

INDEPENDENT SCHOOL DISTRICT 309
301 Huntsinger Ave
Park Rapids, MN 56470

Non-Profit Organization
PARK RAPIDS, MN 56470



PARK RAPIDS AREA SCHOOLS
Preparing Today's Learners for Tomorrow's Challenges



IMPORTANT SCHOOL INFORMATION ENCLOSED

SCHOOL STARTS SEPTEMBER 2nd, 2025

A New School Year, A Fresh Start

Every year at this time, I feel a renewed sense of excitement as we prepare to welcome students and families back for a new school year. On September 2nd, our halls will once again be filled with energy, learning, and the promise of a bright future.

This year feels especially meaningful. With the completion of PProject 309, we are not only beginning a new school year, we are stepping into a new chapter for Park Rapids Area Schools. Our newly constructed and renovated facilities stand as a reflection of our community's commitment to providing the very best for our students.

Over the past three years, we have witnessed incredible progress across the district. From the addition of our 7th/8th grade wing, auxiliary gym, district offices, bus garage and parking areas, to the consolidation of Early Childhood programs and secured entrances at Century School, every improvement was made with our students' success in mind. At the High School, renovations to academic areas, the food service kitchen, transportation lab, and Alternative Learning Center are now complete. This summer, final updates to the commons, auditorium, and locker rooms bring PProject 309 to its exciting conclusion.

As we open our doors this fall, our students will return to state-of-the-art learning environments designed to inspire, innovate, and prepare them for the future. But our work doesn't stop here. Together, as educators, families, and community members, we will continue to focus on providing engaging and challenging learning opportunities and experiences that equip our students for an ever changing world.

To celebrate the completion of PProject 309, we are planning an open house and ribbon-cutting ceremony during our Homecoming Week, September 22–26. This will be a wonderful opportunity for our community to come together, tour the updated facilities, and celebrate this milestone for our district. Watch for more details as the date approaches.

We know that with every new beginning comes both opportunity and challenge. Our district and building teams have worked hard to prepare thoughtful and safe plans for the year ahead. Flexibility will remain key as we settle into these new spaces and routines. We appreciate your continued support and partnership as we navigate this transition together.

As always, we encourage students, parents, and community members to reach out with questions, ideas, or concerns. Park Rapids Area Schools is proud to work alongside you in ensuring a successful year for every learner.

The 2025–2026 school year promises to be a memorable one. With high expectations and a shared commitment to excellence, we are ready to prepare today's learners for tomorrow's challenges.

Sincerely,

Lance Bagstad, Superintendent
Park Rapids Area Schools #309

IN THIS ISSUE:

- *Board of Education
- *Activities Information
- *School Calendar
- *Food Service Program
- *Health Department
- *Transportation
- *Asbestos & Pesticide & Indoor Air Quality Information
- *PR Education & Activities Foundation
- *K12 Accident Insurance
- *LINQ Family Portal
- *ParentVue
- Facebook, Instagram & Twitter:
Follow Us for ISD 309 School News

Important Notes and Updates for the 25~26 School Year

- On August 27th, Open House for Century School grades K-6 is 4:30pm-6pm, Early Childhood Family Education & School Readiness 4pm – 6pm, VPK M/W 3:00-4:30 T/Th 4:30-6pm, and High School is 5:30pm-7:00pm.
- On September 2nd **ALL** K-12 students will return.
- Enclosed in your packet you will find the 2025-2026 Ethnic and Racial Demographic Designation. Once filled out this form should be returned to your child's school in the office.
- All volunteers who have direct unsupervised student contact, who accompany students off campus, who are responsible for working with students on campus, but outside the regular classroom structure will need to have a current background check on file with the District Office. If you need a background check, please contact Marie Frost at 218-237-6508.

Important Dates for the 25~26 School Year

- 8/27 Open House Kindergarten through 12th Grade
- 8/27 Open House ECFE & School Readiness
- 9/02 School begins, **ALL** grades K-12
- 9/03 First Day of School VPK Wed
- 9/04 First Day of School VPK Thurs
- 9/4 High School Picture Day
- 9/24 PreK M/W and K-2 Picture Day
- 9/25 PreK T/Th and grades 3-6 Picture Day
- Homecoming 09/22-26
- 11/6-11/8 Fall Musical
- 5/22 Last day of School
- 5/24 Graduation



- 10/20 7-12 Choir Concert
- 11/17 HS Band Concert
- 12/08 7-12 Choir Concert
- 01/19 7-12 Band Concert
- 2/23 7-12 Choir Concert
- 04/23 HS Band Concert
- 04/30 6th grade Band Concert
- 05/11 7/8 Band Concert
- 5/20 7-12 Choir Concert

PTA Book Fair's. Please watch for information regarding book fairs from your child's teacher, on the school website, or on our Facebook site.



PRAVA, Park Rapids Area Virtual Academy, is a MN State Approved Online Provider serving students in grades six through twelve. PRAVA is an alternative for Panther students and families who value learning from home. Check us out at: <https://prava.parkrapids.k12.mn.us/>.

**Now
Accepting
Applications**





Dear Parent/Guardian:

Welcome back to a new school year!

Qualifying meals are free this year! But please make sure you are still filling out your Free and Reduced Lunch Applications as there are many benefits in doing so. Milk, extra entrees and Ala Carte "High School Only" will be available for purchase.

Breakfast – We offer 3 or 4 components: meat or meat alternative, bread or grain, fruit and vegetable group, and a variety of milk. Students must take 3 items, but may take all 4, for a reimbursable meal.

- K-4 provides approximately 500 calories
- 5-12 provides approximately 588-600 calories

Lunch – We offer 5 components: meat, bread, fruit, vegetable, and milk.

- Targeted caloric amounts are – Kindergarten through 4th grade approximately 640 calories, 5th and 6th grades approximately 700 calories and 7th through 12th grade approximately 800 calories.
- The menus are the same for all schools, except we offer alternative main entrée choices plus larger fruit and vegetable services for the high school students.
- High School students will also have snacks options at the Ala Carte available.

For students needing a lactose free option for milk, or students with disabilities or food allergies, a note from your physician as well as the Special Dietary Statement will be required. The Special Dietary Statement can be requested from the Food Service Office.

We encourage all parents to use the Linq Connect Portal, <https://linqconnect.com/>. This allows you to make lunch payments, pay for fees, fill out lunch applications, check lunch menus and more. More information can be accessed on the district webpage under the food service tab or by contacting me. You can also scan the QR code at the bottom of the page for direct access to the portal.

Free and reduced lunch applications can be filled out online at <https://linqconnect.com/> or by using the Linq app on your handheld device. The application can also be accessed through the district website or by contacting Kim Splett at 237-6500 or stop into any of our offices at your convenience. If you need assistance filling out the free and reduced application or have questions regarding the application please contact Kim or stop by the District Office between 8 a.m. and 4 p.m.

We look forward to the coming school year. Any questions about student lunch accounts, balances owed or our milk program can be directed to me.

Sincerely,

linqconnect.com

JT Clark



2025-2026

Educational Benefits Application

Our educational benefits application is critical to Park Rapids School district in receiving Compensatory Revenue, Title 1 Funding, and other various grants from the State of Minnesota. These funds directly benefit the school site your student attends and can help us generate funding through other sources. It can also benefit you through the following programs listed below. We ask that ALL families complete our application to ensure continued funding to support ALL students in our district. If you think you may qualify or could benefit from the decreased rates, please take the time to click the link and fill out an application for this school year. <https://lincconnect.com>



School Funding

Increased Funding to ensure students receive the support they need to receive a comprehensible world class education



Athletics/Phy. Ed.

Discounts on athletic fees and Physical Education uniforms



**That's
Community Ed!**

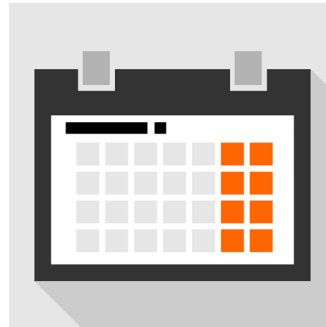
Community Ed Classes

Reduced rates for some community education courses, Preschool classes and afterschool childcare program.



College Application Fees

Waived fees when you fill out college application fees.



Next School Year

Benefits carry over to mid October of the next School year.



ACT, SAT, AP Fees
Academic testing fee reduction.

Questions? Please contact Kim Splett at 218-237-6500 or by email ksplett@parkrapids.k12.mn.us

Board Of Education

School Board Meetings

School board meetings are generally held the first and third Monday of each month in the Board Room in the 7th/8th grade wing at the High School, 301 Huntsinger Ave., Park Rapids. The first meeting will be a working meeting or discussion meeting, and the second meeting will be business oriented. The public is welcome to attend. Board agendas, minutes and the meeting schedule are on the District 309 website at www.parkrapids.k12.mn.us.

With proper notice the meeting schedule is subject to change. Meeting minutes and notice of change are published in the legal notice of the Enterprise and posted on the district website.

Any questions, individual concerns or problems can be directed to the classroom teacher, the principal, the business manager, the superintendent, or the school board.



School Board Members

Sherry Safratowich, Chair
Email: ssafratowich@parkrapids.k12.mn.us

Dana Kocka, Clerk
Email: dkocka@parkrapids.k12.mn.us

Andrea Morgan, Director
Email: amorgan@parkrapids.k12.mn.us

Clayton Hoyt, Vice Chair
Email: claytonhoyt@parkrapids.k12.mn.us

Jay Pike, Treasurer
Email: jaypike@parkrapids.k12.mn.us

Colter Diekman, Director
Email: cdiekman@parkrapids.k12.mn.us

Leadership Team

Lance Bagstad, Superintendent

Kent Fritze, Business Manager

Jeffrey Johnson, High School Principal

Mike LeMier, Century Principal

Steph Mercil, Century Assistant Principal

Mark Frank, High School Assistant Principal

Eva Pohl, PAWN Special Education Director

Jill Dickinson, Community Education Director

Mike Ridlon, Facilities Director

Todd Kumpula, Network Systems Coordinator

Mike Arvik, Transportation Director

JT Clark, Food Service Supervisor

Transportation Guidelines for Park Rapids Area Schools - I.S.D. #309

Effective for the 2025-2026 School Year. Transportation Supervisor: Mike Arvik.

Per MN Statute 121A.59, riding the school bus is a privilege, not a right. The school district's general student behavior rules are in effect for all students on school buses, including nonpublic and charter school students.

The driver of the school bus has an important mission to provide safe, reliable transportation for the students of our district. Their primary focus is on the road and motoring public. The driver can't always see what is going on in the bus. The bus is an extension of the classroom, it is expected that students follow the same rules of the school in the bus. Failure to comply with the driver's instructions may result in disciplinary action.

To ensure the safety, security and schedule of the routes providing transportation for our students the following guidelines are implemented:

- All students must follow the directions/orders of the driver and/or Para.
- Only students assigned to the route/bus are allowed on the bus for that route, no guests.
- Students are allowed one pickup address and one drop off address. Students are not allowed to ride one bus one week and another bus the next.
- Students are expected to be at the stop waiting for the bus, the bus will not wait for students. It is recommended that you arrive 5 minutes prior to your scheduled pickup time. While waiting for the bus, students must be positioned off the roadway for safety reasons.
- If/when a student must cross a roadway, the student must wait for the driver's hand signal prior to crossing for safety reasons.
- Students will remain seated in their seats while the bus is in motion. While seated, students must keep all hands, feet and possessions out of the aisle and window.
- It is at the driver's discretion to assign seats as needed.
- The use of loud or profane language is prohibited. Students will not engage in scuffling or fighting. Students must not harass others. Students will not handle or tamper with other students' possessions.
- Parent/guardian must be present at pickup and drop off for students in grade 3 or less. The driver will return the student to school if no parent/guardian is present. Any deviation from this policy will require approved documentation for review and approval in advance.
- Change of address must be made through the school office prior to any bus/route change.
- New transportation requests may take up to 5 school days to process.
- No eating or drinking while on the bus without the driver's permission.
- Discard any garbage in the trash can at the front of the bus.
- Trespassing- A person who boards a school bus when the bus is on its route or otherwise in operation, or while it has pupils on it, and who refuses to leave the bus on demand of the bus operator, is guilty of a misdemeanor. (MN Statute 609.605 Trespass, Subd. 4a)
- The driver has the discretion to manage the bus in accordance with federal, state law and district policies as they see fit. This includes the use of assigned seating, food and beverage policies etc.
- If the student will not need to be picked up on their scheduled route in the morning, please call at your earliest awareness. 1-218-237-6570.

2025-2026 ANNUAL ASBESTOS NOTIFICATION

As a result of federal legislation (Asbestos Hazard Emergency Response Act- AHERA), each primary and secondary school in the nation is required to complete a stringent inspection for asbestos and to develop a plan of management for all asbestos-containing building materials. Park Rapids School District has a goal to be in full compliance with this law and is following the spirit, as well as, the letter of the law. As a matter of policy, the district shall continue to maintain a safe and healthful environment for our community's youth and employees.

In keeping with this legislation, all buildings (including portables and support buildings) owned or leased by Park Rapids School District were inspected by an EPA accredited inspector and samples were analyzed by an independent laboratory. Based on the inspection, the school prepared and the state approved a comprehensive management plan for handling the asbestos located within its buildings safely and responsibly.

Furthermore, Park Rapids School District has completed the 3-Year Re-inspections required by AHERA. Our district buildings, where asbestos containing materials were found, are under repair, removal and Operations and Maintenance.

This past year, Park Rapids School District conducted the following with respect to its asbestos containing building materials:

- * Continued our Operations and Maintenance Program
- * Completed six-month periodic inspections
- * A 3-year re-inspection was completed and all materials are in good condition.

Federal law requires a periodic walk-through (called "surveillance") every six months of each area containing asbestos. MacNeil Environmental, Inc will accomplish this under contract.

Short-term workers (outside contractors-i.e., telephone repair workers, electricians, and exterminators) must be provided information regarding the location of asbestos in which they may come in contact. All short- term workers shall contact the head custodian in the building before commencing work to be given this information.

Park Rapids School District has a list of the locations and types of asbestos containing materials found in each school building and the description and timetable for their proper management. Century School is free of asbestos. The High School building only has asbestos located in areas students do not have access to. A copy of the Asbestos Management Plan is available for review in the Buildings & Grounds office. Copies are available at 25 cents per page. Questions related to the plan should be directed to MacNeil Environmental, Inc., at 800-642-6730.

FACILITIES INFORMATION

General Pesticide Notice for Parents or Guardians

Dear Parent or Guardian:

A Minnesota state law went in to effect in the year 2000 that requires schools to inform parents and guardians if they apply certain pesticides on school property.

Specifically, this law requires schools that apply these pesticides to maintain an estimated schedule of pesticide applications and to make the schedule available to parents and guardians for review or copying at each school office.

State law also requires that you be told that the long-term health effects on children from the application of such pesticides or the class of chemicals to which they belong may not be fully understood.

If you would like to be notified prior to pesticide applications made on days other than those specified in the estimated schedule, please contact the Facilities Director Mike Ridlon at 218-255-3631.

Indoor Air Quality Notification

Park Rapids School District is proud to be taking a leadership role in providing a safe, comfortable and productive environment for our students and staff so that we achieve our core mission-educating students. Our school will follow the EPA guidance to improve our indoor air quality by preventing as many IAQ problems as possible, and by quickly responding to any IAQ problems that may arise. Good air quality requires an ongoing commitment by everyone in our school, because each of us daily make decisions and performs activities that affect the quality of the air we breathe.

School staff, students and parents can obtain checklists or self-help information so they can properly evaluate their child's home or other out of school situation by contacting the school. Staff and parents can also obtain information about school facility construction, maintenance and housekeeping practices, chemicals used, mold and HVAC related information, chemical producing academic subjects, and pesticide and herbicide applications to determine the extent to which school activities contribute to a child's symptoms by contacting the school.

The Park Rapids School District Indoor Air Quality contact person is MacNeil Environmental, Inc. If there are any questions regarding the school's IAQ Program, please feel free to contact 800-642-6730.

Health Services

Dear Parent/Guardian,

We would like to begin the school year by helping you become acquainted with district health services and district health policies.

Park Rapids Area School Health Services Staff			
Staff Member	Building	Hours	Telephone
Tia Kocka, BSN, RN, LSN, School Nurse	Area High School	7:30-3:30	218-237-6441
Danielle Budzien, RN, Certified Nurse Specialist	Century Elementary/Middle School	7:45-3:30	218-237-6210
Heather Hopkins, RN, Certified Nurse Specialist	Century Elementary/Middle School	7:45-3:30	218-237-6210

General Health Assistance

Students needing care for general health complaints such as colds, headaches, stomach aches or injuries may come to the health office during the school day. The health offices are open during school hours.

Immunization Policy

No student shall remain enrolled in school or any school program unless they have an up-to-date immunization record or a notarized exemption form on file. Please notify the school of any updated immunizations your child receives to keep our records current. Please note the enclosed attachment for the Minnesota immunization law requirement for fall entry. **Transfer students: the Park Rapids School will request your health record from your previous school; however, it is the parent's responsibility to make sure the record is on file by the time of school entry.**

Exclusion from School

At times it is necessary to exclude students from school until a particular health problem improves or medical advice is sought. Some conditions that may be reason for exclusions are, elevated temperature >100.4 degrees, vomiting or diarrhea within 24 hours, advanced cases of impetigo, scabies, head lice.

Medication

Any medications, including **non-prescription** medication that must be given during the school day requires written consent from the parents. **Prescription** medication requires a medical provider's order as well as parental consent. The link to this form is [here](#). The medication consent form is included in this packet as well. **Medication must be sent in its original container or an appropriately labeled pharmacy container.** All prescription medication forms must be signed by the student's medical provider & parent/guardian and brought into the health office PRIOR to the student being administered medications at school. All medications that are not picked up by parent/guardian by the last day of school will be destroyed. It is the parent/guardian's responsibility to pick up the medication from school.

Specific Medical Conditions

When a child has a specific medical condition, parents are encouraged to contact the school nurse directly at 218-237-6441 so that appropriate medical needs of the child can be met. By communicating and sharing information, our staff will be able to assist in keeping your child safe during school hours. If a student has an allergy, an emergency allergy plan found [here](#) will need to be provided to the school from the student's medical provider. You may also use the FARE Allergy plan found [here](#). If your student has asthma, an asthma action plan found [here](#) should be provided to the school by the medical provider. If your student has a seizure, a seizure action plan found [here](#) should be provided to the school by the medical provider. If your student has a gastrostomy tube, a gastrostomy plan found [here](#) needs to be provided to the school by the medical provider. The plans are all included in the following pages.

General

When a child is not feeling well, it interferes with the learning process. If your child complains of not feeling well before school, parents should carefully assess the situation and consider keeping the child home.

Screenings

Health Services staff conduct routine vision screenings at the beginning of the school year. If problems are noted at the time, parents will be informed and asked to seek further medical evaluation. Hearing screenings are conducted on a per request basis. If at any time during the school year parents feel there is a need for vision or hearing screening, they are encouraged to contact the teacher or district nurse (218-237-6441) and request that a screening be done.

You are encouraged to call the school nurse/health specialist in your school for information or to share any concerns you may have regarding school health services.

Park Rapids Schools Health Service Medication Form

Prescription Medication

Parents of students requesting prescription medication to be given to their child during school hours by school staff are required to provide the school with the following information. All medication **MUST** be sent in the original container or pharmacy labeled bottle. A Licensed School Nurse will designate persons giving the medication.

Student Name: _____ Date of Birth: _____ Grade: _____

Parent Name: _____ Phone: _____

Physician Order

I have prescribed the following medication for this child and request it is given during the designated school hours.

Medication: _____ Dosage/Time: _____

For the treatment of: _____

Special Instructions: _____

Possible Side Effects: (optional) _____

Physician Signature: _____ Date: _____

Physicians Name: _____ Phone: _____ Fax: _____

.....

PARENT REQUEST FOR ADMINISTRATION OF MEDICATION

_____ I request this prescription medication to be given as prescribed by the doctor

_____ I request this non-prescription medication to be given to my child

Name of Medication: _____

Dosage and Time: _____

Treatment of: _____

How long to be given: _____

Parent/Guardian Signature: _____ Date: _____

DATE	SEP	OCT	NOV	DEC	JAN	FEB	MARCH	APRIL	MAY
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									

PARK RAPIDS SCHOOL DISTRICT HEALTH SERVICE MEDICATION FLOW SHEET

Student Name: _____ Date of Birth: _____ Grade: _____

Medication: _____ Dosage/Time: _____

Date Started: _____ Date Discontinued: _____

of Tab/Date: _____

Staff Initials & Name: _____/_____/_____/_____

Are Your Kids Ready?

Minnesota K-12 Immunization Law

Students are required to receive certain vaccines for school or submit an exemption. This requirement applies for all public, private, online, and home schools in Minnesota. Look for your child's grade in the chart below and see how many total doses of each vaccine are needed for their grade.

Required Immunizations	Kindergarten to Sixth Grade	Seventh Grade to Eleventh Grade	Twelfth Grade
Hepatitis B (Hep B)	3 Doses	3 Doses	3 Doses
Polio (IPV)	4 Doses	4 Doses	4 Doses
Measles, mumps, rubella (MMR)	2 Doses	2 Doses	2 Doses
Varicella (Chickenpox)	2 Doses	2 Doses	2 Doses
Diphtheria, tetanus, and pertussis (DTaP)	5 Doses	5 Doses	5 Doses
Tetanus, diphtheria, and pertussis (Tdap)		1 Dose	1 Dose
Meningococcal ACWY (MenACWY)		1 Dose	2 Doses

Note: The number of doses may be different if your child is behind schedule. If your child has fallen behind on their vaccinations it is not too late to catch-up, talk to their health care provider.

Recommended but not required for school

Influenza (flu), COVID-19, Human Papillomavirus (HPV), Meningococcal B (MenB) and other vaccines are recommended for children to ensure they are fully protected. Talk to your health care provider about when your child should receive these immunizations. For more information visit [CDC: Vaccine Schedules For You and Your Family \(www.cdc.gov/vaccines/imz-schedules/index.html\)](https://www.cdc.gov/vaccines/imz-schedules/index.html).

Tips for parents and guardians

- Make sure your child has received all of the required immunizations before their first day of school or submit an exemption.
- Submit a copy of your child's immunization record to their school. You can get a copy of their record from the clinic or find their record on [Find My Immunization Record \(www.health.state.mn.us/people/immunize/miic/records.html\)](https://www.health.state.mn.us/people/immunize/miic/records.html).
- Please complete the reverse side if your child requires an exemption for medical reasons or if you are opting for a non-medical exemption due to personal beliefs.



[Vaccines for Infants, Children, and Adolescents \(www.health.state.mn.us/people/immunize/basics/kids.html\)](https://www.health.state.mn.us/people/immunize/basics/kids.html)

Medical and non-medical exemptions

Instructions for documenting medical or non-medical exemptions and history of chickenpox (varicella)

- Follow steps 1 and 2 below to document a medical exemption, non-medical exemption, or history of chickenpox.
1. Place an X in the box to indicate a medical or non-medical exemption. If you are exempting your child from more than one vaccine, mark each vaccine you are exempting them from with an X.
 2. Obtain signatures for exemptions or history of chickenpox disease.

Required Immunizations	Medical	Non-Medical
Hepatitis B (Hep B)		
Polio (IPV)		
Measles, mumps, rubella (MMR)		
Varicella (Chickenpox)		
Diphtheria, tetanus, and pertussis (DTaP)		
Tetanus, diphtheria, and pertussis (Tdap)		
Meningococcal ACWY (MenACWY)		

Medical exemption: A health care provider must review and sign a medical exemption. A health care provider includes a licensed physician, nurse practitioner, or physician assistant.

By my signature below, I confirm that this child should not receive the vaccines marked with an X in the table for medical reasons (contraindications) or because there is laboratory confirmation that they are already immune.

Signature: _____
(of health care practitioner)

Date: _____

Non-medical exemption: A parent/guardian must sign for a non-medical exemption and the form must be signed and stamped by a notary. A child is not required to have an immunization that is against their parent or guardian's beliefs. Choosing not to vaccinate may put the health of your child or others they are around at risk. Unvaccinated children who are exposed to a vaccine preventable disease may be required to stay home from school and other activities for up to 21 days to protect themselves and others.

By my signature I confirm that this child will not receive the vaccines marked with an X in the table because of my beliefs and I understand that they may be required to remain out of school and other activities for up to 21 days if exposed to a vaccine preventable disease.

Signature: _____ Date: _____
(of parent/guardian)

Non-medical exemptions must also be signed and stamped by a notary:

This document was acknowledged before me on _____ (date),

by _____
(name of parent or guardian)

Notary Signature: _____

State of _____
County of _____

Notary Stamp

History of chickenpox (varicella) disease: If a child has previously had chickenpox, they are not required to receive the varicella vaccine. A health care provider must sign this form if the disease happened after Sept. 1, 2010. If the child had chickenpox before Sept. 1, 2010, a parent or guardian may sign this form.

My signature below means that I confirm this child does not need the varicella vaccine because they had chickenpox in the month and year _____

Signature: _____ Date: _____
(of health care practitioner, representative of a public clinic, or parent/ guardian)

Asthma Action Plan for Home and School



Name _____ DOB ____/____/____

Severity Classification ☐ Intermittent ☐ Mild Persistent ☐ Moderate Persistent ☐ Severe Persistent

Asthma Triggers (list) _____

Peak Flow Meter Personal Best _____

Green Zone: Doing Well

Symptoms: Breathing is good – No cough or wheeze – Can work and play – Sleeps well at night

Peak Flow Meter _____ (more than 80% of personal best)

Control Medicine(s)	Medicine	How much to take	When and how often to take it	Take at
	_____	_____	_____	<input type="checkbox"/> Home <input type="checkbox"/> School
	_____	_____	_____	<input type="checkbox"/> Home <input type="checkbox"/> School

Physical Activity ☐ Use albuterol/levalbuterol ____ puffs, 15 minutes before activity ☐ with all activity ☐ when the child feels he/she needs it

Yellow Zone: Caution

Symptoms: Some problems breathing – Cough, wheeze, or chest tight – Problems working or playing – Wake at night

Peak Flow Meter _____ to _____ (between 50% and 79% of personal best)

Quick-relief Medicine(s) ☐ Albuterol/levalbuterol ____ puffs, every 4 hours as needed

Control Medicine(s) ☐ Continue Green Zone medicines

☐ Add _____ ☐ Change to _____

The child should feel better within 20–60 minutes of the quick-relief treatment. If the child is getting worse or is in the Yellow Zone for more than 24 hours, THEN follow the instructions in the RED ZONE and call the doctor right away!

Red Zone: Get Help Now!

Symptoms: Lots of problems breathing – Cannot work or play – Getting worse instead of better – Medicine is not helping

Peak Flow Meter _____ (less than 50% of personal best)

Take Quick-relief Medicine NOW! ☐ Albuterol/levalbuterol ____ puffs, _____ (how frequently)

Call 911 immediately if the following danger signs are present

- Trouble walking/talking due to shortness of breath
- Lips or fingernails are blue
- Still in the red zone after 15 minutes

School Staff: Follow the Yellow and Red Zone instructions for the quick-relief medicines according to asthma symptoms.

The only control medicines to be administered in the school are those listed in the Green Zone with a check mark next to “Take at School”.

☐ Both the Healthcare Provider and the Parent/Guardian feel that the child has demonstrated the skills to carry and self-administer their quick-relief inhaler, including when to tell an adult if symptoms do not improve after taking the medicine.

Healthcare Provider

Name _____ Date _____ Phone (____) ____-____ Signature _____

Parent/Guardian

☐ I give permission for the medicines listed in the action plan to be administered in school by the nurse or other school staff as appropriate.

☐ I consent to communication between the prescribing health care provider or clinic, the school nurse, the school medical advisor and school-based health clinic providers necessary for asthma management and administration of this medicine.

Name _____ Date _____ Phone (____) ____-____ Signature _____

School Nurse

☐ The student has demonstrated the skills to carry and self-administer their quick-relief inhaler, including when to tell an adult if symptoms do not improve after taking the medicine.

Name _____ Date _____ Phone (____) ____-____ Signature _____

Emergency Action Plan for Allergic Reactions

School Year: _____

ALLERGIES (medication, environmental and/or food): _____

Student Name:	Grade:
Parent(s)/Guardian:	
Address:	
Phone # (please specify)	

Accidental ingestion or exposure to the above allergen(s) could lead to a severe allergic reaction or anaphylaxis. Signs of an allergic reaction include:

- **Mouth** – itching and/or swelling of lips, tongue or mouth
- **Throat** – itching and/or a sense of tightness in the throat, hoarseness or cough
- **Skin** – hives, itching and/or swelling of the face or extremities
- **Stomach** – nausea, abdominal cramps, vomiting and/or diarrhea
- **Lungs** – shortness of breath, repetitive cough and/or wheezing
- **Heart** – lightheadedness, fainting

MUST BE COMPLETED BY PRESCRIBING PROVIDER

Treatment Plan:

- 1) If an accidental exposure is suspected or mild symptoms of reaction develop, give **Benadryl (diphenhydramine)** _____ **mg** by mouth immediately (_____ teaspoons).
- 2) If hoarseness, a sensation of tightness in the throat, difficulty breathing, or any symptoms from two or more of the above symptoms develop, give
(☐) **Epinephrine 0.3 mg**, (☐) **Epinephrine 0.15 mg**, and call **911** to arrange transport to the nearest medical facility. **Brand of Epinephrine** _____
- 3) Other treatment:

Signature of Provider: _____ **Date:** _____

I request and give my permission for school personnel to administer the above medication to my child. I understand it is my responsibility to refill medication when notified, and that any changes in dosage or new medications require a new provider's signature. Discontinuations require a note from a parent. I understand the school is not liable for any adverse reactions.

Signature of Parent/Guardian: _____ **Date:** _____

Reviewed/Date _____

Enter the dates for each vaccine your child has received to date. Specify the month, day, and year of each dose such as 01/01/2010.

Immunization Form

Name _____ Birthdate _____

Immunizations required for child care, early childhood programs, and school.

Vaccine	Birth to 6 months	12 -24 months	At Kindergarten	At 7th grade	At 12th grade
Hepatitis B	<input type="text"/>	<input type="text"/>			
Diphtheria, Tetanus, Pertussis (DTaP, DT, Td)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Haemophilus influenzae</i> type b (Hib)	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Pneumococcal (PCV)	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Polio	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measles, Mumps, Rubella (MMR)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Chickenpox (varicella)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hepatitis A		<input type="text"/>	<input type="text"/>		
Tetanus, Diphtheria, Pertussis (Tdap)				<input type="text"/>	
Meningococcal (MCV4)				<input type="text"/>	<input type="text"/>

Minnesota law requires children enrolled in child care, early childhood education, or school to be immunized against certain diseases, unless the child is medically or non-medically exempt.

Instructions for parent or guardian:

- Fill out the dates in chronological order even if your child received a vaccine outside of the age/grade category that the box is in. Depending on the age of your child, they may not have received all vaccines; some boxes will be blank.
 - If you have a copy of your child's immunization history, you can attach a copy of it instead of completing the front of this form.
 - Your doctor or clinic can provide a copy of your child's immunization history. If you are missing or need information about your child's immunization history, talk to your doctor or call the Minnesota Immunization Information Connection (MIIC) at 651-201-3980 or 800-657-3970.
- Sign or get the signatures needed for the back of this form.
 - Document medical and/or non-medical exemptions in section 1.
 - Verify history of chickenpox (varicella) disease in section 2.
 - Provide consent to share immunization information (optional) in section 3.

Instructions: Complete section 1 to document a medical or non-medical exemption, section 2 to verify history of varicella disease, and section 3 to consent to share immunization information.

Name _____

1. Document a medical and/or non-medical exemption (A and/or B).

Place an X in the box to indicate a medical or non-medical exemption. If there are exemptions to more than one vaccine, mark each vaccine with an X.

Vaccine	Medical Exemption	Non-Medical Exemption
Diphtheria, Tetanus, and Pertussis		
Polio		
Measles, Mumps, Rubella		
<i>Haemophilus influenzae</i> type b		
Chickenpox (varicella)		
Pneumococcal		
Hepatitis A		
Hepatitis B		
Meningococcal		

A. Medical exemption: By my signature below, I confirm that this child should not receive the vaccines marked with an X in the table for medical reasons (contraindications) or because there is laboratory confirmation that they are already immune.

Signature: _____ Date: _____
(of health care practitioner*)

2. History of chickenpox (varicella) disease. This child had chickenpox in the month and year _____

My signature below means that I confirm that this child does not need chickenpox vaccine because:

- ☐ I am a health care practitioner and this child was previously diagnosed with chickenpox or the parent provided a description that indicates this child had chickenpox in the past.
- ☐ I am the parent or guardian and this child had chickenpox on or before September 1, 2010.

Signature: _____ Date: _____
(of health care practitioner*, representative of a public clinic, or parent/guardian). Parent can sign if chickenpox occurred before September 2010.

*Health care practitioner is defined as a licensed physician, nurse practitioner, or physician assistant.

B. Non-medical exemption: A child is not required to have an immunization that is against their parent or guardian’s beliefs. However, choosing not to vaccinate may put the health or life of your child or others they come in contact with at risk. Unvaccinated children who are exposed to a vaccine-preventable disease may be required to stay home from child care, school, and other activities in order to protect them and others.

By my signature, I confirm that this child will not receive the vaccines marked with an X in the table because of my beliefs. I am aware that my child may be required to stay home from child care, school, and other activities if exposed.

Signature: _____ Date: _____
(of parent or guardian in presence of notary)

Non-medical exemptions must also be signed and stamped by a notary:

This document was acknowledged before me
on _____ (date)

by _____
(name of parent or guardian)

Notary Signature: _____

Notary Stamp

STATE OF MINNESOTA, COUNTY OF _____

3. Consent to share immunization information: This school is asking for permission to share your child’s immunization record with Minnesota’s immunization information system. Giving your permission will:

- Provide easier access for you and your school to check immunization records, such as at school entry each year.
- Support your school in helping to protect students by knowing who may be vulnerable to disease based on their immunization record. This can be important during a disease outbreak.

Under Minnesota law, all the information you provide is private and can only be released to those authorized to receive it. Signing this section of the form is optional. If you choose not to sign, it will not affect the health or educational services your child receives.

I agree to allow my child’s school to share my child’s immunization documentation with Minnesota’s immunization information system:

Signature: _____ Date: _____
(of parent/guardian)

SEIZURE ACTION PLAN (SAP)



END EPILEPSY

Name: _____ Birth Date: _____
Address: _____ Phone: _____
Parent/Guardian: _____ Phone: _____
Emergency Contact/Relationship: _____ Phone: _____

Seizure Information

Seizure Type	How Long It Lasts	How Often	What Happens

Protocol for seizure during school (check all that apply) ☒

- | | |
|---|--|
| <input type="checkbox"/> First aid – Stay. Safe. Side. | <input type="checkbox"/> Contact school nurse at _____ |
| <input type="checkbox"/> Give rescue therapy according to SAP | <input type="checkbox"/> Call 911 for transport to _____ |
| <input type="checkbox"/> Notify parent/emergency contact | <input type="checkbox"/> Other _____ |

First aid for any seizure

- ☐ **STAY** calm, keep calm, **begin timing seizure**
- ☐ Keep me **SAFE** – remove harmful objects, don't restrain, protect head
- ☐ **SIDE** – turn on side if not awake, keep airway clear, don't put objects in mouth
- ☐ **STAY** until recovered from seizure
- ☐ Swipe magnet for VNS
- ☐ Write down what happens _____
- ☐ Other _____

When to call 911

- ☐ Seizure with loss of consciousness longer than 5 minutes, not responding to rescue med if available
- ☐ Repeated seizures longer than 10 minutes, no recovery between them, not responding to rescue med if available
- ☐ Difficulty breathing after seizure
- ☐ Serious injury occurs or suspected, seizure in water

When to call your provider first

- ☐ Change in seizure type, number or pattern
- ☐ Person does not return to usual behavior (i.e., confused for a long period)
- ☐ First time seizure that stops on its' own
- ☐ Other medical problems or pregnancy need to be checked



When rescue therapy may be needed:

WHEN AND WHAT TO DO

If seizure (cluster, # or length) _____
Name of Med/Rx _____ How much to give (dose) _____
How to give _____

If seizure (cluster, # or length) _____
Name of Med/Rx _____ How much to give (dose) _____
How to give _____

If seizure (cluster, # or length) _____
Name of Med/Rx _____ How much to give (dose) _____
How to give _____

Care after seizure

What type of help is needed? (describe) _____

When is student able to resume usual activity? _____

Special instructions

First Responders: _____

Emergency Department: _____

Daily seizure medicine

Medicine Name	Total Daily Amount	Amount of Tab/Liquid	How Taken (time of each dose and how much)

Other information

Triggers: _____

Important Medical History _____

Allergies _____

Epilepsy Surgery (type, date, side effects) _____

Device: ☐ VNS ☐ RNS ☐ DBS Date Implanted _____

Diet Therapy ☐ Ketogenic ☐ Low Glycemic ☐ Modified Atkins ☐ Other (describe) _____

Special Instructions: _____

Health care contacts

Epilepsy Provider: _____ Phone: _____

Primary Care: _____ Phone: _____

Preferred Hospital: _____ Phone: _____

Pharmacy: _____ Phone: _____

My signature _____ Date _____

Provider signature _____ Date _____

Home

Testimonials

About Us

Agents

Claims

FAQ

Contact Us



K-12 Voluntary Student Accident

- > 24 Hour
- > At School
- > High School Football

Is your child covered by a high-deductible employer plan? If you have to pay hundreds, or even thousands of dollars in order to meet your deductible, the K-12 Accident insurance plan can reimburse you for your children's eligible medical expenses as you continue to work toward meeting the deductible on your employer plan

Login/Register

First time users must register in order to save their Quotes & Applications: [Register here](#)

E-mail

Password

GO

[Forgot password?](#)

Need Assistance?

Call 1-855-742-3135

[Ask us a question](#)

Quick Services

Select Service Type

File a Claim

Applications & Brochures

K-12 Medical Accident is not available in New York, New Hampshire and Virgin Islands

Enroll Now

Select a Program ▼

GO



ACCREDITED
BUSINESS

BBB Rating: A+

As of 8/2/2022

[Click for Profile](#)

[Glossary](#) | [FAQ](#) | [Site Map](#) | [K&K Canada](#) 

Need Assistance, Please Call 1-855-742-3135

Copyright 2009 K&K Insurance Group Inc. | [Privacy and Legal Notice](#) | [Refund Policy](#)

K&K Insurance Group, Inc. is a licensed insurance producer in all states (FL license #L007299, TX license #13924); operating in CA, NY and MI as K&K Insurance Agency (CA License #0334819)

FATCA Notice: Please click <http://www.aon.com/FATCA> to obtain the appropriate W-9.

K&K Insurance Group is a wholly-owned subsidiary of Aon

[Do Not Sell My Data](#)

PANTHER ACTIVITIES



Park Rapids Area Parents and Students:

Park Rapids Area Schools is excited to offer all Park Rapids Area students, K-12, school sponsored activities. This year activity fees have been reinstated and are as follows:

Students Grades 9-12 \$100

Students Grades 7-8 \$50

Fine Arts: \$50

Family cap for the year: \$300

Band/Choir: No Fee

****For those families that qualify you may be eligible for reduced or free activities by filling out a Meal Application.**

We encourage all families to support Panther Activities and cheer for our students. Below are the admission prices for the 25-26 season:

Park Rapids Area Students: Free

Seniors 65+: Free

Visiting Students & Seniors 62-65: \$4

Adults: \$6

Again, thank you for supporting Park Rapids Area Schools and Panther students and activities.

Contact Jeremy Nordick for more information at 218-237-6550 or jnordick@parkrapids.k12.mn.us

Go Panthers!

Jeremy Nordick
Athletic Director
218-237-6550



2025-2026

Educational Benefits Application

Our educational benefits application is critical to Park Rapids School district in receiving Compensatory Revenue, Title 1 Funding, and other various grants from the State of Minnesota. These funds directly benefit the school site your student attends and can help us generate funding through other sources. It can also benefit you through the following programs listed below. We ask that ALL families complete our application to ensure continued funding to support ALL students in our district. If you think you may qualify or could benefit from the decreased rates, please take the time to click the link and fill out an application for this school year. <https://lincconnect.com>



School Funding

Increased Funding to ensure students receive the support they need to receive a comprehensible world class education



Athletics/Phy. Ed.

Discounts on athletic fees and Physical Education uniforms



**That's
Community Ed!**

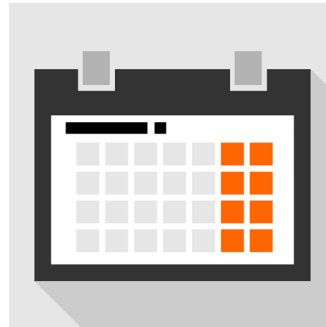
Community Ed Classes

Reduced rates for some community education courses, Preschool classes and afterschool childcare program.



College Application Fees

Waived fees when you fill out college application fees.



Next School Year

Benefits carry over to mid October of the next School year.



ACT, SAT, AP Fees
Academic testing fee reduction.

Questions? Please contact Kim Splett at 218-237-6500 or by email ksplett@parkrapids.k12.mn.us

PREAF

PARK RAPIDS *Education & Activities* **FOUNDATION**

PREAF...WHAT DOES IT STAND FOR?

PREAF is an acronym that stands for Park Rapids Education & Activities Foundation. The Foundation was established in 2000, and throughout the last 25 years, the Foundation has allocated over \$876,000 to the educational, fine arts, and athletic programs in the Park Rapids Area Schools. Decisions are made by a Board of Directors, a group of volunteer community leaders with a strong commitment to educational excellence. Allocation priorities include: art, music, and drama activities; educational and academic activities and equipment; and athletic programs. Grant requests are considered by members of the Allocation Committee within a defined set of guidelines on a case-by-case basis.

PREAF...WHY DOES IT EXIST?

The mission of the PREAF is to ensure the funding for strong and healthy educational, fine arts, and athletic programs of the Park Rapids Area Schools; as well as to provide a contribution structure for these and other school programs. The goals of the PREAF are to establish an annual Park Rapids Area Schools fundraising effort, to create a sustaining Park Rapids Area School District Endowment, to allow for a tax-exempt vehicle for contributions, gifts, grants, trusts, or other fundraising efforts for the school, and to minimize door-to-door fundraising for the Park Rapids Area School District.

PREAF...HOW DOES IT BENEFIT ME?

All allocations are directly funded by individuals, associations, and corporation membership contributions...that is why participation is extremely crucial to our students and the Park Rapids Area Schools. In addition to your membership contribution, there are membership benefits that the PREAF provides for YOU! The PREAF provides a variety of levels of membership that will benefit you and your family's needs...season passes to athletic and fine arts performances, Panther Prowl gift certificates, advertising space in game programs...it's all waiting for YOU! Sustaining memberships are also available.

PREAF...PLEASE SIGN ME UP!

Membership forms can be found on the school website www.parkrapids.k12.mn.us under the Community tab (select Education & Activities Foundation), and at all Park Rapids school offices. Memberships can be mailed directly to PREAF at PO Box 211, Park Rapids, MN 56470. Please contact Steph Carlson at 252-1597 or Lisa Koppelman at 237-4545 for additional information or questions. Or you can email us at preafoundation@gmail.com or send us a message on our PREAF Facebook page.

PREAF PARK RAPIDS *Education & Activities* FOUNDATION

A nonprofit corporation dedicated to the development of Park Rapids Area Youth. Please consider supporting the educational, athletic, and fine arts activities of the Park Rapids Area Schools with any of the available giving opportunities. All options are either partially or fully tax deductible.

PLEASE RETURN THIS FORM BY AUGUST 1ST TO BE LISTED IN THE ATHLETIC PROGRAM/CALENDAR

Name	
E-mail Address	
Address	
Names on season passes (2 names per pass)	

ANNUAL GIVING OPPORTUNITIES	
Donation	<input type="checkbox"/> Amount \$ _____
Panther \$50	<input type="checkbox"/> One 8 punch transferable pass for admission to all regular season athletic contests & fine arts performances
Panther Cub \$100	<input type="checkbox"/> One annual season pass – good for admission to all regular season athletic contests & fine arts performances, recognition in game programs
Panther Den \$309	<input type="checkbox"/> Two annual season passes – good for admission to all regular season athletic contests & fine art performances, 1" x 2" advertising space in game programs, \$40 gift certificate for Panther apparel at the Panther Prowl Store <input type="checkbox"/> DO NOT WANT GIFT CERTIFICATE
Panther Pride \$1,000	<input type="checkbox"/> Four annual season passes, 2" x 4" advertising space in game programs, 2-\$40 gift certificates for Panther apparel at the Panther Prowl Store, 1" x 3.5" advertisement in the PREAF School Activity Calendar

ENDOWMENT FUND GIVING OPPORTUNITIES	
Silver \$3,090	<input type="checkbox"/> Same benefits as Panther Pride membership (renewed annually for 3yrs)
Gold \$10,000	<input type="checkbox"/> Same benefits as Panther Pride membership (renewed annually for 10yrs)
Miscellaneous Gifts	<input type="checkbox"/> Recognition in game program \$ _____

PAYMENT OPTIONS	
Payment Enclosed	<input type="checkbox"/> Cash or Check payable to Park Rapids Education & Activities Foundation (PREAF)
Venmo	<input type="checkbox"/> @PREAF

Please return to: PREAF, PO Box 211, Park Rapids, MN 56470

or email to: preafoundation@gmail.com

THANK YOU FOR YOUR SUPPORT OF THE PREAF!

Why PRAVA Works for You

Park Rapids Area Virtual Academy (PRAVA) is a Minnesota State-Approved online learning provider for grades 6-12. Licensed Park Rapids teachers offer personalized instruction, guidance, and support.

Students benefit from flexible scheduling, advanced courses, special education, mental health services, and academic interventions.

Students receive a district email, Google Suite and Apex Learning access, and may request a Chromebook and Wi-Fi hotspot.



Flexible scheduling allows Mia to barrel race competitively. She appreciates the personalized instruction from local teachers and the Apex platform.

“

Flexible learning.
Real results.
PRAVA makes it
possible.

PHONE
218-237-6418

EMAIL
jstevenson@parkrapids.k12.mn.us

WEBSITE
<https://prava.parkrapids.k12.mn.us/>

Students can enroll in PRAVA full-time or choose a hybrid schedule, combining online learning with on-campus classes at Park Rapids Schools.

PRAVA: Park Rapids Area Virtual Academy



Maggie, Class of 2025 Valedictorian and volleyball captain, used PRAVA's flexibility to balance a full-time job, sports, and studies. "PRAVA taught me independence, time management, and self-motivation."

Your Future Starts Here.

We offer **over 55 accredited courses** in the core subject areas: English, Language Arts, Mathematics, Science, Health/Physical Education, and Social Studies, as well as electives in Creative Writing, Probability & Statistics, Pre-Calculus, Environmental Science, Physics, Earth & Space, Sociology, Psychology, Spanish, College & Career Prep, Business, and much more!

Mylee earned her pilot certificate while enrolled in PRAVA. "Being in PRAVA allowed me to work, get ahead in school, and save money for my future."



Launch

Your Future.

PARK RAPIDS AREA VIRTUAL ACADEMY

- Personalized Instruction
- Mentorship & Support
- Friendly, Knowledgeable Teachers
- Excellent Communications Network
- Academic Requirement Guidance
- High School Graduation & Diploma from Park Rapids Area Schools
- A Model of Instruction that embraces family values to learn from home!

● ● ●
**REAL STUDENTS.
REAL SUCCESS.**

Reid has a passion for stock car racing, which fits into his busy study schedule. PRAVA's support network allows him to complete his education requirements.



**Is PRAVA a good
fit for you?**

Virtual Online learning requires strong family support, a quiet study space, high-speed internet, and flexible time to complete assignments. Families play a key role in guiding students on their educational journey.

PRAVA requires a high level of student engagement. Successful students work independently, are self-motivated, meet deadlines, and ask for help when needed.



🔍 **Wondering if PRAVA is right for you? Scan to find out.**

PRAVA Graduating Class of 2025



PARENT VUE INSTRUCTIONS

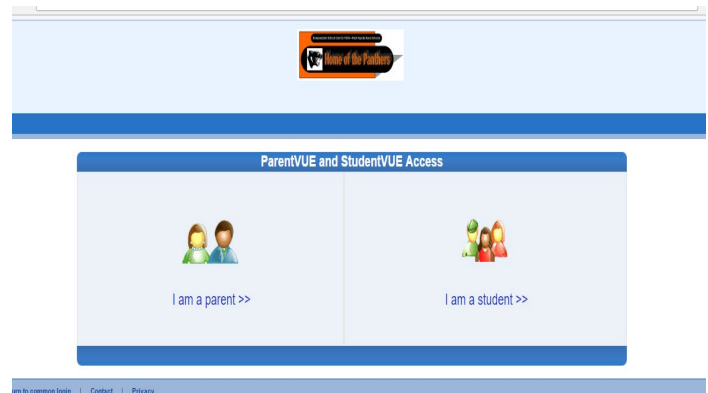
Follow the web address below to begin creating
Your account or go to the Park Rapids School Website
www.parkrapids.k12.mn.us.

From Menu

For Parents/Students-Links for Parents &Students-
ParentVue/StudentVue

You will need the letter and activation key information
you received from the principal's office.

https://rt3.region1.k12.mn.us/rt0309/login_pxp.aspx



All parents and students can create their
own ParentVue or StudentVue account.

Click Accept to Continue

Enter your name and activation key as it
appears on the letter you received from the
building secretary.

Continue to step 3 to enter your user name,
password and primary email address.

Home My Account Help Close

Select Child Cain | Cheyenne | Rhianna Good afternoon, Porter Bradley, 6/27/2017

Messages 1

Calendar

Attendance

Class Schedule

Class Websites

Conference

Course History

Course Request

Discipline

Fee

Grade Book

Health

Report Card

School Information

Student Info

Lunch Activity

MCA Results

Digital Locker

Recent Events

Cain has no recent events to note at this time
Home School: Region 1 High School (070)

Events for Cheyenne:
Nurse visit notes for 06/27/2017
Home School: Region 1 High School (070)
Concurrently Enrolled In: Region 1 ALC (075)

Rhianna has no recent events to note at this time
Home School: Region 1 High School (070)

All your students, District Events, Recent Events for each student

Messages 1

Calendar

Attendance

Class Schedule

Class Websites

Conference

Course History

Course Request

Discipline

Fee

Cheyenne
Region 1 High School (070) (218-681-7432)

Purrier, A ALGEBRA 1(6) ALL ALL

CALENDAR

February 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
29	30 Purrier, A ALGEBRA 1(6) : 1.3 Properties of Numbers - Score: 100.00	31 Purrier, A ALGEBRA 1(6) : 1.4 The Distributive Property - Score: 60.00	1	2 Purrier, A ALGEBRA 1(6) : 1.5 Equations - Score: 100.00	3	4
5	6	7 Purrier, A ALGEBRA 1(6) : Mid-Chapter Quiz - Score: 80.00	8	9	10	11

Calendar can be viewed by day, week, or month.

Messages 1

Calendar

Attendance

Class Schedule

Class Websites

Conference

Course History

Course Request

Discipline

Fee

Cheyenne
Region 1 High School (070) (218-681-7432)

Mid-Term Q1 | Quarter 1 | Mid-Term Q2 | Quarter 2 | Mid-Term Q3 | **Quarter 3** | Mid-Term Q4 | Quarter 4

Grade Book Summary for Region 1 High School (070) Quarter 3 (ending on 04/03/2017)

Period	Course Title	Resources	Room Name	Teacher	Qtr 3
1	TUTORING (782)		119	Jesse Thorstad	A (100.0)
2	Wind Ensemble Test S2 (371.2)		170	Kylee Kalbakdalen	A (100.00)
3	GERMAN III (478)		208	Danita Lindstrom	B (85.0)
5	PHYSICS (756)		227	Sonny Koski	A (97.0)
6	ALGEBRA 1 (611)			Alyssa Purrier	B+ (88.8)

Grade Book

Click on letter grade to view individual assignments.

Grade Book Summary for Region 1 High School (070) Qtr 3								
Assignment Details for ALGEBRA 1 (611) / Period: 6 / Alyssa Purrier / B+ (88.8%)								
Date	Assignment	Assignment Type	Resources	Score	Score Type	Points	Notes	Drop Box
02/07/2017	Expression/Equation Story Project	Project	0	45.83 out of 50.00 (A-)	Raw Score	45.83/50.00		-
02/02/2017	1.5 Equations	Homework	1	5 out of 5.00 (A)	Raw Score	5.00/5.00		1/25/2017 - 1/26/2017
01/31/2017	1.4 The Distributive Property	Homework	1	3 out of 5.00 (D-)	Raw Score	3.00/5.00		1/25/2017 - 1/26/2017
01/31/2017	Mid-Chapter Quiz	Quiz	0	20 out of 25.00 (B-)	Raw Score	20.00/25.00		-
01/30/2017	1.3 Properties of Numbers	Homework	1	5 out of 5.00 (A)	Raw Score	5.00/5.00		1/25/2017 - 1/26/2017
01/26/2017	1.2 Order of Operations	Homework	1	5 out of 5.00 (A)	Raw Score	5.00/5.00		1/25/2017 - 1/26/2017
01/24/2017	1.1 Variables & Expressions	Homework	0	5 out of 5.00 (A)	Raw Score	5.00/5.00		1/23/2017 - 5/31/2017
Totals						88.83 out of 100.0000 Current Score B+ (88.8%)		

LINQ Connect is a secure, online portal that allows families to:

- Make an online payment to their student's meal account
- Remotely monitor their student's accounts
- Set up automatic recurring payments
- Set up low balance email message alerts
- View and purchase fees assigned to their student in the Online Store
- Submit an online application for free and/or reduced meals
- View online breakfast and lunch menus

NEED ADDITIONAL SUPPORT?

support@linqconnect.com

<https://linqconnect.com>

How do I get started? It's as easy as 1, 2, 3:

1. Register

Create an account at <https://linqconnect.com> and selecting **Register**.

2. Verify your Account

Verify your account by clicking on the email verification link sent to your email address.

3. Sign In

Now you can sign in at <https://linqconnect.com> using your email and password.

I just registered and when I try to log in it says, "Invalid email or password"?

Your account will not be active until you have verified your email address and password. Check your email for the verification link.

What if I forget my Username or Password?

On the login page, click **Forgot your password?** Enter your email address and click **Reset Password**. A temporary password will be emailed to you. Upon logging in with the temporary password, you will be prompted to set your new password.

When I log in, I do not see my student's account?

You will need to add your student to your LINQ Connect account. Click on **+** then **Type** and complete the information to link your student. You will need to complete this process for each student you wish to add.

What if I have several student's in different districts?

You can add as many children student's as you need, as long as they attend a school district utilizing LINQ Connect for their meal payment account.

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

Once you have added your child to your LINQ Connect account, you can add money by clicking the **Add Money to Account** button on the dashboard or by clicking the **Meal Accounts** button on the student card. You can choose to either **Add to Balance** or set up a **New Recurring Payment with Auto Pay**.

If you select **Add to Balance**, the funds will be immediately available on your student's account upon completion of the transaction.

If you select **New Recurring Payment with Auto Pay**, you will be setting up a future automatic payment for the specified amount, frequency, day, and starting date that you choose.

Can I set up automatic meal payments?

Yes. Click on **Auto Pay**. Enter the Payment Amount for each student, Frequency, Day, Starting Date, Billing Address, Payment Method, and click **Save**.

How can I cancel or change my automatic meal payments?

Go to the **Meal Accounts** page and click on the trash can icon on the **Auto Pay** card.

Can I transfer my funds from one student's account to another?

If your school district has added the transfer funds feature, you can transfer funds between accounts. To determine if you have access, navigate to the **Transfer Balances** card on the **Meal Accounts** page. If you see your student's name, you're able to transfer funds within the district. Funds can only be transferred for students within the same school district.

Can I set spending limits on my student's account?

You can set specific spending limits on your student's account only if your school district has added the spending limits feature. To determine if you have access, navigate to the **Spending Limits** card on the **Meal Accounts** page and locate your child's name. Click on the pencil icon to the right to set a spending limit.

Where do I find fees assigned to my student's account?

Fees assigned to your student will display on their student card on the Dashboard. Optional fees, such as sports tickets, can be added to your cart from the Online Store.

Why can't I see assigned fees in LINQ Connect?

You will only see assigned fees if your district is using the Fee Management module. Only unpaid assigned fees display on your child's student card and dashboard.

How do I view items in the Online Store?

There are two ways to do this. The first way is to select **Fees** on the student card. The second way is to select **Store** from the Navigation panel.

Where can I download forms that are attached to fees (e.g., permission slips)?

There are two ways to access forms and links. First, go to the Online Store and select the **Fee**. Forms will be listed by name at the bottom of the screen. Click on a form to download it to your device. Second, you can select **Forms** from the Navigation panel and you'll see a complete library of forms and links.

How do I see my Transaction History?

Transaction History includes all in school meal purchases as well as any online payments, fee payments or store purchases. You can see this detailed history and obtain an email copy of transactions by clicking **Transaction > History**.

If I have more than one child in the district, can I deposit money one time and have the amount divided evenly among each of my student's accounts?

Yes, if your district has "Shared Accounts" for its students and you've requested this for your student. To determine if your student has been set up for shared accounts, select any payment option. If siblings are sharing an account, you'll see all your student's names listed next to the deposit amount. You can then enter the deposit amount—funds added will be shared between accounts until the funds have been depleted.

I made an online meal payment. How long will it take before the funds will be available in my child's account?

If you selected **Add Money to Account**, the funds will be available immediately in your student's account upon completing the payment transaction.

If you selected **Add Auto Pay**, the funds will be available the following day from the day is scheduled to run. For example, if the payment is to be made every Monday, the funds will be available Tuesday morning.

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

Yes, you can find the processing fee during checkout.

What credit cards/methods of payment can I use?

Go to the [Payment Methods](#) card on your profile and select [New Payment Method](#) to identify which methods you can use.

When entering my Payment Method, it asks for a “Description”—what do I put?

This is a free form field, and you can name it anything. For example, you can name it “Household Credit Card” or “Chase Credit Card.”

I am trying to enter my credit card information and it keeps saying “Invalid Card”—what am I doing wrong?

The system will not allow you to continue if any required items are missing. Check to see that you have entered the following:

1. Check to see that the credit card information is correct.
2. Make sure the type of card you are entering is accepted. For example, American Express or Discover may not be accepted.

I am trying to make a payment but the “Confirm and Pay” button is gray, and I can’t continue?

The system will not allow you to continue if any required items are missing. Check to see that you have entered the following correctly:

1. Billing address
2. Credit card information

Can I receive a notification when my student’s account balance is low?

Yes. The system is defaulted to send an email reminder when the balance falls below \$5.00. You can change the Payment Reminder by editing the dollar amount on the [Payment Reminder](#) card on the Meal Accounts page.

How can I see activity on my student’s account?

Click on [History](#) to view previous transaction history.

What happens to the money in my student’s account at the end of the school year?

Your account balance moves with your student from grade to grade and school to school (within the district).

How can I remove a student from my LINQ Connect account?

Open the student card and click on the three dots in the bottom right-hand corner, where you can select Remove.

How can I be sure my information is safe?

LINQ Connect is protected by 256-bit SSL encryption between all browsers and our centralized data center.

Why is there a “pending” charge on my bank statement after my card was declined?

It is common practice in the banking industry to hold the transaction fee on online payments. The fee may temporarily appear on your bank statement, but the fee will automatically be removed in approximately 1-8 banking days. If you have any questions about this fee, please contact your credit card company directly.

How can I apply for free/reduced meals online?

1. Apply

Go to <https://linqconnect.com> and click **Start Meal Application**.

2. Log In

If you have already registered for a LINQ Connect account and have logged in, you can click on **Start Meal Application**.

How will I find out the status of my free/reduced meal application?

The district will notify you within 10 school days, either by email or letter. If you have not received a notice, please contact the school district's child nutrition department directly. You can access your eligibility letter once your district has processed the application within the Notification bell in the upper right corner of the dashboard.

How can I update my email address and password?

In the upper right-hand corner, click on the Profile icon, then select your account name. To change your email address, select the **Update Email** button. To update your password, click on **Update Password**.

Can I see my student's school menu online?

Yes, if the school is using TITAN Menu Planning. From the login screen on linqconnect.com, enter your district's name into **Check District Menu**.

When should I contact the Child Nutrition Department of my student's school district?

- If you would like a refund
- If you have a question about your child's meal service or activity on their account
- If you would like to restrict your student from purchasing items due to allergens or restrictions
- If you have questions related to your student's meal account

My spouse and I are no longer together. Can we both have access to LINQ Connect to view our student's accounts, but with separate accounts and logins?

Yes. Simply set up a new account with your email address. When you link your student to your account, you can then view account balances and deposit funds separately. Your financial information will only be visible to you. However, available student balances will be visible to any guardian or family member who has access to your student through LINQ Connect.

Can I access my account through any browser?

You can access your account through any browser except Internet Explorer, which is no longer supported.

Can I access my account through a mobile app?

Yes, you will need to download the new LINQ Connect app in the Apple Store available soon or Google Play Store available now. The app can be downloaded now and will go live on May 23rd.

How can I deposit funds to the Feed it Forward program?

On the **Meal Accounts** page, scroll to the **Feed it Forward** section and select an available district and will help support your district in funding meals for those who cannot. Please note this is separate from your student(s) having an account balance.

What Is the web address for meal applications?

Please utilize <https://linqconnect.com> for your meal applications.

Will there be an option for families to view menus If the district doesn't use the Front of House portion of Titan?

If your district has enabled this feature, you can view your schools menu through LINQ Connect.



Will families need to create a login to view menus?

No, an account is not required to view menus, they can view on linqconnect.com by entering the district name in the [Check District Menus](#) card.

Ethnic and Racial Demographic Designation Form

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

Date of Birth: _____ District: _____ School: _____

Schools are required to report ethnicity and race to the state and to the U.S. Department of Education. Because of recent changes to Minnesota state law, Minnesota disaggregates each category into detailed groups to further represent our student populations. Parents or guardians are not required to answer the federal questions (**in bold**) for their children. If you choose not to answer the federal questions (**in bold**), federal law requires schools to choose for you. This is a last resort—we prefer if parents or guardians complete the form. State questions are labeled as “Optional” and schools will not fill in this information for you.

This information helps improve teaching and learning for everyone and helps us accurately identify and advocate for students currently underserved. The information this form collects is considered private information. You can review the privacy notice to learn more about the purpose of collecting this information, how it will be used and not used, and how the detailed groups were identified. The privacy notice can be found in our [Frequently Asked Questions: Ethnic and Racial Designation Form](#).

Is the student Hispanic/Latino as defined by the federal government? The federal definition includes persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.¹

[You must select “yes” or “no” to this question.]

☐ **Yes** *[If yes, go to Question A.]*

☐ **No** *[If no, go to Question 1.]*

Optional Question A: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | | |
|--|---------------------------------------|--|--|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Guatemalan | <input type="checkbox"/> Salvadoran | <input type="checkbox"/> Other Hispanic/Latino |
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Mexican | <input type="checkbox"/> Spaniard/Spanish/
Spanish-American | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Ecuadorian | <input type="checkbox"/> Puerto Rican | | |

Go to Question 1.

[Select “yes” to at least one of the Questions (1-6) below.]

Question 1: Does the student identify as American Indian or Alaska Native as defined by the state of Minnesota? The state of Minnesota definition includes persons having origins in any of the original peoples of North America who maintain cultural identification through tribal affiliation or community recognition. [This question is needed to calculate state aid/funding.]

☐ **Yes** *[If yes, go to Question 1a.]*

☐ **No** *[If no, go to Question 2.]*

Optional Question 1a: If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

- | | | |
|--|--|---|
| <input type="checkbox"/> Decline to indicate | <input type="checkbox"/> Cherokee | <input type="checkbox"/> Other North American Indian Tribal Affiliation |
| <input type="checkbox"/> Anishinaabe/Ojibwe | <input type="checkbox"/> Dakota/Lakota | <input type="checkbox"/> Unknown |

Go to Question 2.

¹Federal Register, Vol. 72, No. 202/Friday, October 19, 2007/Notices/59274

Question 2. Is the student American Indian from South or Central America?

☐ **Yes** [Go to Question 3.]

☐ **No** [Go to Question 3.]

Question 3. Is the student Asian as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.¹

☐ **Yes** [If yes, go to Question 3a.]

☐ **No** [If no, go to Question 4.]

Optional Question 3a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

☐ Decline to indicate

☐ Chinese

☐ Karen

☐ Other Asian

☐ Asian Indian

☐ Filipino

☐ Korean

☐ Unknown

☐ Burmese

☐ Hmong

☐ Vietnamese

Go to Question 4.

Question 4. Is the student black or African American as defined by the federal government? The federal definition includes persons having origins in any of the black racial groups of Africa.¹

☐ **Yes** [If yes, go to Question 4a.]

☐ **No** [If no, go to Question 5.]

Optional Question 4a. If yes was chosen above, select all that apply from the list below (*this question will not be answered by school staff*):

☐ Decline to indicate

☐ Ethiopian-Other

☐ Somali

☐ African-American

☐ Liberian

☐ Other black

☐ Ethiopian-Oromo

☐ Nigerian

☐ Unknown

Go to Question 5.

Question 5. Is the student Native Hawaiian or Other Pacific Islander as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.¹

☐ **Yes** [Go to Question 6.]

☐ **No** [Go to Question 6.]

Question 6. Is the student white as defined by the federal government? The federal definition includes persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.¹

☐ **Yes**

☐ **No**

Parent(s)/Guardian Name _____ Date _____

Parent(s)/Guardian Signature _____

Print/Save



CENTURY ELEMENTARY SCHOOL LIST BY GRADE

VOLUNTARY PRE-KINDERGARTEN

Please write your child's name on the inside of their folder before open house so they get their own folder back!

- Washable Broad Crayola Markers
- 3 Elmer's Glue Sticks
- 1 Elmer's Washable Glue Bottle
- 1 Plastic Pocket Folder for Backpack Mail
- Lysol or Clorox Disinfecting Wipes
- Box of Kleenex
- Roll of Paper Towels
- Pre-Packaged Snacks for 24
- \$5 Supply Fee Envelope for Classroom Parties

The following items aren't required, but greatly appreciated:

- Dry Erase Markers
- Baby Wipes
- Napkins
- Themed Stickers
- Ziplock Bags: Quart & Gallon
- Paper Plates: Large or Small
- Hand Sanitizer
- Blue Hand—Wipe Rags

KINDERGARTEN

Please check the teacher specific supply lists as well

- 2 plastic folders with prongs
- 12 #2 wooden pencils (not plastic coated)
- 2 boxes of 24 crayons
- 1 large box of Kleenex
- 1 large school backpack (no wheels)
- 1 package of Crayola markers
- 1 box of crackers or similar snack (to be shared)
- Tennis shoes with good traction/soles
- 6 glue sticks or 1 glue bottle
- 1 child's Fiskars scissors
- Headphones (NO earbuds or Bluetooth)
- Water bottle with name on it

FIRST GRADE

Please check the teacher specific supply lists as well

- 12- #2 sharpened Ticonderoga wooden pencils (not plastic coated)

- 2 glue sticks
- 2 containers of Lysol wipes
- 1 school box (about 5"x8")
- 1 backpack (no wheels)
- 1 pointed child's Fiskars scissors
- 1 large box of Kleenex
- Corded plug-in headphones (please no earbuds or headphones that need to be charged!)
- 1 large pencil eraser
- 1 ream of colored copy paper
- Tennis shoes that tie
- 1 box of 24 count Crayola crayons
- 4 Expo dry erase markers
- 1 (4oz) bottle of Elmer's glue (no gel or colors)
- 2 sturdy plastic folders *WITH PRONGS*
- 1 3-ring binder (1" with plastic sleeve on the front cover)
- Water bottle with name on it
- 1 box of any sized Ziplock bags

SECOND GRADE

Please check the teacher specific supply lists as well

- 2 wide-lined 70-sheet spiral notebooks
- Large pink eraser
- 1 large box of Kleenex
- 1 box of Crayola crayons
- 1 container of disinfectant wipes
- 2 large or 4 small glue sticks
- Plastic 5"x8" pencil box
- 2 plastic folders with pockets
- 4 Expo dry erase markers
- Backpack (no wheels)
- Tennis shoes that tie
- 24 #2 sharpened pencils (no plastic coating)
- Index cards
- Post it notes
- 1 pack of colored pencils
- Headphones
- Water bottle with name on it
- Recommended: addition/subtraction flash cards for practice at home
- Scissors

THIRD GRADE

- 3 wide-ruled spiral notebooks
- Headphones
- Backpack (no wheels)
- Scissors



CENTURY ELEMENTARY SCHOOL LIST BY GRADE

- 4 Expo dry erase markers (dark colors with broad tip)
- 1 deck of playing cards
- 6 Elmer's glue sticks
- Plastic 5"x8" pencil box
- 2 boxes of Kleenex
- 12 pk of #2 pencils
- Tennis shoes that tie
- 1 pk of Crayola crayons or colored pencils
- Crayola markers
- Erasers
- 1 ream of colored copy paper
- Water bottle with name on it
- 2 containers of Lysol wipes
- Colored pencils
- Pens
- Markers (package or 8 or more)
- 2 notebooks
- 2 composition notebooks
- Erasers, glue sticks, hand-held pencil sharpener
- Headphones/earbuds
- 1 box of Kleenex
- Pack of Expo markers
- 2 dozen pencils
- TI30xs Multiview or Casio fx-300ES Plus Scientific calculator (optional)
- 1 container of Clorox wipes

FOURTH GRADE

- Backpack
- Crayons or colored pencils
- Headphones (if we don't have yours from 3rd grade)
- Scissors
- Glue Sticks
- 12-24 #2 wooden pencils
- 1-2 Highlighters
- Pencil-top erasers or large eraser
- Pack of low odor Expo markers
- White board eraser
- 3-4 wide-ruled notebooks
- Pocket folders
- 1-2 boxes of Kleenex
- 2 boxes of Lysol/Clorox wipes

*please do not send pencil sharpeners or binders

FIFTH GRADE

- 2 dozen pencils- NO mechanical pencils
- Headphones or earbuds
- 5 spiral notebooks
- Scissors
- Colored pencils
- Big eraser
- 2 big boxes of Kleenex
- Glue stick
- Highlighter
- 5- 2 pocket folders
- Disinfecting wipes

SIXTH GRADE

- 2 ½" binder
- 5 folders for binder
- Pencil pouch with 3 holes
- Scissors
- Highlighter

7th & 8th Grade Supply List

Required Personal Use Items

Headphones or Earbuds (Nothing Wireless)

Scientific Calculator

(Casio fx-300ES OR TI-30xiis)

Ruler

Pencils

Pens

5 Notebooks

5 Folders

Colored Pencils

Hand Held Pencil Sharpener

Markers

Highlighters

Scissors

Gluesticks

Items to Donate to Homeroom Classroom

Facial Tissues

Hand Sanitizer

Sanitizing Wipes

Expo Markers

Wooden Pencils

Colored Pencils

Markers

Glue Sticks

Park Rapids Area High School

General Supplies for students

All 9-12 Classes:

Pencils
Folders
3-ring binder
Loose leaf paper
Notebooks
Head phones

**IF YOU WISH TO DONATE ANY
ITEM TO YOUR CHILD'S CLASS,
PLEASE REFER TO THIS LIST:**

- Low-odor Expo dry erase markers
- Kleenex
- Pencils

Physical Education:

Gym clothes/shoes

ART:

Photography I & II-SD Card

Drawing, Painting, Fund/ Art-Pencil, Eraser

Graphic Design, Calligraphy-Pencil, Eraser

MATH: In addition to the above we also highly recommend a calculator. A TI-30x IIs is what our department uses. For students in Adv. Algebra 2, Algebra 2, Trig/Statistics, College Algebra and Calculus a TI-84 plus would be very useful. If you have any questions, please contact your math teacher.



PARK RAPIDS AREA SCHOOLS

2025-2026 CALENDAR



Aug 25th – 28thStaff Development
 August 27thOpen House
 August 29thFloating Staff Development day
 September 1stNo School K-12, Labor Day
 September 2ndSchool Begins
 September 22nd No School, Staff Development Day
 October 16th & 17thNo School
 October 20th & 22nd K - 6th Grade P/T Conferences
 October 22nd 7th – 12th Grade P/T Conference
 November 25thEnd of the Trimester
 November 26thNo School, Staff Development Day
 November 27th & 28thNo School, Thanksgiving Break
 Dec. 24th – Jan. 1stNo School, Winter Break
 January 2nd..... No School, Staff Development day
 January 14th 7th – 12th Grade P/T Conference
 January 19th..... No School, Staff Development Day
 February 16thNo School
 February 26thEnd of the Trimester
 February 27thNo School, Staff Development day
 March 2nd & 4th.... K - 6th Grade P/T Conferences
 March 16th No School, Staff Development Day
 April 1st 7th – 12th Grade P/T Conference
 April 3rdNo School, Easter Break
 April 6th No School, Easter Break
 April 20th No School, Staff Development Day
 May 22ndLast day of school/Early Out
 May 24thGraduation
 May 25thNo School, Memorial Day

E-Learning Days will be held in the event of unplanned school closures due to emergency situations

1st Trimester = 58 Days
 2nd Trimester = 54 Days
 3rd Trimester = 56 Days

Total - 168 student contact days
 Total – 183 Teacher Contract days

**2 Principal Discretionary Days (½ Open House, ½ Online Trainings, 1 day designated on August 29 to be used at some time in the month of August)

**2 Parent Teacher Conference Days

KEY	
	No School Day – Students & Staff
	End of Trimester
	No School for Students – Staff Development
	Parent Teacher Conference
	Last day of school/Early Out

AUGUST 2025							FEBRUARY 2026						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
					1	2	1	2	3	4	5	6	7
3	4	5	6	7	8	9	8	9	10	11	12	13	14
10	11	12	13	14	15	16	15	16	17	18	19	20	21
17	18	19	20	21	22	23	22	23	24	25	26	27	28
24	25	26	27	28	29	30							
31													

SEPTEMBER 2025							MARCH 2026						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
	1	2	3	4	5	6	1	2	3	4	5	6	7
7	8	9	10	11	12	13	8	9	10	11	12	13	14
14	15	16	17	18	19	20	15	16	17	18	19	20	21
21	22	23	24	25	26	27	22	23	24	25	26	27	28
28	29	30					29	30	31				

OCTOBER 2025							APRIL 2026						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
			1	2	3	4	5	6	7	8	9	10	11
5	6	7	8	9	10	11	12	13	14	15	16	17	18
12	13	14	15	16	17	18	19	20	21	22	23	24	25
19	20	21	22	23	24	25	26	27	28	29	30		
26	27	28	29	30	31								

NOVEMBER 2025							MAY 2026						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
						1						1	2
2	3	4	5	6	7	8	3	4	5	6	7	8	9
9	10	11	12	13	14	15	10	11	12	13	14	15	16
16	17	18	19	20	21	22	17	18	19	20	21	22	23
23	24	25	26	27	28	29	24	25	26	27	28	29	30
30							31						

DECEMBER 2025							JUNE 2026						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
	1	2	3	4	5	6		1	2	3	4	5	6
7	8	9	10	11	12	13	7	8	9	10	11	12	13
14	15	16	17	18	19	20	14	15	16	17	18	19	20
21	22	23	24	25	26	27	21	22	23	24	25	26	27
28	29	30	31				28	29	30				

JANUARY 2026							JULY 2026						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
				1	2	3				1	2	3	4
4	5	6	7	8	9	10	5	6	7	8	9	10	11
11	12	13	14	15	16	17	12	13	14	15	16	17	18
18	19	20	21	22	23	24	19	20	21	22	23	24	25
25	26	27	28	29	30	31	26	27	28	29	30	31	