

Richard M. Hooley, Ed. D.
District Superintendent

DUTCHESS CES

Regional Academic Summer School

Student Handbook & Registration Packet

Ms. Janety Encarnacion
Principal, Dutchess BOCES Regional Academic Summer School

Ms. Jenny Schinella
Director of Educational Resources

Ms. Cora Stempel
Deputy Superintendent



2019



2019 Academic Summer School Calendar

Wednesday, June 26, 2019	Last day to register for Summer School - NO LATE REGISTRATIONS ACCEPTED -
Wednesday, July 3, 2019	Last day for Regents registration
Monday, July 08, 2019	Send All Updated IEPs/504s
Monday, July 08, 2019	First day of classes
Thursday, July 25, 2019	PROGRESS REPORTS MAILED HOME
Thursday, August 08, 2019	Physical Settings/Earth Science Regents Practicum
Monday, August 12, 2019	LAST DAY OF REGULAR CLASSES
Tuesday, August 13, 2019	New York State Regents Exams
Wednesday, August 14, 2019	New York State Regents Exams
Friday, August 16, 2019	FINAL REPORT CARD GRADES MAILED HOME

Students not enrolled in your summer school program must provide written permission from their home school principal to be admitted to an August examination. This must include accommodations/modifications as identified by the students IEP/504, if appropriate.

Questions concerning Summer School prior to registration should be directed to Janety Encarnacion, Principal, Dutchess BOCES Regional Academic Summer School, at 845.486.8001 ext. 4532 or janety.encarnacion@dcboces.org.



2019 Academic Summer School Information

Summer School Vision

Dutchess BOCES Summer School staff are committed to delivering evidence and research based, high quality instruction to promote academic excellence and socio-emotional growth for all summer school participants.

Schedule of Classes

Courses will consist of twenty-three (23) classes with 120 minutes of instruction per class. Classes will be conducted based upon a four-day week schedule, consisting of Monday through Thursday.

Class Sessions Monday, July 08, 2019 – Monday, August 12, 2019

Regent Examinations Thursday, August 08, 2019 | Earth Science Practicum ONLY
Tuesday, August 13, 2019 and Wednesday, August 14, 2019

Time Schedule for Academic Classes Period 1 | 8:00 a.m. – 10:00 a.m.
Period 2 | 10:15 a.m. – 12:15 p.m.

Location F.D. Roosevelt High School | 156 South Cross Road, Hyde Park, NY 12538

Attendance

- Students in summer school are expected to attend each enrolled course every day during the Regional Summer School Session.
- Teachers will take attendance at the beginning of each class.
- Participating home schools will be updated on student attendance.
- At the conclusion of the Summer School Program attendance will be sent to home schools, who will grant course credit at their discretion.

Tardiness

- Tardiness will impact attendance and home school decision to grant or not grant credit.

2019 Academic Summer School Information

Course Offerings

Students may enroll in **two courses**. The home school principal's approval is required before any student can enroll in a Dutchess BOCES Regional Academic Summer School course.

The courses listed below are **tentative**. All courses offered are subject to change or cancellation based upon enrollment and/or availability of certified teachers.

English	English 9, English 10, English 11, English 12
Mathematics	Algebra I, Geometry, Algebra II / Trig
Science	Living Environment
Social Studies	Global Studies 9, Global Studies 10, U.S. History, Participation in Government, and Economics
Physical Education	Grades 9, 10, 11, and 12

Grading

- Final grades and determination of credit will be the responsibility of each student's home school.
- Grades will consist of class participation and classroom assignments.
- A grade of 65 is considered passing.
- Participation, including completion of assigned tasks (i.e. projects, assignments, homework, and assessments) and/or active involvement in class discussions, is essential for student learning to occur.
- Assignments will be determined by the course instructor.
- All assignments must be completed and turned in no later than Monday, August 12, 2019, the last day of Regional Summer School classes.

Report of Student Progress

Close communication with parents is essential to ensure student success. Parents will be contacted by telephone, email, or letter in order to provide updates on student progress.

- Progress Reports will be mailed home Thursday, July 25, 2019.
- Final Report Cards will be mailed home Friday, August 16, 2019.

2019 Academic Summer School Expectations

Parent/Guardian Checklist

- Contact Information | Completed and signed..... Page 5
- Course Selection Form | Completed and signed..... Page 6
- Summer School Expectations | Read and signed..... Page 8
- Parking Permit Form | Completed and signed..... Page 9
- Acceptable Use Policy (Internet) Form | Completed and signed.. Page 12
- Permission for Publicity Form | Completed and signed..... Page 13
- Participation in Activities Permission Slip | Completed and signed Page 14
- Medication Information | Completed and form signed..... Page 15

Students taking Regents Exams

(One form of **I.D. is required** for entrance into testing rooms)

Examples: Copy of Student I.D. | Non-driver I.D. | Driver's License

2019 Academic Summer School Contact Information

This section is to be completed by **home school guidance counselor** and included with course selection form, and behavioral expectations form.

Home District: _____	Home School: _____	
Grade (2018-2019 school year): _____	Check (if applicable): <input type="checkbox"/> IEP <input type="checkbox"/> 504 <input type="checkbox"/> ELL	
Student's Name: _____	_____	_____
<small>Last</small>	<small>First</small>	<small>MI</small>
Residential Address: _____	City: _____	State: _____ Zip Code: _____
<small>Street</small>		
Home Phone Number: _____	Cell Phone Number: _____	
Sex: <input type="checkbox"/> F <input type="checkbox"/> M	Date of Birth: / /	

Ethnicity: (Select all that apply). <input type="checkbox"/> American Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian or Pacific Islander
<input type="checkbox"/> Black	<input type="checkbox"/> White	<input type="checkbox"/> Hispanic or Latino

Legal Parent/Guardian Name: _____	Relationship to Student: _____
Email Address: _____	
Mailing Address (if different): _____	City: _____ State: _____ Zip Code: _____
<small>Street or P.O. Box</small>	
Phone Contact #1: _____	<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
Phone Contact #2: _____	<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
Phone Contact #3: _____	<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work

Emergency Contact (other than parent/guardian)		
Name: _____	Relationship to Student: _____	
Home Phone: _____	Work Phone: _____	Cell Phone: _____

Allergies <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: _____
Are there any other health concerns? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: _____

THIS BOX TO BE FILLED OUT BY OFFICE STAFF
Pupil ID # _____
Registration Date _____

2019 Academic Summer School Course Selection Form

Student's Name: _____
Last First MI

Home District: _____ Home School: _____ Grade (2018-2019 SY): _____

Students may enroll in two courses. *Number the course selections according to preference (every effort will be made to accommodate preferences).* Courses will be determined based on enrollment and staffing.

Student is enrolling for: Course Only Regents Only Both Course and Regents

SUMMER SCHOOL COURSE ENROLLMENT	
Courses for Summer School Enrollment (Number in order of preference.)	Most Recent Course Grade
Physical Education	
English 9	
English 10	
English 11	
English 12	
Algebra I	
Geometry	
Algebra II	
Global Studies 9	
Global Studies 10	
U.S. History	
Participation in Government	
Economics	
Living Environment	

AUGUST REGENTS EXAM ENROLLMENT	
August Regents (Check all that apply)	Most Recent Regents Grade/Year (Write N/A is not applicable)
Algebra I CC	
Algebra II CC	
Chemistry	
Earth Science	
ELA CC	
Geometry CC	
Global History and Geography II (New Framework)	
Global History and Geography (Transition Exam)	
U.S. History & Government	
Living Environment	

This section is to be completed by home school guidance counselor and verified by home school principal.

Check (if applicable): IEP 504 MUST ATTACH MOST CURRENT IEP/504

Identify testing accommodations, modifications, and/or other pertinent information.

Extended Time (Specify length of time): _____ Flexible Setting Test Read

Other _____

Home School Principal's signature below will verify that testing accommodations are correct and current on IEP or 504.

- Guidance Counselor's Name: _____ Phone Number with ext. _____
- Parent/Guardian Signature: _____
- Principal/Designee Signature: _____ (Required for approval)

2019 Academic Summer School Expectations

General Information

- The School building (F.D. Roosevelt High School) will be open from 7:50 a.m. - 12:15 p.m.
First Period: 8:00 a.m. - 10:00 a.m. | Second Period: 10:15 a.m. - 12:15 p.m.
- The school library will be open to students during summer school hours from 7:50 a.m. - 12:15 pm.
The library will be available for student use prior to, in between, and after classes.
- Grades will be a combination of class participation and completed assignments.
- All vehicles must be registered with the Dutchess BOCES Regional Academic Summer School office. Student parking will be on the side of the building. (*Map Attached*)
- All school textbooks and library books must be returned before final exams. Lost or damaged books must be paid for in full prior to the final exam.
- Dutchess BOCES Regional Summer School is not responsible for lost or stolen items.

Code of Conduct

1. Students must be in class, on time, and be active participants in each enrolled course. Lateness may result in a lower participation grade or affect attendance requirements. Students who are tardy must sign in before reporting to class.
2. While class is in session all electronic devices must be silenced and placed out of sight.
3. All students must wear appropriate attire at all times as determined by the Dutchess BOCES Summer School Principal (i.e. clothes that do not detract student or teacher attention from teaching and learning).
4. Acts of insubordination, disruptive behaviors, and the use of threatening language may result in disciplinary action, including suspension.
5. Smoking of any kind (including e-cigarettes) is prohibited on school grounds. Students caught smoking may be subject to disciplinary action including suspension.
6. Fighting, possession of any weapons, drugs, or alcohol will not be tolerated. These may result in suspension from Dutchess BOCES Regional Summer School and, at the discretion of the principal, students may be referred for further disciplinary action and criminal charges may be filed.
7. Acts of bullying or harassment will not be tolerated. These may result in suspension from Dutchess BOCES Regional Summer School and, at the discretion of the principal, students may be referred for further disciplinary action and criminal charges may be filed.

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-

Please sign this form acknowledging receipt and understanding of expectations.

Student Name _____ **Date** _____

Parent/Guardian Name (PRINT) _____

PLEASE RETURN THIS FORM TO REGIONAL ACADEMIC SUMMER SCHOOL.

2019 Academic Summer School Parking Permit

Dear Parent/Guardian,

If your son/daughter is requesting to park his/her car on school property during summer school hours, please be advised that the following information needs to be provided and your permission needs to be granted. More information may be requested before approval is granted.

The following information must be presented to receive a parking permit:

1. Driver's License
2. Bottom of this form completed and signed by student and parent/guardian

Grounds for suspending parking privileges:

1. Imprudent speed and/or reckless driving
2. Unauthorized transport of self and/or others off school grounds
3. Out of School Suspension
4. Excessive lateness to school
5. Selling, duplicating and/or transferring parking permits
6. Other reasons deemed necessary by the Principal or administrators

Upon completion of this application, a numbered parking permit will be issued. The parking permit must be properly displayed on the **REAR WINDOW ON THE DRIVER SIDE OF VEHICLE**. Only one parking permit will be issued per student. **PERMITS ARE NON-TRANSFERRABLE**. Report to the Principal's office immediately if you lose the permit. If you sell your vehicle or take your vehicle off the road, remove the permit and return it to the main office. If you drive a different car to school, you **MUST** report this occurrence to the main office.

Failure to provide all information required on this application may affect issuance of a permit. If you have any questions, please contact Janety Encarnacion at 845.486.8001 ext. 4532.

Thank you for your cooperation.

Sincerely,

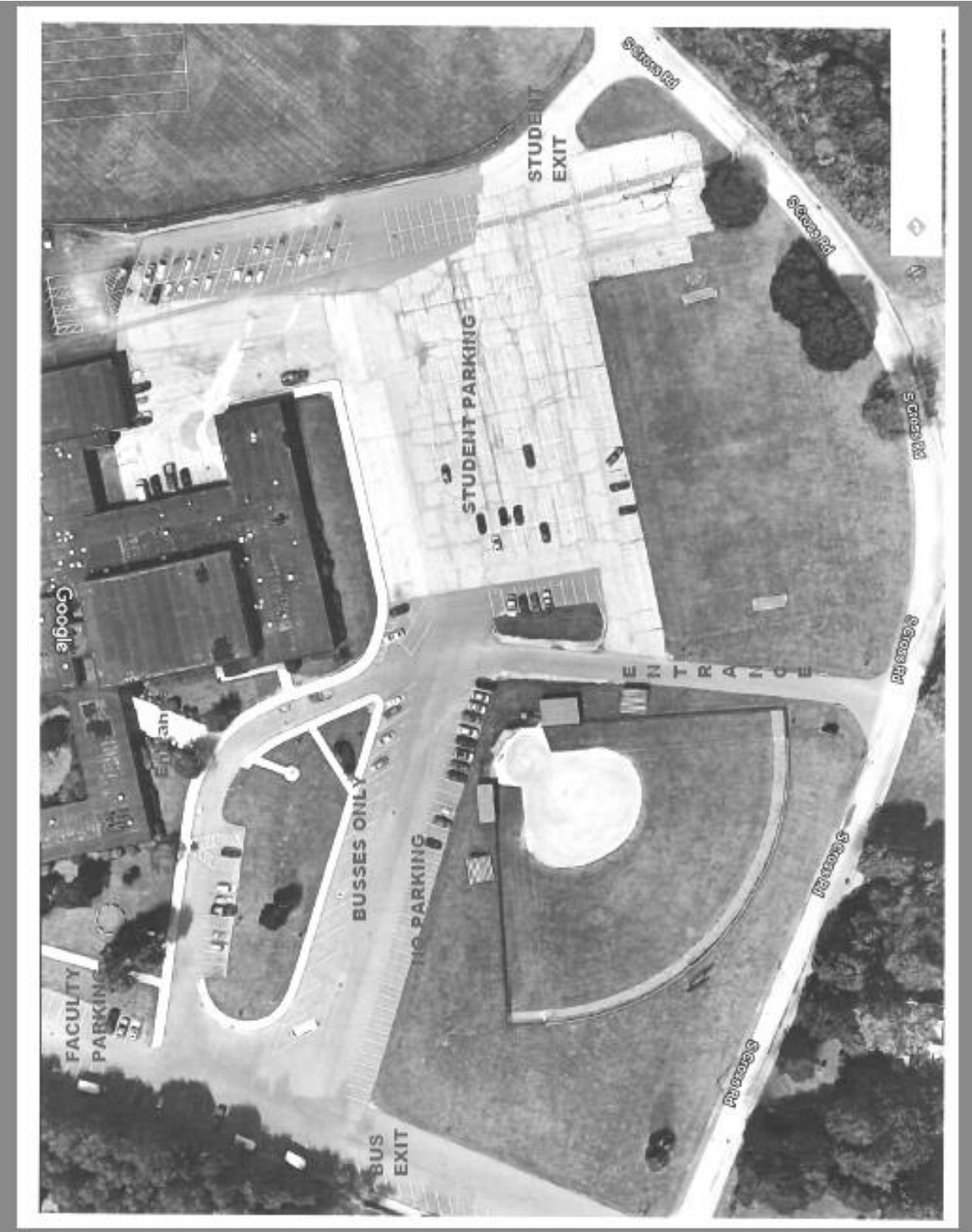
Janety Encarnacion
Principal

.....
I have reviewed the above rules and regulations with my son/daughter and give permission for him/her to drive to and from the 2019 BOCES Regional Academic Summer School located at F.D. Roosevelt High School, Hyde Park.

_____	_____
Student's Name	Date
_____	_____
Parent/Guardian's Signature	Date
_____	_____
Parent/Guardian Cell Number	Parent/Guardian Email

Vehicle Make: _____
Model: _____
Year: _____
Color: _____
Plate #: _____

F.D. Roosevelt High School





2019 Academic Summer School Acceptable Use Policy

COMPUTER USE

The Board of Education is committed to optimizing learning. The Board considers access to the Internet to be a powerful and valuable educational and research tool, and strongly encourages the use of computers and computer-related technology in and outside of district classrooms for the purpose of advancing and promoting a resource rich environment responsive to the individual student.

The computer network can provide a forum for learning various software applications and through online databases, bulletin boards and electronic mail, can significantly enhance educational experiences and provide statewide, national and global communication opportunities for staff and students.

All users of the district's computer network and the Internet must understand that use is a necessity in a digital learning environment and this use entails personal responsibility. The district reserves the right to control access to the Internet for all users of its computers and network. The district may control certain kinds of online activity, access to specific websites, social media, other online resources and bandwidth usage.

Regulations and handbooks, to be developed by the Superintendent, in consultation with the district's Technology Committee will provide specific guidance, as well as rules governing the use and security of the District's computer network. All users of the District's computer network and equipment shall comply with this policy and regulation. Failure to comply may result in disciplinary action, which may include but is not limited to, revocation of computer access privileges, suspension, or termination.

With increased concern about identify theft, it is very important for the district to protect the personally identifiable information (PII) and privacy of our students. (Note that the district email address is not considered PII.) Thus, for any resource that requires an I.D. or permissions to the users' resources, prior to use of any cloud-based educational resource not already approved by the district, staff (or students via staff) must get approval from the Director of Technology. The Director will determine if a formal contract is required or if the terms of service are sufficient to address privacy and security requirements, and if parental permission is needed.

The Superintendent, working in conjunction with the designated purchasing agent for the district, and the Director of Technology, will be responsible for the purchase and distribution of computer software and hardware throughout district schools. They shall prepare and submit for the Board's approval a comprehensive multi-year technology plan which shall be revised as necessary to reflect changing technology and/or district needs.

Parent Copy

A thick, grey L-shaped graphic consisting of a horizontal line on the left and a vertical line on the right, meeting at a corner.



2019 Academic Summer School Acceptable Use Policy

Sign and return this page only. Do not return the entire policy.

I have read and will abide by the Acceptable Use Policy. I understand that I am responsible for my actions while using the District's academic computer systems and the Internet. I understand that my Internet activities will be monitored by the District, and any violation may result in the loss of computer privileges, discipline as per the District Discipline Policy, and/or appropriate legal action.

Student Name (PRINT): _____

I understand that my child's Internet activities will be monitored by the District, and any violation may result in the loss of computer privileges, discipline as per the District Discipline Policy, and/or appropriate legal action.

Signature of Student: _____ Date: _____

Parent/Guardian (PRINT): _____

Parent/Guardian Signature: _____ Date: _____

PLEASE RETURN THIS FORM TO REGIONAL ACADEMIC SUMMER SCHOOL.



2019 Academic Summer School Permission Form for Publicity Purposes

I, the undersigned parent/guardian of _____, a student at
(Name of Student)

Dutchess BOCES, hereby give my permission for my child’s photograph and name to appear on the website, **www.dcboces.org**, in the Dutchess BOCES newsletter and calendar, social media networks (e.g. Facebook), Dutchess BOCES brochures and/or other publications, school yearbook, local newspapers, videotaped recordings of student activities during the school day and after-school which may be broadcast and televised on local radio and/or television stations, on a non-paid basis. I understand that my child’s name may or may not be mentioned and my child’s voice, likeness, statements, actions or other information may be used in such recordings. The same applies to any interviews conducted for broadcast by local television or radio media.

I release Dutchess BOCES, its officers, employees and agents, from any and all claims, demands, actions, causes of action, suits, damages and judgments as a result of the use of the above information about my child in the publications and/or media broadcasts described above while enrolled at Dutchess BOCES.

I am over the age of 18, have read the above information, I understand the conditions of the above agreement and will be bound by its terms on behalf of my child.

Parent/Guardian’s name (PRINT) _____

Parent/Guardian Signature _____ Date _____

Your Relationship to Child _____

Child’s School _____ Child’s Grade _____ Child’s Teacher _____

If you do not wish to have this information used by Dutchess BOCES in the manner described above, please complete this section:

I, the undersigned parent/guardian of _____ **DO NOT WANT** the
(Name of Student)

types of information described above regarding my child given to the local newspapers, used in Dutchess BOCES publications, the Dutchess BOCES Web site, social media networks, the yearbook, or by local television and/or radio stations while enrolled at Dutchess BOCES.

Parent/Guardian’s name (PRINT) _____

Parent/Guardian Signature _____ Date _____

Your Relationship to Child _____

Child’s School _____ Child’s Grade _____ Child’s Teacher _____

PLEASE RETURN THIS FORM TO REGIONAL ACADEMIC SUMMER SCHOOL.



**2019 Academic Summer School
Participation in Activities Permission Slip**

Student Name (PRINT): _____

Parent/Guardian Name (PRINT): _____

FULL PARTICIPATION

I understand that my child, _____ would like to volunteer to participate in a class that may include physical activities. My child has permission and does not have any medical condition or needs that exempt him from participating fully in all such activities. I/We agree to hold BOCES, Hyde Park, its Board of Directors, its employees and authorized volunteers harmless should any mishap occur. In the event of an accident in which my/our child is injured, I/we give my/our express consent for the BOCES staff to obtain medical treatment and will bear all expenses incurred on behalf of my child. By my signature on this document, I agree to the terms written above.

By my signature on this document I agree to the terms written above.

Parent/Guardian Signature Date

Phone Number

PLEASE RETURN THIS FORM TO REGIONAL ACADEMIC SUMMER SCHOOL.

**2019 Academic Summer School
Medication Information**

Please Complete

Student's Name: _____ DOB: _____ M/F: _____

Physician's Name: _____ Phone #: _____

Authorization for the Administration of Medication

Name/Type of Medication: _____

Dosage/amount to be given: _____ Frequency/times to be administered: _____

Duration/number of days, weeks, indefinitely: _____

Anticipated reaction to medication/symptoms, side effects: _____

***Doctor's note with approval to self-medicate required.**

MEDICATION MUST BE IN ORIGINAL PRESCRIPTION CONTAINER

PARENT/GUARDIAN REQUEST/APPROVAL

Please check one:

I hereby request and give permission to the Dutchess County Regional Academic Summer School Program to administer the medication prescribed on this form to my child.

My Child has permission to administer the prescribed medication to himself/herself.

*** Doctor note with approval to self-medicate required.**

Parent/Guardian Name: _____ Signature: _____
PRINT

Phone #: _____ Cell Home Work

Email: _____