



East Liverpool Christian School

46682 FLORENCE STREET EAST LIVERPOOL, OHIO 43920

PHONE: [330]385.5588 FAX: [330]385.1267

East Liverpool Christian School stands firmly upon the historical truth claims and moral foundations of Christianity. Parents or the legal guardians, who choose to enroll their children at East Liverpool Christian School, are agreeing to support basic Biblical values derived from historical Christianity and the relevant Christian positions embraced by the East Liverpool Christian School Board, under whose authority this school rests. Parents understand and agree that East Liverpool Christian School will teach these principles and Biblical values.

In addition, the East Liverpool Christian School urges parents to recognize their scriptural responsibility (Deuteronomy 6:1-9, Psalm 78:5, 6, Proverbs 22:6) to provide their children with a Christian education and to understand that the primary responsibility for this task rests with the parents (Ephesians 6:4).

East Liverpool Christian School was founded and continues to operate upon Biblical values and the desire and commitment for Bible-believing Christian parents to enroll their children in an intentionally Christian environment. East Liverpool Christian School will consider admission for students from any family who, despite their religious background or beliefs, is willing to support the philosophy of Christian education, student conduct requirements, the school's stated positions and who is willing to allow their children to be educated and influenced in an intentionally Christian environment. Continued enrollment at East Liverpool Christian School is contingent upon this same understanding and support.

All attached paperwork must be filled out completely, signed and returned along with the registration/application fees in order to hold a place for your child. The registration process will be complete following the transfer of your child's school records and placement testing. Please use the checklist to assist you in making sure your registration packet is complete.

1. ___ Parent commitment form
2. ___ New Student Application fee \$75.00(one time only for new students)
3. ___ Yearly Registration Fee (March-April \$75.00)(May-June \$100.00)(July and after \$125.00)
4. ___ Student Application Form (one time only for new students only)
5. ___ Copy of Birth Certificate(one time only for new students)
6. ___ Copy of Social Security Card (one time only for new students)
7. ___ Immunization Record and Physical Form (current, within the 12 months)
8. ___ Custody Papers (if applicable)
9. ___ Emergency Transportation Authorization
10. ___ Mediation/Arbitration Agreement
11. ___ Race/Ethnicity Designation form
12. ___ Pastor Reference Form (one time only for new students)
13. ___ Parental/Guardian Photo Consent Form
14. ___ One call Update
15. ___ Volunteer Driver Form(with copy of driver's license and insurance)
16. ___ Statement of Non-Conviction (required yearly to volunteer for school events involving children)
17. ___ Roster Inclusion and Authorization for Student Pick-Up
18. ___ School Parent Compact (Title I Program)
19. ___ Nuclear Incident-Potassium Iodide Forms

Statement on Respect for Authority

Recognizing that obedience to earthy authorities is obedience to God, students are expected to show the proper respect for and obedience toward all adults in authority positions over them. This includes but is not limited to faculty and staff members, coaches, and parents. (Romans 13:1-5)

Statement on Addressing Grievances and Conflicts

Because of our human nature, we may at times irritate others, resulting in misunderstandings or strong disagreements. In Matthew 18:15-17, Jesus gives His formula for solving person-to-person problems. We call it “the Matthew 18 principle” for solving school problems. In a school setting, the Matthew 18 principle requires that parents talk to the teacher about student problems or classroom issues before they talk to Administration or the School Board. If unresolved at the two-person level, the matter is prayerfully and in an orderly fashion moved upward in the school’s organizational structure always with the goal of seeking a peaceful resolution. This is the Lord’s way of solving people-to-people problems. (Matthew 18:15-20)

Statement on the Sanctity of Human Life

We believe that all human life is sacred and created by God in His image. Human life is of inestimable worth in all its dimensions, including pre-born babies, the aged, the physically or mentally challenged, and every other stage or condition from conception through natural death. We are therefore called to defend, protect, and value all human life. (Psalm 139.)

Statement on Marriage, Gender, and Sexuality

We believe that God wonderfully and immutably creates each person as male or female. These two distinct, complementary genders together reflect the image and nature of God. (Genesis 1:26-27.) Rejection of one’s biological sex is a rejection of the image of God within that person.

We believe that the term “marriage” has only one meaning: the uniting of one man and one woman in a single, exclusive union, as delineated in Scripture. (Genesis 2:18-25.) We believe that God intends sexual intimacy to occur only between a man and a woman who are married to each other. (1 Corinthians 6:18; 7:2-5; Hebrews 13:4.) We believe that God has commanded that no intimate sexual activity be engaged in outside of a marriage between a man and a woman.

We believe that any form of sexual immorality (including adultery, fornication, homosexual behavior, bisexual conduct, bestiality, incest, and use of pornography) is sinful and offensive to God. (Matthew 15:18-20; 1 Corinthians 6:9-10.)

We believe that in order to preserve the function and integrity of East Liverpool Christian School as the local Body of Christ, and to provide a Biblical role model to the community, it is imperative that all members of the East

Liverpool Christian School including school employees, volunteers, students, and parents agree to and abide by this Statement on Marriage, Gender, and Sexuality. (Matthew 5:16; Philippians 2:14-16; 1 Thessalonians 5:22.)

We believe that God offers redemption and restoration to all who confess and forsake their sin, seeking His mercy and forgiveness through Jesus Christ. (Acts 3:19-21; Romans 10:9-10; 1 Corinthians 6:9-11.)

We believe that every person must be afforded compassion, love, kindness, respect, and dignity. (Mark 12:28-31; Luke 6:31.) Hateful and harassing behavior or attitudes directed toward any individual are to be repudiated and are not in accord with Scripture nor the doctrines of East Liverpool Christian School.

Final Authority for Matters of Belief and Conduct

The statements of faith do not exhaust the extent of our beliefs. The Bible itself, as the inspired and infallible Word of God that speaks with final authority concerning truth, morality, and the proper conduct of mankind, is the sole and final source of all that we believe. For purposes of East Liverpool Christian School's faith, doctrine, practice, policy, and discipline, the East Liverpool Christian School Board is the final interpretive authority on the Bible's meaning and application.

Parent-Student Commitment Form

As parents/guardians, we know we have the privilege and responsibility for the education of our children. With God's guidance, we also partner with East Liverpool Christian School to provide for our child(ren)'s education. Together, we believe this is the best plan for our family. We have read and understand the *School and Athletic Handbook*, the *Statement on Respecting Authority*, the *Statement on Addressing Grievances and Conflicts*, the *Statement on the Sanctity of Human Life*, and the *Statement on Marriage, Gender, and Sexuality*. Although every situation cannot be covered by a specific rule, we agree to stand with the decisions made by teachers and administration in the implementation of the principles and policies set forth by East Liverpool Christian School.

A crucial part of East Liverpool Christian School's mission is to promote spiritual development and a Biblical world view in the lives of their students. This includes teaching a Biblical understanding of morality and to pursue a life that is governed by this Biblical code. Both the school and the home come under the authority of God for the benefit of our students. The school board and the employees of the school are in agreement with these policies. Therefore, the school reserves the right, as a faith based institution, to refuse admission of an applicant or discontinue enrollment of a student if the atmosphere or conduct within a particular home or the activities of a student are in opposition to the Biblical lifestyle the school teaches, promotes such practices, or demonstrates an inability to support the moral principles of the school. Your signature below signifies your understanding, acceptance, and compliance with said principles and policies.

We understand that the Handbook does not contractually bind East Liverpool Christian School and is subject to change without notice by decision of East Liverpool Christian School's governing body. We certify that we consent to and will submit to all governing principles and policies of the school outlined in the Handbook and Registration Packet.

We also agree to take an active role in our child(ren)'s education, setting time aside each day for homework or helping them memorize Bible verses, math facts, review for tests, etc. Checking grades regularly and attending parent/teacher conferences will be ways we support our student's efforts to succeed in school. We commit to the Matthew 18 principle if there should be a conflict. We will not malign the school or its employees verbally or through any form of social media so that the name of Jesus does not suffer.

Parent Name Print

Parent Signature

Date

Parent Name Print

Parent Signature

Date

Student Name Print (Grades 7-12)

Student Signature

Date

East Liverpool Christian School
46682 Florence St.
E. Liverpool, Oh 43920
Phone: 1-330-385-5588
Fax: 1-330-385-1267
E-Mail: elcsoffice@elchristian.org
Website: www.elchristian.org App

For School Use Only:

Year _____ Grade _____
Received _____ Ref. Forms P__ F__
Interview _____ Grade Card _____ Imm. _____
B.C. _____ Auth. _____ Custody Papers _____
App. Fee _____ Acc. _____ Rej. _____

Student Application Form

Student's Full Name _____
Last Name First Middle Nickname

Street Address _____

City _____ State _____ Zip Code _____ Phone (____) _____
unlisted yes or no

Birthdate _____ Birthplace _____ Sex _____

E-Mail Address _____

School District in which you live _____ Present Grade _____

Name & Address of last school attended _____

Grade for which admission is being sought _____

Is applicant in good health? _____ Please explain any physical disabilities _____

Has the student repeated any grade? _____ If yes, explain what grade and the reason for retention _____

Was the student ever suspended or dismissed from any school for academic or disciplinary reasons?

Yes ___ No ___ If yes, please explain _____

Explain any scholastic or disciplinary difficulties the student has had in school _____

Does the student have an IEP or receive special services? _____

Father's Name _____ Employment _____

Occupation _____

Mother's Name _____ Employment _____

Occupation _____

Guardian's Name _____ Employment _____

Occupation _____

Church Family Attends _____

Church Address _____

Church Phone (____) _____

Pastor's Name _____

Give names of other children in the family

Name Age Attend ELCS? Why, if not?

How has the student done in school thus far? _____

Tell about your child. _____

Has the student had any difficulties with civil authorities? Yes ___ No ___

If yes, please explain.

State your reason for wanting to change schools _____

Give a concise statement of each parent's personal relationship with Christ.

Father: _____

Mother: _____

Give detailed reasons as to why you are interested in sending your child to ELCS.

Please attach the following: 1) \$75.00 non-refundable application fee 2) social security card 3) birth certificate 4) custody papers, if applicable 5) immunization records. 6) Parental Consent for Record Release form

By signing this application you agree that those in charge of the school shall have full discretion in the grade placement and discipline of your child, and that the school reserves the right to dismiss any child who hinders the educational process of the school. Your signature also verifies that you have read the *Student-Parent Handbook* and agree to partner with us regarding its implementation.

By signing this application you also agree to make prompt financial payments.

Signatures: Father _____

 Mother _____

 Date _____

Statement of Non-Discrimination

East Liverpool Christian School admits the students of all races, color, ethnic or national origins, and gender to all the rights, privileges, programs and activities generally accorded or made available to the students of the school. East Liverpool Christian School does not discriminate on the basis of race, color, gender, or ethnic or national origin in the administration of its educational policies, admission policies, scholarship and loan programs, athletic and other school-administered programs. Romans 2:11- "God does not show favoritism."



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Emergency Transportation Authorization

Name of Child		Grade	Age
Child's Home Address			
Mother's Name	Mother's Home Address		
Mother's Phone	Mother's Email		
Mother's Employer's Name	Mother's Employer's Address	Mother's Employer's Phone	
Father's Name	Father's Home Address		
Father's Phone	Father's Email		
Father's Employer's Name	Father's Employer's Address	Father's Employer's Phone	

People to be contacted in the event of an emergency if the parent cannot be reached:

Name	Name
Address	Address
City, State, Zip	City, State, Zip
Relationship to Child Phone	Relationship to Child Phone

Name of Physician or Clinic	Name of Dentist or Clinic
Address	Address
City, State, Zip Phone	City, State, Zip Phone

Date of last physical exam: _____

Medications (prescriptions or over the counter) child is currently receiving. Please list the dosage, times of day medication is usually given and the reason for the medication.

Any known allergies _____

Special precautions and/or treatments for allergies _____

Chronic physical problems affecting child: _____

Any other information the school should be aware of: _____

This Information was provided by (please print): _____

Signature of parent or guardian: _____ Date: _____

Complete either Part I or Part II below. Do not complete both.

Part I. Permission to transport child

I give ELCS permission to transport my child to _____ (hospital or clinic)
for emergency care or to _____ (dentist) for emergency dental care, or to
the nearest available source of assistance.

Parent's Signature

Date

Part II. Refusal to grant permission

I do not give permission to ELCS to transport my child emergency medical or dental care. In the event of an illness or injury which requires emergency medical or dental treatment, I wish the following action to be taken:

Parent's Signature

Date



Mediation Arbitration Agreement

The parties to this agreement believe that the Bible commands them to make every effort to live at peace and to resolve disputes with each other in private or within the Christian community in conformity with the Biblical injunctions of I Corinthians 6: 1-8, Matthew 5:23-34, and Matthew 18:15-20. Therefore, the parties agree that any claim or dispute arising out of, or related to, this agreement or to any aspect of the school relationship, including claims under federal, state, and local statutory or common law, the law of contract, and law of court, shall be settled by biblically based mediation.

If resolution of the dispute and reconciliation do not result from mediation, the matter shall then be submitted to an independent and objective arbitrator for binding arbitration. The parties agree that the mediation and arbitration process will be conducted in accordance with the "Rules of Procedure for Christian Conciliation" ("Rules") contained in the Peacemaker Ministries booklet *Guidelines for Christian Conciliation*. Consistent with these "Rules," each party to the agreement shall agree to the selection of the arbitrator. The parties agree that if there is an impasse in the selection of the arbitrator, the Institute for Christian Conciliation division of Peacemaker Ministries in Billings, Montana (406-256-1583), shall be asked to provide the name of a qualified person who will serve in that capacity. Consistent with the "Rules," the arbitrator shall issue a written opinion within a reasonable time.

The parties to this contract agree that these methods shall be the sole remedy for any controversy or claim arising out of the school relationship or this agreement, and they expressly waive their right to file a lawsuit against one another in any civil court for such disputes, except to enforce a legally binding arbitration decision. The parties to this agreement have had an opportunity to consult legal counsel before signing this agreement.

I/We the parent(s) or legal guardian(s) of _____
agree to abide by the above statement. (A copy of the Guidelines for Christian Conciliation Handbook is kept in the school office for anyone's perusal.)

Signature: Father _____
 Mother _____
 Guardian _____
 Guardian _____
 Date _____



Race/Ethnicity Designation Form

To accurately complete the state-mandated Report of Nonpublic Schools, you as a parent or employee must be given the option to self-designate the category of race/ethnicity. If you decline the school administration will designate it for you.

Please check one box only.

- | | | |
|--------------------------|------------------------------------|---|
| <input type="checkbox"/> | White/Non-Hispanic | Persons having origins in any of the original peoples of Europe, North Africa of the Middle East |
| <input type="checkbox"/> | Black/Non-Hispanic | Persons having origins in any of the black racial groups in Africa |
| <input type="checkbox"/> | Hispanic | Persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race |
| <input type="checkbox"/> | Asian/Pacific Islanders | Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Pacific Islands, or the Indian subcontinent. This area includes, for example, China, India, Japan, Korea, and the Philippine Islands and Samoa |
| <input type="checkbox"/> | American Indian/
Alaskan Native | Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition |
| <input type="checkbox"/> | Muti-racial | Persons having origins in two or more of the above categories |
| <input type="checkbox"/> | I/We decline to self-designate. | |

STATEMENT OF NON-DISCRIMINATION

The East Liverpool Christian School admits students of all races, ethnic or national origins, and gender to all the rights, privileges, programs, and activities generally accorded or made available to the students of the school. The school does not discriminate on the basis of race, gender, or ethnic or national origin in the administration of its educational policies, admission policies, scholarship and loan programs, athletic and other school-administered programs. Romans 2:11, "For God does not show favoritism."

Student's Name

Parent Signature

Date



Pastor Reference Form

Dear Pastor,

We believe it is vital for the home, church, and school to work together in the development of children. Thank you so much for helping us get to know this family better. The family has signed an "Authorization to Release Reference".

Name of Applicant: _____
 Father's Name: _____
 Mother's Name: _____

Church Attendance Practice:
(circle one)

Father: Regular Seldom Never
 Mother: Regular Seldom Never
 Applicant: Regular Seldom Never

Active Participation in church program:
(circle one)

Father: Yes No
 Mother: Yes No
 Applicant: Yes No

With the knowledge you have of the East Liverpool Christian School explain how you feel this student and family will co-operate with our school program?

Student: _____

Parents: _____

Other information you feel will be helpful in evaluating this family:

Pastor's Signature _____

Phone (____) _____

Church _____

Date _____

Please mail or fax this form to the school.



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Parental/Guardian Photo Consent Form

We are sending you a parental consent form to inform you and to request permission for your child's Photo/Image to be included in our website and/or other promotional material.

As pursuant to law, we will not release any personally identifiable information without prior written consent from you as a parent or guardian.

If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to the Headmaster. Such rescission will take effect upon receipt by the school.

Check one of the following choices:

I/we Grant permission for a Photo/image to be published by East Liverpool Christian School on their website or other promotional material.

I/we do not Grant Permission for a Photo/image to be published by East Liverpool Christian School on their website or other promotional material.

Students Name (Please Print) _____

Student's Grade _____

Print Name of Parent or Guardian _____

Signature of Parent or Guardian _____

Relation to Student _____ Date: _____



One Call Update

To receive school notifications via ONE CALL, please complete the information below.

Name of Student(s) _____

Preferred One Call Phone # _____

Any Additional numbers you would like added:

1. _____
2. _____
3. _____
4. _____

Any number that you want removed:

1. _____
2. _____
3. _____
4. _____



Volunteer Driver Form

School Year: _____

Note: We must have this information on file for all drivers of school sponsored events prior to the event.

 Student Name

 Parent/Driver Name

DECLARATION OF PARENT/VOLUNTEER DRIVER OF ELCS STUDENTS

The undersigned acknowledges that the purpose of this Declaration is to establish the primary liability and responsibility of the driver for any and all claims arising out of the driver's transport of ELCS students to and from school-sponsored and supervised activities. In pursuance of the purpose of this Declaration, the driver assures ELCS as follows:

1. The undersigned driver holds a current valid driver's license and car insurance (copies are attached).
2. Permission to transport ELCS students must be granted by the school administrator or her designee (teachers).
3. Only licensed, insured drivers for which we have this form will be permitted to transport ELCS students.
4. The undersigned recognizes and agrees that the driver's insurance coverage is primarily responsible for any and all incidents that may occur while transporting ELCS students.
5. The undersigned driver has checked the safety of the vehicle, tires, brakes, lights, horn, suspension, seat belts, etc.
6. The undersigned driver agrees to carry only the number of passengers for which the vehicle was designed and for which there are functioning safety belts. Each driver and passenger must use a safety belt. All front seat passengers must meet Ohio requirements for front seat passengers.

PLEASE ATTACH A COPY OF YOUR DRIVER'S LICENSE AND INSURANCE CARD FOR OUR RECORDS

 Driver's Name (Print)

 Driver's Signature

 Driver's Name (Print)

 Driver's Signature

 Date

 Phone



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Ohio

Department
of Education

Office of Early Learning and School Readiness Statement of Nonconviction or Conviction/Rehabilitated Form

Revised 7/11/2016

This form meets Ohio Administrative Code. Programs may use this form or build their own.

Section A OR Section B must be completed by all staff and volunteers prior to working with children.

Name
(please print or type) _____

Address _____

Section A - Nonconviction Statement

I hereby attest that I have never been convicted of or pleaded guilty to crimes set forth in division (A) (5) of section 109.572 or division (A) (1) of section 5104.09 (see attached Prohibited Offenses list) of the Ohio Revised Code or an existing or former offense of any municipal corporation, this state, or any other state that is substantially equivalent to any of these offenses.

I attest that no child has been removed from my home as described in section 2151.353

Signature _____

Date _____

Section B - Conviction/ Rehabilitated Statement

I hereby attest that I have been convicted of or pleaded guilty to crimes set forth in division (A)(5) of section 109.572 or division (A) (1) of section 5104.09 (see Prohibited Offenses list) of the Ohio Revised Code or an existing or former offense of any municipal corporation, this state, or any other state that is substantially equivalent to any of these offenses.

I attest that a child has been removed from my home as described in section 2151.353

Signature _____

Date _____

By attesting to this statement the Ohio Department of Education may investigate and confirm.

TO BE SIGNED BY THE SUPERINTENDENT

I have reviewed the rehabilitation requirements of rule 3301-20-01 of the Administrative Code, and have determined that the employee meets the rehabilitation requirements.

Superintendent
Name
(please print or type) _____

Superintendent
Signature _____

Date _____



Roster Inclusion and Authorization for Student Pick-Up

Dear Parents,

For the purposes of classroom parties, field trips, and other school activities, we need your permission to include your child's name in the classroom roster. The roster would list parent(s) and child(ren) names, address, and phone number.

Copies of the roster are to be available to any parent in your child's classroom that requests one. Please mark and sign the form.

Thank you!

Roster Inclusion Permission

Check one:

- I/We give permission for inclusion in the class roster.
- I/We give permission for inclusion in the class roster, but my/our phone number is unlisted; therefore, please do not publish the phone number.
- I/We do not give permission for inclusion in the roster.

Child's Name

Parent's Signature

Please list the names of 5 people we can release your child to:

- 1.
- 2.
- 3.
- 4.
- 5.



School-Parent Compact East Liverpool Christian School

Dear Parent/Guardian,

East Liverpool Christian School students participating in the Title I, Part A program, and their families, agree that this compact outlines how the parents, the entire school staff and the students will share the responsibility for improved student academic achievement, as well as describes how the school and parents will build and develop a partnership that will help children achieve the state's high standards.

JOINTLY DEVELOPED

Parents, students and staff of East Liverpool Christian School commit to establishing a working relationship and open communication, partnering together as we seek common educational goals for our students. Parents are encouraged to frequently and openly communicate with teachers, attend annual conferences to review and discuss student progress and needs, and attend school meetings to discuss school improvement goals. Parents also are encouraged to participate in the end of year Title I parent survey that is used as a tool to collect parent feedback regarding the services provided to their children through the current Title I program at East Liverpool Christian School.

To understand how working together can benefit your child, it is first important to understand the district's and school's goals for student academic achievement.

East Liverpool Christian School Goals

- *ELCS will increase the percentage of students performing at or above grade level in reading*
- *ELCS will increase the percentage of students performing at or above grade level in math*

To help your child meet the district's and school's goals, the school, you and your child will work together on the following items.

SCHOOL/TEACHER RESPONSIBILITIES

East Liverpool Christian School will:

- *Frequently and openly communicate with the home via email, phone call, or letter*
- *Offer assignments, activities, tools, strategies, and suggestions for working with students at home*
- *Post assignments, information, and progress weekly on Renweb for parent awareness*
- *Provide reports of student progress*
- *Hold parent teacher conferences to discuss academic progress*

PARENT RESPONSIBILITIES

We, as parents, will:

- *Frequently and openly communicate with the teacher and school via email, phone call, or letter*
- *Work with students at home to contribute to academic progress*
- *Access Renweb for information regarding student assignments, information, and progress*
- *Attend parent teacher conferences to discuss academic progress*

STUDENT RESPONSIBILITIES

- *Attend school regularly*
- *Be prepared for class and complete assignments*
- *Ask questions and receive instruction*
- *Work to succeed by practicing the strategies and activities given by the teacher*

COMMUNICATION ABOUT STUDENT LEARNING

East Liverpool Christian School is committed to frequent, two-way communication with families about children's learning. Some of the ways you can expect us to reach you include:

- *Letters and notes from the teacher and/or office;*
- *School website;*
- *Renweb-Parentweb;*
- *Parent-teacher conferences;*
- *Weekly folders;*
- *Emails to parents on student's progress;*
- *Phone calls;*

ACTIVITIES TO BUILD PARTNERSHIPS

East Liverpool Christian School offers ongoing events and programs to build partnerships with families.

- *Parent-teacher conferences;*
- *Orientation;*
- *Open house;*
- *Classroom visits;*
- *Monthly meetings;*
- *Other communication;*

Please sign and date below to acknowledge that you have received, read and agreed to this School- Parent Compact. Once signed, please return the form to your child’s teacher. We look forward to our school-parent partnership!

School Representative Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____



Nuclear Incident Form

Dear Parents/Guardians:

In the event of a nuclear incident, students will remain in our building and under our care until you or your designee arrive, because our Glenmoor location is outside the 10-mile Plume Exposure Pathway Zone (EPZ).

If a nuclear incident at the Beaver Valley Power Station requires the evacuation of our students during the school day, you or someone designated by you will be required to come directly to ELCS and pick up your child. Any students remaining in our building after 8:00 PM will be bused to Columbiana County Career and Technical Center/David Anderson High School, Lisbon, OH. These are the host schools; students will be accompanied by school personnel. Parents and legal guardians will be requested to pick up their children at the host school. Emergency cancellations and host school will be announced by the same method we use on snow days. The station to listen to is WTOV Channel 9 in Steubenville; the One Call system will also be utilized. These arrangements have been set-up by the Emergency Management Agency of Columbiana County.

We are concerned that any evacuation be safe and orderly, that accurate attendance be maintained, and that parents/guardians are reunited with students as quickly as possible. Do not rush. Keep school driveways and roads accessible. Drive safely. Your child will be waiting for you under our supervision. In order to insure their safety, children may only be released to parents or their designee. Please complete the attached checklist and potassium iodide form below.

My child (ren), _____, may be picked up by the following people:

Myself only: _____ (name)

My spouse: _____ (name)

Other: _____ (name and relationship)

School officials should not release my child to anyone else unless proper authorization is received from me. I can be reached at the numbers provided below.

Home phone _____ Work phone _____

Parent signature _____ Date _____

ANNEX – D

Potassium Iodide Consent / Dosage

Please read the attached information about Potassium Iodide (KI).

If you want your child to be given Potassium Iodide (KI) in the event of a radiological emergency, complete this form and return it to your child's school.

.....

I understand that, in a radiological emergency, Potassium Iodide (KI) may be given to my child if recommended by the Ohio Department of Health.

I have read the attached materials about Potassium Iodide (KI) issued by the Ohio Department of Health.

- I consent to my child being given Potassium Iodide (KI) in the event of a radiological emergency.
- I **DO NOT** want my child to be given Potassium Iodide in the event of a radiological emergency.

Child's Name: _____

Grade: _____ Teacher/Homeroom Teacher: _____

Parent/Guardian Signature: _____

Date: _____ Telephone Number: _____

YOU MUST RETURN THIS FORM FOR YOUR CHILD TO BE GIVEN KI IN THE EVENT OF AN EMERGENCY.

ANNEX - D

Potassium Iodide Consent / Dosage

ThyroSafe®
(Potassium Iodide Tablet USP, 65 mg)
(Abbreviated KI)

Take potassium iodide (KI) only when public officials tell you. In a nuclear radiation emergency, radioactive iodine could be released into the air. KI protects only the thyroid gland from uptake of radioactive iodine. Therefore, KI should be used along with other emergency measures that will be recommended to you by public officials. If you are told to take this medicine, take it a time every 24 hours. Do not take it more often. More KI will not help you. Too much KI may increase the chances of side effects. Do not take this medicine if you know you are allergic to iodine (see SIDE EFFECTS below).

DESCRIPTION
Each white, round, cross-scored ThyroSafe® tablet contains 65 mg of potassium iodide.

INDICATIONS
ThyroSafe® (Potassium Iodide Tablets, USP) is a thyroid blocking medicine that is used in a nuclear radiation emergency only.

DIRECTIONS FOR USE
Use as directed by public officials if a nuclear radiation emergency happens.

Dose:

Adults over 18 years	2 tablets (whole or crushed) every day (130 mg)
Children over 12 years who weigh at least 150 pounds	2 tablets (whole or crushed) every day (130 mg)
Children over 12 years who weigh less than 150 pounds	1 tablet (whole or crushed) or 8 teaspoons every day (65 mg)
Children over 3 years to 12 years	1 tablet (whole or crushed) or 8 teaspoons every day (65 mg)
Children over 1 month to 3 years	4 teaspoons every day (32.5 mg)
Babies at birth to 1 month	2 teaspoons every day (16.25 mg)

Tablets can be crushed and mixed in many liquids. To take the tablet in liquid solution, use dosing directions under Making a Potassium Iodide Liquid Mixture.

Take KI every day (every 24 hours) as directed by public officials. Do not take more than 1 dose in 24 hours. More will not help you. Too much medicine may increase the chances of side effects.

Making a Potassium Iodide Liquid Mixture:

- Put one 65 mg KI tablet into a small bowl and grind it into a fine powder using the back of a metal teaspoon against the inside of the bowl. The powder should not have any large pieces.
- Add 4 teaspoons of water to the crushed KI powder in the bowl and mix until the KI powder is dissolved in the water.
- Take the KI water mixture solution made in step 2 and mix it with 4 teaspoons of low fat white or chocolate milk, orange juice, flat soda, raspberry syrup, or infant formula.
- The KI liquid mixture will keep for up to 7 days in the refrigerator. It is recommended that the KI liquid mixtures be prepared weekly. Throw away unused portions.

The amount of KI (65 mg tablet) in the drink when mixed as described above is 8.125 mg per teaspoon. The number of teaspoons of the drink to give your child depends on your child's age as described in the following table:

Child's Age	Give your child this amount in teaspoons
Over 12 to 18 years old who weigh less than 150 pounds	8 teaspoons will give you a 65 mg dose
Over 3 to 12 years old	8 teaspoons will give you a 65 mg dose
Over 1 month to 3 years old	4 teaspoons will give you a 32.5 mg dose
Birth to 1 month	2 teaspoons will give you a 16.25 mg dose

Note: This is the amount to give your child for one single dose in teaspoons (not tablepoons). You should give your child one dose each day as recommended by the public officials.

Pregnant or breastfeeding women or babies under 1 month of age: Take as directed above and call a doctor as soon as possible. Repeat dosing should be avoided. It is recommended that thyroid function be checked in babies less than 1 month of age that take KI. Women who are pregnant or breastfeeding should also be checked by a doctor if repeat dosing is necessary. Although these precautions should be taken, the benefits of short-term use of KI to block uptake of radioactive iodine by the thyroid gland far exceed its chances of side effects.

Patients with thyroid disease: If you have both a nodular thyroid condition such as multinodular goiter with heart disease, you should not take KI. Patients with other thyroid conditions may take KI as directed above, but call a doctor if you need to take KI for more than a few days.

WARNING

People who are allergic to iodine, have dermatitis herpetiformis or hypocomplementemic vasculitis, or have nodular thyroid disease with heart disease should not take KI. Keep out of the reach of children. In case of an allergic reaction (difficulty breathing, speaking or swallowing, wheezing, shortness of breath or swelling of the mouth or throat), call 911 or get medical care right away. In case of overdose, get medical help or call a Poison Control Center right away.

HOW POTASSIUM IODIDE WORKS

Certain forms of iodine help your thyroid gland work right. Most people get the iodine they need from foods like iodized salt or fish. The thyroid can "hold" only a certain amount of iodine. In a nuclear radiation emergency, radioactive iodine may be released in the air. This material may be breathed or swallowed. It may enter the thyroid gland and damage it. The damage would probably not show itself for years. Children are most likely to have thyroid damage. If you take KI, it will block or reduce the chances that radioactive iodine will enter your thyroid gland.

WHO SHOULD NOT TAKE POTASSIUM IODIDE

People should avoid KI if they are allergic to iodine, have dermatitis herpetiformis or hypocomplementemic vasculitis, or have nodular thyroid disease with heart disease, because these conditions may increase the chances of side effects to iodine.

HOW AND WHEN TO TAKE POTASSIUM IODIDE

KI should be taken as soon as possible after public officials tell you. If you are told to repeat the dose, you should take the second dose 24 hours after the first dose. Do not take it sooner. More KI will not help you because the thyroid can "hold" only certain amounts of iodine. Taking more than 1 dose per day will increase the chances of side effects. The public officials will tell you how many days to take KI. You should take KI until the chances of major exposure to radioactive iodine by breathing or swallowing stops.

SIDE EFFECTS

Short-term use of KI at the recommended dose is safe. You should not take this drug for longer than you are told. Possible side effects include: swelling of the salivary glands, nausea, vomiting, diarrhea, stomach ache, fever, headache, metallic taste, and allergic reactions. Allergic reactions can include

- skin rashes such as hives
- swelling of various parts of the body such as the face, lips, tongue, throat, hands or feet
- fever with joint pain
- trouble breathing, speaking or swallowing
- wheezing or shortness of breath

Get medical attention right away if you have trouble breathing, speaking or swallowing, wheezing, shortness of breath, or swelling of the mouth, tongue or throat.

Taking iodine, in rare cases, may cause over activity of the thyroid gland, underactivity of the thyroid gland, or enlargement of the thyroid gland (goiter). Symptoms of an overactive thyroid gland may include an irregular heart beat and chest pain. Patients with thyroid disease are more likely to get these side effects. Babies under 1 month of age are more likely to get an underactive thyroid gland (hypothyroidism).

WHAT TO DO IF SIDE EFFECTS OCCUR

Stop taking KI and call a doctor if you have one or more of the following symptoms:

- swelling of the face, hands or feet
- fever and joint pain
- skin rash

Stop taking KI and get medical help right away if you have one or more of the following symptoms:

- trouble breathing, speaking or swallowing
- shortness of breath or wheezing
- swelling of the lips, tongue or throat
- irregular heart beat or chest pain

HOW SUPPLIED

ThyroSafe® (potassium iodide, USP) tablets. Packages of 10 and 20 tablets. Each white, round, cross-scored tablet contains 65 mg potassium iodide. Store at 20-25°C (68-77°F). Keep dry and foil intact. Manufactured by Recipharm Stockholm AB, Sweden, for Recipharm Inc, USA, 1-866-849-7672. www.thyrosafe.com

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PRESCHOOL MANAGEMENT OF COMMUNICABLE DISEASE

1. A person trained to recognize the common signs of communicable disease or other illness shall observe each child daily as he enters a group. A "person trained to recognize the common signs of communicable disease" means any person trained in prevention, recognition and management of communicable diseases as required by paragraph (D) of Rule 3301-37-07 of the Administrative Code.
2. The following precautions shall be taken for children suspected of having a communicable disease:
 - A. The program shall immediately notify the parent or guardian of the child's condition when a child has been observed with signs or symptoms of illness.
 - B. A child with any of the following signs or symptoms of illness shall be immediately isolated and discharged to his parent or guardian:
 - a) Diarrhea (more than one abnormally loose stool within a twenty-four-hour period);
 - b) Severe coughing, causing the child to become red or blue in the face or to make a whooping sound;
 - c) Difficult or rapid breathing;
 - d) Yellowish skin or eyes;
 - e) Conjunctivitis;
 - f) Temperature of one hundred degrees Fahrenheit taken under the arm when in combination with other signs of illness;
 - g) Untreated infected skin patch(es);
 - h) Unusually dark urine and/or gray or white stool;
 - i) Stiff neck; or
 - j) Evidence of lice, scabies or other parasitic infestation.
 - C. A child with any of the following signs or symptoms of illness shall be immediately isolated from other children. Decisions regarding whether the child should be discharged immediately or at some other time during the day shall be determined by the director and the parent or guardian. The child, while isolated at the program, shall be carefully watched for symptoms listed in paragraph (B)(2) of this Rule as well as the following:
 - a) Unusual spots or rashes;
 - b) Sore throat or difficulty in swallowing;
 - c) Elevated temperature;
 - d) Vomiting.

- D. Programs shall follow the Department of Health "child day care communicable disease chart" for appropriate management of suspected illnesses.

A child isolated due to suspected communicable disease shall be:

- a) Cared for in a room or portion of a room not being used in the preschool program;
- b) Within sight and hearing of an adult at all times. No child shall ever be left alone or unsupervised;
- c) Made comfortable and provided with a cot. All linens and blankets used by the ill child will be laundered before being used by another child. After use, the cots shall be disinfected with an appropriate germicidal agent, or, if soiled with blood, feces, vomit or other body fluids, the cots shall be cleaned with soap and water and then disinfected with an appropriate germicidal agent;
- d) Observed carefully for worsening condition; and
- e) Discharged to parent, guardian, or person designated by the parent or guardian as soon as practical.

3. Each program shall have a written policy concerning the management of communicable disease. The policy shall include, at a minimum:

- A. The program's means of training all preschool staff in signs and symptoms of illness and in hand washing and disinfections procedures;
- B. Procedures for isolating and discharging an ill child and policy for readmitting such child;
- C. Procedures for notifying the parent or guardian immediately when a child is exhibiting signs or symptoms of illness or has been exposed to a communicable disease; and
- D. Procedures regarding the care of a mildly ill child. "Mildly ill child" means a child who is experiencing minor common cold symptoms, but who is not exhibiting any of the symptoms specified in paragraph (B) of this Rule or a child who does not feel well enough to participate in activities, but who is not exhibiting any of the symptoms specified in paragraph (B) of this Rule.
- E. Procedures for notifying all parents of enrolled children when children are exposed to a diagnosed communicable disease such as pink eye, ringworm, chicken pox or lice.

Preschool parents are welcome in our school and may have unlimited access to the preschool classroom, provided that permission from administration is obtained first. Parents **MUST** check in/sign in at the office and wear a visitor's badge while on our campus. You are also welcome in the school during hours of operation, Monday-Friday, from 8:30-3:30. Tours of the building, appointments with the Principal, or other concerns may be addressed at this time. If you wish to see the preschool policy handbook for any reason, it can be made readily available for your perusal here at school. Please see the Preschool teacher or the office to schedule a time slot. The preschool teacher and office staff can also provide the latest inspection report from the Ohio Department of Education should you wish to see it. For further questions or concerns, we ask you to follow the Matthew 18 principle explained in the Student/Parent Handbook, but other information can be obtained by contacting the OELSR (Office of Early Learning and School Readiness) at 614.466.0224 or the Department Ombudsperson at 877.644.6338, divisions of the Ohio Department of Education.



BEHAVIOR MANAGEMENT/DISCIPLINE

For the purpose of the following pages dealing with the Preschool, the term “center” or “program” will refer to East Liverpool Christian School. The term “director” will refer to the teacher(s).

1. A preschool staff member in charge of a child or a group of children shall be responsible for their discipline.
2. The center shall have a written discipline policy describing the center's philosophy of discipline and the specific methods of discipline used at the center. This written policy shall be on file at the center for review. Constructive, developmentally appropriate child guidance and management techniques are to be used at all times and shall include such measures as redirection, separation from problem situations, talking with the child about the situation and praise for appropriate behavior.
3. The center's actual methods of discipline shall apply to all persons on the premises and shall be restricted as follows:
 - A. There shall be no cruel, harsh, corporal punishment or any unusual punishments such as, but not limited to, punching, pinching, shaking, spanking or biting.
 - B. No discipline shall be delegated to any other child.
 - C. No physical restraints shall be used to confine a child by any means other than holding a child for a short period of time, such as in a protective hug, so the child may regain control.
 - D. No child shall be placed in a locked room or confined in an enclosed area such as a closet, a box or as similar cubicle.
 - E. No child shall be subjected to profane language, threats, derogatory remarks about himself or his family or other verbal abuse.
 - F. Discipline shall not be imposed on a child for failure to eat, failure to sleep, or for toileting accidents.
 - G. Techniques of discipline shall not humiliate, shame or frighten a child.
 - H. Discipline shall not include withholding food, rest or toilet use.
 - I. Separation, when used as discipline shall be brief in duration and appropriate to the child's age and developmental ability and the child shall be within sight and hearing of a preschool staff member in a safe, lighted and well-ventilated space.
 - J. The center shall not abuse or neglect children and shall protect children from abuse and neglect while in attendance in the preschool program.
4. The parent of a child enrolled in a center shall receive the center's written discipline policy.

5. All preschool staff members shall receive a copy of the center's discipline policy for review upon employment.