**CENTRAL REGISTRATION OFFICE**
**44 Westfall Drive, Tonawanda, NY 14150**
**phone: (716) 871-2090 / fax: (716) 871-2092**
**email: central_registration@ktufsd.org**

# Welcome to the Ken-Ton School District!

We are looking forward to working with you as new members of the Ken-Ton school community! The Board of Education, administration, teachers, and support staff are all committed to providing your student(s) with a high quality educational program in safe and secure schools. We encourage you to join us in fulfilling the District's purpose which is to provide our students with the supports, tools, and diverse opportunities needed to meet the challenges of an ever-changing world.

## PUBLIC SCHOOL - NEW STUDENT REGISTRATION PACKET

Please complete the attached forms and also provide the required documentation as listed in the grid below. After you have completed all forms and collected the required documentation, schedule an appointment at our website www.ktufsd.org/appointment. **All registrations are done BY APPOINTMENT ONLY at our Central Registration Office.** Our address is 44 Westfall Drive, Tonawanda, NY 14150. Our FAX number is (716) 871-2092. At the time of your appointment, our staff will review and verify all information and complete the registration process if everything is in order. If you are unable to complete the forms, supply all the required documentation, or have any questions, please contact our Central Registration Office to discuss your circumstances prior to making an appointment.

## REQUIRED DOCUMENTATION

| | |
|---|---|
| | Two proofs of residency as listed below:<br>• Lease/Rental Agreement, Mortgage Statement, Deed, or Closing Statement for home purchase<br>• Utility Bills dated within the past 30 days (National Fuel, National Grid, Cable, or Water Bill)<br>• Renter's or Homeowner's Insurance<br>• Property Tax Bills |
| | (1) If available, a certified transcript of a birth certificate or record of baptism; or<br>(2) If documentation in Category (1) is not available, a passport; or<br>(3) If documentation in Categories (1) and (2) are not available, other documentary or recorded evidence in existence two years or more, such as: a. Official driver's license; b. State or other government issued identification; c. School photo identification with date of birth; d. Consulate identification card; e. Hospital or health records; f. Military dependent identification card; g. Documents issued by federal, state or local agencies; h. Court orders or other court-issued documents; i. Native American tribal document; or j. Records from non-profit international aid agencies and voluntary agencies. |
| | DSS-2999 Form if living in foster care;<br>Guardianship papers/custody papers if applicable |
| | Photo ID of Parent/Guardian |
| | Student's immunization records & most recent physical *documented on the NYS SCHOOL HEALTH EXAMINATION FORM* |
| | Last report card/transcripts/academic records |
| | For students with special needs - provide a copy of current IEP & psychological report or<br>504 Accommodation Plan |

Kenmore-Town of Tonawanda Union Free School District

# NEW STUDENT REGISTRATION

(To be completed by parent or guardian. Please provide all information requested.)

## STUDENT INFORMATION:

❑ Male
❑ Female
❑ Non-Binary

Name: _____
(last) (first) (middle)

Address: _____ Telephone # _____
(street) (town) (zip code)

Apt. # _____

Birthdate: _____ Country of birth: _____ Age: _____
(month/day/year)

By what name does this student wish to be called: _____

## STUDENT RACIAL and ETHNIC IDENTIFICATION

Please review the Racial/Ethnic definitions which follow. Put a check in the box for the category or categories which best describe your child. The Ken-Ton UFSD understands the sensitive nature of this information and wishes to assure you that it will be kept secure and confidential in accordance with all State and Federal student privacy laws and regulations. If the information requested is not provided on this form on behalf of your child, a district registrar will be required to identify the group to which the student appears to belong, identifies with, or is regarded in the community as belonging.

**Please answer Questions 1 and 2** *(required)*:

**1. Ethnicity:** Is the student Hispanic, Latino, or of Spanish origin? Hispanic, Latino, or of Spanish origin means a person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.

❑ **Yes – Hispanic/Latino**
❑ **No – not Hispanic/Latino**

**2. Race:** Check all racial groups that apply to your child – you must check at least one box.

❑ **AMERICAN INDIAN or ALASKAN NATIVE:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

❑ **ASIAN:** A person 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.

❑ **BLACK or AFRICAN AMERICAN:** A person having origins in any of the black racial groups of Africa.

❑ **NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

❑ **WHITE:** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

| **FOR OFFICE USE ONLY** | | |
|---|---|---|
| Home School: | Student ID #: | ❑ IC Entry ❑ Enrolled |
| Today's Date: | Ktt | ❑ CEIS Flags ❑ Title Flags |
| Start Date: | UPK # _____ ❑ Full ❑ AM ❑ PM ❑ UPK Flags<br>❑ Schedule ❑ Location Code ❑ Location _____ | Records Request:<br>❑ Fax ❑ Email |
| Entering Grade Level: | ❑ IEP *(cover sheet & consent)* ❑ CPSE *(evaluation forms)* | ❑ Conditional Letter |
| | ❑ ENL - possible ❑ Immunizations & Physical | ❑ Scanned to CR Files |
| *Verification of Birth Date:*<br>❑ Birth Certificate ❑ Baptism Certificate<br>❑ Passport ❑ Other<br>❑ DSS-2999 (Foster Care) | *Proofs of Residency (need two):*<br>❑ *Lease Agreement* ❑ *Mortgage Statement* ❑ *Closing Statement*<br>❑ *Deed* ❑ *Property Tax Bill* ❑ *Homeowner's or Renter's Insurance*<br>❑ *National Fuel* ❑ *National Grid* ❑ *Water* ❑ *Cable/Internet*<br>❑ *OTHER:* _____ | *CR Staff taking Registration:*<br>_____<br>*CR Staff processing Registration:* |
| ❑ ID of Parent/Guardian | Conditional Letter Needed: ❑ Yes ❑ No for: _____ | _____ |

## PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name: _____ Date of Birth: _____

Relationship: ❑ Mother ❑ Father ❑ Guardian ❑ Foster Parent ❑ Other _____

Marital Status: ❑ Single ❑ Married ❑ Divorced

Address: _____ Email Address: _____

(street) (town) (zip code)

Home Phone # _____ Cell Phone # _____ Work Phone # _____

Education Level:

❑ High School Diploma or Equivalent ❑ Associate's Degree

❑ Baccalaureate Degree ❑ Master's Degree ❑ Doctoral/Professional Degree

❑ Certificate, less than Associate's Degree ❑ Foreign Higher Education Degree

❑ Less than High School ❑ Some college but no formal award ❑ Unknown

Employer: _____

Occupation: _____

Notifications: ❑ Voice ❑ Text ❑ Email

Parent/Guardian Name: _____ Date of Birth: _____

Relationship: ❑ Mother ❑ Father ❑ Guardian ❑ Foster Parent ❑ Other _____

Marital Status: ❑ Single ❑ Married ❑ Divorced

Address: _____ Email Address: _____

(street) (town) (zip code)

Home Phone # _____ Cell Phone # _____ Work Phone # _____

Education Level:

❑ High School Diploma or Equivalent ❑ Associate's Degree

❑ Baccalaureate Degree ❑ Master's Degree ❑ Doctoral/Professional Degree

❑ Certificate, less than Associate's Degree ❑ Foreign Higher Education Degree

❑ Less than High School ❑ Some college but no formal award ❑ Unknown

Employer: _____

Occupation: _____

Notifications: ❑ Voice ❑ Text ❑ Email

**Student resides with (check one):** ❑ Both Parents ❑ Mother ❑ Father ❑ Guardian(s) ❑ Foster Parent(s) ❑ Other _____

- **If there is a custodial parent/guardian who does not reside with the student:**
  May the student be released to the non-custodial parent/guardian? ❑ Yes ❑ No
  May the student's educational records be released to the non-custodial parent/guardian? ❑ Yes ❑ No

**Note:** If the student or educational records relating to the student may not be released to the non-custodial parent/guardian, legal documents establishing such a prohibition must be provided to the main office by the first day of school, or any time there is a legal change in custody.

- Custodial Documentation provided at time of registration? ❑ Yes ❑ No
- Describe any other custodial arrangements of which the District should be aware –

_____

_____

Please list below the full names of the student's <u>brothers and sisters living in this household</u>, if any:

| First and Last Name | Date of Birth | | School Attending (if any) |
|---|---|---|---|
| _____ | _____ | ❑ M ❑ F ❑ X | _____ |
| _____ | _____ | ❑ M ❑ F ❑ X | _____ |
| _____ | _____ | ❑ M ❑ F ❑ X | _____ |
| _____ | _____ | ❑ M ❑ F ❑ X | _____ |
| _____ | _____ | ❑ M ❑ F ❑ X | _____ |

## EMERGENCY CONTACT INFORMATION:

1. Name: _____ Relationship to Student: _____

   Address: _____ Home Phone #: _____

   _____ Cell Phone #: _____

2. Name: _____ Relationship to Student: _____

   Address: _____ Home Phone #: _____

   _____ Cell Phone #: _____

3. Name: _____ Relationship to Student: _____

   Address: _____ Home Phone #: _____

   _____ Cell Phone #: _____

- What was the last school attended by this student? _____

  Address of school: _____ Grade Enrolling In Now: _____

  Phone #: _____ Last Grade Completed: _____ Grades repeated, if any: _____

- List all other schools your child has attended:

  School: _____ City & State: _____

  _____ _____

  _____ _____

  _____ _____

- Has this student previously attended a school in the Ken-Ton School District? ❑ Yes ❑ No

  If yes, name of school: _____

- List below all addresses at which you and/or the student have resided at any time during the past five years and the dates of residence:

  | Address | Date of Residence |
  |---|---|
  | _____ | _____ |
  | _____ | _____ |
  | _____ | _____ |
  | _____ | _____ |

- Specify the length of time that you and/or the student intend to reside at your current address. If you are renting or leasing at your current address, specify the length of the current rental agreement of lease.

  _____

- Indicate below any locations, other than the residence specified on page 1 of this form, at which the student resides or spends a substantial amount of time during any day(s) or nights(s) of the week, and also indicate the date, times, and reasons for such arrangements:

  _____

  _____

  _____

**Is this student a child of a migrant worker?** ❑ Yes ❑ No **Is this student a child of a parent currently in the Armed Forces?** ❑ Yes ❑ No

## SPECIAL SERVICES:

- Describe any special services that the student is receiving and also indicate if the student has an IEP (Individualized Educational Program) or a Section 504 Accommodation Plan. If none, please write N/A.

_____

_____

## DISMISSAL:

- Describe any issues/activities which may affect the student's dismissal at the end of the school day. (ie: day care, athletics, clubs, etc.)

_____

_____

## OTHER:

- Describe any conditions or requirements of which the District should be aware (food allergies, asthma, medications, etc.). List any additional information you would like known about this student.

_____

_____

### NOTICE

Please be advised that the provision of false information on this registration form could constitute a crime. In addition, the District reserves its right to recover from parents, legal guardians, or other responsible parties the entire actual cost of educating a student, plus related costs, for the entire period that any non-resident student is enrolled in the District's schools without authorization and/or under false pretenses. The cost of educating a student in the District ranges from approximately $8,000 to $30,000 per school year.

### CERTIFICATION

I hereby certify that the student listed on this registration form actually resides at the address specified on Page 1, within the Kenmore-Town of Tonawanda Union Free School District boundaries. I further certify that all the information I provided on this registration form is true and correct. I understand that I must immediately notify the District if the residency of the student changes from the address listed on this registration form.

Signature of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

## COMPLETE THIS SECTION FOR UNIVERSAL PRE-KINDERGARTEN STUDENTS ONLY:

Please indicate if you prefer the morning or afternoon session and state your reason for your choice.

❑ Full Day ❑ Morning ❑ Afternoon Reason: _____

Before and/or After School Care ❑ Yes ❑ No

I have read and understand the criteria for participation in the Kenmore-Town of Tonawanda Universal Pre-Kindergarten Program. If my child is accepted, I agree to follow the established criteria and participate as required. I understand that requests for Full Day, Morning, or Afternoon UPK class and Before and/or After School Care Program are subject to space availability.

_____

Parent/Guardian Signature

# New York State Housing Questionnaire

Identifying and serving students in temporary housing under the McKinney-Vento Act and NYS Ed Law §3209

*This form is to be completed when a student first enrolls, and any time a change in housing status occurs. There are no wrong answers. This form may be filled out independently, or the McKinney-Vento Liaison can assist. To access a list of McKinney-Vento Liaisons, please visit https://www.nysteachs.org/liaisons*

| **District or LEA** | **School Name** |
|---|---|
| | |

## About this form and your rights

Schools are required by federal and state law to identify students living in temporary housing and ensure they can enroll, attend, and succeed in school. The **McKinney-Vento Homeless Assistance Act**, together with **New York State Education Law Section §3209**, protects students and families who no longer have a permanent, stable place to live; families who have lost housing; are staying with others temporarily; or are living somewhere that was never meant to be a home.

**Eligible students have the right to:**

- ✓ Stay in the school they attended when last permanently housed (called the school of origin), for as long as they are in temporary housing.
- ✓ Immediately enroll in the local school where they are temporarily staying (the school of current location).
- ✓ Enroll and start school right away, even without a birth certificate, proof of residency, immunization records, or school records.
- ✓ Receive free transportation to and from the school of attendance, as well as after-school activities (If within 50 miles).
- ✓ Receive free school meals without income paperwork as well as access to other school services including McKinney-Vento Grant resources, if available.

This information is confidential and will be shared only with school staff who have a legitimate educational need to support student access to McKinney-Vento rights and services. Providing this information is voluntary and will be used only to determine eligibility for services under the McKinney-Vento Act and NYS Education Law §3209. Providing it will not affect your immigration status or your eligibility for enrollment or other services.

## STUDENT INFORMATION:

| Student Name (Last, First) | Student Grade Level (Preschool-12) |
|---|---|
| Student Gender<br>☐ M ☐ F ☐ X = Nonbinary | Student Date of Birth (Month/Day/Year) |
| Parent/Legal Guardian Name | |
| Phone Number | E-Mail Address |
| Address where the student is currently living | |

## Where is the student residing right now?

Under the McKinney-Vento Act, students are protected when their nighttime residence is not **fixed, regular, and adequate.** Check every box that describes where **the student** is residing right now.

☐ Permanent housing: you own or rent a fixed, regular, and adequate home

☐ Doubled up: staying with another family or person due to a loss of housing, economic hardship, eviction, or other similar reason

☐ In an emergency, transitional, or domestic violence shelter. Shelter or program name: _____

☐ In a hotel or motel because there is no other alternative, adequate place to stay

☐ In a car, park, campsite, bus or train station, abandoned building, or another place not meant for stable habitation or established dwelling.

☐ In a place with no heat, running water, or electricity, or that is otherwise structurally unsafe or inadequate to reside in

☐ Displaced by a fire, flood, natural disaster, or other emergency

☐ Another temporary situation not listed here: _____

Is there anything else you would like us to know about your situation? (optional)

_____

## Is the student an Unaccompanied Homeless Youth (UHY)?

The McKinney-Vento Act identifies students who are not living with a parent or legal guardian, and are not residing in permanent housing, as **Unaccompanied Homeless Youth (UHY)**. UHYs have the right to enroll in school and to complete and sign this form independently, without a parent or adult present. The McKinney-Vento Liaison can assist UHYs with this process.

☐ **Please check the box if you believe the student identified above may meet the McKinney-Vento eligibility criteria described above.**

## Additional Children within the Household?

To help us identify and support all eligible children and youth, please list every child who is currently living with you, regardless of age or school enrollment status. This includes infants, preschool-aged children, and school-aged children.

| Student Name (Last, First) | Date of Birth | Grade | Current or Recent School | Last School Attended Before Current or Recent |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

| Student Name (Last, First) | Date of Birth | Grade | Current or Recent School | Last School Attended Before Current or Recent |
|---|---|---|---|---|
| | | | | |
| | | | | |

## Accuracy of Information and Signature

The person completing this form certifies that the information provided above is correct and accurate to the best of their ability.

**Name (print):** _____

**Signature:** _____ **Date:** _____

*An unaccompanied homeless youth may sign on their own behalf.*

**Need help?** Contact the McKinney-Vento Liaison listed at the top of this form or call the NYS-TEACHS Helpline at 800-388-2014. Visit nysteachs.org for more information.

### OFFICIAL USE ONLY (School Staff)

**Date received:** _____ **Received by:** Eligibility: Eligible Not Eligible Pending

**Homeless Primary Nighttime Residence Code (SIRS):**

☐ D = Doubled up ☐ S = Shelter ☐ H = Hotel/Motel ☐ U = Unsheltered ☐ T = Transitional Housing

Unaccompanied Homeless Youth (UHY): ☐ Yes ☐ No

Designation Form: ☐ Yes ☐ N/A ☐ Coded in Student Information System (SIS)

Liaison notified (initials): _____ Date: _____ ☐ Family declined to provide information

**Notes:**

_____

_____

_____

_____

# Kenmore Town of Tonawanda UFSD

## Student Health History

***To be completed & signed by parent/guardian with copy of current immunizations and physical exam.***

Student's name: _____ Date of Birth: _____ ❑ Male ❑ Female ❑ Non-Binary
Address: _____ Phone: _____
School: _____ Grade: _____
Has this child ever attended Ken-Ton schools before? _____ If yes, when? _____
Has this child attended a New York State school before? _____ If yes, where? _____

Healthcare provider's name: _____ Address: _____
Provider's Phone: _____ Date of last physical exam: _____

Has your child ever been diagnosed with or treated for any of the following:

| | NO | YES | DATE |
|---|---|---|---|
| Asthma | | | |
| Allergy | | | |
| Accident/serious injury | | | |
| Birth defect | | | |
| Broken bone(s)/fractures | | | |
| Chicken pox | | | |
| Concussion | | | |
| Diabetes | | | |
| Measles, Mumps or Rubella | | | |
| Mononucleosis | | | |
| Scarlet fever | | | |
| Seizures | | | |
| Strep Throat | | | |
| Tuberculosis (TB) | | | |
| OTHER | | | |

Has your child ever had surgery? _____ If yes, give date and description: _____
_____
Does your child wear eyeglasses? _____ If yes, indicate if they are for reading, distance or both _____
Does your child have a hearing problem? ____ Did your child have frequent ear infections?_____ Ear tubes? ____
Is your child currently on any medication? _____ Name of medication: _____
Reason for medication: _____
Does your child have any mental, emotional or physical conditions that the school should know about?
_____
_____
Does your child attend a clinic for any health reason? _____ If yes, name of clinic: _____

Signature of parent/guardian: _____ Date: _____

Submit with current immunizations and a physical documented on the Required NYS School Health Examination Form

**STATE EDUCATION DEPARTMENT** / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234
Office of P-12

Lissette Colon-Collins, Assistant Commissioner
Office of Bilingual Education and World Languages

55 Hanson Place, Room 594
Brooklyn, New York 11217
Tel: (718) 722-2445 / Fax: (718) 722-2459

89 Washington Avenue, Room 528EB
Albany, New York 12234
(518) 474-8775 / Fax: (518) 474-7948

# Home Language Questionnaire (HLQ)

*Dear Parent or Guardian:*
*In order to provide your child with the best possible education, we need to determine how well he or she understands, speaks, reads and writes in English, as well as prior school and personal history. Please complete the sections below entitled Language Background and Educational History. Your assistance in answering these questions is greatly appreciated. Thank you.*

**Please write clearly when completing this section.**

**STUDENT NAME:**

*First* *Middle* *Last*

**DATE OF BIRTH:** *Month* *Day* *Year*

**GENDER:** ❑ Male ❑ Non-Binary ❑ Female

**PARENT/PERSON IN PARENTAL RELATION INFO:**

*Last Name* *First Name* *Relation to Student*

**HOME LANGUAGE CODE**

## *Language Background*
*(Please check all that apply.)*

| | | | |
|---|---|---|---|
| **1. What language(s) is(are) spoken in the student's home or residence?** | ❑ English | ❑ Other _____ *specify* | |
| **2. What was the first language your child learned?** | ❑ English | ❑ Other _____ *specify* | |
| **3. What is the Home Language of each parent/guardian?** | ❑ Mother _____ *specify* | ❑ Father _____ *specify* | ❑ Guardian(s) _____ *specify* |
| **4. What language(s) does your child understand?** | ❑ English | ❑ Other _____ *specify* | |
| **5. What language(s) does your child speak?** | ❑ English | ❑ Other _____ *specify* | ❑ Does not speak |
| **6. What language(s) does your child read?** | ❑ English | ❑ Other _____ *specify* | ❑ Does not read |
| **7. What language(s) does your child write?** | ❑ English | ❑ Other _____ *specify* | ❑ Does not write |

**THIS SECTION TO BE COMPLETED BY DISTRICT IN WHICH STUDENT IS REGISTERED:**

| SCHOOL DISTRICT INFORMATION: | STUDENT ID NUMBER IN NYS STUDENT INFORMATION SYSTEM: |
|---|---|
| *District Name (Number) & School* *Address* | |

# Home Language Questionnaire (HLQ)—Page Two

## Educational History

8. Indicate the total number of years that your child has been enrolled in school _____

9. Do you think your child may have any difficulties or conditions that affect his or her ability to understand, speak, read or write in English or any other language? If yes, please describe them.

*Yes** *No* *Not sure*
❑ ❑ ❑ *If yes, please explain: _____

How severe do you think these difficulties are? ❑ Minor ❑ Somewhat severe ❑ Very severe

10a. Has your child ever been ***referred*** for a special education evaluation in the past? ❑ No ❑ Yes* **Please complete 10b below*

10b. **If referred for an evaluation,* has your child ever ***received*** any special education services in the past?
❑ No ❑ Yes – Type of services received: _____

Age at which services received *(Please check all that apply):*
❑ Birth to 3 years (Early Intervention) ❑ 3 to 5 years (Special Education) ❑ 6 years or older (Special Education)

10c. Does your child have an Individualized Education Program (IEP)? ❑ No ❑ Yes

11. Is there anything else you think is important for the school to know about your child? *(e.g., special talents, health concerns, etc.)*

12. In what language(s) would you like to receive information from the school? _____

_____ Month: Day: Year: _____
*Signature of Parent or of Person in Parental Relation* *Date*

Relationship to student: ❑ Mother ❑ Father ❑ Other: _____

## OFFICIAL ENTRY ONLY - NAME/POSITION OF PERSONNEL ADMINISTERING HLQ

NAME: _____ POSITION: _____

IF AN INTERPRETER IS PROVIDED, LIST NAME, POSITION AND CREDENTIALS:

## NAME/POSITION OF QUALIFIED PERSONNEL REVIEWING HLQ AND CONDUCTING INDIVIDUAL INTERVIEW

NAME: _____ POSITION: _____

ORAL INTERVIEW NECESSARY: ❑ NO ❑ YES

**DATE OF INDIVIDUAL INTERVIEW: _____
MO DAY YR.

OUTCOME OF INDIVIDUAL INTERVIEW:
❑ ADMINISTER NYSITELL
❑ ENGLISH PROFICIENT
❑ REFER TO LANGUAGE PROFICIENCY TEAM

## NAME/POSITION OF QUALIFIED PERSONNEL ADMINISTERING NYSITELL

NAME: _____ POSITION: _____

DATE OF NYSITELL ADMINISTRATION: _____
MO. DAY YR.

PROFICIENCY LEVEL ACHIEVED ON NYSITELL: ❑ ENTERING ❑ EMERGING ❑ TRANSITIONING ❑ EXPANDING ❑ COMMANDING

FOR STUDENTS WITH DISABILITIES, LIST ACCOMODATIONS, IF ANY, ADMINISTERED IN ACCORDANCE WITH IEP PURSUANT TO CSE RECOMMENDATION:

# Immigrant Student Data & Crisis or Disaster Indicator Form

*COMPLETE THIS SECTION FOR **ALL** STUDENTS*:

Student's Name: _____

Country of Birth: _____

Please indicate if your family has been displaced due to a natural disaster (flood, earthquake, etc.), civil conflict (war), health disaster (pandemic, epidemic, etc.), or another crisis/disaster: ❑ YES ❑ NO
If YES, please complete the crisis/disaster section.

If born in one of the United States, the Commonwealth of Puerto Rico, the District of Columbia, Guam, American Samoa, the U.S. Virgin Islands, or the Trust Territory of the Pacific Islands, **do not complete this section of the form. The student is NOT an Immigrant.** Leave the rest of this section blank.

**If not born in one of the United States or its territories as listed above, please COMPLETE the rest of this form**.

- Date of entry into the United States: _____
- Date first enrolled in a U.S. School: _____
- Name, City, and State of first U.S. School: _____
- Other previous public or private school enrollments in one of the United States, the Commonwealth of Puerto Rico, the District of Columbia, Guam, American Samoa, the U.S. Virgin Islands, or the Trust Territory of the Pacific Islands.

| _____ | _____ | _____ |
|---|---|---|
| State/Territory | Date From | Date To |
| _____ | _____ | _____ |
| State/Territory | Date From | Date To |

❑ None - this is the first time the student has enrolled in a U.S. school.

***School staff, please note:*** *If the student has been enrolled in schools in one of the United States or its territories for MORE THAN three (3) years, they are NOT an Immigrant. Place this form in the student's file, and DO NOT send a copy to the ENL Director.*

## Crisis / Disaster Information:

If your family has been displaced due to a crisis or disaster, please choose one of the following:

- ❑ Natural Disaster: A natural disaster includes but is not limited to hurricanes, tropical storms, landslides, tornadoes, tsunamis, wildfire, sinkholes.
- ❑ Civil Conflict: A civil disaster includes but is not limited to manmade intentional, accidental disasters such as war, fire accidents, and industrial accidents.
- ❑ Health Disaster: A health disaster includes but is not limited to pandemics and epidemics.
- ❑ Other Crisis: The crisis or disaster leading to the student being displaced is unclear.

Crisis/Disaster Name: _____ Date of Crisis/Disaster: _____

# Agreement for Student Use of Kenmore-Town of Tonawanda Union Free School District's Computer System

## Important Information

Before you sign: both the student and the parent/guardian should read this entire agreement and the handout entitled "Policy Regarding Student Use of Computerized Information Resources". This signed agreement will be retained by the school.

NOTE: The District reserves the right to pursue legal action against a student and/or the student's parent(s) or legal guardian(s), as appropriate, if there is any damage to or destruction of District property resulting from the student's use of the Kenmore-Town of Tonawanda Union Free School District's Computer System.

## Agreement for Student

In consideration of the privilege of using the Kenmore-Town of Tonawanda Union Free School District's Computer System, I agree that I have been provided with a copy of the District's policy on the student use of computerized information resources. I agree to adhere to the policy, other regulations that may be developed, and to any changes or additions adopted by the District. I also agree to adhere to related policies published in the Student handbook.

I understand that failure to comply with these policies may result in the modifications or loss of my access to the District's computer system, and may in addition result in the imposition of discipline under the District's school conduct and discipline policy.

## Student User Terms and Conditions

1. It is my responsibility to avoid abusive conduct which would include, but is not limited to, the altering of system software, placing of unlawful information, knowingly enacting computer viruses or harmful programs on or through the system, in either public or private files or messages.

2. I am accountable for the use of my password. My password must not be revealed to anyone nor will I use others' passwords.

3. I understand any email or digital materials can be scanned for content and be reviewed by school administration for violations and to protect student safety.

4. I will not use the school's computer system to obtain, view, download, send, print, display, or otherwise gain access to or transit materials that are unlawful, obscene, pornographic, or abusive.

5. I will not use the District's computer system to harass, insult, or attack others, or to otherwise engage in cyber-bullying or any other conduct prohibited by the Student Code of Conduct.

6. I will use only authorized software on the District's computers and network systems.

7. I will use all computer equipment and software within the coursework for which it is intended. I will not abuse equipment, destroy data of any other user, or attempt to disable systems.

8. I will not violate copyright laws or use the District's computer system for commercial purposes.

9. If I identify a security violation or abuse of the District's computer system or with other users, I will immediately notify an instructor.

# Network Etiquette

You are expected to abide by the generally accepted rules of network etiquette. These include, but are not limited to, the following:

a. Be polite. Do not get abusive in your messages to others.
b. Use appropriate language. Do not swear, use vulgarities, or any other inappropriate language. Illegal activities are strictly forbidden.
c. Do not reveal your personal address or phone number or those of others.
d. Network accounts are to be used only by the authorized user for the designated purpose. No "chain mail" materials may be transmitted.
e. Do not use the network in such a way that you would disrupt the use of the network by other users.

**Student's Name (please print): _____**

**User Signature: _____ Date: _____**

# Agreement for Parent or Guardian

I am the parent/guardian of _____, the minor student who has signed the District's agreement for student use of computerized information resources. I have been provided with a copy, and I have read the District's policy and regulations concerning use of the District's computer system.

I also acknowledge receiving notice that, unlike most traditional instructional or library media materials, the District's computer system will potentially allow my son/daughter student access to external networks not controlled by the school district. I understand that some of the materials available through these external computer networks may be inappropriate and objectionable; however, I acknowledge that it is impossible for the District to screen or review all of the available materials. I accept responsibility to set and convey standards for appropriate and acceptable use to my son/daughter when using the District's computer system or any other electronic media or communications.

**I understand that presently student email accounts are active for all students K-10 for internal communication only and not for outside district communication. Email for Juniors and Seniors is allowed for outside district communication. Student email accounts and information are protected under the Google terms of student privacy and COPPA & FERPA compliance. https://edu.google.com/k-12-solutions/privacy-security/?modal_active=none**

I agree to release the Kenmore-Town of Tonawanda Union Free School District, the Board of Education, its agents and employees from any and all claims of any nature arising from my son's/daughter's use of the District's computer system in any matter whatsoever.

I agree that my son/daughter may have access to the District's computer system, and I agree that this may include remote access from our home.

**Parent/Guardian Name (please print): _____**

**Signature: _____ Date: _____**

# Kenmore-Town of Tonawanda UFSD

## Student Expectations for Chromebook Use and Care

### Using My Chromebook

- I will charge my Chromebook's battery to full capacity each night.
- I will bring my Chromebook to school every day. If I forget my Chromebook or forget to charge my Chromebook, I may request a loaner device.
- I will never loan out my Chromebook to other individuals.
- If my Chromebook requires charging during the school day, I can use designated charging stations during my study hall or lunch period.
- I will use my Chromebook in ways that are appropriate for education.
- I will follow the policies outlined in the District Acceptable Use Policy at all times during school as well as outside the school day.
- I understand that this Chromebook/iPad is a district loaned device designated for educational purposes and, therefore, inappropriate actions may result in the suspension or removal of my device privileges.

### Taking Care of My Chromebook

- I will take good care of my Chromebook as I will be issued one in grade 5 and another in grade 9.
- I will never leave my Chromebook unattended in an unsecured or unsupervised location.
- I will know where my Chromebook is at all times.
- I will keep food and beverages away from my Chromebook since they may cause damage to the device.
- I will not disassemble any part of my Chromebook or attempt any repairs (eg. removing keys).
- I will protect my Chromebook by always carrying it in a secure manner to avoid damage. I will be extra careful when putting my Chromebook into my backpack.
- I will not leave my Chromebook in a vehicle as the heat and cold can damage and/or ruin the device.
- I will not place decorations (eg. stickers, markers, writing) on the Chromebook.
- I understand that the Chromebook I am issued is subject to inspection at any time without notice and remains the property of the Kenmore-Town of Tonawanda Union Free School District.
- I will file a police report in case of theft or damage caused by fire.
- I agree to return the Chromebook, power cord/charger in good working condition as directed by the school or upon leaving the district. *Any student device not returned will be disabled within two days and the district may take legal action.*
- I understand that if I lose my charger and/or Chromebook, I will be required to purchase a replacement through *MySchoolBucks*.

**Student**: ❑ By checking this box AND signing below you indicate that you have read, understand and will follow this document. _____

**Parent/Guardian**: ❑ By checking this box AND signing below you indicate that you have read, understand and will follow this document. _____

# Digital Access Survey

Collecting accurate data regarding digital resource access for our students will greatly help educators to better serve their students and families. In order to accomplish this, the New York State Education Department is asking parents or guardians to complete a Digital Equity Survey (for each student in the family) in grades Kindergarten - Grade 12. This survey will provide information on student access to devices and internet access in their places of residence. Please answer each question below and follow any additional instructions provided for submitting or returning the survey. Thank you!

1. **Do you have internet access in your home or the place you are living?**

   ❑ Yes
   ❑ No

2. **What is the primary type of internet service used in your primary place of residence?**

   ❑ **Broadband** - Uses a cable or DSL modem hooked up to an internet service provider
   ❑ **Cellular Data** - Uses your cell phone provider for internet access
   ❑ **Mobile Hot Spot** - A wireless access point created by a dedicated hardware device or a smartphone feature that shares the phone's cellular data
   ❑ **Community Provided Wi-Fi** - Internet connection provided by a community location (library, café, hotel, etc.)
   ❑ **Satellite** - Internet access provided through communications satellites (satellite dish on your property for internet)
   ❑ **Dial-up** - Connecting to the internet by using a modem and telephone line
   ❑ **None**

3. **Can all individuals in the household use their devices at the same time without the internet slowing?** Can your student(s) stream videos and attend their live classes with little to no interruption?

   ❑ Yes
   ❑ No

4. **If you do not have sufficient internet access in your place of residence, what is the main reason?**

   ❑ Availability
   ❑ Cost
   ❑ Other
   ❑ None

# RELEASE OF RECORDS

**Kenmore-Town of Tonawanda Union Free School District**
**Central Registration Office**
**44 Westfall Drive**
**Tonawanda, New York 14150**
**(716) 871-2090 or (716) 871-2091**
**Fax (716) 871-2092**

*The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31): Other schools to which a student is transferring.*

STUDENT'S NAME: ________________________________ DATE OF BIRTH: ______________________

PREVIOUS SCHOOL DISTRICT: ____________________________________________________________

PREVIOUS SCHOOL'S NAME AND ADDRESS: ___________________________________________________

_____________________________________________________________________________________

School Phone Number: _________________________ School Fax Number: ___________________________

Parent / Guardian Signature: Start Date: _____________

## OFFICE USE ONLY BELOW THIS LINE:

**The above-named student has registered in the Kenmore-Town of Tonawanda Union Free School District.**

**RECORDS REQUESTED (as applicable):**

**Academic** **Immunizations & Physical** **CSE/CPSE** **Scripts** **Psychological**
**Standardized Tests** **IEP / 504 Accommodation** **Birth Certificate** **NYSITELL/NYSESLAT Scores**

**PLEASE FORWARD STUDENT RECORDS TO:**

______ **STUDENT SERVICES (Special Education)**
1500 Colvin Boulevard, Buffalo, New York 14223
(716) 874-8400 / Fax (716) 874-8615 / IEP_Direct@ktufsd.org

_______ UPK Program - Hamilton School
44 Westfall Drive
Tonawanda, New York 14150
(716) 874-8419 / Fax (716) 874-7244

************************************************************************************************

**ELEMENTARY SCHOOLS**

_______ Edison Elementary School
236 Grayton Road
Tonawanda, New York 14150
(716) 874-8416
Fax (716) 874-8526

_______ Franklin Elementary School
500 Parkhurst Boulevard
Buffalo, New York 14223
(716) 874-8415
Fax (716) 874-8520

_______ Holmes Elementary School
365 Dupont Avenue
Tonawanda, New York 14150
(716) 874-8423
Fax (716) 874-8560

_______ Hoover Elementary School
199 Thorncliff Road
Buffalo, New York 14223
(716) 874-8414
Fax (716) 874-8460

_______ Lindbergh Elementary School
184 Irving Terrace
Buffalo, New York 14223
(716) 874-8410
Fax (716) 874-8570

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**MIDDLE SCHOOLS (attention: Guidance Office)**

_______ Franklin Middle School
540 Parkhurst Boulevard
Buffalo, New York 14223
(716) 874-8404
Fax (716) 874-8480

_______ Hoover Middle School
249 Thorncliff Road
Buffalo, New York 14223
(716) 874-8405
Fax (716) 874-8470

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**HIGH SCHOOLS (attention: Guidance Office)**

_______ Kenmore East High School
350 Fries Road
Tonawanda, New York 14150
(716) 874-8402
Fax (716) 874-8630

_______ Kenmore West High School
33 Highland Parkway
Buffalo, New York 14223
(716) 874-8401
Fax (716) 874-8407

_______ Kenmore Jr/Sr High School
155 Delaware Road
Kenmore, New York 14217
(716) 874-8403
Fax (716) 874-8650

**Kenmore-Town of Tonawanda Union Free School District**
1500 Colvin Blvd.
Buffalo, NY 14223
(716) 874-8400
www.ktufsd.org

# Excluding Your Child from Photographs, Interviews, and Recordings

At times, children in Kenmore-Town of Tonawanda Schools may be interviewed, photographed, or recorded during the school day in order to recognize their academic, extracurricular, and athletic achievements; to report on the positive work taking place in our schools; to highlight special events, activities, and projects; for educational purposes; and to educate the community about the District and its schools. This includes:

- District e-newsletter ("Ken-Ton Weekly Connection")
- Slideshows at student assemblies and ceremonies
- News releases to local newspapers such as the "Ken-Ton Bee"
- District website and social media pages
- District publications such as the District Calendar & Handbook

Also, representatives from outside media outlets such as newspapers and television stations occasionally desire to visit our schools during the school day to report on educational matters and highlight student accomplishments and distinctions. It is not unusual for students to be interviewed and for photographs or video of students to be featured for print and broadcast purposes.

To best protect our students, you may choose to have your children excluded for any of these communications. *This does not include yearbooks. If you do not wish for your child to be included in yearbooks, please contact your child's school.*

**If you do not wish for photographs/video of your child to be used for any of these purposes for the current school year, please fill out the "Exclusion from Student Photographs, Interviews, and Recordings" form which you can find on the District website at www.ktufsd.org/PhotoForm.**

The "Exclusion from Student Photographs, Interviews, and Recordings" form does not constitute written notification regarding the disclosure of directory information as specified under FERPA, and this form does not include yearbooks. If you do not wish for your child to be included in yearbooks, please contact your child's school. Parents who notify the District regarding the disclosure of directory information as specified under FERPA will automatically be excluded from District communications. At any time, parents who choose to have their children excluded may change their preference either indefinitely or only for a specific purpose by contacting their school.

Find more information about student records and privacy at www.ktufsd.org/privacy.

| | |
|---|---|
| Book | Policy Manual |
| Section | Section 7000: Students |
| Title | Student Use of Computerized Information Resources (Acceptable Use Policy) |
| Code | 7315 |
| Status | Active |
| Adopted | February 9, 2016; Revised November 12, 2019 |

**SUBJECT: STUDENT USE OF COMPUTERIZED INFORMATION RESOURCES (ACCEPTABLE USE POLICY)**

The Board of Education will provide access to various computerized information resources through the District's computer system ("DCS" hereafter) consisting of software, hardware, computer networks and electronic communications systems. This may include access to electronic mail, so-called "on-line services" and the "Internet." It may include the opportunity for some students to have independent access to the DCS from their home or other remote locations. All use of the DCS, including independent use off school premises, shall be subject to this policy and accompanying regulations that may apply.

Use of Kenmore-Town of Tonawanda Union Free School District computer resources is authorized only for purposes that are part of the District's educational mission, including but not limited to instruction, assessment, administration, research, professional development, or other tasks associated with student programs and staff assignments.

**Access to Inappropriate Content/Material and Use of Personal Technology or Electronic Devices**

This policy is intended to establish general guidelines for the acceptable student use of the DCS and also to give students and parents/guardians notice that student use of the DCS will provide student access to external computer networks not controlled by the School District. The District cannot screen or review all of the available content or materials on these external computer networks. Thus some of the available content or materials on these external networks may be deemed unsuitable for student use or access by parents/guardians.

Despite the existence of District policy, regulations and guidelines, it is virtually impossible to completely prevent access to content or material that may be considered inappropriate for students. Students may have the ability to access such content or material from their home, other locations off school premises and/or with a student's own personal technology or electronic device on school grounds or at school events. Parents and guardians are expected to establish boundaries and standards for the appropriate and acceptable use of technology and communicate these boundaries and standards to their children. The appropriate/acceptable use standards outlined in this policy apply to student use of technology via the DCS or any other electronic media or communications, including by means of a student's own personal technology or electronic device on school grounds or at school events.

**Standards of Acceptable Use**

Generally, the same standards of acceptable student conduct which apply to any school activity shall apply to use of the DCS. This policy does not attempt to articulate all required and/or acceptable uses of the DCS; nor is it the intention of this policy to define all inappropriate usage. Administrative regulations will further define general guidelines of appropriate student conduct and use as well as proscribed behavior.

District students shall also adhere to the laws, policies and rules governing computers including, but not limited to, copyright laws, rights of software publishers, license agreements, and student rights of privacy created by federal and state law.

**General Rules and Guidelines**

Obscene materials

The use of District computer resources to view, make, transmit, receive or otherwise engage with obscene materials is strictly prohibited.

Commercial and Political Activities

Users of the District computer resources are prohibited from engaging in the promotion or sale of commercial or non-commercial products, services or advertising. Users are also prohibited from using the resources for political fundraising or lobbying.

Personal and System Security

Users are responsible for maintaining the confidentiality of passwords as well as of their own and others' personally identifying information. No user may knowingly introduce or transmit viruses or other forms of sabotage into the District computer resources. No person may view, alter, or transmit data for which he/she does not have specific authorization.

Unauthorized use of encryption techniques is prohibited.

Users are expected to report any problems (hardware, software, connectivity, etc.) to their teacher or immediate supervisor.

Etiquette

In language and conduct, users are expected to employ the same standard of politeness and respect that is appropriate in other transactions within the school community.

Students who engage in unacceptable use may lose access to the DCS in accordance with applicable due process procedures, and may be subject to further discipline under the District's school conduct and discipline policy and the District *Code of Conduct*. The District reserves the right to pursue legal action against a student who willfully, maliciously or unlawfully damages or destroys property of the District. Further, the District may bring suit in civil court against the parents/guardians of any student who willfully, maliciously or unlawfully damages or destroys District property pursuant to General Obligations Law Section 3-112.

District administrators shall have the authority to determine whether a particular use is appropriate or inappropriate, authorized or prohibited, in their respective domains of supervisory responsibility. For uses that may be illegal, administrators have the authority to consult with law enforcement authorities. Administrators also have the authority to impose disciplinary consequences where warranted.

Student data files and other electronic storage areas will be treated like school lockers. This means that such areas shall be considered to be School District property subject to control and inspection. The Computer Coordinator may access all such files and communications without prior notice to ensure system integrity and that users are complying with the requirements of this policy and accompanying regulations. Students will be informed that information stored on the DCS is accessible by the District and therefore not private.

**Notification**

The District's Acceptable Use Policy and Regulations will be disseminated to parents and students in order to provide notice of the school's requirements, expectations, and students' obligations when accessing the DCS.

Regulations will be established as necessary to implement the terms of this policy.

NOTE: Refer also to Policy #8271 -- Internet Safety/Internet Content Filtering
District *Code of Conduct*

Adopted: 2/9/16, Rev. 11/12/19

# G Suite for Education
# Parent Information

The Kenmore-Tonawanda School District provides students with G Suite for Education accounts. G Suite for Education includes free, web-based programs like email, document creation tools, shared calendars, and collaboration tools as well as the Google Classroom learning system.

G Suite for Education runs on an Internet domain purchased and owned by the school and is intended for educational use. Your student's teachers will be using G Suite for lessons, assignments, and communication.

## G Suite Accounts

All K-12 students will be assigned a @student.ktufsd.org student G Suite account. Students will log in with their computer username plus @student.ktufsd.org. Example: John Smith graduating in 2035 would be smithjo35@student.ktufsd.org.

G Suite for Education is also available at home, the library, or anywhere with Internet access. School staff will monitor student use of G Suite when students are at school. Parents are responsible for monitoring their child's use of G Suite when accessing programs from home. Students are responsible for their own behavior at all times as part of the technology acceptable use policy.

**Presently student email K-10 is only for internal KTUFSD.org communication and not for outside district communication. Email for juniors and seniors is allowed for outside district communication.**

As always, student safety is our highest priority.

## G Suite Acceptable Use (Privacy and Safety):

G Suite for Education is primarily for educational use. Students may use G Suite for personal use, subject to the restrictions below and additional school rules and policies of the Kenmore-Tonawanda UFSD Acceptable Use Policy.

**Privacy** - School staff, administrators, and parents all have access to student email for monitoring purposes. Students have no expectation of privacy on the G Suite system.

**Limited personal use** - Students may use G Suite tools for personal projects but may not use them for:

- Unlawful activities
- Commercial purposes (running a business or trying to make money)
- Personal financial gain (running a website to sell things)
- Inappropriate sexual or other offensive content
- Threatening another person
- Misrepresentation of New York Public Schools, staff or students.
- G Suite, sites, email, and groups are not public forums. They are extensions of classroom spaces where student free speech rights may be limited.

## Safety

- Students may not post personal contact information about themselves or primarily for educational use.
- Students agree not to meet with someone they have met online without their parent's approval and participation.
- Students will tell their teacher or other school employee about any message they receive that is inappropriate or makes them feel uncomfortable.
- Students are responsible for the use of their individual accounts and should take all reasonable precautions to prevent others from being able to use their account. Under no conditions should a user provide his or her password to another person.

## Access Restriction - Due Process

- Access to G Suite for Education accounts are created at the discretion of the District. The District maintains the right to immediately withdraw the access and use of G Suite when there is reason to believe that violations of law or District policies have occurred. In such cases, the alleged violation will be referred to the Principal for further investigation and account restoration, suspension, or termination. As a party of the Agreement with Google, the State of New York also reserves the right to immediately suspend any user account suspected of inappropriate use. Pending review, a user account may be terminated as part of such action.

## Consumer Safety (Advice for Students and Parents)

- Don't get scammed. Many times entities create fake emails and web pages that look real in a practice called phishing. Don't trust links or web pages sent by email. Instead, open a new browser window and type in the address yourself.
- Don't get spammed. Spam is unwanted advertising sent by email. Never reply to spam and never do business with a company that sends spam. Use the "report spam" button to get rid of spam.
- Protect your private, sensitive information by not saving your financial advice or using incognito mode on browsers.

## Digital Citizenship (Advice for All)

- **Treat others well**. It hurts to get a mean email just like it hurts when someone is mean in the school hallway. When using email or making a post on a forum or web page, be kind. Everyone will see what you write so think before you type.
- **Respect the rights of copyright owners**. Copyright infringement occurs when an individual reproduces a work without permission that is protected by a copyright. If a work contains language that specifies acceptable use of that work, the user should follow the expressed requirements. If the user is unsure whether or not they can use a work, they should request permission from the copyright owner.
- **Students have First Amendment rights to free speech**. Your rights can be limited in school, though. If you post something via email or on a school web page that disturbs the learning environment in your school, your right of speech may be limited. School websites, email, and groups are for educational use and are not considered public forums for debating ideas. This means that a school has the right to limit student speech that disturbs the learning process in these areas.

## These are the laws and policies that help to protect our students online:

### Child Internet Protection Act (CIPA)

The school is required by CIPA to have technology measures and policies in place that protect students from harmful materials including those that are obscene and pornographic. This means that student email is filtered. Mail containing harmful content from inappropriate sites will be blocked.

-- CIPA - http://fcc.gov/cgb/consumerfacts/cipa.html

### Children's Online Privacy Protection Act (COPPA)

COPPA applies to commercial companies and limits their ability to collect personal information from children under 13. By default, Google advertising is turned off for G Suite for Education users. No personal student information is collected for commercial purposes. This permission form allows the school to act as an agent for parents in the collection of information within the school context. The school's use of student information is solely for education purposes.

-- COPPA - http://www.ftc.gov/privacy/coppafaqs.shtm

### Family Educational Rights and Privacy Act (FERPA)

FERPA protects the privacy of student education records and gives parents rights to review student records. Under FERPA, schools may disclose directory information (name, phone, address, grade level, etc...) but parents may request that the school not disclose this information.

- The school will not publish confidential education records (grades, student ID #, etc...) for public viewing on the Internet.
- The school may publish student work and photos for public viewing but will not publish student last names or other personally identifiable information.
- Parents may request that photos, names and general directory information about their children not be published.
- Parents have the right at any time to investigate the contents of their child's email and G Suite for Education files.

-- FERPA - http://www2.ed.gov/policy/gen/guid/fpco/ferpa

## Common Acronyms

| | |
|---|---|
| **ADHD** | Attention Deficit Hyperactivity Disorder |
| **AIS** | Academic Intervention Services |
| **APE** | Adapted Physical Education |
| **BIP** | Behavioral Intervention Plan |
| **BOCES** | Board of Cooperative Educational Services |
| **ESY** | Extended School Year |
| **FAPE** | Free Appropriate Public Education |
| **FBA** | Functional Behavioral Assessment |
| **IDEA** | Individuals with Disabilities Education Act |
| **IEP** | Individualized Education Program |
| **IESP** | Individualized Education Service Plan |
| **LRE** | Least Restrictive Environment |
| **OT** | Occupational Therapy |
| **PLEP** | Present Levels of Educational Performance |
| **PT** | Physical Therapy |
| **RTI** | Response to Intervention |
| **ST** | Speech Therapy |
| **SWD** | Student with a Disability |

## Student Services Team:


**Matt Bystrak**
*Assistant Superintendent of Student Services*
mbystrak@ktufsd.org

**Matt Raines**
*Executive Director of Secondary Special Education*
mraines@ktufsd.org

**Ashley Digati**
*Executive Director of Elementary Special Education*
adigati@ktufsd.org

**Gretchen Sukdolak**
*Interim Director for Special Education/Student Services, Oversight of Out of District Students*
gsukdolak@ktufsd.org

**Donna Ringholz**
*CPSE Chairperson*
dringholz@ktufsd.org


Additional information concerning special education services, procedures and regulations can be found at:

**www.ktufsd.org**
Departments ➡ Special Education

**www.nysed.gov**
Program Offices ➡ P-12 Education ➡ Special Education

KENMORE - TOWN OF TONAWANDA
UNION FREE SCHOOL DISTRICT

# A PARENT'S GUIDE TO SPECIAL EDUCATION


**Special Education Department**

1500 Colvin Blvd.
Buffalo, NY 14223

**Phone:** 716-874-8400
**Fax:** 716-874-8615
**Web:** www.ktufsd.org

# Frequently Asked Questions

## What should you do if you suspect your child has a disability?

If your school-age child is having difficulties in school, first talk to his or her teacher.

Schools offer supports for students within regular education such as psychological services, curriculum and instructional modifications, and Academic Intervention Services. If you, the teacher and principal have not been able to help your child, your child may have a disability which affects his or her learning.

To determine if your child has a disability, you can make a referral to the **Committee on Special Education (CSE)**. Contact the Director of Special Education for guidance on the referral process.

## What is special education?

Special education means specially designed individualized or group instruction or special services or programs to meet the unique needs of students with disabilities. Special education services and programs are provided at no cost to the parent.

In order to be eligible, a child must have a disability that affects his or her ability to learn.

Students, ages 5-21, who are identified as having a disability, may have autism, deafness, deaf-blindness, emotional disturbance, hearing impairment, learning disability, intellectual disability, multiple disabilities, orthopedic impairment, other health impairment, speech or language impairment, traumatic brain injury, or visual impairment (including blindness).

## What are the steps in the Special Education Process?

**1) Initial Referral for Special Education Services:** Students suspected of having a disability are referred to a multidisciplinary team called the Committee on Special Education or the Committee on Preschool Special Education.

**2) Individual Evaluation Process:** The Committee arranges for an evaluation of the student's abilities and needs.

**3) Determining Eligibility for Special Education Services:** Based on evaluation results, the Committee decides if the student is eligible to receive special education services and programs.

**4) Individualized Education Program (IEP):** If the child is eligible to receive special education services, the Committee develops and implements an appropriate IEP, based on evaluation results, to meet the needs of the student. Based on the IEP, the Committee must determine the student's placement, ensuring that services are provided in the least restrictive environment (LRE).

**5) Annual Review/Reevaluation:** The IEP is reviewed and, if needed, modified or revised by the Committee at least once a year (annual review). The student has a reevaluation at least once every three years to review the student's need for special education programs and services and to revise the IEP, as appropriate.

The process occurs sequentially with each step, building on the previous one. In this way, comprehensive information about the student is obtained and considered. Timelines are in place so that delays are avoided. Parents are an integral part of this process, and your involvement is needed.

## What is an Individualized Education Plan?

If your child is eligible for special education services and/or programs, the Committee must meet to develop a plan to meet your child's unique needs. This plan is called an Individualized Education Program (IEP).

The IEP evolves from a discussion that begins with how your child is doing in school (current level of functioning). From that base, the Committee agrees on the goals your child should be working toward. The Committee then discusses the supports, services and modifications that the child needs to reach those goals. Finally, the Committee determines where those special education services will be provided (location and placement). The location where services will be provided and the student's placement must be in the least restrictive environment.

## What resources are available for parents?

**A Parent's Guide to Special Education** provides information for parents, guardians and other family members about laws, regulations and policies affecting special education programs and services and can be found at the following link: www.p12.nysed.gov/specialed/parentpubs.htm

**Parent Network of WNY** is a not-for-profit agency that provides education and resources for families of individuals with special needs (birth through adulthood) and for professionals. The Parent Network of WNY can be reached at (716) 332-4175.

**The Kenmore-Town of Tonawanda UFSD Special Education Office** can be reached at (716) 874-8400