

Laurel Highlands School District Information

*Please keep this packet for your records
(only return specific documents if appropriate)*



: The mission of the Laurel Highlands School District, in partnership with students, families, and the community, is to provide a rigorous, meaningful, and relevant education which prepares students to become productive members of our ever changing, global society.

:

- 1. Demonstrate increased academic achievement and growth district-wide*
- 2. Develop a district system to collect and evaluate student, staff, parent, and community feedback annually*
- 3. Establish a system that ensures the district's resources effectively address instructional priorities aligned with the district's vision and mission*
- 4. Prepare all students with essential skills to be successful in their future*



Laurel Highlands School District

304 Bailey Avenue, Uniontown, Pennsylvania 15401
(724) 437-2821 Fax (724) 437-8929 www.lhsd.org



Jesse T. Wallace, III, D.Ed.
Superintendent

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Food Service Director*

Richard Barron
*Chief of Police/Security
Attendance Officer/Discipline Review
Transportation Director*

Zachary Just
PIMS Coordinator

Nick Gulino
Director of Buildings & Grounds

Dear Parent/Guardian:

Welcome!

It is with great pride that we accept your child into our educational family. Our staff is one of the best equipped and highly trained group of educators in the region if not nationally. It is indeed our duty and privilege to help each child learn and to challenge each child to meet the Pennsylvania Department of Education Standards. Our unique role as a public school is to accept each child and to work with the parents, teachers, and support staff to help all children. Your children come to us with various skills, different maturity levels, and varied capabilities and levels of readiness. This is obviously a complex task, placing these children in a classroom of strangers, and then trying to make it all work.

Our entire staff is dedicated to helping your child reach his/her potential. We will work with you and your child to provide a wide range of educational experiences and enrichment opportunities. This is indeed an exciting and emotional time for you and your child. Please take consolation when times seem difficult, and realize we are experienced at handling these situations. If you need help or someone to talk to – we are here for you.

In closing, we want to reassure you that we are dedicated to our profession. Enjoy your wonderful years watching your child grow and develop. We look forward to the education and growth of your student.

Sincerely,

Jesse T. Wallace, III
Superintendent

Title I Parent Resource Center Order Form

As a Title I Parent, you may request a single copy of one or more (up to 10 titles) of the following booklets from the Resource Center completely free of charge. Please complete this form and check up to ten (10) items you would like shipped to you. Return the form to: Midwestern Intermediate Unit IV, 453 Maple Street, Grove City, PA 16127. **ATTENTION: Title I Parent Resource Center.** Fax: 724-458-5083

Date _____ School District _____

Name of Title I Parent (please print) _____

Parent's Mailing Address (please print) _____

I, , verify this request is from a Title I Parent in our school district.
(Signature of Title I Coordinator or Administrator)

Check up to ten (10) titles from the following booklets. * Indicates items for children

A. CAREER AWARENESS

- 1. After High School - What?
- 2. Landing a Job - Tips for a Successful Job Search
- 3. How to Encourage Attendance/Success at School
- 4. Next Stop...College! Tips to Help You Find A School That's Right for You
- 5. Financing a College Education
- 6. Be Successful at Work
- 7. Career Planning...A Skill for the Future
- 8. How to Get the Job you Want
- 9. Writing a Resume That Opens Doors
- 10. Balancing Work & Family
- 11. A Good Financial Start
- 12. Guide to Helping Your Teen Succeed in High School

B. PERSONAL DEVELOPMENT

- 4. About Setting Goals To Reach Your Potential
- 5. Assertiveness - Skills For Life
- 6. Teaching Children Responsibility For Their Learning & Behavior
- 8. 25 Ways Parents Can Build Children's Self-Esteem
- 9. Lo que usted debe saber sobre LA AUTOESTIMA
- 10. What Every Teenager Should Know about Peer Pressure
- 11. Raising Children of Character: a Parent's Handbook
- 12. A Positive Attitude, A Positive You!
- 13. Young People & Suicide - What You Should Know
- 14. Children and Depression - Learn the Facts
- 15. Know What? Bullying Hurts!* (ages 6-8)
- 17. What's Up With Beating Test Anxiety
- 18. Listening Well and Following Directions

C. PARENT/SCHOOL INVOLVEMENT

- 1. Teach Children Respect
- 3. Being Involved in Your Child's Education
- 4. Protect Your Child From Drugs: A Parent's Handbook
- 6. About Your School Counselor
- 8. Your Parent - Teacher Conference
- 11. About Helping Your Teen Finish School
- 12. Internet Safety & Responsibility for Students
- 14. La Crianza De Los Hijos
- 16. Raising Your Grandchildren: A Grandparent's Handbook
- 18. Helping Children Learn to Resolve Conflicts
- 19. About Getting Along at School
- 24. The ABC's of Discipline at Home
- 25. Keeping Tabs on Your Child's Education
- 26. Your Guide to Supporting Your Child at School

D. SPECIAL EDUCATION

- 1. Helping Your Child Manage ADHD: A Parent's Handbook
- 2. Helping Children with Learning Disabilities: A Parent's Handbook
- 4. What Is This Thing Called Dyslexia?

E. LIFE SKILLS

- 1. What You Should Know About Being a Single Parent
 - 5. Cooperative Co-Parenting - Making the Most of Custody Arrangements
 - 6. Single Mothers Entering the Work Force
-

F. CHILD SAFETY

- 1. McGruff's Bicycle Safety: Coloring Book*
- 2. McGruff Safe Kids Identification Kit
- 3. About Child Safety
- 4. About First Aid
- 5. Let's Learn More About School Bus Safety Activities Book*
- 6. About After-School Safety: Coloring/Activities Book*
- 7. Home Alone After School - What Parents Should Know

G. CHILD DEVELOPMENT

- 1. Child Development from Birth to 3 Years Old
- 2. Child Development from 3-6 Years Old
- 3. Child Development from 6-9 Years Old
- 4. Child Development from 9-12 Years Old
- 5. About Your Child's Thinking Skills and Language Development: Birth to Age 3

H. TITLE I

- 1. Learn about Schoolwide Title I Programs
- 4. Every Student Succeeds Act
- 5. Parents' Rights in Education - A Guide to the No Child Left Behind Act
- 8. Title I - What Parents Should Know
- 10. Acerca De Su Programa Del Titulo I
- 11. Common Core State Standards - Academic Success

I. HELPING YOUR CHILD LEARN

- 1. About Your Child's Learning Style
- 6. Effective Note Taking
- 7. Studying for Success
- 9. Homework Lessons for Parents
- 11. Your Child & Standardized Tests - Grades 3-5: A Parent's Handbook
- 12. Let's Improve our Test-Taking Skills* An Information & Activities Book (ages 9-12)
- 15. You, Your Child, and Math
- 19. 25 Ways Parents Can Read with Children
- 22. Starting School: Coloring Book*
- 23. Write to the Point-Tips to Write Effective Essays
- 24. Your Child and Writing
- 25. When a Bright Child Has Trouble Reading
- 26. Help Child w/ Homework Parent Handbook

J. FAMILY COMMUNICATIONS

- 1. I Tell the Truth
- 2. Critical Thinking
- 3. Let's Say "No Way!" to Violence: Info & Act.*
- 4. TV and Your Child
- 6. What's Up with Social Media
- 7. Making the Most of Your Child's Summer Vacation
- 8. What Every Family Should Know About Getting Along At Home
- 9. What's Up with Cyber Bullying
- 10. Bedtime Struggles
- 11. Las Batallas A La Hora De Dormir
- 12. I'm Proud to be a Military Kid*
- 13. Succeeding as a Military Family: a Guide
- 14. Who Knew? The Eat Healthy Be Fit Issue (ages 9-11)
- 15. Preventing Bullying - Information for Parents
- 16. Know What? Fighting Hurts
- 17. Parents and Stress
- 18. Anger Management for Parents: A Parents Handbook

K. MIDDLE SCHOOL

- 1. Middle School - Moving on up
- 2. What's Up with Starting Middle School
- 3. Standardized Tests in Middle School
- 4. Preparing Your Child for Middle School Success

L. SUBSTANCE ABUSE

- 1. About Addiction
- 2. On Living Drug-Free
- 3. Alcohol and Others Drugs - Keeping Tabs On Talking With Your Child
- 4. Trying Drugs - What Would YOU Do?

Laurel Highlands School District

Annual Public Notice of Child Find Activities

The Laurel Highlands School District uses the following procedures for screening, identifying, and evaluating specified needs of school-aged students requiring special programs of service.

The district meets the health screening requirements as described in Section 1402 of the School Code. The district routinely conducts screenings of a child's hearing acuity in following grades: Kindergarten, 1, 2, 3, 7, and 11, and other grades according to need. Visual acuity is screened in every grade. Height and weight data are collected yearly at every grade level and Body Mass (BMI) is calculated. Visual acuity, hearing acuity, height and weight screenings are conducted throughout the school year at the child's home school. School nurses work with the private schools (such as Montessori, New Directions, etc.) to provide required screenings. Dental exams are conducted in the spring of each school year in kindergarten, grades 3 and 7 at the respective schools. Physical exams are conducted in the spring of each year. Physicals are conducted in Kindergarten, grades 6 and 11, as well as scoliosis screenings in grades 6 and 7.

Kindergarten registration is held in the spring of each year. Currently all school districts throughout Fayette County are holding kindergarten registration during the same week in order to take advantage of local media to inform parents of the need to register students who will attend kindergarten in the fall. Students are to accompany parents when registering for kindergarten. During the registration, kindergarten teachers will screen each student's readiness skills, speech/language therapists will screen the student's articulation and language abilities, and the nurse will review the student's health record including immunizations. Classroom teachers assess gross motor and fine motor skills, academic skills, and social-emotional skills on an on-going basis and referrals made for follow-up when needed.

Throughout the school year, the district will administer standardized tests to students, beginning in kindergarten. These tests may include the Group-Mathematics Assessment and Diagnostic Evaluation (GMADE) and Dynamic Indicators of Basic Early Literacy Skills (DIBELS) administered in K, 1, and 2. 4-Sight tests will be administered throughout the year in grades 3-8. Results of these tests are provided to the parent/guardian each year. In addition, elementary teachers will test students to see if they have learned the particular skill being taught. These tests are given throughout the year.

The Pennsylvania System of School Assessment (PSSA) is administered at the mandate grade levels each school year. Other testing occurs on the basis of individual need. Vocational interest tests may be given in the secondary schools. Report cards are issued quarterly. Any parent who has a question about the testing program should contact the Building Principal. The Pennsylvania Alternate School Assessment (PASA) is available for students who meet the eligibility for this assessment.

If the student is experiencing academic, social, and/or behavioral issues that are impacting the student's education, then the student may be eligible for intervention to address the student's concerns. Every attempt will be made to maintain the student in his/her regular education environment prior to considering special education services. Screening information is utilized by a team consisting of the building principal, classroom teacher, guidance counselor, and school psychologist to determine if adjustments can be made in the child's current program and/or if a multidisciplinary evaluation is warranted. Once the student's needs are identified the team will discuss strategies to implement in the child's current program. If a student does not make progress, parents will be asked to give written permission for a multidisciplinary evaluation.

Parents with concerns regarding their child may contact the building principal at any time to request a screening or evaluation. The request shall be in writing, if the request is made orally, the parent will be asked to make the request in writing and will be provided with the proper form. Communication with the parents and students shall be in English or their native language. For parents with a hearing impairment, the school district will provide a person to communicate in sign language.

After the multidisciplinary evaluation is completed, an Evaluation Report (ER) is compiled with parent input and includes recommendations for the types of intervention necessary to accommodate the child's specific needs. Parents are provided with a draft copy of the ER to review prior to the meeting where the results of the evaluation are explained and discussed. An Individualized Education Plan (IEP) is developed for those students qualifying for special education services. This plan includes demographic information regarding the student; his/her strengths and needs with goals and objectives that address needs, along with specially designed instruction and related services necessary to accomplish the goals and objectives. The IEP Team consists of the following: the parent, the building principal/LEA, a special education teacher and a regular education teacher. Other team members may include: the student when appropriate, the school psychologist, public agency representative, other teachers or specialists, other administrative staff, etc. Parents are an integral part of the IEP team and are encouraged to be physically present at the IEP meeting. The district makes every effort to ensure parent participation. The district notifies the parent in writing and makes documented phone calls to make parents aware of the IEP conference and the importance of parent participation. Parents are then presented with a Notice of recommended Educational Placement (NOREP) with which they may agree or disagree. If parents agree, the IEP is implemented. If parents disagree with the recommendation, the issue may be taken to mediation or to a due process hearing.

The Laurel Highlands School District operates a comprehensive continuum of services for special needs students. For the most part identified exceptional students are served in their home school. Types of services available include: **Learning Support** that is primarily for students with academic learning needs. **Life Skills Support** that focuses primarily on the need for independent living skills. **Emotional Support** which addresses social and emotional difficulties, **Multiple Disabilities Support** which is for students with more than one disability, **Physical Support** for students whose need is the result of a physical disability, **Autistic Support** for those students diagnosed with Autism and/or Pervasive Development Disorder, **Speech/Language Support** that is for students who have articulation and/or expressive/receptive language difficulties, **Hearing Support** for students who are hearing impaired/deaf, **Vision Support** which is for students who are blind or visually impaired, and **Gifted Support** for those students identified as mentally gifted. The Laurel Highlands School District works closely with neighboring school districts and Intermediate Unit # 1 to place students who cannot be served within the district. The small number of students who needs cannot be accommodated in the public school setting can receive services in an approved private school or other licensed facilities at school district expense. No such placement is made without an IEP meeting and parental agreement. Laurel Highlands intends to serve students at the home school or within the district before considering other placements.

If a child does not qualify for special education services, he/she may still be considered a protected handicapped student and require services under Chapter 15. A protected handicapped student is a student who is school aged with a physical or mental disability that substantially limits or prohibits participation in or access to any aspect of the school program. The Laurel Highlands School District provides each protected handicapped student the aids, services or accommodations which are needed to provide equal opportunity to participate in and obtain the benefits of the school program and extra curricular activities to the maximum extent appropriate to the student's abilities. If you believe your child comes under this classification and is in need of a service to assist him/her in benefiting from his/her education, you should contact your building principal.

The Laurel Highlands School District recognized the need to protect the confidentiality of personally identifiable information in the education records of exceptional children. The Laurel Highlands School District confidentiality Assurance Policy has been prepared as to insure the privacy rights of both the parents and the exceptional child in the collection, maintenance, release, and destruction of these records. The Laurel Highlands School District and its staff are required by Federal law and State and Federal Rules and Regulations to protect the rights of students. The foundation of these rights comes from Federal Legislation entitled the Family Educational rights and Privacy Act of 1974 – FERPA (also known as the Buckley Amendments). All students are protected by the State Regulations contained in Chapter 12 known as Student's Rights and Responsibilities. In addition, State Rules and regulations protect regular and special education students' rights and privacy.

School records are always open and available to parents and only to school officials who have legitimate "need to know" information about the child. Disclosure of information means to permit the release, transfer or other communication of education records to any part, by oral, written and /or electronic means. This means that information about a student

cannot be shared in conversation without permission. This also applies to other personnel who do not have an educationally relevant reason to possess knowledge student.

The parents of a student or eligible student have the right to inspect and/or challenge their child's or their own educational records, to receive copies of the records, and to have a school official explain the records if requested as outlined in the Laurel Highlands District Policy. The school district will disclose directory information which includes: the student's name, address, telephone number, date and place of birth, major field of study, participation in officially recognized activities and sports, weights and heights of members of athletic teams, dates of attendance, degrees and awards received, the most recent previous educational agency of or institution attended by the student, and other similar information. Should the parent of a student or eligible student wish to refuse disclosure of this information, a written notice or refusal of disclosure of directory information must be sent to the Principal within twenty (20) days of this public notice. To inspect your child's or your records, contact the Building Principal.

The Laurel Highlands School District will release information from a student's education record without prior consent to officials of the other primary or secondary schools or school systems in which a student seeks or intends to enroll. Transcripts to post-secondary institutions in which a student seeks or intends to enroll will be sent upon request of parents of a student or eligible student. Parents, upon written request, may receive a copy of records that may be released by the school district. The parents have the right to request that their child's or their educational records be changed if they are inaccurate, misleading or violate student's rights, and to have a hearing if that request is refused.

A more detailed explanation of these rights, the procedure to follow, and the limitations on the release of records are presented in the school district's policy on the collection, maintenance and release of student records. You may obtain a copy of this policy by contacting the Building Principal.

Early Intervention

In Pennsylvania, a child between three years of age and the school district's age to begin school who has a developmental delay or one or more of the physical or mental conditions listed above, will be identified as an "eligible young child." The parents of these children have the same rights described above.

The Pennsylvania Department of Education is responsible for providing programs and services to eligible young children under Act 212 of 1990, the Early Intervention Services System Act. Screening for preschool children is available through the Child Alert Program operated by Intermediate Unit #1. To schedule an appointment for screening call Barbara Rothermel at 1.800.328.6481. For additional information, contact Lori DiCenzo at 724.437.2821

A developmental delay is determined by the results of a developmental evaluation. The results of one or more domain areas (adaptive, personal-social, communication, motor or cognitive) have to show at least a 25% delay or a score of 1.5 standard deviations below the mean (Standard Score of 77 or below). The delay results in the need for specially designed intervention/instruction (SDI) in order to participate in typical activities and routines.

Children with a developmental delay may show weaknesses in the following areas:

Adaptive – Pre-kindergarten aged children with a developmental delay may have difficulty dressing/undressing; using utensils to eat, removing shoes without assistance, distinguishing between nonfood/food substances, or have difficulty with toileting needs. One may have difficulty moving independently around the house, understanding that hot is dangerous, putting away toys when asked, indicating an illness or ailment to an adult, or demonstrating caution and avoiding common dangers.

Personal-Social – Pre-kindergarten aged children with a developmental delay may have difficulty responding positively to adult praise, rewards or promise of rewards; greeting familiar adults spontaneously, enjoying simple stories read aloud, helping with simple household tasks, initiating social interaction with familiar adults, expressing affection/liking for peers, playing cooperatively with peers, stating first name, last name, age, or whether he is a male/female; using objects in make-believe play, using 'I' or 'me' to refer to himself, or recognizing facial expressions of common emotions.

Communication - Pre-kindergarten aged children with a developmental delay may have difficulty following 2-step verbal commands, associating spoken words with pictures, recalling events from a story presented orally; engaging in extended and meaningful nonverbal exchanges with others, using words to get his/her needs met, responding to 'yes' and 'no' questions appropriately, or asking 'wh' questions.

Motor - Pre-kindergarten aged children with a developmental delay may have difficulty running without falling, kicking a ball without falling, walking up and down steps alternating feet without assistance, walking backward, imitating the bilateral movements of an adult, pointing with his index finger independent of the thumb and other fingers, scribbling linear and/or circular patterns spontaneously, using the pads of fingertips to grasp a pencil, holding a paper with one hand while drawing or writing with the other hand, fastening clothing without assistance, cutting with scissors, copying a circle, or imitating vertical and horizontal markings.

Cognitive - Pre-kindergarten aged children with a developmental delay may have difficulty attending to one activity for 3 or more minutes, reciting memorized lines from songs or TV shows, showing interest in age-appropriate books, matching/naming colors, responding to one and one more, giving three objects on request, matching shapes, identifying objects by their use, identifying items by size, identifying colors of familiar objects not in view, or identifying simple objects by touch.

Developmental disabilities are birth defects related to a problem with how a body part or body system works. They may also be known as functional birth defects. Many of these conditions affect multiple body parts or systems. Researchers have identified thousands of different birth defects. Birth defects can have a variety of causes, such as:

Genetic problems caused when one or more genes doesn't work properly or part of a gene is missing, problems with chromosomes, such as having an extra chromosome or missing part of a chromosome, environmental factors that the expectant mother is exposed to during pregnancy, such as Rubella or German measles or if she uses drugs or alcohol during pregnancy.

For further information in the screening procedures, evaluation procedures, and provision of services to protected handicapped students, contact Dr. Jesse T. Wallace, Superintendent of Schools, 304 Bailey Avenue, Uniontown, PA 15401 or call 724-437-2821

Age Waiver Public Notice

Due to the decrease of enrollment and small classes in the Laurel Highlands School District special education maybe out of compliance due to age range according to PDE. A student with a disability eligible to receive special education services may not be placed in a class in which the chronological age from the youngest to oldest student varies beyond three years in the grades K-6 and 4 years in grades 7-12 unless an exception is determined to be appropriate by the IEP team of the student whose age is outside the age range of the program where the student would be receiving special education services. (22Pa. School Code 14.42(f))

A statement will be written into student's IEP's indicating age differences. Parents will also sign a waiver informing them of the age range of their child's special education program and their child's IEP will not be adversely affected by this change. Their child's needs will be met through the students IEP.

Medical/Dental Screenings Schedule

Dear Parents/Guardians:

The Pennsylvania School Health Law requires scheduled screenings of all children. Early detection and correction of problems assures your child of the opportunity of taking advantage of his/her educational opportunities. The screenings are scheduled as follows:

| | |
|-------------------------------|---|
| Physical Exam | Original Entry, Sixth Grade, Eleventh Grade |
| Dental Exam | Original Entry, Third Grade, Seventh Grade |
| Scoliosis Exam | Sixth Grade, Seventh Grade |
| Height, Weight, Vision | Yearly |
| Hearing | Original Entry, First Grade, Second Grade, Third Grade, Seventh Grade, Eleventh Grade |

Students may be delayed entering school if all immunizations are not current.

Medication Policy and Procedures

This communication is to establish guidelines for children who must take medication while at school. Prescription medication can be given daily by complying with the following policies and procedures:

1. Furnish a written authorization from the child's physician and parent/guardian. Please note all medication orders expire at the end of each school year and a newly signed order for all medications must be obtained each year.

(Medical Authorization Forms are available at your child's school)

2. Send only those prescription medications which **MUST** be given during school hours.

(Medications taken three times per day should be given before and after school)

3. **IMPORTANT**: Medication should be sent in the original prescription container.

4. Parent/guardian **MUST** bring the medication to school office.

5. **DO NOT SEND MEDICATION** with your child on the school bus.

6. Medication will be prohibited in desks, lockers, or to be carried by the student during the school day.

7. The child is to go to the nurse's office and request his/her medication at the scheduled time.

8. When the physician is not available for consultation, the parent is to assume the complete responsibility for giving any medication to their child while in school.

9. Over the counter medication **WILL NOT** be given at school without a doctor's authorization.

10. If your child has been diagnosed with Asthma, please see the school nurse.

Your cooperation is necessary for the safety of all children and clarification of policy for school personnel. Failure to comply with all guidelines will prevent the school personnel from handling your child's medication.

Exemptions to the school laws for immunizations are:

- medical reasons;
- religious beliefs; and
- philosophical/strong moral or ethical conviction.

If your child is exempt from immunizations, he or she may be removed from school during an outbreak.

VACCINE SAFETY

- Vaccines are held to the highest standard of safety.
- The United States has the safest, most effective vaccine supply in history.
- Vaccines are continually monitored for safety and effectiveness.

Pennsylvania's school immunization requirements can be found in
28 PA Code Ch.23
(School Immunization).

Contact your health care provider or the Pennsylvania Department of Health at 1-877-PA-HEALTH (1-877-724-3258).

Vaccine information can be found at:
www.dontwaitvaccinate.pa.gov



Rev. 03/17

PENNSYLVANIA SCHOOL IMMUNIZATION REQUIREMENTS

IMMUNIZE --

Don't Wait. Vaccinate.

Children in **ALL** grades (K-12) need the following **immunizations for attendance:**

- 4 doses of tetanus, diphtheria and acellular pertussis*
(1 dose on or after 4th birthday)
- 4 doses of polio (4th dose on or after 4th birthday and at least 6 months after previous dose given)
- 2 doses of measles, mumps and rubella**
- 3 doses of hepatitis B
- 2 doses of varicella (chickenpox) or evidence of immunity

Seventh through 12th Grade ADDITIONAL immunization requirements for attendance:

- 2 doses meningococcal conjugate vaccine (MCV)
 - First dose is given 11-15 years of age; a second dose is required at age 16 or entry into 12th grade.
 - If the dose was given at 16 years of age or older, only one dose is required.
- 1 dose of tetanus, diphtheria, acellular pertussis (Tdap)

* Usually given as DTaP or DTP or DT or Td

** Usually given as MMR

Don't Wait. Vaccinate.



SCHOOL VACCINATION INFORMATION FOR PARENTS

The Department of Health is changing school immunization regulations beginning in August 2017. The regulations are intended to ensure that children attending school in the commonwealth are adequately protected against potential outbreaks of vaccine preventable diseases.



A CHILD MUST HAVE REQUIRED VACCINES OR RISK EXCLUSION FROM SCHOOL.

A child must have the required medically-appropriate vaccines or a plan to complete those vaccines or risk exclusion from school. A child may still obtain medical, religious or philosophical exemption from meeting the immunization requirements. Talk to your child's pediatrician about the vaccines your child needs to attend school.



NEW VACCINATION REQUIREMENTS:

- combination form for diphtheria and tetanus;
- pertussis vaccination;
- combination form for measles, mumps and rubella; and
- meningococcal conjugate vaccine for entry into 12th grade, or in an ungraded school, in the school year the child turns 18.

For more information on the vaccines your child needs to attend school, visit dontwaitvaccinate.pa.gov or talk to your child's pediatrician.

dontwaitvaccinate.pa.gov





Bureau of Community Health Systems
Division of School Health

Private or School PHYSICAL EXAMINATION OF SCHOOL AGE STUDENT

PARENT / GUARDIAN / STUDENT:
Complete page one of this form **before**
student's exam. Take completed form to
appointment.

Student's name _____ Today's date _____
Date of birth _____ Age at time of exam _____ Gender: Male Female

| | | | |
|--|----------------------------------|-------------------------------|---|
| Medicines and Allergies: Please list all prescription and over-the-counter medicines and supplements (herbal/nutritional) the student is currently taking: _____ | | | |
| Does the student have any allergies? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, list specific allergy and reaction.) | | | |
| <input type="checkbox"/> Medicines | <input type="checkbox"/> Pollens | <input type="checkbox"/> Food | <input type="checkbox"/> Stinging Insects |

Complete the following section with a check mark in the YES or NO column; circle questions you do not know the answer to.

| GENERAL HEALTH: <i>Has the student...</i> | YES | NO |
|---|-----|----|
| 1. Any ongoing medical conditions? If so, please identify: <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infection Other _____ | | |
| 2. Ever stayed more than one night in the hospital? | | |
| 3. Ever had surgery? | | |
| 4. Ever had a seizure? | | |
| 5. Had a history of being born without or is missing a kidney, an eye, a testicle (males), spleen, or any other organ? | | |
| 6. Ever become ill while exercising in the heat? | | |
| 7. Had frequent muscle cramps when exercising? | | |
| HEAD/NECK/SPINE: <i>Has the student...</i> | YES | NO |
| 8. Had headaches with exercise? | | |
| 9. Ever had a head injury or concussion? | | |
| 10. Ever had a hit or blow to the head that caused confusion, prolonged headache, or memory problems? | | |
| 11. Ever had numbness, tingling, or weakness in his/her arms or legs after being hit or falling? | | |
| 12. Ever been unable to move arms or legs after being hit or falling? | | |
| 13. Noticed or been told he/she has a curved spine or scoliosis? | | |
| 14. Had any problem with his/her eyes (vision) or had a history of an eye injury? | | |
| 15. Been prescribed glasses or contact lenses? | | |
| HEART/LUNGS: <i>Has the student...</i> | YES | NO |
| 16. Ever used an inhaler or taken asthma medicine? | | |
| 17. Ever had the doctor say he/she has a heart problem? If so, check all that apply: <input type="checkbox"/> Heart murmur or heart infection <input type="checkbox"/> High blood pressure <input type="checkbox"/> Kawasaki disease <input type="checkbox"/> High cholesterol <input type="checkbox"/> Other: _____ | | |
| 18. Been told by the doctor to have a heart test? (For example, ECG/EKG, echocardiogram)? | | |
| 19. Had a cough, wheeze, difficulty breathing, shortness of breath or felt lightheaded DURING or AFTER exercise? | | |
| 20. Had discomfort, pain, tightness or chest pressure during exercise? | | |
| 21. Felt his/her heart race or skip beats during exercise? | | |
| BONE/JOINT: <i>Has the student...</i> | YES | NO |
| 22. Had a broken or fractured bone, stress fracture, or dislocated joint? | | |
| 23. Had an injury to a muscle, ligament, or tendon? | | |
| 24. Had an injury that required a brace, cast, crutches, or orthotics? | | |
| 25. Needed an x-ray, MRI, CT scan, injection, or physical therapy following an injury? | | |
| 26. Had joints that become painful, swollen, feel warm, or look red? | | |
| SKIN: <i>Has the student...</i> | YES | NO |
| 27. Had any rashes, pressure sores, or other skin problems? | | |
| 28. Ever had herpes or a MRSA skin infection? | | |

| GENITOURINARY: <i>Has the student...</i> | YES | NO |
|--|-----|----|
| 29. Had groin pain or a painful bulge or hernia in the groin area? | | |
| 30. Had a history of urinary tract infections or bedwetting? | | |
| 31. FEMALES ONLY: Had a menstrual period? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: At what age was her first menstrual period? _____ How many periods has she had in the last 12 months? _____ Date of last period: _____ | | |
| DENTAL: | YES | NO |
| 32. Has the student had any pain or problems with his/her gums or teeth? | | |
| 33. Name of student's dentist: _____ Last dental visit: <input type="checkbox"/> less than 1 year <input type="checkbox"/> 1-2 years <input type="checkbox"/> greater than 2 years | | |
| SOCIAL/LEARNING: <i>Has the student...</i> | YES | NO |
| 34. Been told he/she has a learning disability, intellectual or developmental disability, cognitive delay, ADD/ADHD, etc.? | | |
| 35. Been bullied or experienced bullying behavior? | | |
| 36. Experienced major grief, trauma, or other significant life event? | | |
| 37. Exhibited significant changes in behavior, social relationships, grades, eating or sleeping habits; withdrawn from family or friends? | | |
| 38. Been worried, sad, upset, or angry much of the time? | | |
| 39. Shown a general loss of energy, motivation, interest or enthusiasm? | | |
| 40. Had concerns about weight; been trying to gain or lose weight or received a recommendation to gain or lose weight? | | |
| 41. Used (or currently uses) tobacco, alcohol, or drugs? | | |
| FAMILY HEALTH: | YES | NO |
| 42. Is there a family history of the following? If so, check all that apply: <input type="checkbox"/> Anemia/blood disorders <input type="checkbox"/> Inherited disease/syndrome <input type="checkbox"/> Asthma/lung problems <input type="checkbox"/> Kidney problems <input type="checkbox"/> Behavioral health issue <input type="checkbox"/> Seizure disorder <input type="checkbox"/> Diabetes <input type="checkbox"/> Sickle cell trait or disease Other: _____ | | |
| 43. Is there a family history of any of the following heart-related problems? If so, check all that apply: <input type="checkbox"/> Brugada syndrome <input type="checkbox"/> QT syndrome <input type="checkbox"/> Cardiomyopathy <input type="checkbox"/> Marfan syndrome <input type="checkbox"/> High blood pressure <input type="checkbox"/> Ventricular tachycardia <input type="checkbox"/> High cholesterol <input type="checkbox"/> Other: _____ | | |
| 44. Has any family member had unexplained fainting, unexplained seizures, or experienced a near drowning? | | |
| 45. Has any family member / relative died of heart problems before age 50 or had an unexpected / unexplained sudden death before age 50 (includes drowning, unexplained car accidents, sudden infant death syndrome)? | | |
| QUESTIONS OR CONCERNS | YES | NO |
| 46. Are there any questions or concerns that the student, parent or guardian would like to discuss with the health care provider? (If yes, write them on page 4 of this form.) | | |

I hereby certify that to the best of my knowledge all of the information is true and complete. I give my consent for an exchange of health information between the school nurse and health care providers.

Signature of parent / guardian / emancipated student _____ Date _____

| STUDENT'S HEALTH HISTORY (page 1 of this form) REVIEWED PRIOR TO PERFORMING EXAMINATION: Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
|--|-----------|-----------|-------|--|
| Physical exam for grade: K/1 <input type="checkbox"/> 6 <input type="checkbox"/> 11 <input type="checkbox"/> Other <input type="checkbox"/> | CHECK ONE | | | *ABNORMAL FINDINGS / RECOMMENDATIONS / REFERRALS |
| | NORMAL | *ABNORMAL | DEFER | |
| Height: () inches | | | | |
| Weight: () pounds | | | | |
| BMI: () | | | | |
| BMI-for-Age Percentile: () % | | | | |
| Pulse: () | | | | |
| Blood Pressure: (/) | | | | |
| Hair/Scalp | | | | |
| Skin | | | | |
| Eyes/Vision Corrected <input type="checkbox"/> | | | | |
| Ears/Hearing | | | | |
| Nose and Throat | | | | |
| Teeth and Gingiva | | | | |
| Lymph Glands | | | | |
| Heart | | | | |
| Lungs | | | | |
| Abdomen | | | | |
| Genitourinary | | | | |
| Neuromuscular System | | | | |
| Extremities | | | | |
| Spine (Scoliosis) | | | | |
| Other | | | | |

| TUBERCULIN TEST | DATE APPLIED | DATE READ | RESULT/FOLLOW-UP |
|-----------------|--------------|-----------|------------------|
| | | | |
| | | | |

| MEDICAL CONDITIONS OR CHRONIC DISEASES WHICH REQUIRE MEDICATION, RESTRICTION OF ACTIVITY, OR WHICH MAY AFFECT EDUCATION |
|---|
| (Additional space on page 4) |

| |
|---|
| Parent/guardian present during exam: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Physical exam performed at: Personal Health Care Provider's Office <input type="checkbox"/> School <input type="checkbox"/> Date of exam _____ 20____ |
| Print name of examiner _____ |
| Print examiner's office address _____ Phone _____ |
| Signature of examiner _____ MD <input type="checkbox"/> DO <input type="checkbox"/> PAC <input type="checkbox"/> CRNP <input type="checkbox"/> |

HEALTH CARE PROVIDERS: *Please photocopy immunization history from student's record – OR – insert information below.*

IMMUNIZATION EXEMPTION(S):

Medical Date Issued: _____ Reason: _____ Date Rescinded: _____
 Medical Date Issued: _____ Reason: _____ Date Rescinded: _____
 Medical Date Issued: _____ Reason: _____ Date Rescinded: _____

NOTE: The parent/guardian must provide a written request to the school for a religious or philosophical exemption.

| VACCINE | DOCUMENT: (1) Type of vaccine; (2) Date (month/day/year) for each immunization | | | | |
|---|--|----|----|----|----|
| Diphtheria/Tetanus/Pertussis (child) Type: DTaP, DTP or DT | 1 | 2 | 3 | 4 | 5 |
| Diphtheria/Tetanus/Pertussis (adolescent/adult) Type: Tdap or Td | 1 | 2 | 3 | 4 | 5 |
| Polio Type: OPV or IPV | 1 | 2 | 3 | 4 | 5 |
| Hepatitis B (HepB) | 1 | 2 | 3 | 4 | 5 |
| Measles/Mumps/Rubella (MMR) | 1 | 2 | 3 | 4 | 5 |
| Mumps disease diagnosed by physician <input type="checkbox"/> | Date: _____ | | | | |
| Varicella: Vaccine <input type="checkbox"/> Disease <input type="checkbox"/> | 1 | 2 | 3 | 4 | 5 |
| Serology: (Identify Antigen/Date/POS or NEG) i.e. Hep B, Measles, Rubella, Varicella | 1 | 2 | 3 | 4 | 5 |
| Meningococcal Conjugate Vaccine (MCV4) | 1 | 2 | 3 | 4 | 5 |
| Human Papilloma Virus (HPV) Type: HPV2 or HPV4 | 1 | 2 | 3 | 4 | 5 |
| Influenza Type: TIV (injected) LAIV (nasal) | 1 | 2 | 3 | 4 | 5 |
| | 6 | 7 | 8 | 9 | 10 |
| | 11 | 12 | 13 | 14 | 15 |
| Haemophilus Influenzae Type b (Hib) | 1 | 2 | 3 | 4 | 5 |
| Pneumococcal Conjugate Vaccine (PCV) Type: 7 or 13 | 1 | 2 | 3 | 4 | 5 |
| Hepatitis A (HepA) | 1 | 2 | 3 | 4 | 5 |
| Rotavirus | 1 | 2 | 3 | 4 | 5 |
| Other Vaccines: (Type and Date) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Laurel Highlands School District

Speech Development

When is Speech “*Within Normal Range*”?

A child’s speech is “within normal range” when he/she can use the vowel and consonant sounds expected of his/her age group. A child’s speech is also “within normal range” when it is consistent with the child’s general development. For example, when a child is less mature in motor development, social development, or intellectual development, it can be expected that his/her speech will be more consistent with his/her general development than with his/her chronological age. There is a scale of speech development upon which we measure any given speech performance.

Maturation Table for Vowel and Consonant Sounds

| Age in Years | Speech Sounds | Description |
|----------------|---------------------------------------|---------------------|
| Prior to age 3 | Vowels | |
| 3 - 4 | p, b, m, w, h | Mostly lip sounds. |
| 4 1/2 | t, d, n, k, g, ng, y | Tongue sounds. |
| 5 1/2 | f | Lip - teeth sounds. |
| 6 1/2 | v, sh, zh | |
| 7 ½ - 8 | s, z, r, th, ch, j, wh, l, and blends | |

When do speech errors constitute a speech problem and when do they constitute “*normal immature*” speech?

A child’s speech is measured against the “Maturation Table for Consonant Sounds” (above). If all expected sounds have been acquired, speech is regarded as normal. If the child has failed to acquire sounds expected for his/her age, mental, social, and motor maturity must be examined. When speech is found to be consistent with these areas, but below the level of expectation for chronological age, it is considered “within normal range” but possibly requiring assistance later. If the child has a single phonemic error in kindergarten or first grade, he/she should not be included for formal speech therapy until he/she is developmentally ready according to the maturation table.

Exceptions:

- Any child having an organic or physical defect which will interfere with the acquisition of normal speech should be given help at the earliest possible time. Such defects may include cleft palate, hearing loss, etc.
- Any child having a deficit in language of one year or more in addition to articulation errors should be given help at the earliest possible time.
- Any child having certain distortions of sounds (example: lateral distortion of the “s”) should be given help at the earliest possible time to change his/her pattern of production.

Summary:

Fully mature speech patterns should not be expected until eight years of age. If a child seems to be in a continuing process of speech development and is within the limits of expectation, it can be assumed that no special help will be needed. Special help may be needed if sound acquisitions seem to be delayed beyond the limits of expectation. We should also consider the general maturity of the child as well as his/her chronological age. There is a “**Speech Readiness Level**” for each individual, just as there is a “**Reading Readiness Level**” and “**Motor Readiness Level**”. It is not advised to force skills which are beyond the ability of the individual.

2018-2019 School Calendar

| July 2018 | | | | | | |
|-----------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | 31 | | | | |

| August 2018 | | | | | | |
|-------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | |

| September 2018 | | | | | | |
|----------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | | | | | | |

| October 2018 | | | | | | |
|--------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

| November 2018 | | | | | | |
|---------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |

| December 2018 | | | | | | |
|---------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

**Laurel Highlands
School District**
www.lhsd.org

**All dates are subject to change.*

| | |
|--------------|--|
| Aug 20 | NEW Teacher Orientation |
| Aug 21-23 | Professional Development for Staff |
| Aug 27 | First Day of School |
| Sept 3 | No School - Labor Day |
| Oct 8 | In Service Day No School for Students |
| Oct 30 | End of 1st Nine Weeks |
| Nov 6 | In Service Day No School for Students |
| Nov 12 | No School - Veteran's Day |
| Nov 21 | Parent/Teacher Conf No School-Students |
| Nov 22-26 | No School - Thanksgiving Break |
| Nov 27 | Parent/Teacher Conf No School-Students |
| Dec 21 | Two Hour Early Release |
| Dec 24-Jan 1 | No School - Happy Holidays |
| Jan 17 | End of 2nd Nine Weeks |
| Jan 21 | No School - Possible Make Up day |
| Feb 18 | No School - Possible Make Up day |
| Mar 25 | End of 3rd Nine Weeks |
| Apr 18-23 | No School Possible Make Up Days |
| May 27 | No School - Memorial Day |
| Jun 3 | Last Day of School and HS Graduation |

Parent/Teacher Conferences

| | |
|--------|----------------------------------|
| Nov 21 | Day 1 (8:00-11:30 AM) |
| Nov 27 | Day 2 (2:00-4:00 & 6:00-8:00 PM) |

Progress Reports and Report Cards

| | |
|---------|----------------------------|
| Sept 26 | Progress Reports Sent Home |
| Nov 9 | Report Cards Sent Home |
| Dec 7 | Progress Reports Sent Home |
| Jan 29 | Report Cards Sent Home |
| Feb 20 | Progress Reports Sent Home |
| Apr 3 | Report Cards Sent Home |
| Apr 24 | Progress Reports Sent Home |

**Remember to log into your Parent Portal for updated grade and attendance information.*

Kindergarten Orientation/Bus Run

| | |
|--------|----------------|
| Aug 22 | 10:00-11:30 AM |
|--------|----------------|

**Additional information will be sent home in a letter by the building principal.*

| January 2019 | | | | | | |
|--------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | | |

| February 2019 | | | | | | |
|---------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | | |

| March 2019 | | | | | | |
|------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| 31 | | | | | | |

| April 2019 | | | | | | |
|------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

| May 2019 | | | | | | |
|----------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | |

| June 2019 | | | | | | |
|-----------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | | | | | | |

Keystone Exam & PSSA Windows

| | |
|--------------|------------------------------|
| Dec 3-14 | Wave 1 Testing Window |
| Jan 7-18 | Wave 2 Testing Window |
| Apr 15-May 3 | PSSA Testing Window |
| May 13-24 | End of Course Testing Window |

SAT Testing Dates

| |
|--------------------------------------|
| Aug 25th, Oct 6th, Nov 3rd, Dec 1st, |
| Mar 9th, May 4th and June 1st |

**Please check the College Board website for additional information or changes.*

Open House

| | |
|------------|----------------------------|
| Clark | Tues., Aug. 21st (6-8 PM) |
| Hatfield | Tues., Aug. 21st (6-8 PM) |
| Hutchinson | Tues., Aug. 21st (6-8 PM) |
| Marshall | Tues., Aug. 21st (6-8 PM) |
| M.S. | Wed., Aug. 22nd (6-8 PM) |
| H.S. | Thurs., Aug. 23rd (6-8 PM) |

 School Closed
 Two Hour Early Release

 In Service Day No School for Students
 Act 80 day No School for Students

 First & Last Day of School
 Assessment Windows

LAUREL HIGHLANDS SCHOOL DISTRICT

Building Start & End Times

ELEMENTARY SCHOOLS (Clark, Hatfield, Hutchinson, and Marshall)

Teachers 8:25 – 3:55

Students 8:40 – 3:40 (Homeroom starts at 8:45)

MIDDLE SCHOOL

Teachers 7:45 – 3:15

Students 7:45 – 3:01 (Homeroom starts at 8:00)

HIGH SCHOOL

Teachers 7:00 – 2:30

Students 7:20 – 2:27 (Homeroom starts at 7:23)

SCHOOL DELAYS and CANCELLATIONS

Parents/Students Can Find District Delays and Cancellations Here:

WPXI

WTAE

KDKA

WWW.LHSD.ORG

Laurel Highlands School District App

Laurel Highlands SD Twitter Account

ADMINISTRATION BUILDING

304 Bailey Avenue
Uniontown, PA 15401

(724) 437-2821

FAX: (724) 437-8929 (upstairs)

FAX: (724) 437-2887
(downstairs)

**R.W. CLARK ELEMENTARY
SCHOOL**

Mrs. Emilie Kurek, Principal
200 Water Street
Uniontown, PA 15401

(724) 437-9600

(724) 437-9688 (fax)

**HATFIELD ELEMENTARY
SCHOOL**

Mrs. Heidi Mears, Principal
370 Derrick Avenue
Uniontown, PA 15401

(724) 437-7371

(724) 437-9229 (fax)

**HUTCHINSON ELEMENTARY
SCHOOL**

Mr. Richard Hauger, Principal
213 Mt. View Road
Uniontown, PA 15401

(724) 437-6208

(724) 437-9774 (fax)

**G.C. MARSHALL
ELEMENTARY SCHOOL**

Mr. Jason Johns, Principal
335 Park Street
Uniontown, PA 15401

(724) 438-5851

(724) 438-7858 (fax)

**LAUREL HIGHLANDS MIDDLE
SCHOOL**

Mr. Michael Rozgony, Principal
Mrs. Jessica Scott, Assistant
Principal

18-20 Hookton Avenue

Uniontown, PA 15401

(724) 437-2865

(724) 437-8518 (fax)

**LAUREL HIGHLANDS HIGH
SCHOOL**

Mr. John Diamond, Principal
Mr. Matt Kalich, Assistant
Principal

Mrs. Brandi Mancini, Assistant
Principal

300 Bailey Avenue

Uniontown, PA 15401

(724) 437-4741

(724) 437-5653 (fax)

(724) 425-5436 (guidance)



Laurel Highlands

Food Service Department

FREE AND REDUCED LUNCH APPLICATION AND BENEFITS

The Laurel Highlands School District recommends that all families apply for free and reduced lunch benefits through the School Breakfast Program (SBP) & the National School Lunch Program (NSLP). Even if you don't meet income guidelines, you still may be eligible for benefits through other Department of Human Services programs. Doing so is quite easy. Please review your options below:

- **Online Option**

- You can visit www.lhsd.org and click on the cafeteria tab. From there, choose the option "Online Lunch Application." You will be directed to the PA Meals online lunch application. Just fill in the required information and submit - it's that easy! The LHSF Food Service Department director will verify the information and mail/email a letter with your child's lunch status. This is the most efficient and confidential way to submit your application.
- You can also visit the PA Meals application site directly at www.paschoolmeals.com and fill out the online application.

- **Paper Application Option**

- Each school building has been provided with free and reduced lunch applications. Please contact your child's school and request that a paper application be sent home with your child. You only need one application per household. Once the application has been completed, please return it to your child's school. The application will be delivered to the district's food service director for further processing. Paper applications are then kept on file for future reference.

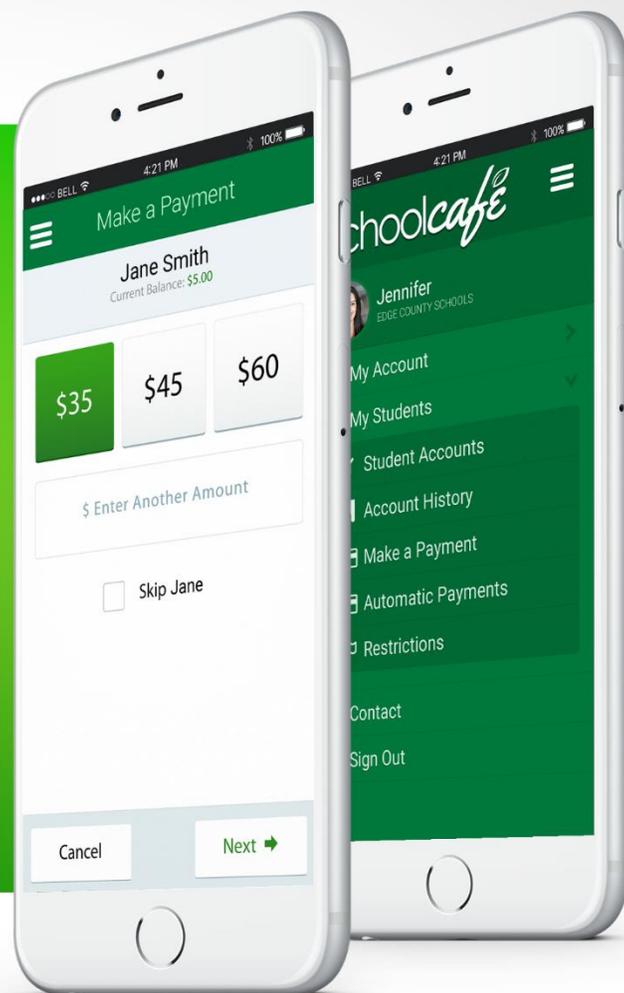
Keep the following points in mind with regards to Free and Reduced Lunch Benefits.

1. You can apply for benefits at any time. If your income is reduced throughout the school year, you may apply or reapply for benefits at any point.
2. You can never lose your benefits for the school year once you attain them. This means that if you qualify for free meals at the beginning of the year and your income greatly increases, you will not lose those benefits for the remainder of the school year.
3. If you receive a Direct Certification Letter from the district's food service department, you do not need to complete an application. Your benefits were automatically uploaded into our system through the Department of Human Services.
4. Your child will maintain their previous year's benefits for the first thirty days of school. After that, all benefits will refer back to "paid" status until an application is on file. You will be responsible for any balance that accrues during this time.

schoolcafé

Formerly ParentOnline

- View your child's cafeteria account balance
- Make payments to your child's cafeteria account
- Review daily spending and purchases
- Low balance reminders



Laurel Highlands School District is proud to offer SchoolCafé, a safe and secure way for parents to make online payments to their children's cafeteria accounts.



schoolcafe.com

SchoolCafé provides a secure, online system for parents to

- Make payments to their student(s) cafeteria-meal account(s)
- Set Low Balance Alerts for each account
- Review your student's buying history

Quick Answers

✓ How do I add money/make a payment to my child's account?

You can continue to send money to school with your student or you can add money through SchoolCafé. Follow the steps in Make a Payment in this guide.

✓ I made an online payment. When can my student use the payment?

Your student's cafeteria account at the school is credited within 24 hours but may become available as quickly as 2 hours.

✓ Is there a fee or service charge for making online payments?

A convenience fee **may be** charged for each online payment transaction. For example, if you make a \$20.00 payment and the convenience fee is \$1.00, the total debited from your credit card is \$21.00. The available funds for your child will be \$20.00. Convenience fee amounts vary by school district.

✓ Can I receive notification when my student's account balance is low?

Yes! Follow the steps in **Set Up a Low Balance Alert** in this guide.

✓ Why was my account locked when making a payment?

After three failed payment attempts, payment function is locked. Contact SchoolCafé to remove the lock.

✓ What if I have several students in different schools?

Include as many students as you need in your account. The students can attend any school within the same district. Payments for each student are made separately.

✓ Can I transfer money from one child to another?

Contact the Child Nutrition Services office at the school district for assistance with a transfer.

✓ What happens to the money in my account at the end of the school year?

Your account balance moves with your student(s) from grade to grade and school to school within the district. Contact the Child Nutrition Services office at the school district for assistance with a refund.

✓ How do I receive a refund if my child changes school districts?

Contact the Child Nutrition Services office at your school district for assistance with a refund.

1 Register

* You will be asked to verify your security answer and contact information when you request help with your username, password, or other information on your Profile page.

- Click [Register](#)
- Verify "I'm registering as a Parent" is selected and click [Next Step](#)
- Enter your school district name and then click [Next Step](#)
- Enter your name and contact information, and then click [Next Step](#)
- Set up your username and password
- Select a **Security Question** and enter a **Security Answer**, and click [Next Step](#)
- Click **I'm not a robot** and follow the reCAPTCHA prompts
- Check **I accept the Terms & Conditions** and click [Create My Account](#)

2 Add Your Student(s)

- Click [Students → Student Accounts](#)
- Click [Add a Student](#)
- Enter your **Student's ID** [and **Lunch PIN**, if asked] and select your student's **School**
- Click [Search & Verify Student](#)
- Click [Add this Student](#)

3 Add Payment Source

- Click [My Account → Payment Sources](#)
- Click [Add a Card](#)
- Enter your **Card Number** and **Card Expiration** date
- Enter a name to associate with this card, if wanted
- Click [Add Card](#)

4 Make a Payment

- Click [Students → Student Accounts](#)
- Click [Make a Payment](#)
- Enter **Payment** dollar amount
- Click
- Select a [Payment Method](#), or enter card information for a one-time payment
- Click

Set Automatic Payment

- Click [Students → Student Accounts](#)
- Click **Automatic Payment** () in a student listing
- Enter **Payment Amount** and enter amount in **Balance Threshold** to trigger payment
- Select a **Payment Source** and set **Auto Pay Expiration Date** for stop payment date
- Click [Add Automatic Payment](#)

Set Low Balance Alerts

- Click [Students → Student Accounts](#)
- Click **Low Balance Alert** () in a student listing
- Enter **Threshold** amount
- Enter number of days to elapse between alerts



McKinney-Vento Act

If you live in any of the following situations:

- A shelter.
- A motel or campground due to the lack of an alternative adequate accommodation.
- A car, park, abandoned building, bus or train station.
- Doubled up with other people due to loss of housing or economic hardship.

You have the right to:

- Receive a free, appropriate public education.
- Enroll in school immediately, even if lacking documents normally required for enrollment.
- Enroll in school and attend classes while the school gathers needed documents.
- Enroll in the local school or continue attending your school of origin (the school you attended when permanently housed or the school in which you were last enrolled), if that is your preference and is feasible.

If the school district believes that the school selected is not in your best interest, the district must provide you with a written explanation of its position and inform you of your right to appeal its decision.

- Receive transportation to and from the school of origin, if you request this.
- Receive educational services comparable to those provided to other students, according to your needs as a student.

If you believe you are eligible for services contact our Homeless liaison Sherry Gregory at 724-437-2865 or sherry.gregory@lhsd.org.