



**Watervliet City School District &
Boys and Girls Clubs of the Capital Area
2557 10th Avenue, Watervliet NY 12189
(518) 629-3263 Fax (518) 629-3250
PreK 4-Year Old Program Application Information**

You will need to provide all documentation to register for the 4 yr old Pre-K Program. Registration packets are available on the district website www.watervlietcityschools.org or from 8am-3pm at the Watervliet Elementary School. Completed applications/documents should be brought to your registration appointment on March 19th or 20th. After that date, you can drop off the materials at the front door. Please contact Danielle Mele, dmele@vlietschools.org or 629-3263 to make an appointment.

Packets are due no later than April 20th, 2024 to be considered for the lottery.

The Watervliet City School District is pleased to announce that our community-based partner (CBO) for our 4-year-old UPK program is Boys and Girls Clubs of the Capital Area.

The classes will run from 8am-2pm at the **Watervliet Elementary School**. The students will be provided with breakfast and lunch. This program is *free* to all who participate.

**PLEASE RETURN THE FOLLOWING ITEMS WITH YOUR REGISTRATION PACKET:
(YOUR APPLICATION CANNOT BE PROCESSED WITHOUT ALL OF THE FOLLOWING)**

1. **Completed Application**
2. **Proof of Residency:**
Acceptable proof of residence: Mortgage or property tax statement, Residential Unit Client Certificate (RUCC), Copy of lease, or notarized statement from landlord
3. **Child's Birth Certificate**
(Child/ren must be age 4 by December 1, 2024 to attend the Pre-K 4-year-old Program)
4. **Child's Immunization Record and recent physical**
5. **Custody Paperwork**
If applicable, please attach a complete certified copy of the court decision bearing its case number, official stamp and signature. It is the responsibility of the parent/legal guardian to inform Watervliet UPK of any subsequent modifications during the child's enrollment.

Placements are limited and will be assigned through a lottery system if oversubscribed. Applications not initially selected will be placed on a waiting list and called when a space becomes available.

IF YOUR APPLICATION IS SELECTED YOU WILL RECEIVE AN ACCEPTANCE LETTER/CALL BY JUNE 2, 2024.

Before and After Care is available for a fee and is provided by Watervliet Civic Center.
Transportation is not provided.

Before your child can begin attending school in September, s/he will need:

- A complete annual physical exam and recorded lead levels.
- An Emergency Treatment Form
- Day Care Registration Card (Blue card with photo)
- Permission for exchange of information
- Permission to apply sunscreen
- Health Care Plan (if needed)
- Release from school
- Medication consent (if necessary)

**First Day Registration
Watervliet City School District**

Student Information

Student ID # _____

Student's Last Name _____ First Name _____ Middle Initial _____

Male Female Non Binary Preferred Pronouns _____

Grade: _____ Date of Birth: _____ (MM/DD/YYYY)

Mailing Address _____ City _____ NY, Zip Code _____

Home Phone _____ Work Phone : _____

Students Place of Birth: City _____ State _____ Country _____

Language spoken in home: English _____ Other _____

Ethnic Category: Hispanic Not Hispanic

Race: White Black American Indian/Alaskan Asian Pacific Islander Other

Residence Type: Own Rent Lease Unknown

Family Information

Name: _____ Date of Birth: _____

Mother Father Legal Guardian Relation _____

Place of Employment: _____ Occupation _____

Home Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email address _____

Name: _____ Date of Birth: _____

Mother Father Legal Guardian Relation _____

Place of Employment: _____ Occupation _____

Home Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email address: _____

Parent(s) in active Military status: Yes: _____ No: _____

Parents: Married Divorced Separated Widowed Single

If parents are separated, what legal arrangements are in place:

Joint Custody Sole Custody Visitation Rights Foster Students

NOTE: A complete certified copy of the court custody decision bearing its case number and including the official stamp and signature are required

Mail from school should be addressed to (check one): Both Parents Mother Father Guardian

Please list all previous schools child has attended:

Name	Address	State	Country	Entry Date	Exit Date
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____

Brothers or Sisters in School

1. _____	Grade _____	School _____
2. _____	Grade _____	School _____
3. _____	Grade _____	School _____
4. _____	Grade _____	School _____

EMERGENCY DATA

In case of an emergency, illness, accident or removal from school due to discipline issues we will contact the parent/guardian first. If we are unsuccessful the following adults listed will be contacted. Please inform these people that are listed as emergency contacts for your child. If your child needs to leave school, only the listed adults, including parents, will be allowed to sign him /her out.

In case of early dismissal or a "go home" drill, where should your child go? Home: _____

If not dismissed to home, then please list the location: _____

Responsible adult's name. _____

PLEASE NOTE: Please indicate with your emergency contacts if the phone is home, work or cell.

- 1. Contact _____ Relationship _____ Phone: _____ (h)(w)(c)
- 2. Contact _____ Relationship _____ Phone: _____ (h)(w)(c)
- 3. Contact _____ Relationship _____ Phone: _____ (h)(w)(c)

Physician to Be Called in an Emergency _____ Phone : _____

In Case Of an Emergency, Hospital Preferred _____

Please list any serious illness such as Heart Disease, Diabetes, Epilepsy, severe allergies, eye or ear problems or any chronic condition, etc. Please include any operation or serious injury, eg. fractures, severe laceration requiring sutures, etc.

Does student have an IEP or 504 Plan with Special Education? YES [] NO []

I understand that if I provide false information on the registration forms and/or on the supporting materials that I may be committing the crime of perjury in the third degree (a class A misdemeanor); if I provided false information on these forms to the Watervliet City School District with the intent to defraud the District, I may be committing the crime of perjury in the second degree (a class E Felony); and I may be prosecuted on criminal charges for such false information.

Signature of parent/guardian _____ Date _____

Watervliet City School District

Registrar's Office

2557 10th Ave, Watervliet, NY 12189

STUDENT RACIAL AND ETHNIC IDENTIFICATION

Parent/Guardian: The Watervliet City School District has adopted a policy which requires the collection and recording of the ethnic identity of students of the Watervliet School District in accordance with federal categories and definitions. The information will be used to :

- Report information to the State and Federal Education Departments
- Plan educational programs and make sure that they are readily available to all students
- Analyze differences in academic performance attendance and completion of school

We need your help in order to accomplish this task. Please review the Racial/Ethnic definitions on the back of this page. Put a check in the box for the category or categories which best describe your child. The Watervliet City School District understands the sensitive nature of this information and wishes to assure you that it will be kept secure and confidential in accordance with all state and federal student privacy laws and regulations. If the information requested is not provided on this form on behalf of your child, a student records officer from the school or district will be required to identify the group to which the student appears to belong. Thank you for your cooperation.

CONFIDENTIALTY PROCEDURES AND REGULATIONS

To School Staff: This form will be filed in the student's permanent record as confidential informational.

To the Parent/Guardian: The information, which you have provided, on this form is confidential. It is protected by the Confidentiality Regulations cited below.

"The Family Educational Rights and Privacy Act (1974) prohibits unauthorized access to student records and unauthorized release of any student record information identifiable by either student name or student identification number"

Watervliet City School District- Registrar's Office
2557 10th Avenue
Watervliet NY 12189

STUDENT RACIAL AND ETHNIC IDENTIFICATION

All students between 5 and 21 years of age have the right to a free public education. Children may not be refused admission because of race, color, creed or national origin, sex, citizenship, handicap condition or immigration status.

Name of School: _____

Student Name: _____

Date of Birth: _____ Grade: _____

Please read and answer questions 1 and 2. For question 1, please check the box that best describes your child.

1. Is the student Hispanic, Latino, or of Spanish origin? Hispanic, Latino, or of Spanish origin, means a person Cuban, Mexican, Puerto Rican, Central or South American or other Spanish culture or origin regardless of race.

___ Yes- Hispanic

___ No- Not Hispanic

2. Select one or more races from the following racial groups (please specify all that apply)

___ **AMERICAN INDIAN OR ALASKA NATIVE:** A person having origins in North and South America (Including Central America), and who maintains tribal affiliation or community attachment.

___ **ASIAN:** A person having origins in any of the original people of the Far East, Southeast Asia or the Indian Subcontinent including for example- Cambodia, China, India, Japan, Korea, Malaysian, Pakistan, the Philippines Islands, Thailand and Vietnam.

___ **NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

___ **BLACK OR AFRICAN AMERICAN:** A person having origins in any of the racial groups in Africa.

___ **WHITE-** A person having origin in any of the original peoples of Europe, North Africa or the Middle East.

Signature or Parent/Guardian

Date (MM/DD/YYYY)

**Watervliet City School District
Residency Questionnaire**

Name of School: _____

Name of Student: _____
Last First Middle

Gender: Male Date of Birth: ____ / ____ / ____ Grade: ____ ID#: ____
Female Month Day Year (preschool-12) (optional)

Address: _____ Phone: _____

The answer you give below will help the district determine what services you or your child may be able to receive under the McKinney-Vento Act. Students who are protected under the McKinney-Vento Act are entitled to immediate enrollment in school even if they don't have the documents normally needed, such as proof of residency, school records, immunization records, or birth certificate. Students who are protected under the McKinney-Vento Act may also be entitled to free transportation and other services.

Where is the student currently living? (Please check one box.)

- In a shelter
- With another family or other person because of loss of housing or as a result of economic hardship (sometimes referred to as "doubled-up")
- In a hotel/motel
- In a car, park, bus, train, or campsite
- Other temporary living situation (Please describe): _____

- In permanent housing

**Print name of Parent, Guardian, or
Student (for unaccompanied homeless youth)**

**Signature of Parent, Guardian, or
Student (for unaccompanied homeless youth)**

Date

Watervliet Elementary School

2557 10th Ave
Watervliet NY 12189

Health History

Date : _____ Grade : _____

Name : _____ Sex : _____

Date of birth : _____ Place of birth : _____

Father : _____ Phone : _____ Work : _____

Address : _____

Mother : _____ Phone : _____ Work : _____

maiden

Address : _____

Family doctor : _____ phone : _____

date _____ date _____

Chicken pox _____ Pneumonia _____

Diabetes _____ Heart Disease _____

Scarlet or Rheumatic Fever _____ Ear conditions _____

Frequent colds/sore throats _____ Asthma _____

ADHD /ADD _____ Allergies _____

Please list any medications your child is taking _____

Operations _____

Serious Injuries (Stitches, Broken Bones etc... what and when) _____

Any other medical condition or problem you feel the nurse should be aware of ?

Vr 20/ _____ VI 20/ _____ MB P / F Hr _____ HI _____



STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234
Office of P-12

Lissette Colón-Collins, Assistant Commissioner
Office of Bilingual Education and World Languages

55 Hanson Place, Room 594
Brooklyn, New York 11217
Tel: (718) 722-2445 / Fax: (718) 722-2459

89 Washington Avenue, Room 528EB
Albany, New York 12234
(518) 474-8775 / Fax: (518) 474-7948

Home Language Questionnaire (HLQ)

Dear Parent or Guardian:
In order to provide your child with the best possible education, we need to determine how well he or she understands, speaks, reads and writes in English, as well as prior school and personal history. Please complete the sections below entitled Language Background and Educational History. Your assistance in answering these questions is greatly appreciated. Thank you.

Please write clearly when completing this section.

STUDENT NAME:		
<i>First</i>	<i>Middle</i>	<i>Last</i>
DATE OF BIRTH:		GENDER:
<i>Month</i>	<i>Day</i>	<i>Year</i>
		<input type="checkbox"/> Male
		<input type="checkbox"/> Female
PARENT/PERSON IN PARENTAL RELATION INFO:		
<i>Last Name</i>	<i>First Name</i>	<i>Relation to Student</i>

HOME LANGUAGE CODE

Language Background (Please check all that apply.)

1. What language(s) is(are) spoken in the student's home or residence?	<input type="checkbox"/> English	<input type="checkbox"/> Other	_____
			<i>specify</i>
2. What was the first language your child learned?	<input type="checkbox"/> English	<input type="checkbox"/> Other	_____
			<i>specify</i>
3. What is the Home Language of each parent/guardian?	<input type="checkbox"/> Mother	_____	<input type="checkbox"/> Father
		<i>specify</i>	<i>specify</i>
	<input type="checkbox"/> Guardian(s)	_____	<i>specify</i>
4. What language(s) does your child understand?	<input type="checkbox"/> English	<input type="checkbox"/> Other	_____
			<i>specify</i>
5. What language(s) does your child speak?	<input type="checkbox"/> English	<input type="checkbox"/> Other	_____ <input type="checkbox"/> Does not speak
			<i>specify</i>
6. What language(s) does your child read?	<input type="checkbox"/> English	<input type="checkbox"/> Other	_____ <input type="checkbox"/> Does not read
			<i>specify</i>
7. What language(s) does your child write?	<input type="checkbox"/> English	<input type="checkbox"/> Other	_____ <input type="checkbox"/> Does not write
			<i>specify</i>

THIS SECTION TO BE COMPLETED BY DISTRICT IN WHICH STUDENT IS REGISTERED:

SCHOOL DISTRICT INFORMATION:

STUDENT ID NUMBER IN NYS STUDENT INFORMATION SYSTEM:

District Name (Number) & School

Address

Home Language Questionnaire (HLQ)—Page Two

Educational History	
8. Indicate the total number of years that your child has been enrolled in school _____	
9. Do you think your child may have any difficulties or conditions that affect his or her ability to understand, speak, read or write in English or any other language? If yes, please describe them. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 30%;"> <p>Yes* <input type="checkbox"/> No <input type="checkbox"/> Not sure <input type="checkbox"/></p> </div> <div style="width: 65%;"> <p>*If yes, please explain: _____</p> </div> </div> <p>How severe do you think these difficulties are? <input type="checkbox"/> Minor <input type="checkbox"/> Somewhat severe <input type="checkbox"/> Very severe</p>	
10a. Has your child ever been <u>referred</u> for a special education evaluation in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes* <i>*Please complete 10b below</i>	
10b. <i>*If referred for an evaluation</i> , has your child ever <u>received</u> any special education services in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes – Type of services received: _____	
Age at which services received <i>(Please check all that apply)</i> : <input type="checkbox"/> Birth to 3 years (Early Intervention) <input type="checkbox"/> 3 to 5 years (Special Education) <input type="checkbox"/> 6 years or older (Special Education)	
10c. Does your child have an Individualized Education Program (IEP)? <input type="checkbox"/> No <input type="checkbox"/> Yes	
11. Is there anything else you think is important for the school to know about your child? <i>(e.g., special talents, health concerns, etc.)</i> _____ _____ _____	
12. In what language(s) would you like to receive information from the school? _____	

<p style="text-align: center;"><i>Signature of Parent or of Person in Parental Relation</i></p>	<p style="text-align: center;">Month: Day: Year: Date</p>
Relationship to student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other: _____	

OFFICIAL ENTRY ONLY - NAME/POSITION OF PERSONNEL ADMINISTERING HLQ	
NAME: _____	POSITION: _____
IF AN INTERPRETER IS PROVIDED, LIST NAME, POSITION AND CREDENTIALS:	
NAME/POSITION OF QUALIFIED PERSONNEL REVIEWING HLQ AND CONDUCTING INDIVIDUAL INTERVIEW	
NAME: _____	POSITION: _____
ORAL INTERVIEW NECESSARY: <input type="checkbox"/> No <input type="checkbox"/> Yes	
**DATE OF INDIVIDUAL INTERVIEW: _____ <small style="display: flex; justify-content: space-around; width: 100%;">Mo DAY YR.</small>	OUTCOME OF INDIVIDUAL INTERVIEW: <input type="checkbox"/> ADMINISTER NYSITELL <input type="checkbox"/> ENGLISH PROFICIENT <input type="checkbox"/> REFER TO LANGUAGE PROFICIENCY TEAM
NAME/POSITION OF QUALIFIED PERSONNEL ADMINISTERING NYSITELL	
NAME: _____	POSITION: _____
DATE OF NYSITELL ADMINISTRATION: _____ <small style="display: flex; justify-content: space-around; width: 100%;">Mo. DAY YR.</small>	PROFICIENCY LEVEL ACHIEVED ON NYSITELL: <input type="checkbox"/> ENTERING <input type="checkbox"/> EMERGING <input type="checkbox"/> TRANSITIONING <input type="checkbox"/> EXPANDING <input type="checkbox"/> COMMANDING
FOR STUDENTS WITH DISABILITIES, LIST ACCOMMODATIONS, IF ANY, ADMINISTERED IN ACCORDANCE WITH IEP PURSUANT TO CSE RECOMMENDATION:	

Community Relations

SUBJECT: USE OF SOCIAL MEDIA POLICY

The Board of Education of the Watervliet City School District recognizes the importance of District employees, students, and parents engaging, collaborating, learning, and sharing in digital environments. To this aim, the Watervliet City School District has developed the following policy to provide direction for District employees, students, and parents when participating in online school-based social media activities.

The Watervliet City School District "Use of Social Media" policy encourages employees and students to participate in the use of social computing for school-based learning and strives to create an atmosphere of trust and individual accountability, keeping in mind that information produced by the Watervliet City School District teachers and students is a reflection of the entire District and is subject to the District's Acceptable Use Policy. By accessing, creating or contributing to any web authoring applications (blogs, podcasts, sites using digital or video imaging, or other social media) for classroom or District use, all employees and students are required to abide by these guidelines.

Definitions

"Social media" from this point forward refers to Internet-based media that includes, but is not limited to blogs, podcasts, and sites using digital images and video. It refers to a wide variety of Internet-based sites that include, but is not limited, to Facebook/Instagram, Twitter, Google shared apps, YouTube, Snapchat, TikTok, and other media that involve the interaction and sharing of social information and employee/student work.

Personal Responsibility

- a) Watervliet City School District employees and students are legally and personally responsible for the content they publish online, on or off-campus.
- b) Online behavior should reflect standards of honesty, respect, and consideration.
- c) When web-authoring and posting relating to the District or education, it is to be stated in the posting that the information is representative of the author's views and opinions and not necessarily the views and opinions of the Watervliet City School District.
- d) Social media, when used in a constructive manner can be an extension of the classroom. What is inappropriate in a classroom should be deemed inappropriate online.

(Continued)

Community Relations

SUBJECT: USE OF SOCIAL MEDIA POLICY (Cont'd.)

- e) Employees and students should ensure that content associated with them is consistent with the goals of the Watervliet City School District.
- f) All School Board members, educators, teachers, staff members, and students are reminded that they are expected to abide by all applicable state and federal laws, professional and ethical codes of conduct, Board of Education Policies, administrative regulations, the District Code of Conduct, applicable employment handbooks/policies, and collective bargaining agreements. This statement does not replace or supersede any existing policy or procedure.
- g) Confidential student and employee information may not be posted online on any social media tool.
- h) Social media will not be used to harass or bully others in any way.
- i) Individuals' privacy shall be respected in the use of social media.
- j) Violation of this policy may result in disciplinary action.

Copyright and Fair Use for Employees and Students

- a) Users will respect the rights of copyright owners and shall also adhere to the laws, policies and rules governing computers including, but not limited to, copyright laws, rights of software publishers, license agreements, and rights of privacy created by federal and state law.
- b) Hyperlinking to outside sources is recommended. When hyperlinking, be sure that the content is appropriate.
- c) Be sure to always give credit where it is due (proper attribution) and not to plagiarize.

Profiles and Identity

- a) Be cautious on how you set up a profile, bio, avatar, etc. No addresses or phone numbers of students, employees, parents, or community members should appear on school-based social media.
- b) In accordance with the District's opt-out of directory and media policy- pictures, videos, audio or digital reproductions of students, employees, parents or community members can be displayed on any school-based social media site without the consent of the individual student (if 18 or older, i.e., "eligible student") or the parents or guardians of students (less than 18 years of age) unless the eligible student or parent/guardian chose to sign and return the District opt-out policy. Check with the Building Principals for the list of parents who have chosen to have their child opt-out.

(Continued)

SUBJECT: USE OF SOCIAL MEDIA POLICY (Cont'd.)**Requests for Social Media Sites**

The Watervliet City School District understands that technology is constantly changing and that many sites have pedagogical significance for teacher and student use.

- a) If you would like to request that an online site (including one of your own creation) be accessible to use for teaching and learning, please fill out the Social Media Request Form and submit it to the District-Data Privacy Officer for review.
- b) Requests will be reviewed and the District social media guidelines will be updated periodically.
- c) A description should be provided of the intended use of the site and what tools on the site match your needed criteria.
- d) A link to the site's privacy policy should be included if possible.

Social Media Policy for Students

- a) A student will not post identifying information such as an address, age, email address, or telephone number.
- b) The School District's *Code of Conduct on School Property* applies to the use of District technology and Social Media.
- c) A student may not use the school-based social media to violate the Watervliet City School District's *Code of Conduct on School Property* by plagiarizing, cheating, forging, or using copyrighted material without permission.
- d) A student may not publish links to inappropriate websites.
- e) A student will use appropriate language. Offensive language will not be accepted.
- f) A student will not use social media to harass or bully others in any way.
- g) A student must respect the privacy of others at all times.
- h) A student must understand that there will be consequences for misuse of the school-based social media-as per the Acceptable Use Policy and the School District's *Code of Conduct on School Property*.
- i) Students must read and sign the Watervliet City School District's Use of Social Media Policy before participating in any social media activity.

(Continued)

Community Relations

SUBJECT: USE OF SOCIAL MEDIA POLICY (Cont'd.)

- j) The misuse of personal or home-based social media, depending on its potential effect on the health, safety, and welfare of students/others and the maintenance of the educational setting in school may result in referral to law enforcement and/or student or employee discipline in accordance with law and regulation.

Social Media Policy for Teachers

- a) A teacher will register his/her social media for school-based learning with the Watervliet City Office of Technology by contacting the District Data Privacy Officer.
- b) A teacher will provide students with the Watervliet City School District's Use of Social Media Policy and actively review the policy several times during the school year.
- c) A teacher will teach students safe and appropriate behavior as social media authors and readers.
- d) A teacher will recognize social media as a closed conversation for members of the class and will not open the site to any person who is not a participant in the class, except for others whose presence on the site supports the educational goals and objectives of the lesson who have been pre-approved by the teacher.
- e) A teacher will actively monitor social media for cyber-bullying, offensive language or images, and other material that violates the Use of Social Media Policy or other policies of the District.
- f) A teacher will protect student privacy at all times by not publishing identifying information such as an address, email address, or telephone number.
- g) All social media must have a direct correlation to subject material taught in class and will not be used for personal social networking.
- h) Teachers must enforce consequences for social media misuse. They must report violations to the Building Principal.
-

SUBJECT: USE OF SOCIAL MEDIA POLICY (Cont'd.)

ACKNOWLEDGMENT AND SIGNATURE PAGE

I have read and understood the Watervliet City School District's Use of Social Media Policy and Acceptable Use Policy.

____ Student/Parent

____ Teacher

Print Name (student) _____

Signature _____

Date _____

Print Name (parent) _____

Signature _____

Date _____

Print Name (Teacher) _____

Signature _____

Date _____

Adopted by BOE 8-10-2017
Reviewed by Technology Sub Committee 7/8/2021
Reviewed by the Technology Committee 4/8/2022
Adopted by BOE on 6/9/2022

Students

**SUBJECT: STUDENT USE OF COMPUTERIZED INFORMATION RESOURCES
(ACCEPTABLE USE POLICY)**

The Board of Education will provide access to various computerized information resources through the District's computer system ("DCS" hereafter) consisting of software, hardware, computer networks and electronic communications systems. This may include access to electronic mail, "on-line services" and the "Internet." It may include the opportunity for some staff/students to have independent access to the DCS from their home or other remote locations. All use of the DCS, including independent use off school premises, shall be subject to this policy and accompanying regulations. Further, all such use must be in support of education and/or research and consistent with the goals and purposes of the School District.

Access to Inappropriate Content/Material and Use of Personal Technology or Electronic Devices

The policy is intended to establish general guidelines for acceptable student use of the DCS and also to give students and parents/guardians notice that student use of the DCS will provide student access to external computer networks not controlled by the School District. The district cannot screen or review all of the available content or materials on these external computer networks. Thus some of the available content or materials on these external networks may be deemed unsuitable for student use or access by parents/guardians.

Despite the existence of District policy, regulations and guidelines, it is virtually impossible to completely prevent access to content or material that may be considered inappropriate for students. Students may have the ability to access such content or material from their home, other locations off-school premises and/or with a student's own personal technology or electronic device on school grounds or at school events. Parents and guardians must be willing to establish boundaries and standards for the appropriate and acceptable use of technology and communicate these boundaries and standards to their children. The appropriate/acceptable use standards outlined in this policy apply to student use of technology via the DCS or any other electronic media or communications, including by means of a student's own personal technology or electronic device on school grounds or at school events.

Personal Devices:

Students may use personal devices to access the District Network. These devices include, but are not limited to, laptop computers, smart phones, tablet computers, iPads, netbooks, and mp3 players. All activities conducted on the District Network using a personal device, including messages, emails, communications, information and Internet access, are subject to monitoring, inspection, copying, review, access and storing by the district. There is no expectation of privacy, regardless of whether a personal or district-issued device is used to access the District Network. The district will not be liable for any damages, expenses or costs associated with the student's use of the personal device to access the District Network or in the event a student's personal device is lost or damaged.

Students

Standards of Acceptable Use

Generally, the same standards of acceptable student conduct which apply to any school activity shall apply to use of the DCS. This policy does not attempt to articulate all required and/or acceptable uses of the DCS; nor is it the intention of this policy to define all inappropriate usage. Administrative regulations will further define general guidelines of appropriate student conduct and use as well as proscribed behavior.

Prohibited Conduct:

The District reserves the right to limit and/or terminate Internet access, District Network access or other technology use privileges in the event it determines that a user has violated any district policy or regulation or any state or federal law. The following have been deemed inappropriate uses of technology by the district:

- I. Cyberbullying: Refer to Policy #7552 and Policy #3410 (Code of Conduct).
If it is determined that students used or accessed the District Network, including Internet access to engage in cyberbullying, the user will be subject to discipline consistent with the Code of Conduct (#3410). It should also be noted that "cyberbullying is a misdemeanor punishable by a \$1,000 fine and /or up to one year in jail.
- II. Accessing, uploading, downloading or distributing pornographic, obscene or sexually explicit material.
- III. Using the District Network for illegal activity, including copyright infringement, or for uses that violate the district's Code of Conduct or other policies.
- IV. Vandalizing the account or data of another user.
- V. Gaining unauthorized access to another account, confidential records or District Network operations, including using another person's account name with or without permission.
- VI. Sharing personal user ID or password
- VII. Using any method or means to bypass the Internet filtering system.
- VIII. Disrupting or damaging equipment, software or the operations of the District Network, including creating or installing a computer virus or other damaging program.
- IX. Using district technology for personal or financial gain.
- X. Installing or using personal software on an individual computer or the District Network.
- XI. Downloading software without permission
- XII. E-mail broadcasting or "spamming"
- XIII. Misrepresenting yourself by using a false/fictitious identity in any electronic communication.
- XIV. Posing any material or information that may result in a disruption of normal school operations, including transmitting offensive or harassing messages, insults or attacking others or using obscene language.

**SUBJECT: STUDENT USE OF COMPUTERIZED INFORMATION RESOURCES
(ACCEPTABLE USE POLICY) (Cont'd.)**

This is not intended to be comprehensive, but to illustrate the expectations set for the by the District.

District students shall also adhere to the laws, policies and rules governing computers including, but not limited to, copyright laws, rights of software publishers, license agreements, and student rights of privacy created by federal and state law.

Staff/Students who engage in unacceptable use may lose access to the DCS in accordance with applicable due process procedures, and may be subject to further discipline under the District's school conduct and discipline policy and the District Code of Conduct. The District reserves the right to pursue legal action against a staff/student who willfully, maliciously or unlawfully damages or destroys property of the District. Further, the District may bring suit in civil court against the parents/guardians of any student or staff member who willfully, maliciously or unlawfully damages or destroys District property pursuant to General Obligations Law Section 3-112.

Staff/Student data files and other electronic storage areas will be treated like school lockers. This means that such areas shall be considered to be School District property subject to control and inspection. The District Network Administrator may access all such files and communications without prior notice to ensure system integrity and that users are complying with the requirements of this policy and accompanying regulations. Staff/Students should **NOT** expect that information stored on the DCS will be private.

Notification/Authorization

The District's Acceptable Use Policy and Regulations will be disseminated to staff, parents and students in order to provide notice of the school's requirements, expectations, and staff and students' obligations when accessing the DCS. It will be available on the district website.

The District provides opt-out forms on the District website with respect to use of the District Network. These forms will serve as written notification of a parent or guardian's wish to withhold Internet access or other technology privileges for their student(s) and can be completed at any time during the school year. Privileges to access the District Network and Internet may only be restored through written notification from a parent or guardian.

(Continued)

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Students

**SUBJECT: STUDENT USE OF COMPUTERIZED INFORMATION RESOURCES
(ACCEPTABLE USE POLICY) (Cont'd.)**

Regulations will be established as necessary to implement the terms of this policy.

NOTE: Refer also to Policies #3121 -- Use of Social Media Policy
#8271 -- Internet Safety/Internet Content Filtering Policy
3410 -- Code of Conduct
7552 -- Bullying in the Schools

Adopted: 6/19/12; BOE Adopted: 8-10-17

Eligibility Screen for Migrant Education Services

*** Migrant Education Program services are free of charge and may include tutoring, assistance with health needs, educational field trips, summer programs, parent involvement activities, adult education, emergency assistance and referrals to other services as needed. ***

Has your family moved to a different school district in the last 3 years? YES _____ NO _____

In the last three years, has the parent or guardian of the child enrolling done farm work as a paid job? (Did they work on a dairy farm, planting, picking/harvesting fruits or vegetables, food processing or packaging, logging or tree farming?) YES _____ NO _____

If yes, what farm did you work on? _____ Where? _____ When? _____



If you can answer YES to BOTH of the above questions, your family MAY qualify for Migrant Education services. To be contacted by a Migrant Education recruiter, please complete the information below.

Child's name _____ D.O.B. _____ Grade _____
Child's name _____ D.O.B. _____ Grade _____
Child's name _____ D.O.B. _____ Grade _____
Child's name _____ D.O.B. _____ Grade _____

Parents/ Guardians

Mother's name _____ Father's Name _____

Home Address _____ Home Phone # _____
(Street Address)

Work or Message # _____
(city, town or village) (Zip)

School District _____ School Building _____

School Contact Person _____ Contact Number _____

Other Useful information (directions, farm names, best time to contact, etc.) _____

To submit this referral please fax to the Herkimer BOCES at (315) 867-2087 or mail to the address above. For more information please call the Migrant Program at (315) 867-2079.
Thank you for your assistance.

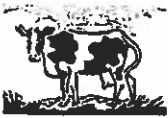
Cuestionario de Elegibilidad para Servicios de Educación Migrante

*** Servicios del Programa de Educación Migrante son gratuitos y pueden incluir tutoría, ayuda con necesidades de salud, viajes educativos, programas del verano, actividades de involucrar a los padres, educación para adultos, ayuda de emergencia y referidos a otros servicios como necesario. ***

¿Ha mudado su familia a un distrito escolar diferente en los últimos 3 años? Sí _____ NO _____

¿En los últimos 3 años ha trabajado un padre o guardián en granja como: lechería, plantando, cosechando frutas o legumbres, el procesamiento o empaquetar de comida, corta de árboles o cultivo de árboles? Sí _____ NO _____

Si UD dijo que sí, ¿en que granja? _____ ¿Donde? _____ ¿Cuándo? _____



Si Usted contestó que Sí a AMBOS preguntas de arriba, su familia PUEDA calificar para servicios de Educación Migrante. Para estar contactado por una reclutadora del Programa de Educación Migrante, favor de llenar la información de abajo.

Nombre del niño(a) _____ Fecha de Nacimiento _____ Grado _____

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Nombre del niño(a) _____ Fecha de Nacimiento _____ Grado _____

Nombre del niño(a) _____ Fecha de Nacimiento _____ Grado _____

Padres/ Guardianes

Nombre de la Mamá _____ Nombre del Papá _____

Dirección de la Casa _____ Numero de teléfono en casa _____
(Dirección de la Calle)

_____ # de teléfono del trabajo o de Mensaje _____
(Ciudad o Pueblo) (Código Postal)

Distrito escolar _____ edificio escolar _____

Persona para contactar _____ numero para contactar _____

Otra información Útil (direcciones, nombres de granjas, mejor hora de llamar, etc.) _____

Para someter este referido, favor de mandarlo por fax al Herkimer BOCES a
(315) 867-2087 o mandar por correo al dirección de arriba.

Para más información, favor de llamar al Programa Migrante a (315) 867-2079. Gracias.

WATERVLIET CSD

PARENT PORTAL INSTRUCTIONS



Why sign up for parent portal?

- Review your child's schedule/Teacher
- See Interim Reports and Report cards
- Review Teacher's gradebook with current test/homework grades
- Student attendance
- H.S transcripts
- Health records
- Contact teachers

To log on to the Parent Portal

- Use Web browser: Internet Explorer 7.0
- Go to Web site: <https://esd-parentportal.neric.org>

Follow each of the following steps

- If you already have an account, enter your user name and password on the right hand side of the screen.
- If you are beginning the approval process to the parent portal, click "here" next to "First time here?" on the left hand side of the screen.
- If you need help or have questions, click "FAQ" on the left hand side of the screen.

STEP 1: Account Information

- Complete the account information as requested. Required fields are marked with a red asterisk.
- The "Username" must be the first letter of your first name followed by up to 7 letters of your last name.
- Once finished, click "Create Account Information."

STEP 2: Personal Information

- Complete the personal information as requested. Required fields are marked with a red asterisk.
- Once finished, click on "Finish Registration."