-after school programs and school readiness programs, in the child's program record.

(4) Authorized prescribers may make verbal orders, including telephone orders, for a change in medication order. Such verbal orders may be received only by a school nurse and must be followed by a written order, which may be faxed, and must be received within three (3) school days.

(5) Medication administration records will be made available to the Department of Education for review until destroyed pursuant to Section 11-8a and Section 10-212a(b) of the Connecticut General Statutes.

(a) The completed medication administration record for non-controlled medications may, at the discretion of the school district, be destroyed in accordance with Section M8 of the Connecticut Record Retention Schedules for Municipalities, so long as it is superseded by a summary on the student health record.

(b) The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three (3) years pursuant to Section 10-212a(b) of the Connecticut General Statutes.
(6) Documentation of any administration of medication by a coach or licensed athletic trainer shall be completed on forms provided by the school and the following procedures shall be followed:

(a) a medication administration record for each student shall be maintained in the athletic offices;

(b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;

(c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and

(d) the administration of medication record must be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

F. Errors in Medication Administration

(1) Whenever any error in medication administration occurs, the following procedures shall apply:

(a) the person making the error in medication administration shall immediately implement the medication emergency procedures in this Policy if necessary;

(b) the person making the error in medication administration shall in all cases immediately notify the school nurse, principal, school nurse supervisor, and authorized prescriber. The person making the error, in conjunction with the principal, shall also immediately notify the parent or guardian, advising of the nature of the error and all steps taken or being taken to rectify the error, including contact with the authorized prescriber and/or any other medical action(s).

(c) the principal shall notify the Superintendent or the Superintendent's designee.

(2) The school nurse, along with the person making the error, shall complete a report using the authorized medication error report form. The report shall include any corrective action taken.
(3) Any error in the administration of medication shall be documented in the student’s cumulative health record or, for before-and-after school programs and school readiness programs, in the child’s program record.

(4) These same procedures shall apply to coaches and licensed athletic trainers during intramural and interscholastic events, except that if the school nurse is not available, a report must be submitted by the coach or licensed athletic trainer to the school nurse the next school day.

G. Medication Emergency Procedures

(1) Whenever a student has a life-threatening reaction to administration of a medication, resolution of the reaction to protect the student’s health and safety shall be the foremost priority. The school nurse and the authorized prescriber shall be notified immediately, or as soon as possible in light of any emergency medical care that must be given to the student.

(2) Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances:

(a) use of the 911 emergency response system;
(b) application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardio-pulmonary resuscitation;
(c) administration of emergency medication in accordance with this policy;
(d) contact with a poison control center; and
(e) transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.

(3) As soon as possible, in light of the circumstances, the principal shall be notified of the medication emergency. The principal shall immediately thereafter contact the Superintendent or the Superintendent’s designee, who shall thereafter notify the parent or guardian, advising of the existence and nature of the medication emergency and all steps taken or being taken to resolve the emergency and protect the health and safety of the student, including contact with the authorized prescriber and/or any other medical action(s) that are being or have been taken.

H. Supervision

(1) The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned.
The school nurse's duty of general supervision includes, but is not limited to the following:

(a) availability on a regularly scheduled basis to:

(i) review orders or changes in orders, and communicate these to personnel designated to give medication for appropriate follow-up;

(ii) set up a plan and schedule to ensure medications are given properly;

(iii) provide training to licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and interscholastic athletics, licensed athletic trainers and to identified paraprofessionals designated in accordance with Section B(3)(f), above, which training shall pertain to the administration of medications to students, and assess the competency of these individuals to administer medication;

(iv) support and assist other licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, licensed athletic trainers and identified paraprofessionals designated in accordance with Section B(3)(f), above, to prepare for and implement their responsibilities related to the administration of specific medications during school hours and during intramural and interscholastic athletics as provided by this policy;

(v) provide appropriate follow-up to ensure the administration of medication plan results in desired student outcomes; and

(vi) provide consultation by telephone or other means of telecommunications, which consultation may be provided by an authorized prescriber or other nurse in the absence of the school nurse.

(b) In addition, the school nurse shall be responsible for:

(i) implementing policies and procedures regarding the receipt, storage, and administration of medications;
(iii) reviewing, on a periodic basis, all documentation pertaining to the administration of medications for students;

(iii) perform observations of the competency of medication administration by full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(e), above, and identified paraprofessionals designated in accordance with Section B(3)(f), above, who have been newly trained to administer medications; and,

(iv) conducting periodic reviews, as needed, with licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(e), above, and identified paraprofessionals designated in accordance with Section B(3)(f), above, regarding the needs of any student receiving medication.

I. **Training of School Personnel**

(1) Full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(e), above, and identified paraprofessionals designated in accordance with Section B(3)(f), above, who are designated to administer medications shall at least annually receive training in their safe administration; and only trained full-time principals, full-time teachers, full-time licensed physical or occupational therapist employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(e), above, and identified paraprofessionals designated in accordance with Section B(3)(f), above, shall be allowed to administer medications.

(2) Training for full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(e), above, and identified paraprofessionals designated in accordance with Section B(3)(f), above, shall include, but is not necessarily limited to the following:

(a) the general principles of safe administration of medication;
(b) the procedures for administration of medications, including the safe handling and storage of medications, and the required record-keeping;

(c) specific information related to each student’s medication plan, including the name and generic name of the medication, indications for medication dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side effects, overdose or missed doses of the medication, and when to implement emergency interventions.

(3) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraprofessional(s) who administer epinephrine as emergency first aid, pursuant to Section D above, shall annually completed the training program developed by the Departments of Education and Public Health and training in cardiopulmonary resuscitation and first aid.

(4) The Board shall maintain documentation of medication administration training as follows:

(a) dates of general and student-specific trainings;

(b) content of the trainings;

(c) individuals who have successfully completed general and student-specific administration of medication training for the current school year; and

(d) names and credentials of the nurse or school medical advisor, if any, trainer or trainers.

(5) Licensed practical nurses may not conduct training in the administration of medication to another individual.

J. Handling, Storage and Disposal of Medications

(1) All medications, except those approved for transporting by students for self-medication, those administered by coaches of intramural or interscholastic athletics or licensed athletic trainers in accordance with Section B(3)(e) above, and epinephrine to be used for emergency first aid in accordance with Section D above, must be delivered by the parent, guardian, or other responsible adult to the nurse assigned to the student’s school or, in the absence of such nurse, the school principal who has been trained in the appropriate administration of medication. Medications administered by coaches of intramural or interscholastic athletics or licensed athletic trainers must be delivered by the
parent or guardian directly to the coach or licensed athletic trainer in accordance with Section B(3)(e) above.

(2) The nurse shall examine on-site any new medication, medication order and the required authorization to administer form, and, except for epinephrine to be used as emergency first aid in accordance with Section D above, shall develop a medication administration plan for the student before any medication is given to the student by any school personnel. No medication shall be stored at a school without a current written order from an authorized prescriber.

(3) The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication, except for epinephrine intended for emergency first aid in accordance with Section D above.

(4) Emergency Medications

(a) Except as otherwise determined by a student’s emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse, or in the absence of the school nurse, the principal or the principal’s designee who has been trained in the administration of medication;

(b) Emergency medication shall be locked beyond the regular school day or program hours, except as otherwise determined by a student’s emergency care plan.

(5) All medications, except those approved for keeping by students for self-medication, shall be kept in a designated and locked location, used exclusively for the storage of medication. Controlled substances shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.

(6) Access to stored medications shall be limited to persons authorized to administer medications. Each school or before-and-after school program and school readiness program shall maintain a current list of such authorized persons.

(7) All medications, prescription and non-prescription, shall be delivered and stored in their original containers and in such a manner that renders them safe and effective.
(8) At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before-and-after school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the direct control of the principal and, if necessary, the program director or lead teacher who has been trained in the general principles of the administration of medication shall also have a set of keys.

(9) Medications that must be refrigerated shall be stored in a refrigerator, at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator must be located in the health office that is maintained for health services with limited access. Non-controlled medication may be stored directly on the refrigerator shelf with no further protection needed. Controlled medication shall be stored in a locked box which is affixed to the refrigerator shelf.

(10) All unused, discontinued or obsolete medications shall be removed from storage areas and either returned to the parent or guardian or, if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse:

(a) non controlled drugs shall be destroyed in the presence of at least one witness;

(b) controlled drugs shall be destroyed in pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies;

(c) accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue and jointly documented on the student medication administration record and on a medication error form pursuant to Section 10-212a(b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.

(11) Medications to be administered by coaches of intramural or interscholastic athletic events or licensed athletic trainers shall be stored:

(a) in containers for the exclusive use of holding medications;

(b) in locations that preserve the integrity of the medication;
(c) under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and

(d) in a locked secured cabinet when not under the general supervision of the coach or licensed athletic trainer during intramural or interscholastic athletic events.

(12) In no event shall a school store more than a three (3) month supply of a medication for a student.

K. School Readiness Programs and Before-and-After School Programs

(1) As determined by the school medical advisor, if any, and school nurse supervisor, the following procedures shall apply to the administration of medication during school readiness programs and before-and-after school programs run by the Board, which are exempt from licensure by the Office of Early Childhood:

(a) Administration of medication at these programs shall be provided only when it is medically necessary for participants to access the program and maintain their health status while attending the program.

(b) Except as provided by Section D above, no medication shall be administered in these programs without:

(i) the written order of an authorized prescriber; and

(ii) the written authorization of a parent or guardian or an eligible student.

(c) A school nurse shall provide consultation to the program director, lead teacher or school administrator who has been trained in the administration of medication regarding the safe administration of medication within these programs. The school medical advisor and school nurse supervisor shall determine whether, based on the population of the school readiness program and/or before-and-after school program, additional nursing services are required for these programs.

(d) Only school nurses, directors or directors’ designees, lead teachers or school administrators who have been properly trained may administer medications to students as delegated by the school nurse or other registered nurse or other registered nurse. Properly trained directors or directors’ designees, lead teachers or school administrators may administer oral, topical, intranasal or inhalant
medications. Investigational drugs or research or study medications may not be administered in these programs.

(e) Students attending these programs may be permitted to self-medicate only in accordance with the provisions of Section B(3) of this policy. In such a case, the school nurse must provide the program director, lead teacher or school administrator running the program with the medication order and parent permission for self-administration.

(f) In the absence of the school nurse during program administration, the program director, lead teacher or school administrator is responsible for decision making regarding medication administration.

(g) Cartridge injector medications may be administered by a director, lead teacher or school administrator only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.

(2) Local poison control center information shall be readily available at these programs.

(3) Procedures for medication emergencies or medication errors, as outlined in this policy, must be followed, except that in the event of a medication error a report must be submitted by the program director, lead teacher or school administrator to the school nurse the next school day.

(4) Training for directors or directors’ designees, lead teachers or school administrators in the administration of medication shall be provided in accordance with Section I of this policy.

(5) All medications must be handled and stored in accordance with Section H of this policy. Where possible, a separate supply of medication shall be stored at the site of the before-and-after or school readiness program. In the event that it is not possible for the parent or guardian to provide a separate supply of medication, then a plan shall be in place to ensure the timely transfer of the medication from the school to the program and back on a daily basis.

(6) Documentation of any administration of medication shall be completed on forms provided by the school and the following procedures shall be followed:

(a) a medication administration record for each student shall be maintained by the program;
(b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;

(c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and

(d) the administration of medication record must be submitted to the school nurse at the end of each school year and filed in the student's cumulative health record.

(7) The procedures for the administration of medication at school readiness programs and before-and-after school programs shall be reviewed annually by the school medical advisor, if any, and school nurse supervisor.

L. Review and Revision of Policy

In accordance with the provisions of Section 10-212a-2(a), the Board shall review this policy periodically, and at least biennially, with the advice and approval of the school medical advisor, if any, or other qualified licensed physician, and the school nurse supervisor. Any proposed revisions to the policy must be made with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Legal References:

Connecticut General Statutes:
Section 10-206
Section 10-212
Section 10-212a
Section 19a-900
Section 21a-240
Section 52-557b

Public Act 15-215, An Act Concerning Various Additions to the Education Statutes
Regulations of Conn. State Agencies:
Sections 10-212a-1 through 10-212a-10, inclusive

Code of Federal Regulations:
Title 21 Part 1307.21

Adopted: May 29, 1990
Reviewed: July 13, 1992
Reviewed: October 24, 1994
Revised: November 12, 1996
Reviewed: November 9, 1998
Revised: May 23, 2011
Revised: April, 2016
[NOTE: This form makes reference to a school medical advisor. If your district does not, and is not required to, have a medical advisor, all references to such should be deleted before providing this form to parents]

[Board of Education/School Letterhead]
REFUSAL TO PERMIT ADMINISTRATION
OF EPINEPHRINE FOR EMERGENCY FIRST AID

Name of Child: ___________________________________ Date of Birth: __________________________

Address of Child: _______________________________________________________________

Name of Parent(s): _______________________________________________________________

Address of Parent(s): _____________________________________________________________
(if different from child)

Connecticut law requires the school nurse and other qualified school personnel in all public schools to maintain epinephrine in cartridge injectors (EpiPens) for the purpose of administering emergency first aid to students who experience allergic reactions and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine. State law permits the parent or guardian of a student to submit a written directive to the school nurse or school medical advisor that epinephrine shall not be administered to such student in emergency situations. This form is provided for those parents who refuse to have epinephrine administered to their child. The refusal is valid for only for the 20___-20___ school year.

I, ___________________________________________, the parent/guardian of ___________________________,
__________________________ [Print name of parent/guardian] Print name of student
refuse to permit the administration of epinephrine to the above named student for purposes of emergency first aid in the case of an allergic reaction.

__________________________________________ Date
Signature of Parent/Guardian

Please return the completed original form to your child’s school nurse or school medical advisor,
__________________________ [Insert name of medical advisor] at
__________________________ [Insert address of medical advisor].

8/26/15
STUDENTS 5121

WEARING OF PHOTO IDENTIFICATION BADGES (Red line)

The Board of Education requires all students at Bennet Academy, Illing Middle School, and Manchester High School to be issued and wear in a visible place carry photo identification badges, beginning the 2011-2012 school year.

In addition, all visitors to schools will report to the school office; and, once admitted to the school, will be issued a visitor’s ID which will be worn while in the building. The purpose of this policy is to better ensure both the safety of all our students and staff, and the security of our buildings and personal property.

Adopted: April 11, 2011
Revised: April, 2016
STUDENTS 5121

WEARING OF PHOTO IDENTIFICATION BADGES ADMINISTRATIVE GUIDELINES

1. Students will be provided an initial badge and lanyard at no cost.

2. If the student loses his or her badge a charge for the replacement badge would occur.

3. A building-based progressive discipline approach would be implemented for those students who fail to comply with the policy. This could include parent or guardian notification, detention, and in-school suspension.
BUSINESS

BUDGET

Function of the Board

The Board of Education recognizes that finances and financial management are critical to the community's support of public education in Manchester. To help ensure that this support remains strong, the Board will:

1. Encourage advance planning using thorough and well thought out budget procedures.

2. Guide the expenditure of funds so as to extract the greatest educational returns.

3. Explore all practical sources of financial support.

4. Maintain a level of expenditure needed to provide high quality education within the ability of the community of Manchester to pay.

5. Establish sound and efficient accounting and reporting procedures.

Function of the Superintendent

1. Maintain appropriate and customary management, control, and accounting functions for all budget expenditures as outlined in the Town Charter, State Statutes accepted practices and policies.

2. Elicit a wide range of input in the development of the annual budget.

3. Prepare a yearly budget estimate for the Board of Education and Board of Directors as outlined in the Town Charter and Statutes.

4. Submit quarterly reports to the Board of Education projecting the fiscal health of the budget.

5. Regularly disseminate budget information to the community, parents, staff and students.

6. Maintain appropriate purchasing procedures to insure the highest quality of instructional supplies, materials and services for the lowest price.

7. Seek economies whenever and wherever possible.
Establishing Budget Priorities

Before developing and adopting a recommended budget, the Board of Education will study educational programs in relation to the present and future student, parent and community needs. Based on those needs, it will establish budget priorities for each fiscal year.

Budget Planning Process

Budget planning is a year-round process that includes specifying measurable objectives, evaluating programs in relation to those objectives and formulating budget requests to support them. To make the budget a comprehensive reflection of the needs of students, parents and the community, the Board and the Superintendent will take appropriate steps to ensure the involvement of professional and administrative staff in the budget development process and to ensure there is ample opportunity for community input.

Budget Evaluation and Adoption

The Superintendent will present the Board with a detailed recommended budget request not later than the first regular meeting of the Board in January of each year.

Following the presentation of the Superintendent’s Recommended Budget, the Board will conduct a detailed financial review of the Superintendent’s recommended budget through a series of workshops. The Board will study the Superintendent’s recommended budget to determine that budget line items meet the present and future needs of the students, the parents and the community, as outlined in the Board of Education’s adopted criteria, including budget priorities, its strategic plan, technology plan and any and all other documents approved by the Board. The budget evaluation process is organized into three phases, with a workshop or series of workshops in each phase:

Phase One

The initial workshop will be scheduled for the Superintendent to deliver an overall budget presentation. This workshop will include, but not be limited to, a review of how new budget initiatives and present spending levels meet the Board’s adopted criteria. During phase one, the Board will not entertain nor request additions/reductions to the Superintendent’s recommended budget until the Board has reviewed the budget in its entirety.

Phase Two

When the Superintendent has completed his/her review, phase two of the budget evaluation process will begin. The Board will conduct a detailed financial review of the Superintendent’s recommended budget. This review may include an examination of the following:

➢ any adjustments the Superintendent may wish to make in his/her initial recommendation;
Phase Three

Once the Board of Directors has approved an appropriation for Manchester's schools, a phase three workshop may be held. At this workshop, the Board, in consultation with the Superintendent, will make such adjustments in the budget as are necessary to conform the budget to the appropriation.

Not later than February 1 of each year,
The Board of Education will adopt a request for an appropriation and forward that request to the General Manager of the Town by February 14. The request for an appropriation filed by the Board of Education with the General Manager shall be accompanied by a copy thereof for each member of the Board of Directors.

Within three (3) days after said filing the request for an appropriation, the Chair of the Board of Education may submit a letter to the General Manager requesting joint meeting of the two (2) Boards for the purpose of discussing the appropriation request of the Board of Education and the recommendations of the General Manager. If the Chair of the Board of Education requests this initial joint meeting, the joint meeting shall be held no later than five (5) days before the General Manager submits his tentative budget to the Board of Directors.

Following the submittal of the General Manager's tentative budget, but not later than seven (7) days before the adoption of the final budget, the Chairperson of the Board of Education and Superintendent of Schools will attend a Board of Directors budget workshop mandatory joint meeting of the two (2) Boards shall be held for the purpose of presenting and discussing the appropriation request of the Board of Education.

The Chairman of the Board of Education may, at any time, sign and file with the General Manager a written waiver dispensing with said adjourned joint meeting. Once the Board of Directors has approved an appropriation for Manchester's schools, the Board of Education will conduct additional budget workshops as necessary and will adopt a final budget on or before June 30.

Adopted: September 10, 2001
Revised: August 26, 2013
Revised: April, 2016
BUDGET

Function of the Board

The Board of Education recognizes that finances and financial management are critical to the community’s support of public education in Manchester. To help ensure that this support remains strong, the Board will:

1. Encourage advance planning using thorough and well thought out budget procedures.
2. Guide the expenditure of funds so as to extract the greatest educational returns.
3. Explore all practical sources of financial support.
4. Maintain a level of expenditure needed to provide high quality education within the ability of the community of Manchester to pay.
5. Establish sound and efficient accounting and reporting procedures.

Function of the Superintendent

1. Maintain appropriate and customary management, control, and accounting functions for all budget expenditures as outlined in the Town Charter, State Statutes accepted practices and policies.
2. Elicit a wide range of input in the development of the annual budget.
3. Prepare a yearly budget estimate for the Board of Education and Board of Directors as outlined in the Town Charter and Statutes.
4. Submit quarterly reports to the Board of Education projecting the fiscal health of the budget.
5. Regularly disseminate budget information to the community, parents, staff and students.
6. Maintain appropriate purchasing procedures to insure the highest quality of instructional supplies, materials and services for the lowest price.
7. Seek economies whenever and wherever possible.
Establishing Budget Priorities

Before developing and adopting a recommended budget, the Board of Education will study educational programs in relation to the present and future student, parent and community needs. Based on those needs, it will establish budget priorities for each fiscal year.

Budget Planning Process

Budget planning is a year-round process that includes specifying measurable objectives, evaluating programs in relation to those objectives and formulating budget requests to support them. To make the budget a comprehensive reflection of the needs of students, parents and the community, the Board and the Superintendent will take appropriate steps to ensure the involvement of professional and administrative staff in the budget development process and to ensure there is ample opportunity for community input.

Budget Evaluation and Adoption

The Superintendent will present the Board with a detailed recommended budget request not later than the first regular meeting of the Board in January of each year.

Following the presentation of the Superintendent's Recommended Budget, the Board will conduct a detailed financial review of the Superintendent's recommended budget through a series of workshops. The Board will study the Superintendent's recommended budget to determine that budget line items meet the present and future needs of the students, the parents and the community, as outlined in the Board of Education's adopted criteria, including budget priorities, its strategic plan, technology plan and any and all other documents approved by the Board.

The Board of Education will adopt a request for an appropriation and forward that request to the General Manager of the Town by February 14. The request for an appropriation filed by the Board of Education with the General Manager shall be accompanied by a copy thereof for each member of the Board of Directors.

Within three (3) days after said filing the request for an appropriation, the Chair of the Board of Education may submit a letter to the General Manager requesting joint meeting of the two (2) Boards for the purpose of discussing the appropriation request of the Board of Education and the recommendations of the General Manager. If the Chair of the Board of Education requests this initial joint meeting, the joint meeting shall be held no later than five (5) days before the General Manager submits his tentative budget to the Board of Directors.

Following the submission of the General Manager's tentative budget, but not later than seven (7) days before the adoption of the final budget, the Chairperson of the Board of Education and Superintendent of Schools will attend a Board of Directors budget workshop for the purpose of presenting and discussing the appropriation request of the Board of Education.

Once the Board of Directors has approved an appropriation for Manchester's schools, the
BUDGET

Board of Education will conduct additional budget workshops as necessary and will adopt a final budget on or before June 30.

Adopted: September 10, 2001
Revised: August 26, 2013
Revised: April, 2016
INSTRUCTION

PHYSICAL EDUCATION EXTERNAL CREDIT

Physical activity is critical to the development and maintenance of good health. The goal of physical education is to develop physically educated individuals who have the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity. —National Standard from the National Association of Sport and Physical Education

MHS PHYSICAL EDUCATION PHILOSOPHY

In order to live fully in today's complex society, people must have an understanding and awareness of good health practices that will promote healthy lifestyles. Physical, mental, social and emotional fitness are just a few of the many important outcomes in the growth and development of our youth.

A comprehensive physical educational curriculum should include the needs and interests of today's youth by incorporating a developmental program that emphasizes positive attitudes towards obtaining and maintaining a healthy lifestyle.

This program, based on a process which understands how students learn, should integrate a healthy lifestyle into a broad range of activities and sports for lifetime use.

It is important that the physical education program instill in all students a sense of responsibility for their own wellness. Physical education should teach concepts, skills, rules and strategies that will reinforce attitudes, knowledge and social skills involved in health and wellness. This foundation is essential for students to make intelligent choices in the future about their own physical participation for a healthful life.

EXTERNAL CREDIT OPTIONS:

College and university credits earned at an accredited institution of higher learning

Special vocational courses offered by accredited technical or business schools

Career related courses offered by approved proprietary schools

Summer School courses offered at any accredited high school (other than MHS) or an approved summer program.

Independent Study offered as a post secondary preparatory option to earn credit in all high school curriculum areas.

Community-based learning activities can earn credit on the basis of .50 credits per 60 hours of learning experience gained through volunteer activities which meet the requirements of the MHS External Credit program. Students who apply for credit must submit to the External Credit Committee a well-defined unit of study designed to enrich learning experiences of the academic program and enhance personal growth. The activity must have a sponsor [a Manchester High School Physical Education Teacher (obtained by the student), who will supervise the activity and certify its satisfactory completion.

Independent study is defined as: (a) a course which is not being offered as part of the regular program, but does have an approved curriculum; (b) an experience that extends learning beyond our existing course offering in order to provide enrichment. In either case, this course is supervised by a Manchester High School teacher.

Examples of definition (a) are French V, Italian IV or Economics. Example of definition (b) Cartooning offered by the Art Dept.

Internship is “Any carefully monitored work or service experience in which an individual has intentional learning goals and reflects actively on what he or she is learning throughout the experience.” Defined by the National Association of Colleges and Employers

An Internship is any experience where students learn by taking on responsible roles as workers in organizations by observing and reflecting on what happens while they are in the workplace. The Internship Program is a supplement to formal classroom instruction. Its intent is to add significantly to the vitality of the instructional program and impact the courses that a student has taken or will take. The expected outcomes of this experience for the students include
INSTRUCTION

PHYSICAL EDUCATION EXTERNAL CREDIT

• Increased self-esteem and personal growth derived from successfully meeting new interpersonal and intellectual challenges
• Acquired new skills and knowledge
• Increased exposure to various work roles and career choices
• Increased understanding of the relationship between school-based learning and the work experience
• Increased opportunities for high school students to explore areas of academic, career, or service interests
• Development of positive relationships between the Internship Program and the school and the community

Adopted: January 26, 2009
INSTRUCTION

PHYSICAL EDUCATION EXTERNAL CREDIT

ADMINISTRATIVE GUIDELINES

Students who wish to earn External Physical Education credit must do the following:

1. An application must be completed by the student and submitted within the first two weeks of the beginning of the semester in which the Physical Education External Credit activity is to be undertaken.
2. Approval of the External Credit Committee must be obtained for participation in the activity.
3. Requirements are to be completed by the end of the semester for which approval has been granted.
4. The responsibility for submission of grades lies with the student. Grades should be submitted 10 days before the end of the semester in which the activity was taken. Grades are on a pass/fail basis.
5. Once approved, the activity must be completed or a grade of "F" will be assigned.
6. No more than .50 credit can be taken in a semester through the external credit program and no more than a total of 2 credits throughout the high school career.
7. A Proficient Physical Education External Credit includes a minimum of 60 hours for a semester long course and 30 hours for a quarter long course at an approved site and a summative narrative including the following:
   i. A detailed journal with descriptions of activities at the activity site. (for expectations see Appendix B)
   ii. A time sheet summary (see Appendix C)
   iii. Site Supervisor Evaluation Form (see Appendix D)
   iv. Student Evaluation Form (see Appendix E)
   v. Written thank-you letter from the student to the site supervisor (see sample in Appendix F)
8. A student may not choose a skill area that is included in the Physical Education Curriculum. The student must engage in a minimum of three different activities. These three activities must be a new exposure to the student.
9. Interscholastic and other programs such as AAU, travel teams, select teams, etc… are not options that would be accepted.
10. All students must complete the Physical Education requirement for graduation by completion of regular Physical Education courses or approved external credit.

External Credit Committee

1) The External Credit Committee will be comprised of the Director of Guidance, Department Head of Physical Education, and the assigned teacher.
2) The Physical Education Department Head will serve as chair of the Committee and will collect and collate all materials.
3) The Committee will be convened as needed to evaluate applications and materials submitted by the students enrolled in the course.

Adopted: January 26, 2009
APPENDIX A
Physical Education External Credit Activity

The Physical Education External Credit Activity is an active experience that is a minimum of 60 hours. The External Credit Activity allows the student to experience three activities for a minimum of twenty hours each. Please attach additional pages if necessary to further explain any area on the application.

Last Name: ___________________________ First Name: ___________________________

Student ID#: ___________________________ Grade: _______ Guidance Counselor: ___________________________

Street Address: __________________________________________ City: ___________________________ Zip: _______

Student E-mail: __________________________________________ Home Phone: ___________________________

Parent(s)/Guardian(s) Name(s): __________________________________________

Parent E-mail: __________________________________________ Parent Work Phone: ___________________________

Parent(s)/Guardian(s) Name(s): __________________________________________

Parent E-mail: __________________________________________ Parent Work Phone: ___________________________

Explain your rationale for choosing this External Credit option.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Describe the Physical Education activities you plan to engage in. Explain how the Physical Education External Credit will help you realize your Physical Education goals for leading a healthy lifestyle.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
What if any previous experiences do you have in these three activities?


List two high school teachers who can attest to your performance as a student and your ability to work independently:

Name: ____________________________  Subject: ____________________________


I hereby certify that the information on this application is true and accurate to the best of my knowledge.

Student Signature ____________________________  Date ____________  Parent Signature ____________________________  Date ____________
APPENDIX B

Journal Expectations

Directions: You will begin your journal at the start of your Physical Education External Credit activity. At least two dated journal entries are required for each week and turned in to the teacher weekly. One useful way of keeping track of what you are learning is to keep a personal journal of your activities. A journal encourages you to think about your experiences and can help give insight into what you are experiencing and feeling. To be most effective, the journal should not be merely a log of events. It should be a means to analyze or reflect on the activities you are performing and the new things you are learning. In addition, it helps you to recognize important events and to relate your stated objectives to what you perceive you are learning and doing.

Use the following to help you decide what information to include in your journal entries:

1. Description of Activities
   - Describe in as much detail as possible what you are doing in your experience.
   - How are these activities helping you reach your Physical Education goals?

2. The Organizational Setting
   - Who is supervising your activities?
   - Describe the atmosphere at your activity site.
   - Is it a cooperative or competitive atmosphere?
   - Is this a team or individual activity?

3. Journal Entries
   - Describe what you did for your Physical Education activity.
   - Describe daily highlights.
   - Describe what new skills or knowledge you have learned since beginning the activities.
   - How might these new skills or knowledge help you lead a healthy lifestyle?
   - Describe a typical day at your activity site.
   - How has your skill level changed since you first started?
   - What have you done at this activity that has made you feel accomplished? Why?
   - How did your coach/instructor/trainer become interested in this activity?
   - Will you pursue this interest when your Independent Study is completed?
   - What do you like the most or the least about your activity?
   - What skills do you use most often?
   - What personal qualities are helpful?
   - What are the major problems or frustrations in your activity?
   - What advice would you give to someone interested in this activity?
   - How will you apply these activities to your lifestyle?
   - Will these activities improve your personal health and wellness?
# Physical Education External Credit Time Sheet

<table>
<thead>
<tr>
<th>Name:</th>
<th>Location:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Activity:</th>
<th>Location:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Total Time</th>
<th>Supervisor Approval</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student Signature:  
Supervisor Signature:  
Date:  
Date:
APPENDIX D
Physical Education External Credit

Student Name: ___________________________ Site: ___________________________

Activity: ________________________________________________________________

Location: __________________________________________________________________

Note to Sponsor: This form was developed to help the Physical Education External Credit Committee determine the student's academic credit. It is suggested that you share this evaluation with the student before placing in a SEALED envelope and SIGNING over the flap. We realize that not all categories listed below may be applicable. Please check only those items you feel comfortable evaluating. Thank you for your assistance and cooperation.

<table>
<thead>
<tr>
<th>Personal Qualities</th>
<th>Excellent</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Accepts and fulfills responsibilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Exercises good judgment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is friendly and courteous</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Accepts responsibility with maturity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Works well with others</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Is dependable and reliable</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Is willing to accept suggestions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Conscientious in fulfilling assignments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Follows directions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Working to potential</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Is honest and sincere</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Asks appropriate questions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Reports to site on time/stays on task</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Is cooperative and industrious</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Is creative</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Shows initiative</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Is flexible</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please evaluate overall performance:

Circle one 10 9 8 7 6 5 4 3 2 1

Excelllent Above Average Average Below Average

Comments: __________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

Activity Supervisor's Signature: ___________________________ Date: ____________

Telephone Number: ___________________________ E-mail: ___________________________
APPENDIX E
STUDENT EVALUATION FORM

The following questions are designed to help you summarize your experience. Please answer these questions at the conclusion of your Physical Education External Credit Experience.

1. What specific skills did you learn?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

2. What is your overall rating of this experience?

Excellent: _______ Good: _______ Fair: _______ Poor: _______

3. If you had an excellent or good learning experience, what made it good or excellent?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

4. If your experience was fair or poor, please explain.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

5. My experience was:  □ Individual Activity
□ Non-Competitive Group Activity
□ Competitive Team Activity
□ Other

6. Additional comments:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
Instructions: The following list describes features of an appropriate Physical Education External Credit experience. Please describe your particular experience by checking the appropriate box that corresponds to your feelings.

<table>
<thead>
<tr>
<th></th>
<th>Strong Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Had adult responsibilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Had challenging tasks/activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Made important decisions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Discussed my experiences with significant people in my life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Offered input that was accepted</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Did interesting tasks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Performed tasks/activities instead of observing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Received training to do tasks/activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Received clear instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Had freedom to develop and use my own ideas</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Worked with adults who took a personal interest in me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Had freedom to explore my own interests</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Had a variety of tasks/skills to do</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Received help when needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Was appreciated as a team player</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Received feedback about my performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Felt I made a change to a healthy lifestyle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Achieved my original goals for this experience</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Was teachable or coachable</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
What have you learned or what areas have furthered your development as a result of your Physical Education External Credit? Evaluate your experiences and check the appropriate response for each question.

<table>
<thead>
<tr>
<th>Have You Gained:</th>
<th>Yes</th>
<th>No</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Maturation of physical/personal skills?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Self-motivation to learn, participate and achieve?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. An improved self-concept (sense of confidence, competence and awareness)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Willingness to try new experiences?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. An understanding of how these activities improved your personal health and or wellness.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Assertiveness and independence?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. An ability to accept consequences for your actions?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Knowledge of community organizations?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Responsibility for your life?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. A balance between family, friends, work, school, social activities, and exercise?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. An awareness of community resources?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Realistic ideas about the world of physical activity?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Knowledge about a variety of skills and movement forms?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. More efficient use of leisure time?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. An ability to use these activities to increase your own personal health and wellness?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student

Date

Site Supervisor

Date

External Credit Committee Chair

Date

Supervising Physical Education Teacher

Date
APPENDIX F
STUDENT THANK YOU LETTER

Please note that this is an idea starter. You should send a thank you letter to each site supervisor. Below are some bullets with ideas on how to get going. Use your own words. Be sincere.

Date:
Dear ____________________

Sincerely,
_____________________

YOUR THANK YOU LETTER SHOULD CONTAIN:
- Thanks for the help and encouragement
- Thanks for the time and consideration given to you
- Your appreciation for their efforts
- Gratefulness in sharing their experience and things learned
- Any special things you learned/happened
- How this benefited you
- What future use this would be to you
- Any motivation to do something different
BUSINESS 3150

Adoption of the Budget

On or before February 11 of each year, the Board will adopt a budget request for the next fiscal year.

Before adopting the budget request, the Board will study the school budget in relation to present and future needs of the students, the parents, and the community. To make the budget a comprehensive reflection of the financial needs of the school program, steps will be taken to involve the professional, non-certified, and administrative staff in its development. The Board of Education will adopt a final budget not later than the first regularly scheduled Board meeting in June of each year.

Adopted: April 8, 1974
Revised: March 12, 2012
STATEMENT

The Manchester Board of Education is committed to creating and maintaining an educational environment free from bullying, harassment and discrimination. In accordance with state law and the Board’s Safe School Climate Plan, the Board expressly prohibits any form of bullying behavior on school grounds; at a school-sponsored or school-related activity, function or program, whether on or off school grounds; at a school bus stop; on a school bus or other vehicle owned, leased or used by a local or regional board of education; or through the use of an electronic device or an electronic mobile device owned, leased or used by Board of Education.

The Board also prohibits any form of bullying behavior outside of the school setting if such bullying (i) creates a hostile environment at school for the student against whom such bullying was directed, (ii) infringes on the rights of the student against whom such bullying was directed at school, or (iii) substantially disrupts the education process or the orderly operation of a school. Discrimination and/or retaliation against an individual who reports or assists in the investigation of an act of bullying is likewise prohibited.

Students who engage in bullying behavior shall be subject to school discipline, up to and including expulsion, in accordance with the Board’s policies on student discipline, suspension and expulsion, and consistent with state and federal law.

Public Act 11-232, An Act Concerning the Strengthening of School Bullying Laws
Conn. Gen. Stat. § 10-222d
Conn. Gen. Stat. §§ 10-233a through 10-233f
Connecticut State Department of Education Circular Letter C-8,
Series 2008-2009 (March 16, 2009)
Public Act No. 08-160

Adopted: June 27, 2003
Revised: December 18, 2006
Revised: June 11, 2007
Revised: February 23, 2009
Revised: November 28, 2011
Revised: January 23, 2012
Revised:
ADDENDUM

The Manchester Board of Education has the responsibility to create and maintain a school environment free from bullying, harassment and discrimination. Safe School Climate Plan represents a comprehensive approach to promoting a school climate in which bullying is not tolerated by students and school employees.

I. Definition of Bullying

A. “Bullying” means the repeated use by one or more members of the school community of a written, verbal or electronic communication, such as cyber-bullying, or a physical act or gesture directed at another student attending school in the same district that:

1. causes physical or emotional harm to such student or damage to such student’s property;
2. places such student in reasonable fear of harm to himself or herself, or of damage to his or her property;
3. creates a hostile environment at school for such student;
4. infringes on the rights of such student at school; or
5. substantially disrupts the education process or the orderly operation of a school.

B. Bullying includes, but not be limited to, a written, verbal or electronic communication or physical act or gesture based on any actual or perceived differentiating characteristics, such as race, color, religion, ancestry, national origin, gender, sexual orientation, gender identity and expression, socioeconomic status, academic status, physical appearance, or mental, physical, developmental or sensory disability, or by association with an individual or group who has or is perceived to have one or more of such characteristics.

II. Other Definitions

A. "Cyber-bullying" means any act of bullying through the use of the Internet, interactive and digital technologies, cellular mobile telephone or other mobile electronic devices or any electronic communications.

B. "Electronic communication" means any transfer of signs, signals, writing, images, sounds, data or intelligence of any nature transmitted in whole or in part by a wire, radio, electromagnetic, photo-electronic or photo-optical system;

C. "Hostile environment" means a situation in which bullying among students is sufficiently severe or pervasive to alter the conditions of the school climate;

D. "Mobile electronic device" means any hand-held or other portable electronic equipment capable of providing data communication between two or more individuals, including, but not limited to, a text messaging device, a paging device, a personal digital assistant, a laptop computer, equipment that is capable of playing a video game or a digital video disk, or equipment on which digital images are taken or transmitted;

E. "Outside of the school setting" means at a location, activity or program that is not school related, or through the use of an electronic device or a mobile electronic device that is not owned,
ADDENDUM

STUDENTS
Safe School Climate Plan
leased or used by a local or regional board of education;

F. "Prevention and intervention strategy" may include, but is not limited to,

(1) implementation of a positive behavioral interventions and supports process or another
evidence-based model approach for safe school climate or for the prevention of bullying identified
by the Department of Education, (2) school rules prohibiting bullying, harassment and
intimidation and establishing appropriate consequences for those who engage in such acts, (3)
adequate adult supervision of outdoor areas, hallways, the lunchroom and other specific areas
where bullying is likely to occur, (4) inclusion of grade-appropriate bullying education and
prevention curricula in Kindergarten through high school, (5) Individual interventions with the
student found to be engaged in bullying behavior, parents and school employees, and
interventions with the student who experienced the bullying, parents and school employees, (6)
School-wide training related to safe school climate,(7) Student peer training, education and
support, and (8) Promotion of parent involvement in bullying prevention through individual or
team participation in meetings, trainings and individual interventions.

G. "School climate" means the quality and character of school life with a particular focus on the
quality of the relationships within the school community between and among students and adults.

H. "School employee" means (1) a teacher, substitute teacher, school administrator, school
superintendent, guidance counselor, psychologist, social worker, nurse, physician, school
paraprofessional or coach employed by a local or regional board of education or working in a
public elementary, middle or high school; or (2) any other individual who, in the performance of
his or her duties, has regular contact with students and who provides services to or on behalf of
students enrolled in a public elementary, middle or high school, pursuant to a contract with the
local or regional board of education.

I. “School-Sponsored Activity” means any activity conducted on or off school property (including
school buses and other school-related vehicles) that is sponsored, recognized or authorized by the
Board of Education.

III. Prohibition Against Bullying and Retaliation

A. The Board prohibits any form of bullying behavior on school grounds; at a school-sponsored or
school-related activity, function or program whether on or off school grounds; at a school bus
stop; on a school bus or other vehicle owned, leased or used by a local or regional board of
education; or through the use of an electronic device or an electronic mobile device owned,
leased or used by the Board of Education.

B. The Board also prohibits any form of bullying behavior outside of the school setting if such
bullying (i) creates a hostile environment at school for the student against whom such bullying
was directed, (ii) infringes on the rights of the student against whom such bullying was directed
at school, or (iii) substantially disrupts the education process or the orderly operation of a school.

C. The Board also prohibits discrimination and/or retaliation against an individual who reports or
assists in the investigation of an act of bullying.

D. Students who engage in bullying behavior in violation of Board Policy and the Safe School
Climate Plan will be subject to school discipline, up to and including expulsion, in accordance
with the Board's policies on student discipline, suspension and expulsion, and consistent with
state and federal law.
IV. Leadership and Administrative Responsibilities

A. Safe School Climate Coordinator

The Manchester Board of Education directs the Superintendent to appoint a District Safe School Climate Coordinator. The Superintendent will communicate, in writing, the name and contact information of the District Safe School Climate Coordinator annually. The Coordinator will:

1. be responsible for implementing the district’s Safe School Climate Plan;
2. collaborate with Safe School Climate Specialists, the Board, and the Superintendent to prevent, identify and respond to bullying in district schools;
3. provide data and information, in collaboration with the Superintendent, to the Department of Education regarding bullying;
4. meet with Safe School Climate Specialists at least twice during the school year to discuss issues relating to bullying in the school district and to make recommendations concerning amendments to the district’s Plan.

B. Safe School Climate Specialist

The principal of each school (or principal’s designee) will serve as the Safe School Climate Specialist. The Principal will communicate, in writing, the name and contact information of the District Safe School Climate Coordinator annually. The Safe School Climate Specialist will investigate or supervise the investigation of reported acts of bullying and act as the primary school official responsible for preventing, identifying and responding to reports of bullying in the school.

V. Development and Review of Safe School Climate Plan

A. The Principal of each school will establish a committee in the school to be responsible for developing and fostering a safe school climate and addressing issues relating to bullying in the school. Such committee will include teachers and special services staff as well as at least one parent/guardian of a student enrolled in the school, as appointed by the school principal. The Principal will communicate, in writing, the names and contact information of the School Climate Committee annually.

B. This committee will: 1) receive copies of completed reports following bullying investigations; 2) identify and address patterns of bullying among students in the school; 3) review and amend school policies relating to bullying; 4) review and make recommendations to the Coordinator regarding the Safe School Climate Plan based on issues and experiences specific to the school; 5) educate students, school employees and parents/guardians on issues relating to bullying; 6) collaborate with the Coordinator in the collection of data regarding bullying; and 7) perform any other duties as determined by the principal that are related to the prevention, identification and response to school bullying.

C. Any parent/guardian serving as a member of the Committee will not participate in any activities that may compromise the confidentiality of any student, including receiving copies of
investigation reports, or identifying or addressing patterns of bullying among students in the school.

D. The School Climate Plan will be available on the district’s and each school’s web site, all student handbooks, and any school publications that include the rules, procedures, and standards of conducts

E. The Manchester Public Schools District Safe School Climate Coordinator will ensure that all staff receive annual training on the safe school climate plan.

VI. Procedures for Reporting and Investigating Complaints of Bullying

A. Parents (or guardians of students) must file written reports of bullying. A form will be available in the school’s office to report a bullying complaint. Written reports of bullying will include the time and place of the alleged conduct, the number of incidents, the target of the suspected bullying, and the names of potential witnesses. The building principal will receive such reports and forward them to the Safe School Climate Specialist for review and actions consistent with the Plan.

B. Students may make written anonymous reports of bullying. Anonymous complaints must be made to any school professional employee. If the student requests anonymity when making a report, the Safe School Climate Specialist will meet with the student to review the request for anonymity and discuss the impact that maintaining the anonymity of the complainant may have on the investigation and on any possible remedial action. Anonymous complaints will be reviewed and reasonable action will be taken to address the complaint. The Safe School Climate Specialist will not disclose the source of the complaint, and any disclosure must be consistent with the due process rights of the student(s) alleged to have committed acts of bullying. No disciplinary action will be taken solely on the basis of an anonymous complaint.

C. School employees who witness acts of bullying or receive reports of bullying will orally notify the Safe School Climate Specialist or another school administrator if the Safe School Climate Specialist is unavailable, as soon as reasonably possible but no later than one (1) school day after such school employee witnesses or receives a report of bullying. The school employee will then file a written report with the Safe School Climate Specialist no later than one (1) school days after making such oral report.

D. The Safe School Specialist will be responsible for reviewing any anonymous reports of bullying and will investigate or supervise the investigation of all reports of bullying and ensure that such investigation is completed promptly after receipt of any written reports. In order to allow the school to investigate all complaints adequately the parent of the student suspected of being bullied must provide written consent to permit the release of that student’s name to those third parties that the Safe School Climate Specialist contacts as part of the investigation.

E. In investigating reports of bullying, the Safe School Climate Specialist will consider all available information known, including the nature of the allegations and the ages of the students involved, interview witnesses, as necessary, reminding the alleged perpetrator and other parties that retaliation is strictly prohibited and will result in disciplinary action.

VII. Responding to Verified Acts of Bullying

A. If acts of bullying are verified following the investigation, the Safe School Climate Specialist will:
1. Notify the parents or guardians of the students against whom such acts were directed as well as the parents or guardians of the students who commit such acts of bullying of the finding not later than forty-eight hours after the investigation is completed. This notification will include a description of the school’s response to the acts of bullying and be consistent with the statutory privacy rights of students, including the perpetrator of such bullying. The specific disciplinary consequences imposed on the perpetrator, or personally identifiable information about a student may not be disclosed except as provided by law.

2. Invite the parents or guardians of the student who commits any verified act of bullying and the parents or guardian of the student against whom such act was directed to a meeting to communicate the measures being taken by the school to ensure the safety of the student/victim and to prevent further acts of bullying. The invitation must include a description of the school’s response to such acts, along with consequences, as appropriate. At the discretion of the Safe School Climate Specialist and with written consent of the parents/guardians involved, the meeting(s) may be held jointly.

3. Develop a student safety support plan for any student against whom an act of bullying was directed. Such support plan will include safety measures to protect against further acts of bullying.

4. Develop a case-by-case intervention plan to address repeated incidents of bullying against single individual or recurrently perpetrated bullying incidents by the same individual, which may include counseling and discipline.

5. Coordinate an investigation with other appropriate district personnel if the bullying complaint raises concern about discrimination or harassment on the basis of a legally protected classification (such as race, religion, color, national origin, sex, sexual orientation, age or disability).

If the investigation concludes that bullying has not occurred, the Safe School Climate Specialist will notify the parents or guardians of the finding not later than forty-eight hours after the investigation is completed.

B. If the principal reasonably believes that any act of bullying constitutes a criminal offense, he/she will notify the Manchester Police Department.

VIII. Documentation and Maintenance of Log

A. Each school will maintain written complaints of bullying, along with supporting documentation received and/or created as a result of bullying investigations, consistent with the Board’s obligations under state and federal law. Any educational record containing personally identifiable student information pertaining to an individual student shall be maintained in a confidential manner, and shall not be disclosed to third parties without prior written consent of a parent, guardian or eligible student, except as permitted under Board policy and state and federal law.

B. The principal of each school will maintain a tally of each verified act of bullying in the school and this list will be available for public inspection upon request. The list will not identify any of these particulars of each verified act, including, but not limited to any personally identifiable student information.

C. The principal will annually report the number of verified acts of bullying in the school to the
IX. Other Prevention and Intervention Strategies

A. To protect students from further acts of bullying, the school administration will develop a written intervention plan to address repeated incidents of bullying against a single individual or recurrently perpetrated bullying incidents by the same individual.

B. Prevention and intervention strategies may include non-disciplinary and disciplinary responses to enforce the Board’s prohibition against bullying.

1. Non-disciplinary interventions may include:
   a. counseling;
   b. increased monitoring and supervision of students;
   c. peer mediation;
   d. positive behavioral interventions and support systems to create a safe and positive school climate;
   e. rules and consequences designed to prevent bullying behavior;
   f. adequate adult supervision in specific areas where bullying is likely to occur;
   g. grade appropriate bullying prevention curriculum for all grades;
   h. intervention strategies with the perpetrator, the perpetrator’s parents and school staff; and interventions with the bullied student, parents, and school staff;
   i. staff training related to a safe school climate;
   j. student peer training, education, and support;
   k. promotion of parent involvement in bullying prevention through individual or team participation in meetings, trainings and individual interventions;
   l. planned professional development programs addressing prevention and intervention strategies, which training may include school violence prevention, conflict resolution and prevention of bullying, with a focus in evidence based practices concerning same;
   m. modeling by teachers of positive, respectful, and supportive behavior toward students;
   n. creating a school atmosphere of team spirit and collaboration that promotes appropriate social behavior by students in support of others;
   o. employing classroom strategies that instruct students how to work together in a collaborative and supportive atmosphere;
   p. yoga, mindfulness, or other calming activities
   q. use of therapy dogs in schools and classrooms
   r. implementation of a social emotional learning curriculum

2. Disciplinary interventions

When acts of bullying are verified and a disciplinary response is warranted, students are subject to the full range of disciplinary consequences consistent with the Board’s discipline policy. No disciplinary action will be taken based solely on anonymous complaints

3. Other Prevention and Intervention Strategies

Administrators, teachers and other professional employees will educate students about bullying and help eliminate bullying behavior through class discussions, counseling, and reinforcement of socially-appropriate behavior.
Administrators, teachers and other professional employees will intervene promptly whenever they observe student conduct that has the purpose or effect of ridiculing, harassing, humiliating or intimidating another student, even if such conduct does not meet the formal definition of “bullying.”

X. Annual Notice and Training

A. The principal will annually provide students, parents or guardians of students the process by which students may make reports of bullying.

B. At the beginning of each school year, the Superintendent will provide all employees with a written or electronic copy of the school district’s safe school climate plan.

C. All school employees will annually receive training on the identification, prevention and response to bullying as required by law. The Manchester Public Schools District Safe School Climate Coordinator will ensure that all staff receive annual training on the safe school climate plan.

XI. School Climate Assessments

The Board of Education requires each school in the district to complete an assessment using the school climate assessment instruments disseminated by the Department of Education. The Superintendent’s Office will collect the school climate assessments for each school in the district and submit such assessments to the Department of Education.

School principals will annually include, within their school improvement plans, strategies to improve the quality of school climate based on assessments of school climate, and behavioral data including but not limited to behavior that may constitute or lead to bullying or harassment.
MANCHESTER PUBLIC SCHOOLS
REPORT OF BULLYING FORM/INVESTIGATION SUMMARY
(Please review Student Policy 5131/1 for further information on Bullying and School Climate)

School: ____________________________  Date: ____________________________

Reporter Information:
- Anonymous student
- Staff member (Name: ____________________________)
- Parent/Guardian (Name: ____________________________)
- Student (Name: ____________________________)

Describe the alleged act of what happened:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Who committed the alleged bullying act? ____________________________
Who was the target(s)? ____________________________
Time(s) of day alleged act(s) happened: ____________________________
Frequency of alleged bullying (Only once, daily, 2x/week, etc.): ____________________________
Location alleged bullying occurred (If by electronic device, please specify type and if possible attach any supporting documents, usernames, etc.): ____________________________

Please write the name(s) of any potential witness: ____________________________

After completing the above information, please give this form to your building principal.

Parent/Guardian must also complete and attach the “Report of Bullying/Consent to Release Student Information” form when submitting this report to begin investigation.

Building Administrator Use Only:

Describe what action the reporter took (i.e. students were separated, office was called, police was called, etc.):

Administration Investigation Notes:

________________________________________________________________________
________________________________________________________________________

Was bullying verified? (If yes, you must do the following:) Yes ☐  No ☐

- Parent/Guardian of victim(s) and perpetrator(s) were notified within 48 hours of investigation. Date: ____________
- The notification included the mandatory statutory privacy rights and due process rights of students. Date: ____________
- Parent/Guardian of perpetrator(s) was notified of specific disciplinary consequences imposed. Date: ____________
- Parent/Guardian of victim(s) and perpetrator(s) were invited to attend a meeting to review. Date: ____________
  (Meetings should be separate unless both parties agree and give consent to a joint meeting.)
- A Student School Safety Plan was developed. (Attach with this form)
- (If applicable) A case-by-case intervention plan was developed for repeat incidents against a single individual or recurrently perpetrated bullying incidents by the same individual which may include counseling, etc.
- (If applicable) The Manchester Police Department was notified.
- ESchool and the principal’s records have been updated and reflect the verified act of bullying.
- A copy of this form was forwarded to the District School Climate Coordinator and Director of Pupil Personnel Services.

Other: __________________________________________________________________

Administrator Signature: ____________________________  Date: ____________________________
MANCHESTER PUBLIC SCHOOLS
REPORT OF BULLYING/CONSENT TO RELEASE STUDENT INFORMATION

Date:  
Name of Student:  
School:  

To Parent/Guardian:

A complaint of bullying has been filed on behalf of your child alleging that he/she has been the victim of bullying. In order to facilitate a prompt and thorough investigation of the complaint, the Manchester Public Schools may need to disclose the name of your child and/or other information which may otherwise disclose your child’s identity.

(Please check one):

☐ I hereby give permission for the Manchester Public Schools to disclose my child’s name, along with any other information necessary to permit the district to adequately and appropriately investigate such complaint, to third parties contacted by the district as part of its investigation.

☐ I do NOT give permission for the Manchester Public Schools to disclose my child’s name, along with any other information necessary to permit the district to adequately and appropriately investigate such complaint, to third parties contacted by the district as part of its investigation.

_________________________________  ________________________
Signature of Parent/Guardian          Date

_________________________________
Name (Please print)
Manchester Public Schools
Student Safety Plan

The below student has been identified as a victim of substantiated mean-spirited behavior. New state law and school policy requires there must be a safety plan for named student.

If you have received a copy of this plan, you are responsible to read and implement this safety plan.

Student Name: ___________________________ Grade: ___________ School: ___________________________

Primary Staff /Contact Person: ___________________________ Classroom Teacher/Team Leader: ________________

Plan Start Date: ________________ Plan End Date: ________________ Plan Review Date: __________________

A. School/Staff (Check all that apply)

☐ All appropriate school staff will be informed of this plan and will make every effort to implement successfully.

☐ Any staff that becomes aware of hears of any mean spirited behavior against this student will intervene immediately and report it to the building principal.

☐ Mr./Ms. ___________________________ has been designated as the primary point of contact (trusted adult) for this student.

☐ Mr./Ms. ___________________________ has been informed about the situation and will keep the student and his/her aggressor separated in the classroom and during class activities.

☐ Classroom teachers have been informed about the situation and will keep students separated in the classroom and during staff activities.

☐ Security officers (or other appropriate staff) will be visible in hallways and monitoring the student during passing times.

☐ The student will visit ___________________________ at a designated time daily to ensure that the plan is working. If student does not or cannot visit, the above designated person will locate and check with the student.

☐ The bus driver will be instructed to intervene and report any bus incidents immediately to the principal.

☐ The school will immediately report any mean-spirited behavior to the student’s parents.

☐ Other: ___________________________

☐ Other: ___________________________

B. The Student (check all that apply)

☐ The student will not have face-to-face or electronic contact with perpetrator while this plan is in effect.

☐ The student will identify with the social worker/guidance counselor who his/her safe and trusted friend is.

☐ The student will remain as close as possible with his/her trusted friend during the school day.

☐ The student will visit ___________________________ on a daily basis at _______________________________ to check to see that the plan is working.

☐ The student will share all passwords and “friend” his parents on all social networking sites so his/her parents can monitor.

☐ The student will report any mean behavior immediately to his/her trusted adult, teacher or parents.

☐ Other: ___________________________

☐ Other: ___________________________
Parent/Family (Check all that apply)

- The parents or other family members agree to support this student with this safety plan, monitor the use of technology and contact the school if the problem persists.
- Parents are welcome to contact the school to check on effectiveness of this plan.
- Other: ________________________________
- Other: ________________________________

All parties understand that if the mean-spirited behavior persists or escalates, law enforcement may need to be called.

This plan is in place from ___________________________ through ___________________________ at which time it will be reviewed, revised, discontinued, or continued, if necessary.

We agree to the above safety plan:

_____________________________________________  _______________________________________
Student                                          Parent

_____________________________________________  _______________________________________
Principal                                         Other

Completed/Modified/Extended ___________________________  Date
Manchester Public Schools

Use of Therapy Dogs in Schools

The school district supports the use of therapy dogs for the benefit of its students subject to the conditions of this policy. Benefits from working or visiting with a therapy dog include reduced stress, improved physical and emotional well being, lower blood pressure, decreased anxiety, improved self esteem and normalization of the environment, increasing the likelihood of a successful academic achievement by the student.

Animal Assisted Activities and Animal Assisted Interactions are non goal-driven interactions where the specific content of the visit is spontaneous and is meant to provide motivational, educational and/or recreational activities that enhance the quality of life.

Animal Assisted Therapy is a goal-driven intervention which is directed and/or delivered by a health, human or education service professional and is meant to improve physical, social, emotional and/or cognitive functioning of an individual.

A therapy dog is a dog who has been individually trained, evaluated and registered with his/her handler to provide animal assisted activities, animal assisted therapy and animal assisted interactions within a school or other facility. Therapy dogs are not "emotional support animals" or "service animals."

A handler is an individual school district staff member or volunteer who owns a therapy dog and who has been individually trained, evaluated and registered with his/her therapy dog to provide animal assisted activities, animal assisted therapy and animal assisted interactions within a school or other facility.

A therapy dog is the personal property of the handler and is not the property of the school district. The handler shall assume full responsibility for the therapy dog's care, behavior and suitability for interacting with students and others in the school while the therapy dog is on school district property.

Therapy Dog Standards and Procedures

The following requirements must be satisfied before a therapy dog will be allowed in school buildings or on school district property:

Request: A handler who wishes to bring a therapy dog to school district property shall first submit a completed written request form to the Superintendent or the Superintendent’s designee, for approval. (The request form is attached to this policy.) The request shall be submitted for approval each school year and/or whenever the handler wishes to use a different therapy dog. Such approval may be rescinded at any time at the sole discretion of the superintendent.

Training and Registration: The handler shall submit proof of registration as a therapy dog handler with each individual therapy dog he or she plans to bring to the school district. Such registration shall be from the Intermountain Therapy Dog, Pet Partners, Bright and Beautiful or such other therapy dog registering
organization as determined by the superintendent. Such registration shall be from an organization that requires an evaluation of the therapy dog and handler prior to registration and at least every two years and shall remain current and in good standing at all times.

**Health and Vaccination:** The handler shall submit proof from a licensed veterinarian that the therapy dog is in good health and has been immunized against diseases common to dogs. Such vaccinations shall be kept current and up to date all times.

**Licensing:** The handler shall submit proof of licensure from the local dog licensing authority.

**Insurance:** The handler must submit a copy of an insurance policy that provides liability coverage for the work of the handler and therapy dog while the two are on school district property.

Once a handler has been approved by the superintendent to bring a therapy dog on school district property, such handler shall adhere to the rules of his/her registering organization and the following rules of the school district:

**Identification:** The handler and therapy dog shall wear appropriate identification issued by the registering organization identifying them as a registered handler and therapy dog. The handler shall bring only registered therapy dogs onto school district property and may bring only one such dog at a time. The handler shall not bring young children along to the school district when handling a therapy dog.

**Health and Safety:** The handler shall ensure that the therapy dog does not pose a health and safety risk to any student, employee, or other person at school and that the therapy dog is brought to the school district only when properly groomed, bathed, free of illness or injury and of the temperament appropriate for working with children and others in the schools.

**Control:** The handler shall ensure that the therapy dog wears a collar or harness and a leash no longer than four feet and shall maintain control of the therapy dog by holding the leash at all times that the therapy dog is on school district property, including during breaks, unless holding such leash would interfere with the therapy dog's safe, effective performance of its work or tasks. However, the handler shall maintain control of the therapy dog at all times and shall not tether the therapy dog to any individual or object.

**Supervision and Care of Therapy Dog:** The handler shall be solely responsible for the supervision and humane care of the therapy dog, including any feeding, exercising, and cleaning up after the therapy dog while the therapy dog is in a school building or on school property, shall not leave the therapy dog unsupervised or alone on school property at any time and shall limit the therapy dog's work to two consecutive hours at a time. The school district is not responsible for providing any care, supervision or assistance to the therapy dog.

**Authorized Area(s):** The handler shall ensure that the therapy dog has access to only such areas of the school buildings or properties that have been authorized by school district administrators.
Allergies and Aversions: The handler shall remove the therapy dog to a separate area as designated by the school administrator in such instances where any student or school employee who suffers dog allergies or aversions is present in an office, hallway or classroom.

Recordkeeping: Volunteer handlers shall sign themselves and their therapy dog in upon arrival at any school and shall sign both out on departure from the building. Handlers who are school district staff shall sign in their therapy dog upon arrival and sign him/her out on their departure.

Photographs: The handler shall not take any photographs of students or staff without first obtaining a photo release.

Fees and Gratuities: The handler shall not charge a fee for the work they perform with the therapy dog, shall not borrow money or personal items or receive any personal gratuity, gift or tip, such as money or jewelry from students in the district.

Multiple Therapy Dogs on Site: The handler shall confirm whether or not there will be any other therapy dog(s) on site prior to scheduling any visit with a therapy dog and shall take steps with appropriate staff to ensure that the dogs do not engage inappropriately while on school property. When multiple therapy dogs are engaged in a planned activity on school district property, the handlers shall ensure that the dogs have an opportunity to greet each other prior to entering the school building. Once inside the building, the handlers shall ensure that the dogs are each on a four-foot leash, given work space at least eight feet from each other and are given no opportunity for contact or socialization with each other while working.

Damages and Injuries: The handler shall assume full responsibility and liability for any damage to school property or injury to district staff, students or others in the school caused by the therapy dog.

Exclusion or Removal from School District Property: A therapy dog may be excluded from school district property if a school administrator determines that: (1) The handler does not have control of the therapy dog; (2) The therapy dog is not housebroken; (3) The therapy dog presents a direct and immediate threat to others in the school; or (4) The therapy dog’s presence otherwise interferes with the educational program. The handler shall immediately remove his/her therapy dog from school property when instructed to do so by a school administrator.