

Spring 2025

Dear Parent/Guardian of ECHS Student,

We are fortunate that our students have many opportunities made available through our program. Please complete the enclosed forms and either scan and email them to me or mail them to the address below. Enclosed, you will find the District Responsible Use Policy that one of the forms is referencing. Many of the enclosed forms will stay on file until high school graduation. Please scan and email them to me at, <u>asnow@bscsd.org</u>, or you can mail them to Adrienne Snow at Ballston Spa High School, 220 Ballston Ave., Ballston Spa, New York 12020. We have supplied a checklist to assist you with tracking the permission slips. Please contact me with any questions.

Sincerely, Adrienne Snow ECHS Program Coordinator

9th Grade Form Checklist:

- Adirondack Museum Summer Bridge Trip Permission Form
- Chromebook Use Policy Form (Only if borrowing a device from the program)
- Publication Release
- Participation in Research Studies
- Mandatory Monthly Visits to TEC-SMART
- Social Media
- Medication Carry Form (If Applicable)
- Emergency Card (Only Non-Ballston Spa Students)
- School Tool Account Set Up (for Non- Ballston Spa Students)
- District Acceptable Use Policy (Full Policy can be Found here): <u>https://resources.finalsite.net/images/v1712776213/bscsdorg/afb9kdwkw3zqluainvjj/BSCSD-</u> <u>HIGHSCHOOLStudentAUPAcceptableUse08-2022.pdf</u>



Dear Parents/Guardians:

Students from the Clean Technologies & Sustainable Industries Early College High School Program will be participating in a trip to the Adirondack Experience at the Museum on Blue Mountain Lake on Tuesday, July 15, 2025. We will be leaving from the Hudson Valley Community College (HVCC) TEC-SMART campus at 8:30 am and returning at 3:30 pm. Students will participate in different activities while there. We will eat lunch in the picnic area at the museum. Students can bring a lunch with them or can purchase something at the Lake View Café.

Here is the itinerary for the trip:

8:30 AM- Depart TEC-SMART through charter transportation
10:00 AM- Arrive at Museum on Blue Mountain Lake
10:15 AM- 12:30 PM- Students will participate in activities
12:30 PM- Lunch (Bring lunch or available for purchase at Lake View Café)
2:00 PM- Depart Museum on Blue Mountain Lake
3:30 PM- Arrive back at TEC-SMART

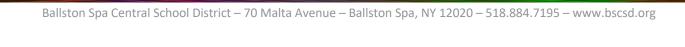
Attire: Students should wear comfortable shoes for walking a lot and their Clean Tech ECHS shirt. They also may want to bring sunscreen and/or bug spray.

If you have any questions or concerns please don't hesitate to contact Adrienne Snow at asnow@bscsd.org We can also be reached at 518-884-7150, Ext. 2662.

Thank you, Adrienne Snow ECHS Program Coordinator

Student Nam	e (Please print)	Parent or Guardian (signed)	Date
Home Phone	Work Phone	Cell	
Please check below IF your chi			
Bee Sting Nuts Dairy La	atex 🗆 Other		
Required medications:			
Please check below IF your chi	d has:		
□Asthma □Diabetes □Kidne	y Injuries □Seizure Disorder □H	leart Condition DOther Medical Condition	tion
Required medications:			

Authorization Form are on file. (If ordered by the student's physician, an epipen must be provided for all field trips).



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Chromebook Use Policy

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As a student participating in the Clean Technologies & Sustainable Industries Early College High School Program, I

______ agree to the following term, conditions, and policies regarding the provided

laptop as outlined and identified below for the 2025-2026 school year.

- 1. The student has been given permission from his or her parent or guardian to be provided a Chromebook and the parent/guardian signifies awareness of the terms of this agreement by printing his or her name and signing in the spaces below.
- 2. The student is aware that he or she is solely responsible for the safe, responsible use and return of the stated equipment. Deviation from the intended use of the laptop will result in disciplinary action. All aspects of the Ballston Spa Central School District Acceptable Use Policy and Code of Conduct apply.
- 3. In the event the Chromebook is damaged, lost, stolen, not returned, or is rendered inoperable due to mistreatment, or irresponsible use, above and beyond that of the normal wear and tear, the student will then be responsible for the full replacement value of the laptop and shall reimburse the school district within 30 days.
- 4. This agreement shall remain on file for the 2025-2026 school year.

Printed Parent/Guardian Name

Signature of Parent/Guardian

FY PLL COLLEGE HIGH SCHOO

Date

Printed name of Student

Signature of Student

Date





Student Publication Release Form

(This form typically refers to things like using photos for Twitter(X), School District Newsletters, HVCC publications, interviews with news/newspapers)

I, hereby, grant the Ballston Spa Central School District, Hudson Valley Community College and the affiliated business partners the absolute right and permission to use, reuse, copyright, and/or publish original student work, photographic pictures or video footage which includes/references of myself and/or my child(ren), in conjunction with an actual or a fictitious name. I understand this will be for the purpose of illustration, promotion, and public relations. Images may appear in printed material, video presentations, news coverage (both print and/or television) and/or on websites.

I, hereby, waive the right to inspect or approve the finished product, or any text that accompanies it. I release the above organizations from any claims and demands connected with the use of the materials.

I, hereby, warrant that I am of legal age and have the right to contract for myself and/or my minor child(ren). I have read the above authorization and fully understand the contents.

This form will be on file and the agreement in effect until the student's graduation from the program in June 2029.

PARENT/GUARDIAN NAME: _____

STUDENT'S NAME: _____

ADDRESS:

PARENT/ GUARDIAN SIGNATURE:

DATE:_____



Approval for Minor's Participation in Research Studies

As part of an ongoing effort to continue to improve the Clean Technologies & Sustainable Industries Early College High School Program, we may conduct or contract with an external evaluator to conduct an evaluation of parts of or all components of the Clean Technologies & Sustainable Industries Early College High School Program. Student personal identifiable data is not used. If it is used, it is ONLY under the signature of an Ed Law 2D agreement.

The Clean Technologies & Sustainable Industries Early College High School Program provides an excellent opportunity to conduct research which will document and analyze key factors associated with the school and/or community development and partnerships that support networks working collaboratively to develop STEM education. The information generated from research will inform future STEM education studies and will help identify key factors associated with academic excellence, early college program benefits, as well as critical information for policy makers and educators engaged in creating new STEM based education opportunities.

Important Aspects of the Research Project(s)

- The research may include one-on-one interviews, group discussions, questionnaires, surveys and observation of school activities. Information from interviews, group discussions or observations will be recorded hand-written notes, computer word-processed notes and/or audio recordings. Participants will always be asked permission prior to any audio recordings.
- There are no risks to participation for any individual participating in the studies. Your child may elect to not participate in or elect to leave any study at any time without penalty.
- Efforts will be made to keep your child's study-related information confidential. However, there may be circumstances where this information must be released. For example, personal information regarding your child's participation may be disclosed if required by state law. While the results of the research may be presented at conferences and/or in published papers, all individual responses will remain confidential.

I have read this form, and I am aware that I am being asked to provide permission for my minor to participate in research studies as they are outlined above. I am assured that no harm will come to my child as a result of this participation and that his/her anonymity will be maintained. I understand that I will receive additional information prior to any study beginning and that I will be provided with a copy of any products that results from this work, should I request it. I have had the opportunity to ask questions and have had them answered to my satisfaction. I voluntarily agree to permit my minor to participate in these studies. This form will be on file and the agreement in effect until the student's graduation from the program.

Printed Name of Minor					
Printed Name of the Person Authorized to Provide Permission for Minor	Signature of the Person Authorized to Provide Permission for Minor				
Relationship to the Minor	Date				
Ballston Spa Central School District – 70 Malta Avenue –	Ballston Spa, NY 12020 – 518.884.7195 – www.bscsd.org				



Visits to TEC-SMART - 2025-2026

Ninth grade students from the Clean Technologies & Sustainable Industries Early College High School Program will be returning to the TEC-SMART campus on September 16th, October 17th, November 5th (Expo), December 15th, January 9th, February 10th, March 12th, April 17th, May 21st (Expo). Please be aware that some of the dates may change if there are snow days or opportunities that come up, and we will notify you of any changes we expect. Students will be on campus from 8:00 am until 10:45 am. These visits are a requirement of the program, and student attendance is mandatory whether in person or attending remotely through Google Meet. Students will be missing classes at their home school and will need to touch base with their teachers to get their work. **Transportation will be coordinated by the home schools. Please check with your home school counselor regarding how transportation will be coordinated.**

The following are the specific details pertaining to the field trips.

DATES: September 16th, October 17th, November 5th (Expo), December 15th, January 9th, February 10th, March 12th, April 17th, May 21st (Expo)

LOCATION: TEC-SMART Facility TIME: 8:00 am until 10:45 am

Christina Carlson and I will be sending out information with more specific information about these dates as the dates get closer. If you have any questions, please don't hesitate to contact me at <u>asnow@bscsd.org</u>, or ECHS School Counselor, Christina Carlson, at <u>ccarlson@bscsd.org</u>. We can also be reached at 518-629-4981.

Thank you, Adrienne Snow ECHS Program Coordinator

I give my child permission to attend the activities at the TEC-SMART campus September 16th, October 17th, November 5th (Expo), December 15th, January 9th, February 10th, March 12th, April 17th, May 21st (Expo).

Student Name (Please print)	Parent/ Guardian	Parent/ Guardian (signature)	
Home Phone	Work Phone	Cell	
Please check below IF your child has	sensitivity to:		
Bee Sting Nuts Dairy L	atex 🗆 Other		
Required Medications:			
Please check below IF your child has:			
□Asthma □Diabetes □Kidney Inju	ries □Seizure Disorder □Heart	Condition □Other Medi	cal Condition
Required medications:			



Social Media Form

Students in the Clean Technologies & Sustainable Industries Early College High School will have increased opportunities to connect with business partners, staff, and classmates in a professional setting. Remind, LinkedIn, Instagram, Google platform, Snap Chat, and Twitter(X) are social media tools used in the business and professional environment. LinkedIn is a tool for students to connect with business and industry. Google allows students to collaborate on documents. Twitter(X) is an online forum where people can post information, "like" what people post, or share what people have posted. One example is the Twitter(X) account for our program @CleanTechECHS. Students will be given the opportunity to create a LinkedIn profile as part of their experience in the program. Some of the HVCC college professors will also ask students to create a LinkedIn account as part of their course.

By signing the form below, you indicate that you understand the creation and use of the LinkedIn account, Twitter(X), and Google and agree to follow the established expectations.

- The goal is for students to understand and appropriately use social media for assignments.
- Students are expected to follow BSCSD's Responsible Use Policy.
- Students are expected to conduct themselves in a professional and respectable manner.
- Students will use social media to connect with business and industry representatives to help them learn about career opportunities and develop workplace skills.
- Students will be interacting with adults in a professional environment.
- Students could be sharing personal information, depending on what they enter in their personal profile. This can be comparable to a Facebook account. Students have to accept a connection through LinkedIn before someone can see their profile.
- Communications on LinkedIn, Google, and Twitter(X) will **not** be monitored by ECHS staff.
- Students will be using their HVCC email account for the social media tools.

Student Name:	
Student Signature:	Date:
Parent/Guardian Name Printed:	
Parent/Guardian Signature:	Date:



BALLSTON SPA CENTRAL SCHOOL DISTRICT – <u>MEDICAL CARRY FORM</u> Administration of Medication in School and School Activities Parent and Healthcare Provider's Authorization

A. To be completed by the Parent or G	iuardian:				
I request that my child		receive the medic	receive the medication as prescribed below by or		
physician. The medication is to be f school nurse may contact the presc Signature (Parent or Guardian):	riber as needed.			cy. The	
Telephone: Home	Work	Cell	Date		
B. To be completed by the Private Hea I request that my patient, as listed	below, receive the follo	C C			
Name of Student		D(OB		
Diagnosis:			**ICD-10:		

Health Care Provider Permission for Independent Carry and Use

I attest that this student has demonstrated to me that he/she can self-administer the medication(s) listed below safely and effectively, and may carry and use this medication (with a delivery device if needed) independently at any school/school sponsored activity with no supervision by school staff. This order applies only to the emergency medications checked below:

MEDICATION	SELF- CARRY	DOSAGE	FREQUENCY/TIME TO BE TAKEN	ROUTE OF ADMIN.

Healthcare Provider's Printed Name with title:				
Signature		Date (Full)		
License #:	NPI #:	Phone #:		
Complete Address:				

* Medication must be in original pharmacy labeled container with specific orders and name of medication. This medication order is valid for July 2025 – June 2026.



	(for Health Office use o	only)	
Student Information:			
Last Name			
Home Phone	Date of Birth _		
Street			
City	State	Zip Code	
Who does the child live with?	Who should be	e called first?	
Mother/Guardian's Name		Home Phone	
Address		Cell Phone	
		Work Phone	
Which is the best # to reach you at?	Home Cell Work		
		Home Phone	
-ather/Guardian's Name			
Father/Guardian's Name Address		Cell Phone	
Address		Cell Phone	
Address	u: Home Cell Work	Cell Phone Work Phone	
Address Which is the best number to reach you Doctor	u: Home Cell Work	Cell Phone Work Phone Phone	
Address Which is the best number to reach you	u: Home Cell Work	Cell Phone Work Phone Phone <u>e of your child if you cannot</u>	
Address Which is the best number to reach you Doctor Please list two neighbors or nearby relativ	u: Home Cell Work ves who will assume temporary car	Cell Phone Work Phone Phone <u>e of your child if you cannot</u>	
Address Which is the best number to reach you Doctor Please list two neighbors or nearby relativ First choice: Name:	u: Home Cell Work ves who will assume temporary car Second ch <u>Name:</u>	Cell Phone Work Phone Phone <u>e of your child if you cannot</u>	
Address Which is the best number to reach you Doctor Please list two neighbors or nearby relativ First choice:	u: Home Cell Work ves who will assume temporary car Second ch	Cell Phone Work Phone Phone <u>e of your child if you cannot</u>	
Address Which is the best number to reach you Doctor Please list two neighbors or nearby relativ First choice: Name:	u: Home Cell Work ves who will assume temporary car Second ch <u>Name:</u>	Cell Phone Work Phone Phone e of your child if you cannot noice:	
Address Which is the best number to reach you Doctor Please list two neighbors or nearby relation First choice: Name: Address:	u: Home Cell Work ves who will assume temporary car Second ch Name: Address:	Cell Phone Work Phone Phone <u>e of your child if you cannot</u> noice:	
Address Which is the best number to reach you Doctor Please list two neighbors or nearby relation First choice: Name: Address: Phone(H):	u: Home Cell Work ves who will assume temporary car Second ch Name: Address: Phone(H):	Cell Phone Work Phone Phone e of your child if you cannot noice:	

chronic conditions, etc.:

**Parent Signature _

Date



School Tool Account Set Up – (Grading and Attendance) Portal Registration Form for NON-Ballston Spa Students

(Please Print)

Student Name:	 	
School District:	 	
School Counselor Name:		

This form will also add you to our School News Notifier in order for you to receive email communication from the program. Weekly updates are sent by Clean Tech staff using this information. If you are from a district other than Ballston Spa Central School District, please be aware that this will be a separate School Tool account from the account you have for your child's home school.

Parent/Guardian 1 Last Name:	
Parent/Guardian 1 First Name:	
Parent/Guardian 1 Email address:	
Parent/Guardian 1 Address:	
Parent/Guardian 1 Home Phone Number:	
Parent/Guardian 1 Cell Phone Number:	
Parent/Guardian 2 Last Name:	
Parent/Guardian 2 First Name:	
Parent/Guardian 2 Email Address:	
Parent/Guardian 2 Address:	
Parent/Guardian 2 Home Phone Number:	
Parent/Guardian 2 Cell Phone Number:	