

Waterville Central School District
Memorial Park Elementary School
145 E. Bacon Street • Waterville, NY 13480

Phone: 315-841-3700

www.watervillecsd.org

Fax: 315-841-3718

Maureen Gray • *Principal*

Date _____

I hereby give permission to the _____
Name and Address of Previous School
to forward transcripts of health records, psychological records, standardized test results
and relevant information pertaining to the education of my child/children to the
Waterville Central School District, enrolled at Memorial Park Elementary School.

Please forward records to: Mrs. Maureen Gray, Principal
Memorial Park Elementary School
145 East Bacon Street
Waterville, NY 13480

Child's Name(s)	Grade
_____	_____
_____	_____
_____	_____

Parent/Guardian Signature

Date

Memorial Park Elementary School

EMERGENCY INFORMATION CARD

STUDENT INFORMATION

Last Name _____ First _____ Middle _____

Address _____

City _____ State NY Zip _____ Grade Entering _____

☐ Copy of Birth Certificate received

Sex M F Birthday ____/____/____ Birth Place _____

Choose as many as applicable:

____ White

____ Black or African American

____ Asian

____ American Indian or Alaskan Native

____ Native Hawaiian/Other Pacific Islander

Hispanic ____ Yes or ____ No

CUSTODIAL / EMERGENCY CONTACT INFORMATION

Student **Resides with** PARENTS MOTHER ONLY FATHER ONLY GUARDIAN

Mother's Name(s) _____

Address _____

Home Phone _____ Cell Phone _____

Mother's Employer _____ Work Phone _____

Mother's Email Address _____

Father's Name(s) _____

Address _____

Home Phone _____ Cell Phone _____

Father's Employer _____ Work Phone _____

Father's Email Address _____

Sibling's Names _____ DOB _____

_____ DOB _____

_____ DOB _____

Please list two (2) additional EMERGENCY CONTACTS below -

Contact Name(s) _____ Relationship _____

Address _____

Home Phone _____ Cell Phone _____

Work Phone _____

Contact Name(s) _____ Relationship _____

Address _____

Home Phone _____ Cell Phone _____

Work Phone _____

Previous school attended _____ Grade _____

Teacher _____ Phone _____ Fax _____

Waterville Central School District
Memorial Park Elementary School
Grades K-6

145 E. Bacon Street • Waterville, NY 13480

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Maureen Gray • Principal

mgray@watervillecsd.org

Busing/Child Care Form

Student(s) Name

Grade

Teacher

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please X appropriate box for AM & PM busing.

AM Busing

Monday	<input type="checkbox"/> Home <input type="checkbox"/> Child Care
Tuesday	<input type="checkbox"/> Home <input type="checkbox"/> Child Care
Wednesday	<input type="checkbox"/> Home <input type="checkbox"/> Child Care
Thursday	<input type="checkbox"/> Home <input type="checkbox"/> Child Care
Friday	<input type="checkbox"/> Home <input type="checkbox"/> Child Care

PM Busing

<input type="checkbox"/> Home <input type="checkbox"/> Child Care
<input type="checkbox"/> Home <input type="checkbox"/> Child Care
<input type="checkbox"/> Home <input type="checkbox"/> Child Care
<input type="checkbox"/> Home <input type="checkbox"/> Child Care
<input type="checkbox"/> Home <input type="checkbox"/> Child Care

Home Information

Home Address _____
House #, Street, Town

Parent/Guardian's Name _____

Home Telephone # _____ Cell Telephone # _____

Child Care Information

Child Care Address _____
House #, Street, Town

Child Care Provider's Name _____

Child Care Provider's Home Telephone # _____ Cell Telephone # _____

Please be sure to read and sign the reverse side.

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Grades K-6

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mgray@watervillecsd.org

Busing/Child Care Form Instructions

Child Care Service Criteria

- Child Care facility must be located within the school district boundaries
- Students may only have a maximum of two (2) bus stop locations: home and child care (if applicable.) These bus stop locations must be on a consistent basis. Bus transfers will not be allowed for activities (ie: Boy Scouts, Girl Scouts, 4-H, birthday parties, etc.), going to a friend's house, or more than one child care site. Therefore, students may only ride a bus to their home or to their pre-assigned child care. We will not drop students off for appointments or places of employment.

Any changes made in your child's daily busing schedule, must be accompanied by a note to your child's teacher. This note must contain the following information:

- DATE OF CHANGE REQUEST
- STUDENT'S FULL NAME
- TEACHER'S NAME
- BUS # THE STUDENT IS COMING *OFF* OF
- NAME, ADDRESS, AND PHONE # OF WHERE CHILD WILL BE GOING
- PARENTAL SIGNATURE

Each year a new Busing/Child Care Form must be filed with the MPS Office and completed by the parent/guardian. These forms must be received by the MPS Office no later than August 15, 2014. Thank you!

If child care needs change throughout the school year, a new form must be re-filed with the MPS office to ensure that we are able to maintain accurate data. We will need five working days to implement the child care arrangements. These request forms are available at the MPS Office and our website.

Your cooperation in the timely return of this form will help to ensure the proper transportation of your child to/from their child care provider.

Parent/Guardian's signature _____ Date _____

PLEASE MAIL/FAX/EMAIL COMPLETED APPLICATION TO:

Memorial Park Elementary School
Attn: BRENDA EVANS

145 E. Bacon Street • Waterville, NY 13480
Fax (315) 841-3718 • k6busing@watervillecsd.org

Waterville Central School District
Memorial Park Elementary School
Grades K-6

145 E. Bacon Street • Waterville, NY 13480

Phone: 315-841-3700

www.watervillesd.org

Fax: 315-841-3718

Maureen Gray • Principal

mgray@watervillesd.org

Walker/Pick-Up Form

Effective Date _____

Student(s) Name

Teacher/Grade

Person(s) picking student up:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

☐ Please check box if your child will be dismissed daily as a WALKER.

Please be sure to read and sign the reverse side.

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mgray@watervillecsd.org

DISMISSAL

Dismissal is a very busy time of the day, especially for the office. If an emergency arises that requires you to change your child's dismissal plans, please notify the office not later than 1 pm, by emailing Brenda Evans at k6busing@watervillecsd.org or faxing to (315) 841-3718. If you call after 1 pm, we cannot guarantee that we will be able to honor your request.

If you plan to pick up your child instead of having them ride the bus, a note **MUST** be sent in with your child on that morning. Thank you for your cooperation.

PICK UP PROCEDURES AT DISMISSAL (2:20 pm)

Everyone picking up a child is to park in the parking lot to the right of the school, near the Bus Garage. All students are to be picked up in the library, via the library door, located behind the large evergreen tree. Parents and students are to exit the building through that same door. Prior to taking your child, you must sign him/her out. These procedures have been put in place for the safety of our children.

If you have a prearranged meeting with your child's teacher, you must exit the building, via the library door, and reenter through the front office door. We ask that you wait until **ALL** of the busses have left the front circle before reentering the building. Thank you!

All walkers will be dismissed from the cafeteria after all buses have departed.

Thank you for your cooperation in following these important procedures.

Sincerely,

Maureen Gray
Principal

Parent/Guardian's signature _____ Date _____

PLEASE MAIL/FAX/EMAIL COMPLETED APPLICATION TO:

Memorial Park Elementary School

Attn: BRENDA EVANS

145 E. Bacon Street • Waterville, NY 13480

Fax (315) 841-3718 • k6busing@watervillecsd.org

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Maureen Gray • *Principal*

PHOTO RELEASE

Dear Parent/Guardian:

Please sign below, giving Waterville Central School District permission to photograph your child and use the image for promotional purposes. (This may include print publications, television, District Newsletters and the Waterville Central School's website. This does **not** include the MPS Yearbook.) Your permission will assist us in promoting Waterville's educational programs. Thank you.

RELEASE FORM

_____ YES, I have read the above information and Waterville Central School District has my permission to use my child's pictures in publications and/or participate in radio/television coverage of Waterville's programs to promote educational activities.

_____ NO, Waterville may **NOT** use my child's photograph to promote educational activities.

If we do not receive a PHOTO RELEASE FORM by _____, your child will be added to the DO NOT PHOTOGRAPH list.

Student's Full Name (Print)

Grade & Teacher's Name

Parent/Guardian Signature

Date



381 Madison Street
Waterville, NY 13480
Website: www.watervillecsd.org

Phone: 315-841-3900
Fax: 315-841-3939
Email: districtoffice@watervillecsd.org

WCSD Electronic Technology Acceptable Use Policy Signature Form STUDENT

Dear Parent/Guardian,

It is necessary for all students to have computer access at school. Please read and review the attached *WCSD Electronic Technology Acceptable Use Policy* with your child and sign the form below. Return the signed form to the MPS Office. Students will not be given computer access until this form is on file in the District.

STUDENT/PARENT

I understand and will follow the *WCSD Electronic Technology Acceptable Use Policy*. I further understand that any violation of the WCS Computer Use Agreement is unethical and may be criminal offense. Should I commit any violation, my privileges may be taken away, disciplinary action taken, and/or legal action may be taken.

Network accounts may be treated like school lockers. Student computer files may be reviewed and edited by staff at any time. Users should not expect that files stored on District servers will be private.

Student's Name (*Please Print*):

Student's Signature:

Date:

Student's Year of Graduation:

Parent or Guardian's Signature



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Waterville Central School District Electronic Technology Acceptable Use Policy

The intent of The Waterville School District's use of technology is to assist in the collaboration and exchange of information among all who are concerned and involved with education. The integration of networking technology into daily operations of classrooms, libraries, and offices is intended to provide the development of high quality technological resources in an effective, efficient, and economical manner.

Internet and Network access is available to all students, faculty, and staff at Waterville Central Schools. The District feels the benefits to learning far outweigh any disadvantages that may result from the use of this technology. Through the use of filters, every effort is being made to protect the users at WCS from inappropriate materials. Any offensive material that evades the system should be reported to administrative personnel immediately.

Individuals using technology at Waterville Central Schools are expected to act in an appropriate manner at all times. Technology is intended to be used for school-related assignments and activities only. Computer use is a privilege and that privilege can be revoked at any time. Email, Instant Messaging, gaming, and any other personal use of technology is prohibited. Any activities that may damage, destroy, or alter equipment or another person's data will result in disciplinary action. Users should not expect that files on the WCS server are private; therefore, files may be monitored and reviewed by school personnel.

- All use of the network and technology resources must be in support of education and research and consistent with the mission of the school.
- Users will not damage, disable, or otherwise interfere with the operations of computers, computer systems, software or related equipment through physical action or by electronic means.
- Users will not seek information on, obtain copies of, or modify files, other data, or passwords belonging to other users, or misrepresent other users on the network.
- Users will not be involved in any activities that violate copyright policy. This includes plagiarism, downloading or duplicating of copyrighted material such as music, movies, software, artwork or photographs.
- Users will not use the computer network to obtain, download, send, print, display or otherwise gain access to or to transmit materials that are unlawful, obscene, pornographic or abusive.

Network administrators may review files and communications to maintain system integrity, to insure that users are using the system responsibly and to check their contents. Users should not expect that files stored on district servers will be private.

Consequences

- Violations of this policy will result in the loss of computer privileges. A first offense will result in a two-week suspension of privileges. A second offense will result in loss of privileges for the remainder of the school year.
- In addition: Users may be required to make financial restitution.
- When applicable, law enforcement agencies may be involved.
- Further consequences may be determined by the administration.

The University of the State of New York
The State Education Department
Office of Bilingual Education

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 English. Your assistance in answering these questions and returning this form to your child(ren)s school at your earliest convenience, is greatly appreciated.

District **Waterville Central School**
School **Memorial Park Elementary School**

Student Name	Grade	Country Born	Date of Birth

☒ boxes that apply

	English	Other (<i>specify</i>)
What language is spoken in student's home?		
What language is spoken most of the time to the student, in the home or residence?		
What language does the student understand?		
What language does the student speak?		
What language does the student read?		
What language does the student write?		

In your opinion, how well does the student understand, speak and write English?

	Very Well	Only a little	Not at all
Understands English			
Speaks English			
Reads English			
Writes English			

PRINT *Parent/Guardian Name*

Signature Parent/Guardian Name

Date



Phone: 315-841-3900
Website: www.watervillescd.org

Fax: 315-841-3855
Email: districtoffice@watervillescd.org

NOTE TO SCHOOLS/LEAS: Please assist students and families filling out this form. Do not simply include this form in the registration packet, because if the student qualifies as residing in temporary housing, the **student is not required to submit proof of residency** and other required documents that may be part of the registration packet.

ENROLLMENT FORM - RESIDENCY QUESTIONNAIRE

Name of LEA: _____

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

If the student is **NOT** living in permanent housing, **proof of residency** and other documents normally needed for enrollment **are not required** and the **student is to be immediately enrolled**. **After** the student has been enrolled, the district/school must contact the previous district/school attended to request the student's educational records, including immunization records, and the enrolling district's LEA liaison must help the student get any other necessary documents or immunizations.

NOTE TO SCHOOLS/LEAS: If the student is **NOT** living in permanent housing, please ensure that a Designation Form is completed.



INSTRUCTIONS FOR COMPLETING THE ENROLLMENT FORM – RESIDENCY QUESTIONNAIRE

Purpose of the Enrollment Form - Residency Questionnaire

All LEAs are required to identify students experiencing homelessness. Additionally, all LEAs that receive Title I funds must ask enrolling students about their housing status. SED encourages all LEAs regardless of whether they receive Title I funds to do the same. To collect this information, LEAs may:

1. Use the Model Enrollment Form - Residency Questionnaire attached here,
2. Update/modify the Model Enrollment Form - Residency Questionnaire to address the needs of the LEA, or
3. Incorporate the housing status question from the Model Enrollment Form - Residency Questionnaire into the LEA's Enrollment Form or other documents already used by the LEA during the enrollment process.

If an LEA elects the third option and incorporates the housing status question into the LEA's Enrollment Form, the LEA should take steps to ensure that a student's housing status does not become a part of the student's permanent record, because of the sensitive nature of this information. Please see the section titled "Confidentiality" (below) for information about how and when housing information may be shared within the LEA.

Who should fill out the Enrollment Form - Residency Questionnaire?

A Enrollment Form - Residency Questionnaire should be filled out for all students enrolling in school and for all students who have a change of address in grades preschool-12. Preschool includes any LEA program for 3-5 year olds, such as pre-k, Head Start, or Even Start. The Form - Questionnaire should be completed by the student's parent, person in parental relation, or in the case of an unaccompanied youth, by the student directly.

Confidentiality

Student housing information should be kept confidential to the maximum extent possible. This information should only be shared with LEA/school staff members who need information about housing status to ensure that the student's educational needs are met. To this end, LEAs may share a student's completed Enrollment Form - Residency Questionnaire with LEA personnel such as:

1. the LEA liaison,
2. the registrar,
3. the student's teachers, and/or guidance counselor, and
4. the LEA staff member responsible for reporting data to SED

However, this information should only be shared with the above staff members to the extent that it will enable them to better meet the educational needs of the student in question and to fulfill reporting requirements mandated by SED.

Other than the above uses, housing information **should be kept confidential** and generally **should not be shared** with other LEA/school personnel due to its sensitive nature and the stigma attached to being labeled homeless. LEAs are also encouraged to seek out ways of preventing Enrollment Form - Residency Questionnaires and housing information from becoming a part of a student's permanent record.



Discussing the Enrollment Form - Residency Questionnaire with Students and Families

In reviewing the Enrollment Form - Residency Questionnaire with parents, persons in parental relation, and unaccompanied youth, LEAs should emphasize that the purpose of gathering the information is to ensure that students in temporary housing arrangements are provided with the rights and services to which they are entitled under the McKinney-Vento Act. These rights and services include:

1. The right to stay in the same school the student had been attending before losing his/her housing or the last school attended (both known as the school of origin),
2. The right to immediate enrollment for students who decide to transfer schools, even if the student does not have all of the documents normally for enrollment,
3. Transportation services if the student continues to attend the school of origin,
4. Categorical eligibility for Title I services if offered in the LEA,
5. Categorical eligibility for free meals if offered in the LEA, and
6. Access to services provided with McKinney-Vento funds if available in the LEA.

The LEA should also ensure that the parent, person in parental relation, unaccompanied youth is aware that the student's housing status will kept confidential and will only be shared with those LEA staff responsible for providing services to the student and those responsible for keeping track of how many students are identified as living in temporary housing in the LEA.

LEAs are advised to explain to parents that if a parent claims that her/her child is living in temporary housing, and the LEA wishes to conduct an investigation to verify this information, the LEA may conduct a home visit. However LEAs **cannot contact a landlord or building superintendent** to verify a student's housing status. Contacting a landlord or building superintendent may be a violation of FERPA, a federal law, and may put the family at risk of losing its housing. If the student is living in a doubled up situation, it may also lead to loss of housing for the primary tenants.

If the Parent, Person in Parental Relation, or Unaccompanied Youth Declines to Fill Out the Enrollment Form - Residency Questionnaire

If the parent, person in parental relation, or unaccompanied youth declines to complete the Enrollment Form - Residency Questionnaire, the LEA should note on the form that the parent, person in parental relation, or unaccompanied youth declined to provide the information requested.

Completing the Form

If a parent, person in parental relation, or unaccompanied youth enrolling in school indicates that a student is living in one of the five temporary housing arrangements, the school may not require proof to verify where the student is living before enrolling the student. The five temporary housing arrangements are listed below:

1. In a shelter,
2. With another family or other person (sometimes referred to as "doubled-up"),
3. In a hotel/motel,
4. In a car, park, bus, train, or campsite, or
5. Other temporary living situation.

After the student is enrolled and attending classes, the school or LEA is permitted to verify the student's housing arrangements. However, the student must first be enrolled in school. Again, LEAs **cannot not contact a landlord or building superintendent** to verify a student's housing status. (See above for more information.)



Definitions of Temporary Housing Arrangements

“With another family or other person” (also referred to as “doubled-up”)

LEAs should be aware that students who are sharing the housing of others are eligible for services under the McKinney-Vento Act and State law, if sharing housing is due to loss of housing, economic hardship, or a similar reason.

“Other temporary living situation”

In addition to the four examples of temporary housing, students who lack a “fixed, adequate, and regular” nighttime residence are also covered as homeless under the McKinney-Vento Act and State law. This may include unaccompanied youth who have fled their homes or were forced to leave their homes and who do not otherwise meet the definition of “doubled-up.”

“In permanent housing”

Permanent housing means that the student’s living arrangements are “fixed, regular, and adequate.”

Next Steps for LEAs with Students Living in Temporary Housing Arrangements

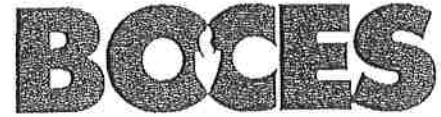
If the parent, person in parental relation, or unaccompanied youth indicates that a student is living in temporary housing, the LEA must complete a Designation Form. If the LEA believes additional information is needed before reaching a final decision on the student’s eligibility under McKinney-Vento, enrollment should not be delayed and a Designation Form should still be filled out. For more information about determining eligibility see the National Center on Homeless Education’s Determining Eligibility Brief, available at: www.serve.org/nche/downloads/briefs/det_elig.pdf

If a student who is identified as homeless was last permanently housed in a different school district, the district of attendance/local district will be eligible for tuition reimbursement from SED for the cost of educating the student. School districts should complete a STAC-202 form if eligible for tuition reimbursement. For more information about STAC-202 forms contact the STAC Office at 518-474-7116 or NYS-TEACHS at 800-388-2014.

Thomas P. Pfisterer, R.D., M.B.A.
Director, School Food Services

Phone: (315) 738-0848
Fax: (315) 724-0077

ONEIDA • HERKIMER • MADISON



BOARD OF COOPERATIVE
EDUCATIONAL SERVICES

Box 70, Middle Settlement Road
New Hartford, NY 13413-0070

July 6, 2014

Dear Parent,

The 2014-2015 school year is rapidly approaching for your child(ren). We, the School Food Service staff, welcome your child back for another year here at the Waterville Central School.

If I may take a moment of your time, I would like to explain to you about the importance of filling out the free/reduced price meal application in this packet. Whether you feel that you may qualify or not, you may benefit by completing this application.

If you qualify, obviously you will save money. For instance, if you qualify for free meals, you will save the price of a full-price lunch, which is \$ 2.25 in all schools, and/or breakfast, which is \$ 1.00 in those schools which run a breakfast program. Similarly, if you qualify for reduced price meals, you will have to pay only \$.25 for your child's lunch and/or breakfast. Over the course of the school year, these savings will become sizeable, and further magnified for each additional child you have in the school district.

IMPORTANT : Please remember that while your child may have received free/reduced price meals this past school year, **BE AWARE THAT YOU MUST REAPPLY ANNUALLY FOR THESE BENEFITS TO CONTINUE.**

Therefore, I encourage you to take a few minutes and complete this application, **and submit anytime after August 1st.** You can then find out the status of your application by calling the School Food Service office at 738-0848, Monday through Friday between 9:00 a.m. and 2:00 p.m.. Thank you.

Sincerely,

Thomas P. Pfisterer
Director, School Food Services

**2014-2015 INCOME ELIGIBILITY GUIDELINES
FOR FREE AND REDUCED PRICE MEALS OR FREE MILK**

REDUCED PRICE ELIGIBILITY INCOME CHART

Total Family Size	Annual	Monthly	Twice per Month	Every Two Weeks	Weekly
1	\$ 21,590	\$ 1,800	\$ 900	\$ 831	\$ 416
2	\$ 29,101	\$ 2,426	\$ 1,213	\$ 1,120	\$ 560
3	\$ 36,612	\$ 3,051	\$ 1,526	\$ 1,409	\$ 705
4	\$ 44,123	\$ 3,677	\$ 1,839	\$ 1,698	\$ 849
5	\$ 51,634	\$ 4,303	\$ 2,152	\$ 1,986	\$ 993
6	\$ 59,145	\$ 4,929	\$ 2,465	\$ 2,275	\$ 1,138
7	\$ 66,656	\$ 5,555	\$ 2,778	\$ 2,564	\$ 1,282
8	\$ 74,167	\$ 6,181	\$ 3,091	\$ 2,853	\$ 1,427
*Each Add'l person add	\$ 7,511	\$ 626	\$ 313	\$ 289	\$ 145

How to Apply: To get free or reduced price meals for your children you may submit an Eligibility Letter for Free Meals received from the NYS Education Department, OR carefully complete one application for your household and return it to the designated office. If you now receive SNAP, Temporary Assistance to Needy Families (TANF) for any children, or participate in the Food Distribution Program on Indian Reservations (FDPIR), the application must include the children's names, the household food stamp, TANF or FDPIR case number and the signature of an adult household member. All children should be listed on the same application. If you do not list a food stamp, TANF or FDPIR case number for all the children for whom you are applying, the application must include the names of everyone in the household, the amount of income each household member, and how often it is received and where it comes from. It must include the signature of an adult household member and the last four digits of that adult's social security number, or check the box if the adult does not have a social security number. An application that is not complete cannot be approved. Contact your local Department of Social Services for your food stamp or TANF case number or complete the income portion of the application.

Reporting Changes: The benefits that you are approved for at the time of application are effective for the entire school year. You no longer need to report changes for an increase in income or decrease in household size, or if you no longer receive SNAP.

Income Exclusions: The value of any child care provided or arranged, or any amount received as payment for such child care or reimbursement for costs incurred for such care under the Child Care Development (Block Grant) Fund should not be considered as income for this program.

Nondiscrimination Statement: This explains what to do if you believe you have been treated unfairly.

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form (PDF), found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities and you wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

Persons with disabilities who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

July 6, 2014

Dear Parent/Guardian :

Waterville Central School believes that one of the most important ways in which we can help our children perform better in their classrooms is to provide them with the nutrition necessary for the healthy growth of their minds and bodies. Therefore, we provide breakfast and/or lunch in our school every day.

We invite all students to show their support for their school food service program through frequent participation. Students may buy lunch for \$ 2.25 and/or breakfast for \$ 1.00.

Children from households that meet Federal income guidelines (outlined below) are eligible for free meals or reduced price meals. Reduced price meals cost each eligible student \$.25 for lunch and \$.25 for breakfast. To apply for free or reduced price meals, complete the enclosed application, sign it, and return it to the school as soon as possible – anytime after August 1st. (If your family receives public assistance, you will most likely be approved for free meals through the Direct Certification process). Please refer to the guidelines contained in this letter when completing the application.

1. DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD? No. Complete the application to apply for free or reduced price meals. *Use one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: [name, address, phone number].
2. WHO CAN GET FREE MEALS? All children in households receiving benefits from SNAP, the Food Distribution Program on Indian Reservations or TANF, can get free meals regardless of your income. Also, your children can get free meals if your household's gross income is within the free limits on the Federal Income Eligibility Guidelines.
3. Can foster children get free meals? Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals. Any foster child in the household is eligible for free meals regardless of income.
4. CAN HOMELESS, RUNAWAY, AND MIGRANT CHILDREN GET FREE MEALS? Yes, children who meet the definition of homeless, runaway, or migrant qualify for free meals. If you haven't been told your children will get free meals, please call or e-mail [school, homeless liaison or migrant coordinator information] to see if they qualify.
5. WHO CAN GET REDUCED PRICE MEALS? Your children can get low cost meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on this application.
6. SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE APPROVED FOR FREE MEALS? Please read the letter you got carefully and follow the instructions. Call the school at [phone number] if you have questions.
7. MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT ANOTHER ONE? Yes. Your child's application is only good for that school year and for the first 30 days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.
8. I GET WIC. CAN MY CHILD(REN) GET FREE MEALS? Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out a FREE/REDUCED PRICE MEAL application.
9. WILL THE INFORMATION I GIVE BE CHECKED? Yes and we may also ask you to send written proof.
10. IF I DON'T QUALIFY NOW, MAY I APPLY LATER? Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.
11. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: [name, address, phone number, e-mail].
12. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You or your child(ren) do not have to be U.S. citizens to qualify for free or reduced price meals.
13. WHO SHOULD I INCLUDE AS MEMBERS OF MY HOUSEHOLD? You must include all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.
14. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.

Meal Service to Children With Disabilities: Federal regulations require schools and institutions to serve meals at no extra charge to children with a disability which may restrict their diet. A student with a disability is defined in 7CFR Part 15b.3 of Federal regulations, as one who has a physical or mental impairment which substantially limits one or more major life activities. Major life activities are defined to include functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. You must request the special meals from the school and provide the school with medical certification from a medical doctor. If you believe your child needs substitutions because of a disability, please get in touch with us for further information, as there is specific information that the medical certification must contain.

Confidentiality: The United States Department of Agriculture has approved the release of students names and eligibility status, without parent/guardian consent, to persons directly connected with the administration or enforcement of federal education programs such as Title I and the National Assessment of Educational Progress (NAEP), which are United States Department of Education programs used to determine areas such as the allocation of funds to schools, to evaluate socioeconomic status of the school's attendance area, and to assess educational progress. Information may also be released to State health or State education programs administered by the State agency or local education agency, provided the State or local education agency administers the program, and federal State or local nutrition programs similar to the National School Lunch Program. Additionally, all information contained in the free and reduced price application may be released to persons directly connected with the administration or enforcement of programs authorized under the National School Lunch Act (NSLA) or Child Nutrition Act (CNA); including the National School Lunch and School Breakfast Programs, the Special Milk Program, the Child and Adult Care Food Program, Summer Food Service Program and the Special Supplemental Nutrition Program for Women Infants and Children (WIC); the Comptroller General of the United States for audit purposes, and federal, State or local law enforcement officials investigating alleged violation of the programs under the NSLA or CNA.

Reapplication: You may apply for benefits any time during the school year. Also, if you are not eligible now, but during the school year become unemployed, have a decrease in household income, or an increase in family size you may request and complete an application at that time.

The disclosure of eligibility information not specifically authorized by the NSLA requires a written consent statement from the parent/guardian. We will let you know when your application is approved or denied.

Sincerely,

2014-2015 Application for Free and Reduced Price School Meals/Milk

To apply for free and reduced price meals for your children, read the instructions on the back, complete **only** one form for your household, sign your name and return it to (name/school). Call (phone number) if you need help. Additional names may be listed on a separate paper.

1. List all children in your household who attend school:

Student Name	School	Grade/Teacher	Foster Child	No Income
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

2. SNAP or TANF Benefits:

If anyone in your household receives either SNAP, TANF or FDIPIR benefits, list their name and CASE # here. Skip to Part 5, and sign the application.

Name: _____ CASE # _____

3. If any child you are applying for is homeless, migrant or a runaway, please call this number:

☐ Homeless ☐ Migrant ☐ Runaway

(Homeless Liaison/Migrant Education Coordinator)

4. Household Gross Income: List all people living in your household, how much and how often they are paid (weekly, every other week, twice per month, monthly). Do not leave income blank. If no income, check box. If you have listed a foster child above, you must report their personal income.

Name of household member LIST EVERYONE EMPLOYED OR NOT	Earnings from work before deductions Amount / How Often	Child Support, Alimony Amount / How Often	Pensions, Retirement Payments Amount / How Often	Other Income, Social Security Amount / How Often	No Income
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>
	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____	<input type="checkbox"/>

5. Signature: An adult household member must sign this application and provide the last four digits of their Social Security Number (SS#), or mark the "I do not have a SS# box" before it can be approved.

I certify (promise) that all of the information on this application is true and that all income is reported. I understand that the information is being given so the school will get federal funds; the school officials may verify the information and if I purposely give false information, I may be prosecuted under applicable State and federal laws, and my children may lose meal benefits.

Signature: _____ Date: _____

Email Address: _____ Last Four Digits of Social Security Number: ***-**-____

Home Phone _____ Work Phone _____ Home Address _____

I do not
have a
SS# ☐

DO NOT WRITE BELOW THIS LINE - FOR SCHOOL USE ONLY

Annual Income Conversion (Only convert when multiple income frequencies are reported on application)
Weekly X 52; Every Two Weeks (bi-weekly) X 26; Twice Per Month X 24; Monthly X 12

☐ Food Stamp/TANF/Foster
☐ Income Household: Total Household Income/How Often: _____ Household Size: _____
☐ Free Meals ☐ Reduced Price Meals ☐ Denied/Paid
☐ Signature of Reviewing Official _____ Date Notice Sent: _____

Waterville Central School District
Memorial Park Elementary School
Grades K-6

145 E. Bacon Street • Waterville, NY 13480

Phone: 315-841-3700

Fax: 315-841-3718

www.watervillecsd.org

Maureen Gray • Principal

mgray@watervillecsd.org

TO: Parent/Guardian
FROM: Maureen Gray
RE: Title 1 Requirements

Memorial Park Elementary School is a “Title I” school. A Title I school is a school that receives supplemental federal funding due to the high percentage of low-income students. Title I funding is intended to help close the achievement gap between low and high performing schools and ensure that all children have the opportunity to obtain a high quality education and reach grade-level proficiency.

As a parent of a student at the Waterville Central School, you have the right to know the professional qualifications of the classroom teacher(s) who instruct your child. Federal law allows you to ask certain information about your child’s classroom teacher(s), and requires us to give you this information in a timely manner, should you ask for it. Specifically, you have the right to ask for the following information about each of your child’s classroom teacher(s):

- (a) Whether NYS Education Department has licensed or qualified the teacher for grades and subjects he or she teaches.
- (b) Whether the NYS Education Department has decided that the teacher can teach in a classroom without being licensed or qualified under state regulations because of special circumstances.
- (c) The teacher’s college major and whether the teacher has any advanced degrees and, if so, the subject of degree.
- (d) Whether any paraprofessionals provide service to your child and, if they do, their qualifications.
- (e) You can find the full parent involvement in the Title I Program at www.moboces.org/districtpolicies/?public=waterville

You also have the right to know that because MPS is a Title I school and Focus school, parents have the option of “Public School Choice.” Public School Choice allows parents the choice to send your child to another public elementary school within the District that has not been deemed a Focus School. However, since there are no other choices in our District, this is not an option.

At MPS, however, we are implementing the following initiatives to ensure increased academic success within the District:

- Adopting the New York State Common Core Curriculum
- Providing rigorous, differentiated instruction to all students
- Implementing integrated Co-Teaching for Students with Disabilities
- Providing targeted Academic Intervention Services (AIS) for those students who qualify
- Increasing time, in minutes, for Math and ELA instruction during the school day

If you would like to receive this information, please call the office, and we will be happy to provide it to you.

Thank you.

*Please see Newsletter regarding the annually required Title I Parent Meeting, scheduled for 6 pm on September 14th in the MPS Cafeteria.