SUWANNEE COUNTY SCHOOL BOARD
REGULAR MEETING
March 31, 2020

AGENDA

Call to Order - 6:00 p.m.

Pledge to the Flag

Citizen Input (A *Citizen Input Form* must be completed and submitted to the secretary to the Superintendent/School Board prior to addressing the Board. We ask that speakers keep their comments to two minutes.)

The Superintendent recommends approval to adopt the Agenda.

The Superintendent recommends approval of the Consent Agenda.

CONSENT AGENDA

Anyone present may approach the Board concerning any item on this agenda. Board members may pull any item on the Consent Agenda for discussion and separate action.

1. The Superintendent recommends approval of the following Minutes: **(pgs. 7-24)**

February 11, 2020	- Workshop Session - Special Meeting - Expulsion Issues Hearing (Private)
February 25, 2020	- Expulsion Issues Hearing (Private) - Public Hearing - Regular Meeting

2. The Superintendent recommends approval of the monthly financial statement for February 2020.

3. The Superintendent presents the following bills for the period February 1-29, 2020:

General Checking Account	
General Fund 1000	$ 481,564.34
LCIF Fund 3200	75,518.94
Food Service Fund 4100	173,562.14
Federal Fund 4200	198,476.91
Total	$ 929,122.33

Payroll Checking Account	
General Fund 1000	$ 3,029,950.22
Food Service Fund 4100	139,393.01
Federal Fund 4200	367,994.82
Total	$ 3,537,338.05

Total	$ 4,466,460.38

4. The Superintendent recommends approval of the following budget amendments for fiscal year 2019-2020:

General	LCIF	Special Revenues
I-8	III-8	IV-8 (Federal)
		IV-5 (Food Service)

5. The Superintendent recommends approval for disposal of property as per the attached Property Disposition Form dated March 24, 2020. **(pg. 25)**

6. The Superintendent recommends approval of the following contract/agreement for the 2019-2020 school year: (RENEWAL) (Note: This contract has been reviewed and approved by Board Attorney Leonard Dietzen.)

#2020-85	Career Pathways Articulation Agreement between North Florida College and Suwannee County School District for Nursing Assistant/Program of Study: Medical Assisting; Early Childhood Education/Program of Study: Early Childhood Education; and Surgical Technology/Program of Study: Medical Assisting (*Renewal/Revised*) **(pgs. 26-38)**

7. The Superintendent recommends approval of the following contract/agreement for the 2020-2021 school year: (RENEWAL) (Note: This contract has been reviewed and approved by Board Attorney Leonard Dietzen.)

   #2021-02 Inter-District Private School Services Agreement 2020-2021 between the Suwannee County School Board and the Lafayette County School District Title I Programs (*Renewal*) (Note: This agreement was initiated by the Lafayette County School District.) **(pgs. 39-40)**

8. The Superintendent recommends approval of the following student transfers for the 2019-2020 school year. Parents will provide transportation.

   District Reassignment:

FIRST NAME	LAST NAME	TO	FROM	GRADE
Knox	Fairchild	Suwannee	Lafayette	PK
Jaliah	Gardner	Suwannee	Hamilton	3

   Zone Reassignment:

FIRST NAME	LAST NAME	TO	FROM	GRADE
Kayton	McMillan	BES	SPS	1

9. The Superintendent recommends approval of Public Official Bonds for the individuals listed below. (These bonds and certificates have been reviewed by Board Attorney Leonard Dietzen.) **(pgs. 41-42)**

   Public Official Bonds – Chairman/Vice Chairman
   Ed daSilva, Chairman (November 2019 – November 2020)
   Tim Alcorn, Vice Chairman (November 2019 – November 2020)

10. Human Resources Transactions **(pgs. 43-47)**

REGULAR AGENDA

1. The Superintendent recommends approval of the following contract/agreement for the 2019-2020 school year: (NEW) (Note: This contract has been reviewed and approved by Board Attorney Leonard Dietzen.)

   #2020-86 Clinical Education Agreement between Shands Teaching Hospital and Clinics, Inc. and Suwannee County School Board, through RIVEROAK Technical College, Surgical Technology Program (*New*) **(pgs. 48-55)**

2. The Superintendent recommends approval of the annual Florida Department of Education, Office of Educational Facilities, Florida Inventory of School Houses (FISH) Certification of Facilities Data for 2019-2020.

3. The Superintendent recommends approval of the 2020-2021 Enrollment Packet for student enrollment in Suwannee County School District. **(pgs. 56-69)**

4. The Superintendent recommends approval of the following curriculum item for the 2019-2020 school year:

   a. 2020 Summer School Schedule **(pgs. 70-73)**

5. The Superintendent recommends approval of the following personnel items for the 2019-2020 school year:

   a. The following summer school positions for the 2020 summer school term:

Program	Number of Employees/Position	Funding
3rd Grade Reading Camp	5 – Teachers (SES-4: Housed at SMS; BES-1)	General Fund/ Reading Allocation
VPK	6 – Teachers (SPS-6: Housed at SMS)	VPK

Program	Number of Employees/Position	Funding
Extended School Year (ESY) Services for ESE	3 – Teachers (SES-2: Housed at SMS; BES-1) 2 – Paraprofessionals (SES-1: Housed at SMS; BES-1) 1 – Nurse (SMS)	IDEA Grant
Credit Recovery (Grades 4-11)	8 – Teachers (BHS-2; SHS-5; SMS-1) 3 – Paraprofessionals (BHS-1; SHS-2)	Federal Programs/ General Fund
Driver's Education	2 – Teachers (SHS) (*Serving students from BHS, SHS, and SVS, as needed*)	Federal Programs/ General Fund
Virtual Instruction	12 – Teachers (SVS) (*As needed to complete courses already in progress*)	General Fund
21st Century (CCLC) Program	4 – Site Coordinators (SES, SIS, SPS-1 each: Housed at SMS; BES-1) 4 – Paraprofessionals (SES, SIS, SPS-1 each: Housed at SMS; BES-1)	21st CCLC Grant
Migrant Summer Program	6 – Paraprofessionals (*Serving students at BES, BHS, SHS, SMS, and in home, as needed)*	Title I Part C
Transportation	2 – Bus Drivers 2 – Bus Attendants (*as needed for ESE travel*)	Federal Programs, as available

NOTE: Positions will be based on student enrollment daily.

b. The following personnel to implement the 2020 Summer Food Service Program:

Sites	Personnel	Up to Hours/Week
BES, SHS, and SMS	3 – Food Service Managers-8 hour	32
	7 – Food Service Workers-7.5 hour	28
	2 – Substitute Food Service Workers	As needed

(All Food Service positions are subject to program participation.)

6. The Superintendent recommends approval of the following form:

#5200-066 Suwannee County School District Consent to Invite Agency Representatives to Transition IEP Meetings and Release of Information to Transition Agencies (*New*) **(pg. 74)**

7. Comments from Student Ambassadors

8. Legal Counsel's Report

9. Superintendent's Report

10. Issues and concerns Board members may wish to discuss

End of Agenda

SUWANNEE COUNTY SCHOOL BOARD
WORKSHOP SESSION
February 11, 2020

MINUTES

The Suwannee County School Board met in Workshop Session on this date in the School Board Meeting Room, 1740 Ohio Avenue, South, Live Oak, Florida. School Board members present were Chairman Ed daSilva, Tim Alcorn, Catherine Cason (arrived at 9:03 a.m.), Jerry Taylor, and Ronald White (arrived at 9:07 a.m.), along with Superintendent Ted Roush, School Board Attorney Leonard Dietzen, Chief Financial Officer Vickie DePratter, and Administrative Secretary Karen Lager.

Administrators and others present: Jennifer Barrs, Walter Boatright, Amy Boggus (arrived at 9:31 a.m.), Tammy Boggus, Bill Brothers (arrived at 9:17 a.m.), Marsha Brown, Ethan Butts, Mark Carver, Lisa Dorris, Janene Fitzpatrick, Ronnie Gray, Malcolm Hines (arrived at 10:00 a.m.), Teri Jones (arrived at 9:15 a.m.), Mary Keen (arrived at 9:05 a.m.), Debbie Land (arrived at 9:24 a.m.), Dee Dee McManaway (arrived at 9:17 a.m.), Kecia Robinson, Angie Stuckey (arrived at 10:41 a.m.), Marsha Tedder (arrived at 9:23 a.m.), Kelly Waters, Jimmy Wilkerson (arrived at 9:38 a.m.), Josh Williams, and Laura Williams. Jennifer Page and Kristin Summers, with NFC; and Julie Calvitt, J.D. Curl, and Eric Scott, with Arthur J. Gallagher & Company, were also present.

Chairman daSilva called the meeting to order at 9:00 a.m., and led the pledge.

North Florida College (NFC) Collegiate..... Jennifer Page, NFC Academy Partnership

Ms. Page distributed and reviewed a handout regarding Sentinel Scholars Collegiate Academy Principles of Participation Partnership Program.

Fringe Benefits Committee Update..... Vickie DePratter

Mr. Eric Scott provided a PowerPoint presentation regarding Self-Insured vs. Fully-Insured pertaining to health insurance. Ms. Calvitt distributed a hard copy of the PowerPoint to Board members.

Ms. DePratter shared that the Fringe Benefit Committee's recommendation was to go with the self-insured plan, all plans would remain the same, and funding level/premiums would remain the same. There would be no change for the employees, but to recognize the risk that will be placed on the District going self-insured.

School Configuration Update ..... Janene Fitzpatrick

Mrs. Fitzpatrick provided a PowerPoint presentation regarding an update on the school configuration process.

Career, Technical, and Adult Education (CTE) ..... Mary Keen
Department Update

Ms. Keen distributed and reviewed handouts on RIVEROAK Technical College's Career Day; she provided information regarding the proposed CTE Month Proclamation (February). Consensus of the Board was to proceed with the proclamation, with no need for formal Board approval.

Human Resources Department Update ..... Walter Boatright

Mr. Boatright stated that the only revision to the 2020-2021 Minority Teacher Recruitment Plan was a date change. **(pgs. 2-4)**

Transportation Department Update **(pgs. 5-8)** .....Jimmy Wilkerson

Mr. Wilkerson provided an update for the Transportation Department, which included the following:

- New pickup configuration with the Live Oak elementary school configuration for next year.
- Increase of students riding the buses this school year, which resulted in an FTE funding increase of a little over $193,000.
- Purchase of additional school buses; currently having issues with our newer buses. Mr. Wilkerson asked for direction from the Board regarding his proposal to purchase only a couple of buses each year, instead of mass purchasing. Mr. White felt the need to purchase up to seven buses each year due to life span of buses. Mr. Alcorn questioned if Mr. Wilkerson's proposal

was better than a lease option. Mr. Wilkerson responded that he has not looked at that option, but would be more than happy to look into the lease option. Discussion was held regarding the need to purchase seven buses or two buses on a rotation, as well as looking at a lease option. Mr. Wilkerson will prepare detailed information regarding purchase/lease purchase of school buses for discussion at a future workshop.

The workshop recessed at 11:26 a.m. and resumed at 12:32 p.m.

School Safety and Other Administrative Services Department Update.....Malcolm Hines

Mr. Hines reviewed the proposed changes to the Suwannee County School District Employee Workplace Safety Program for 2019-2020. Several corrections were noted that need to be made to the document. **(pgs. 9-94)**

Facilities Department Update.....Mark Carver

- Mr. Carver distributed a hard copy of a PowerPoint presentation that Mr. Butts provided regarding an update on school configuration pertaining to the Facilities Department, which included estimated costs of the project.

- Mr. Roush noted that the additional dollars needed for the school configuration project (approximately $234,000) would come out of the insurance loss recovery dollars received from the portable that burned down at Suwannee Primary School (SPS). Board consensus was to proceed as noted. Mr. Roush asked to spend an additional $40,000 from the insurance loss recovery dollars to update the marquis at Branford Elementary School (BES). Mr. White asked if we had evaluated the playground equipment at BES; Mr. Carver responded that new playground (large structure) equipment was installed at BES about four to five years ago. Mr. Carver stated they did look at the furniture at BES, and it is still in good shape. Consensus of the Board was to proceed with the additional marquis for BES.

- Mr. Carver stated that insurance loss recovery dollars could also be used for the SPS fire alarm replacement, as well as classroom flooring in the north wing of SPS. This would be in lieu of LCIF dollars from the work plan, which would free up dollars for other needed projects in the District. Consensus of the Board was to proceed as discussed.

Superintendent Update ..... Ted Roush

Mr. Roush announced that a brief Executive Session would need to be held immediately following the Special Meeting today (and prior to the 2:30 p.m. expulsion hearing).

The workshop adjourned at 1:51 p.m.

SUWANNEE COUNTY SCHOOL BOARD
SPECIAL MEETING
February 11, 2020

MINUTES

The Suwannee County School Board met in Special Session on this date in the School Board Meeting Room, 1740 Ohio Avenue, South, Live Oak, Florida. School Board members present were Chairman Ed daSilva, Tim Alcorn, Catherine Cason, Jerry Taylor, and Ronald White, along with Superintendent Ted Roush, School Board Attorney Leonard Dietzen, Chief Financial Officer Vickie DePratter, and Administrative Secretary Karen Lager.

Chairman daSilva called the meeting to order at 1:52 p.m.

MOTION by Mr. Alcorn, second by Ms. Cason, for approval to adopt the agenda. MOTION CARRIED UNANIMOUSLY

1. MOTION by Mr. Taylor, second by Mr. Alcorn, for approval of the Employee Workplace Safety Program for 2019-2020, along with the changes discussed at the Board workshop previously today. (A copy is available in the office of the Director of School Safety and Other Administrative Services.) MOTION CARRIED UNANIMOUSLY

2. MOTION by Ms. Cason, second by Mr. Alcorn, for approval of the following form:

   #5200-065 Suwannee County School District Parental/Guardian Notice Consent for Evaluation (Speech/Gifted) (*New*) **(pg. 2)**

   MOTION CARRIED UNANIMOUSLY

3. MOTION by Mr. Taylor, second by Ms. Cason, for approval of the Human Resources Transactions **(pgs. 3-4)** MOTION CARRIED UNANIMOUSLY

The meeting adjourned at 1:59 p.m.

SUWANNEE COUNTY SCHOOL BOARD
PUBLIC HEARING
February 25, 2020

MINUTES

The Suwannee County School Board held a Public Hearing on this date in the Branford High School Auditorium, 405 NE Reynolds, Branford, Florida. School Board members present were Chairman Ed daSilva, Tim Alcorn, Catherine Cason, Jerry Taylor, and Ronald White, along with Superintendent Ted Roush, School Board Attorney Leonard Dietzen, Chief Financial Officer Vickie DePratter, and Administrative Secretary Karen Lager.

School Resource Officer Rachel Rodriguez was also present.

Chairman daSilva called the hearing to order at 5:55 p.m.

1. Final review of additions and revisions to the Suwannee County School Board Policy Manual as follows: (Copies are available for review in the office of the Assistant Superintendent of Administration.)

#5.03	Student Assignment (*Revised*)
#5.031	Student Out of Zone Transfers/Choice (*Revised*)
#5.032	Postsecondary Enrollment Programs (*Revised*)
#7.01	School Budget System (*Revised*)

Chairman daSilva called for comments or questions regarding the additions and revisions to the Suwannee County School Board Policy Manual and there were none.

The hearing adjourned at 5:57 p.m.

SUWANNEE COUNTY SCHOOL BOARD
REGULAR MEETING
February 25, 2020

MINUTES

The Suwannee County School Board met in Regular Session on this date in the Branford High School Auditorium, 405 NE Reynolds, Branford, Florida. School Board members present were Chairman Ed daSilva, Tim Alcorn, Catherine Cason, Jerry Taylor, and Ronald White, along with Superintendent Ted Roush, School Board Attorney Leonard Dietzen, Chief Financial Officer Vickie DePratter, and Administrative Secretary Karen Lager.

School Resource Officer Rachel Rodriguez and Student Ambassadors Antonio White (arrived at 6:02 p.m.) and Barrett Young were present.

Chairman daSilva called the meeting to order at 6:00 p.m.

Student remarks and pledge to the flag by Branford Elementary School Student Council student organization.

Special Recognition by the Superintendent:

District Spelling Bee Winners

- Isabella "Bella" Hobday (Branford Elementary School, 5th Grade) – First Place
- Dusty Wardrep, (Suwannee Middle School, 8th Grade) – Runner Up

Branford High School

- Barrett Young – Branford High School's Sunshine State Scholar

Citizen Input (A *Citizen Input Form* must be completed and submitted to the secretary to the Superintendent/School Board prior to addressing the Board. We ask that speakers keep their comments to two minutes.)

➢ There were none.

MOTION by Mr. Taylor, second by Mr. White, for approval to adopt the Regular Agenda. MOTION CARRIED UNANIMOUSLY

MOTION by Mr. Taylor, second by Ms. Cason, for approval of the Consent Agenda, along with the following changes:

1. Page 4, Consent Agenda/February 25, 2020, Item #8 – Out of County

   - Mason Marable should be listed for 2020-2021, instead of 2019-2020

2. Page 12, Consent Agenda/January 28, 2020, Minutes, Item #5 – Donations

   - Cash donation, in the amount of $1,000, from Live Oak Lions Charities should be for SMS New Softball Field, instead of SHS

MOTION CARRIED UNANIMOUSLY

CONSENT AGENDA

Anyone present may approach the Board concerning any item on this agenda. Board members may pull any item on the Consent Agenda for discussion and separate action.

1. Approval of the following Minutes: **(pgs. 6-22)**

January 14, 2020	- Workshop Session
	- Special Meeting
January 28, 2020	- Public Hearing
	- Regular Meeting

2. Approval of the monthly financial statement for January 2020.

3. The following bills for the period January 1-31, 2020:

General Checking Account		
General Fund 1000	$	520,398.90
LCIF Fund 3200		36,559.11
Food Service Fund 4100		111,143.47
Federal Fund 4200		35,647.62
Total	$	703,749.10

Payroll Checking Account		
General Fund 1000	$	3,105,956.71
Food Service Fund 4100		136,914.47
Federal Fund 4200		348,027.98
Total	$	3,590,899.16
Total	$	4,294,648.26

4. Approval of the following budget amendments for fiscal year 2019-2020:

General	LCIF	Special Revenues
I-7	III-7	IV-7 (Federal)

5. Approval of the following contract/agreement for the 2019-2020 school year: (RENEWAL) (Note: This contract has been reviewed and approved by Board Attorney Leonard Dietzen.)

#2020-84	Contract for Evaluation Services between the Suwannee County School District and the Center for Assessment, Strategic Planning, Evaluation and Research, LLC d/b/a CASPER (*Renewal*) **(pgs. 23-37)**

6. Approval of the following contract/agreement for the 2020-2021 school year: (RENEWAL) (Note: This contract has been reviewed and approved by Board Attorney Leonard Dietzen.)

#2021-01	Master Services Agreement between Windstream and the School Board of Suwannee County, Florida (*Renewal*) **(pgs. 38-56)**

7. Approval to accept the following donated items:

Site	Item	Donor
SMS-Girls Track Team	Cash Donation ($1,000)	Newton L. Bassford, Jr., Valdosta, GA
SMS-Wrestling Team	Cash Donation ($998)	Luke Grantham, Live Oak, FL

8. Approval of the following student transfers for the 2019-2020 school year. Parents will provide transportation.

District Reassignment:

FIRST NAME	LAST NAME	TO	FROM	GRADE
Airin	Hauch	Suwannee	Columbia	4
Avery	Lanier	Suwannee	Lafayette	K

9. Approval of the following student transfers for the 2020-2021 school year. Parents will provide transportation.

District Reassignment:

FIRST NAME	LAST NAME	TO	FROM	GRADE
Mason	Marable	Suwannee	Hamilton	Pre-K

10. Human Resources Transactions **(pgs. 57-61)**

RECOMMENDATIONS FOR THE 2019-2020 SCHOOL YEAR:

RESIGNATION: INSTRUCTIONAL:

RIVEROAK Technical College:
M'Alice Julius, LPN Instructor, effective February 24, 2020

RESIGNATIONS: NON-INSTRUCTIONAL/SCHOOL RELATED:

Food Service:
Renee Perivolaris, Food Service Worker, 8 hour, effective February 6, 2020

Information Technology:
Edmund (Buddy) Thompson, Information Technology Technician, effective March 2, 2020

Suwannee Primary School:
Betty A. Riley, Lead CDA Paraprofessional, effective January 20, 2020

Transportation:
Michael Munhall, Parts Inventory Clerk, effective February 3, 2020
Amanda Register, Bus Driver, effective February 3, 2020
August Schomburg, Bus Driver, effective January 31, 2020

RETIREMENTS: INSTRUCTIONAL:

RIVEROAK Technical College:
Tracy T. Henderson, Teacher, effective July 31, 2020

Suwannee Elementary School:
Candance Plymel, Teacher, effective July 31, 2020

RETIREMENTS: NON-INSTRUCTIONAL/SCHOOL RELATED:

Suwannee High School:
Linda G. Goodman, Custodian, effective July 28, 2020

Suwannee Middle School:
Carla A. Williams, School Receptionist, effective December 1, 2020

RECOMMENDATIONS: INSTRUCTIONAL:

Suwannee High School:
Patrick Dawson, NJROTC Teacher, effective July 1, 2020
REPLACES: Douglas Aukerman

Suwannee Middle School:
Ashton Petersen, Teacher, effective December 17, 2019
REPLACES: Jayvis Ward

SUPPLEMENTARY:

NAME	POSITION	LOCATION
Jerrica Byrd	Assistant M/S Softball Coach	BHS
*Cody Gamble	Head JV Baseball Coach	SHS
Laritta Hunter	Girls' JV Basketball Coach	SHS
Patrick Jernigan	Assistant Baseball Coach	SMS
Jason Langston	Assistant Wrestling Coach	SHS
*Michelle Richards	Girls' Assistant Track Coach	BHS
Alex Scarborough	Boys' Basketball Assistant Coach	SMS
Brittney Shearer	Assistant Softball Coach	SMS
Benjamin Thomas	Girls' Head Tennis Coach	SHS
Benjamin Thomas	Boys' Head Tennis Coach	SHS
K. Nicole Williamson	Girls' Basketball Assistant Coach	SMS

*Payment contingent upon completing certification

LEAVE OF ABSENCE (FAMILY AND MEDICAL LEAVE):

Branford High School:
Emilee Raines, Teacher, tentatively, February 24, 2020 through April 17, 2020, with the option of returning sooner if released by the doctor.

Suwannee High School:
Sarah Grillo, Teacher, tentatively, February 3, 2020 through April 29, 2020, with the option of returning sooner if released by the doctor.

RECOMMENDATIONS: NON-INSTRUCTIONAL/SCHOOL RELATED:

Branford Elementary School:
Donna Rightmire, Food Service Worker, 6 hour, effective March 2, 2020
REPLACES: Deborah Crawford

Suwannee High School:
Natelle Smith, Food Service Worker, 6 hour, effective February 3, 2020
REPLACES: Amoreena Miller
Transportation:
Amanda Colon, Bus Driver, effective January 31, 2020
REPLACES: Charles Livington
Bruce Kemmerer, Bus Driver, effective January 31, 2020
REPLACES: Deseree Ansley

LEAVE OF ABSENCE (MEDICAL LEAVE):

Transportation:
Leon Kaczmarek, Bus Driver, tentatively, January 16, 2020 through May 29, 2020, with the option of returning sooner if released by the doctor.

Cathy Reed, Bus Driver, January 7, 2020 through January 27, 2020.

LEAVE OF ABSENCE (ILLNESS IN THE LINE OF DUTY):

Branford High School:
William Yates, Food Service Worker, 8 hour, October 24, 2019 through November 6, 2019, for a total of 80 hours.

Suwannee Elementary School:
Renee Perivolaris, Food Service Worker, 8 hour, December 3, 2019 through December 16, 2019, for a total of 80 hours.

Suwannee Middle School:
Katrina Johnson, Assistant Food Service Manager, December 16-17, 2019, for a total of 16 hours.

LEAVE OF ABSENCE (FAMILY AND MEDICAL LEAVE):

Suwannee Primary School:
Vanessa Isidro Mares, Paraprofessional, tentatively, February 10, 2020 through March 30, 2020, with the option of returning sooner if released by her doctor. *(Revised from January 28, 2020 HR Transactions)*

MENTOR	MENTEE	SCHOOL
Annette Chauncey	Jennifer Turner	SMS

STUDENT WORKER:

Sara Lekisha Williams, RIVEROAK Technical College/Early Childhood Education/My Play School

SUBSTITUTES:

The following to serve as Substitute Bus Attendants:

Robert Barrs Robert Frayer Curt Lux

The following to serve as Substitute School Nurses:

Brandice Corbin Jennifer Lewis Lori Peters Hildelita Warren

SUSPENSION:

Food Service:
Rebecca Kirby, Food Service Manager, effective February 6-7, 2020, without pay.

MISCELLANEOUS:

Hospital Homebound:
The following to work as teachers in the Hospital Homebound Program District-wide:

Michael Braun	Robbin Chapman	Angela Hester
Hannah Johnson	Holly McMillan	Debra Singletary

Suwannee Primary School:

Approval for the following Paraprofessional to work in the after school extended day Pre-K program.

Janice McCall

VOLUNTEERS:

Tony Abbott
Jedidiah Arnold
Michael Ascough
Susann Baan
Wilbur Barrs
Clifford Bean
Sherri Bracewell
Ashley Cannon
Zachary Clark
Calena Clemons
Heather Connor
Ashley Davis
William Davis
LeAnn Dees
Morgan Franklin
Mackenzie Frye
Lorena Gardner
Danielle Gay
Daren Gay
Jeri Giddens
Tonya Hagan
Zach Hand
Rachael Hazen
Lori Hughes
Susann Johnson
Susan Kirby
Lynn Lanier
Patrick Lanier
Jon Little
Ashley Lundy
Natalie Manna
Robyn Metzger
Judithann Murray
Reina Olver Lugo
Aksel Perez-Lugo
Krystal Ramsey
Teresa Schultz
Fannie Stoudemire
Jessie TenBroeck
Cory Thompson
Angeline Tuckey
Lila Udell
Elizabeth Vargas
Barrinesha Washington
Deborah Yates

End of List
2019-2020
School Year

REGULAR AGENDA

1. MOTION by Mr. Alcorn, second by Mr. White, for approval of additions and revisions to the Suwannee County School Board Policy Manual as follows: (Copies are available for review in the office of the Assistant Superintendent of Administration.)

#5.03	Student Assignment (*Revised*)
#5.031	Student Out of Zone Transfers/Choice (*Revised*)
#5.032	Postsecondary Enrollment Programs (*Revised*)
#7.01	School Budget System (*Revised*)

MOTION CARRIED UNANIMOUSLY

2. MOTION by Mr. Taylor, second by Mr. White, for approval to renew the employee health insurance plans for the period of May 1, 2020 – April 30, 2021, including moving from a fully-insured plan to a self-insured plan. (Note: The Fringe Benefits Committee has reviewed and evaluated the health insurance renewal plan for the period above. The vote was 9-1 in favor of the recommendation.)

   Mr. Roush provided additional information regarding the recommendation that the original proposal vote of 9-1 is accurate. However, at the most recent Fringe Benefits Committee meeting, BCBS proposed an additional 3% decrease in premium with staying fully-insured with BCBS. The committee voted on the revised proposal, with a 6-4 vote; with 6 staying with the new proposed self-insured plan and 4 continuing with being fully-insured and accepting the 3% decrease in premium. Mr. Roush felt that the best interest for the District, and its employees, was to proceed with self-insured, which will allow for more control over our plans, as well as having a better long-term benefit for employees.

   Discussion followed regarding the matter.

   Mr. Taylor questioned the 3% decrease; but feels it is in the best interest of the District to proceed with original recommendation to go self-insured.

   Mr. White questioned Mr. Tyson Johnson regarding the proposed recommendation, as well as if there would be a need for additional employees if we go self-insured. Mr. Johnson responded that Florida Blue would continue to administer the self-insured plan on behalf of the District. He also felt there

was a possibility of a plan to shift responsibilities of current District employees to help with the administration of the plan internally.

Mr. Alcorn questioned what the responsibilities of Mr. Johnson, and his staff, would be under the self-insured plan; he also questioned the fees associated with the stop loss portion, as well as safe harbor and the billing process between the District, the medical institution, and Florida Blue. Mr. Johnson responded to Mr. Alcorn's questions.

Mr. Taylor questioned if the District could manage with current staff, along with employee savings on premiums. Mr. Roush stated he would need to get feedback as the plan year progresses. He can't promise that he would never come back to the Board and ask for an additional employee; he would rely on Mrs. DePratter and Mr. Johnson to help determine if there ever is the need for additional staff. Mr. Taylor stated that we need to look at a different wellness plan for the District.

Mr. Alcorn questioned safe harbor once again. Mr. Johnson stated that if we perform, as a group, this next year as we did last year, we would be in good standing. Mr. Alcorn asked about increasing the threshold. Mr. Roush responded there is no reason why we can't increase the threshold. Mr. Johnson stated that we want to have a healthy surplus, which could potentially help benefit the employees.

Mr. White questioned having a specific account strip for self-insured dollars only. Mr. Roush responded that money collected can only be used for health insurance purposes.

Mr. daSilva addressed the 3% reduction proposal offered by Florida Blue for this upcoming plan year, but concerned that they could come back next year with a much higher increase. He felt that being self-insured allows the District to have more control, even with the risk involved.

Mr. daSilva called for a vote. MOTION CARRIED UNANIMOUSLY

3. MOTION by Mr. Alcorn, second by Mr. Taylor, for approval of revisions for the names of the new Live Oak elementary schools as follows: (Note: This is a correction for the themes of these schools, which was originally Board approved on November 19, 2019.)

   - **Suwannee Pineview Elementary (Innovation Program)**
     [theme originally approved as Arts Program]
   - **Suwannee Riverside Elementary (Arts Program)**
     [theme originally approved as Innovation Program]
   - **Suwannee Springcrest Elementary (Leadership/Careers Program)**
     [no corrections]

   MOTION CARRIED UNANIMOUSLY

4. MOTION by Mr. Taylor, second by Ms. Cason, for approval of the following personnel item for the 2019-2020 school year:

   a. Twelve day laborers to work on summer projects under the direction of the Director of Facilities
   b. Six additional day laborers to work on school configuration, for the Live Oak elementary schools, during the summer, under the direction of the Director of Facilities

   MOTION CARRIED UNANIMOUSLY

5. MOTION by Mr. White, second by Mr. Alcorn, for approval to award the following bid:

   #20-209 Type IIB Panelized Modular Buildings to Mobile Modular (*New*) (Note: Mobile Modular was the only company to submit a bid for this RFP.)

   MOTION CARRIED UNANIMOUSLY

6. MOTION by Mr. Taylor, second by Ms. Cason, for approval of the 2020-2021 Minority Teacher Recruitment Plan. **(pgs. 62-64)**

   MOTION CARRIED UNANIMOUSLY

7. Comments from Student Ambassadors

   Barrett Young and Antonio White thanked everyone for their attendance at the Board meeting.

8. Legal Counsel's Report – No legal matters to report.

9. Superintendent's Report

   Mr. Roush thanked Mr. Huddleston, and his staff, for hosting the Master Board Session earlier, as well as for the Board meeting. He thanked the Board for their support of going self-insured regarding health insurance.

10. Issues and concerns Board members may wish to discuss

- Board members commented on the bold move to go self-insured with health insurance. They thanked everyone for their hard work and dedication.
- Mr. White spoke about concerns from Tallahassee regarding teacher salary increases, potential issue for next year's funding, digital classrooms, and FRS increase. He spoke with Chris Doolin regarding these topics.

The meeting adjourned at 7:15 p.m.

2019-2020 MARCH SURPLUS ITEMS

PROPERTY RECORD #	ITEM DESCRIPTION	ORIGINAL PURCHASE PRICE	ORIGINAL PURCHASE DATE	COST CENTER	REQUESTED DISPOSITION
99004713	CAMERA SURVEILLANCE SYST	$ 5,850.00	3/25/2004	FACILITIES	SURPLUS
99007795	CAMERA SURVEILLANCE SYST	$ 1,500.00	4/25/2013	FACILITIES	SURPLUS
99007796	CAMERA SURVEILLANCE SYST	$ 1,500.00	4/25/2013	FACILITIES	SURPLUS
99008408	CISCO SWITCH	$ 1,385.00	12/9/2016	TECHNOLOGY	SURPLUS
99008421	CISCO SWITCH	$ 1,385.00	12/9/2016	TECHNOLOGY	SURPLUS
99008426	CISCO SWITCH	$ 1,385.00	12/9/2016	TECHNOLOGY	SURPLUS
99008440	CISCO SWITCH	$ 1,408.18	2/10/2017	TECHNOLOGY	SURPLUS
99007436	COMPUTER, BASIC UNIT	$ 1,564.00	2/11/2011	TECHNOLOGY	SURPLUS
99007769	COMPUTER, BASIC UNIT	$ 1,075.00	1/31/2013	TECHNOLOGY	SURPLUS
99006558	COMPUTER, LAPTOP	$ 815.00	3/27/2009	TECHNOLOGY	SURPLUS
99006689	COMPUTER, LAPTOP	$ 1,575.70	4/8/2009	TECHNOLOGY	SURPLUS
99006830	COMPUTER, LAPTOP W DOCKIN	$ 899.00	8/14/2009	TECHNOLOGY	SURPLUS
99007503	COMPUTER, LAPTOP W DOCKIN	$ 882.00	6/3/2011	TECHNOLOGY	SURPLUS
99007587	COMPUTER, LAPTOP W DOCKIN	$ 855.00	8/19/2011	TECHNOLOGY	SURPLUS
99007674	COMPUTER, LAPTOP W DOCKIN	$ 839.00	3/9/2012	TECHNOLOGY	SURPLUS
99007095	LAMINATOR	$ 1,417.74	4/6/2010	BRANFORD ELEMENTARY	SURPLUS
99004577	MIXER, AUDIO VISUAL	$ 1,186.00	10/31/2001	BRANFORD ELEMENTARY	SURPLUS
99005988	PRINTER, LASER	$ 755.00	7/13/2007	TECHNOLOGY	SURPLUS
99007277	PRINTER, LASER	$ 899.98	5/5/2010	TECHNOLOGY	SURPLUS
99007856	PRINTER, LASER	$ 1,854.99	5/1/2014	TECHNOLOGY	SURPLUS
99008002	PRINTER, LASER	$ 870.00	12/18/2014	TECHNOLOGY	SURPLUS
99007724	SCRUBBER, FLOOR	$ 1,536.19	6/13/2012	SUWANNEE ELEMENTARY	SURPLUS
99007763	SERVER	$ 1,050.00	10/23/2012	TECHNOLOGY	SURPLUS
99007910	SWITCH 3750G, CISCO	$ 1,525.00	2/20/2014	TECHNOLOGY	SURPLUS
99008285	SWITCH, LAN BASE	$ 1,475.00	8/18/2016	TECHNOLOGY	SURPLUS
	TOTAL	$ 35,487.78			

Requested By: _____ APPROVED BY: _____

MARK A CARVER,
DIRECTOR OF PROPERTY RECORDS

SUPERINTENDENT

3/24/2020
DATE

BOARD CHAIRMAN

2019-2020 MARCH SURPLUS ITEMS

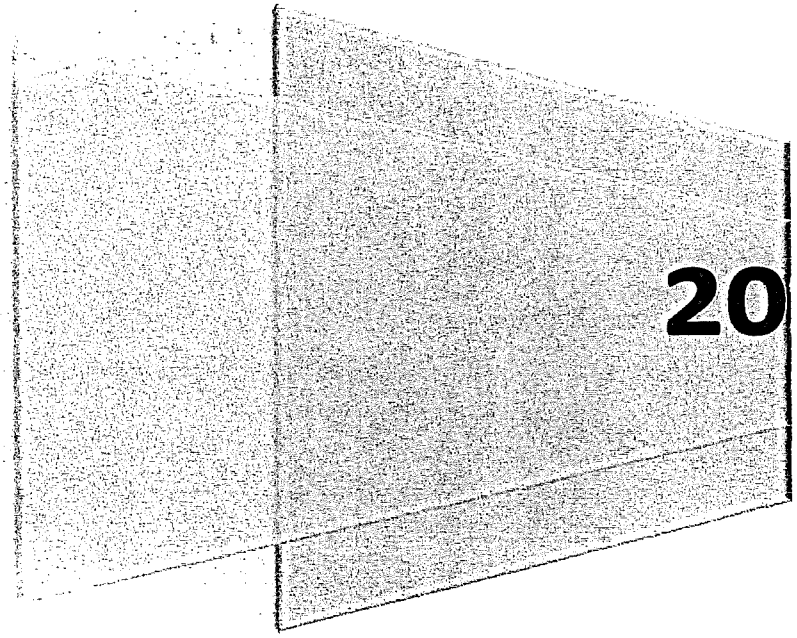
NORTH FLORIDA COLLEGE

North Florida College

Career Pathways Agreements

With

Suwannee County School District



2019-2020

Career and Workforce Education
North Florida College & Suwannee County School District
Career Pathways Articulation Agreement
2019-2020

Articulation is a method of granting college level course credit for learning and skills accomplished as part of secondary school and postsecondary instruction. Suwannee County School District and North Florida College (NFC) will maintain the integrity of their separate programs and enter into this agreement as cooperating educational institutions.

NFC will work with the high school to establish Career Pathways to serve Career and Technical Education (CTE) students. Agreements will be developed during the year and will be amended as agreements are completed.

Student Qualifications
Students must meet all NFC admission requirements and present evidence of the following:

1. Successful completion of the articulated secondary or postsecondary technical program of study with a grade of 3.0 (on a 4.00 scale) or better.

2. Completion of North Florida College Application for Admission and placement testing requirements as well as additional specific program requirements.

3. Graduation from secondary or postsecondary school no more than 24 months prior to enrollment at North Florida College.

4. Enrollment in an A.S.; College Credit Certificate; or Postsecondary Career Certificate program appropriate to the credit to be awarded for the specified exemption exam or industry certification.

5. Courses that make up an Associate in Science degree that are included in a College Credit Certificate program may also receive articulated credit in the same courses for the College Credit Certificate program.

Procedure

1. The school guidance department provides evidence of completion to the district Career and Workforce Education contact who forwards the information to the NFC's Career Pathways contact.

2. High School Guidance Counselors will issue a letter to students who have successfully completed the secondary Career Pathway program as reported by the district guidance department contact informing the student of the Career Pathway articulation agreement opportunities.

3. NFC will award/enter high school earned credits under this agreement after the student has completed 12 semester hours or 150 clock hours in the program in which the degree or certificate is to be awarded.

Conditions of Agreement

1. Suwannee High School, Branford High School, and RIVEROAK Technical College faculty members and NFC faculty members will review course textbooks, syllabi, and other institutional materials as needed in order to develop articulated programs of study.

2. Suwannee High School, Branford High School, and RIVEROAK Technical College and NFC will review the list of articulated programs of study annually. Necessary changes will be made based on changes in program offerings and outcomes.

3. Suwannee High School, Branford High School, and RIVEROAK Technical College and NFC will cooperate in publicizing this program to school students in order to ensure that they are aware of these opportunities.

Credit Articulation

1. To receive articulated credit for CGS 1100, CGS 2515 and/or, ACG 2450 the following must be completed prior to such credit being awarded:
   a. The most recent version of Microsoft Office Word and PowerPoint will articulate credit for CGS 1100 - Computer Applications 1.
   b. The most recent version of Microsoft Excel will articulate credit for CGS 2515 - Spreadsheet Applications for Business.
   c. Certification in Quickbooks Pro 2016 or later will articulate credit for ACG 2450 - Accounting Using Quickbooks.

2. Comprehensive examinations may be required for students who have not completed the industry certifications listed on this articulation.

3. NFC will not charge tuition for any courses for which a student receives articulated credit.

This agreement is valid for the current school year and may be terminated at any time by either Suwannee County School District or North Florida College through providing thirty (30) days' notice. In the event of a termination, Suwannee County School District agrees that students who are currently in secondary courses and working toward fulfilling the competencies or who are in their first semester at NFC will be allowed to complete the articulated credit.

This agreement will remain in effect and will be reviewed annually by the articulation committee and incorporated into the dual enrollment articulation agreement. The articulation committee will be composed of the Dean of Academic Affairs, North Florida College; Associate Dean of Economic Development and Workforce Education of North Florida College; Registrar, North Florida College; Coordinator of Dual Enrollment, North Florida College; Representative for Suwannee County School District, and others as so designated.

High School Career Pathway	Associated Industry Certification	NFC Program of Study/ Certificate	Assessment	Articulated Credit
Nursing Assisting 8417210 8417100 Health Science Anatomy & Physiology 8417110 Health Science Foundations OCP A	**FDMQA002** – Certified Nursing Assistant (Not required for articulation purposes)	**Medical Assisting – PSAV**	Completion of the high school program of study. Student must receive a **grade of "B"** or better in each class in the **Technical Core** and must successfully complete all academics with an **overall GPA of "C" or higher.**	HSC 0003 Basic Healthcare Worker (90 clock hours) OCP A
Early Childhood Education E300100 8405110 Early Childhood Education 1 8405120 Early Childhood Education 2 8405130 Early Childhood Education 3	**NRAEF003** – Certified Professional Food Manager (SERVESAF) (Not used for articulation purposes) **8405100** Early Childhood Professional Certificate (Part 1 – 40 hours – DFC transcript required)	**Early Childhood Education - PSAV**	Completion of the high school program of study. Student must receive a grade of "B" or better in each class in the Technical Core and must successfully complete all academics with an overall GPA of "C" or higher.	HEV 0870 Child Care Worker 1 (150 Clock hours)
Surgical Technology – H170211 HSC0003 Basic Health Care Worker OCP A	**NSTSA001** – Certified Surgical Technologist (CST) (Not required for articulation)	**Medical Assisting – PSAV**	Completion of the high school program of study. Student must receive a grade of "B" or better in each class in the Technical Core and must successfully complete all academics with an overall GPA of "C" or higher.	HSC 0003 Basic Healthcare Worker (90 clock hours) OCP A

IN WITNESS WHEREOF, the School Board of Suwannee County, Florida and The Board of Trustees, North Florida College, Suwannee, Florida have adopted this agreement and caused it to be executed by their respective chairs and chief executive officers, in accordance with Section 1007.271, F.S., Dual Enrollment Articulation Agreements.

1/21/2020
Date

Chair, Board of Trustees,
North Florida College, Florida

1/21/2020
Date

President, North Florida College

Date

Chair, District School Board of Suwannee County

Date

Superintendent, Suwannee County School District

Date

Director, Career & Technical Education, Suwannee County School District

"Approved as to Form and Sufficiency
BY_____
Leonard J. Dietzen, III
Rumberger, Kirk & Caldwell, P.A.
Suwannee School Board Attorney"

~~INFO ONLY~~

~~North~~
~~Honda~~
NORTH FLORIDA COLLEGE

SCSB ~~2019-96~~2020-85 (~~REVISED/RENEWAU~~REVISED/RENEWAL)

North Florida

~~COMMUNITY COLLEGE~~

~~*Smatt'College.* *Big PossittiStm.*~~

~~North Florida Community~~ College

Career Pathways Agreements

With

~~District School Board of~~ Suwannee

County School District

2019-2020

INFO ONLY

Career and ~~Technical~~ Workforce Education
North Florida ~~Community~~ College & ~~District School Board of~~ Suwannee County School District
Career Pathways Articulation Agreement
~~2018-2019~~2019-2020

Articulation is a method of granting college level course credit for learning and skills accomplished as part of secondary school ~~instruction. The secondary school~~ and postsecondary instruction. Suwannee County School District and North Florida ~~Community~~ College (~~NFCC~~NFC) will maintain the integrity of their separate programs and enter into this agreement as cooperating educational institutions.

~~NFCC~~ NFC will work with the high school to establish Career Pathways to serve Career and Technical Education (CTE) students. ~~Agreement~~ Agreements will be developed during the year~~,~~ and ~~this agreement~~ will be amended as agreements are completed.

Student Qualifications
Students must meet all ~~NFCC~~ NFC admission requirements and present evidence of the following:

1. Successful completion of the articulated secondary or postsecondary technical program of study with a grade of 3.0 (on a 4.00 scale) or better.
2. Completion of North Florida ~~Community~~ College Application for Admission and placement testing requirements as well as additional specific program requirements.
3. Graduation from secondary or postsecondary school no more than 24 months prior to enrollment at North Florida ~~Community~~ College.
4. Enrollment in an A.S.; College Credit Certificate; or ~~Post-Secondary Adult Vocational~~ Postsecondary Career Certificate program appropriate to the credit to be awarded for the specified exemption exam or industry certification.
5. Courses that ~~are~~ make up an Associate in Science degree that are included in a College Credit Certificate program may also receive articulated credit in the same courses for the College Credit Certificate program.

Procedure

1. The ~~secondary~~ school guidance department provides evidence of completion to the district Career and ~~Technical~~ Workforce Education contact who forwards the information to the ~~NFCC's~~ NFC's Career Pathways contact.
2. ~~Individual~~ High School Guidance Counselors will issue a letter to students who have successfully completed the secondary Career Pathway program as reported by the district ~~high school~~ guidance department contact informing the student of the Career Pathway articulation agreement opportunities.

3. ~~NFCC~~ NFC will ~~award/~~ award/enter high school earned credits under this agreement after the student has completed 12 semester hours or 150 clock hours in the program in which the degree or certificate is to be awarded.

Conditions of Agreement

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2. Suwannee ~~and~~ High School, Branford High ~~Schools and NFCC~~ School, and RIVEROAK Technical College and NFC will review the list of articulated programs of study annually. ~~Changes~~ Necessary changes will be made ~~as necessary~~ based on changes in program offerings and outcomes.

3. Suwannee ~~and~~ High School, Branford High ~~Schools and NFCC~~ School, and RIVEROAK Technical College and NFC will cooperate in publicizing this program to ~~secondary~~ school students in order to ensure that they are aware of these opportunities.

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   ~~industry certifications listed on this articulation.~~

3. ~~NFCC~~ NFC will not charge tuition for any courses for which a student receives articulated credit.

This agreement is valid for the current school year and may be terminated at any time by either ~~District School Board of~~ Suwannee County School District or North Florida ~~Community~~ College through providing thirty (30) days~~²~~ * notice. In the event of a termination, ~~both schools agree~~ Suwannee County School District agrees that students who are currently in secondary courses and working toward fulfilling the competencies or who are in their first semester at ~~NFCC~~ NFC will be allowed to complete the articulated credit.

This agreement will remain in effect and will be reviewed annually by the articulation committee and incorporated into the dual enrollment articulation agreement. The articulation committee will be composed of the Dean of Academic Affairs, North Florida ~~Community~~ College; Associate Dean of Economic Development and ~~Technical Programs,~~ Workforce ~~and Career Technical~~ Education of North Florida ~~Community~~ College; Registrar, North Florida ~~Community~~ College; Coordinator of Dual Enrollment, North Florida ~~Community~~ College; ~~District~~ Representative for ~~District School Board of~~ Suwannee County School District, and others as so designated.

INFO ONLY

School Career Pathway	Associated Industry Certification	~~NFCC~~ NFC Program of Study/ Certificate	Assessment	Articulated Credit
~~lth~~ Nursing Assisting ~~1474308~~417210 -~~8~~417100 Health Science & Physiology -~~8~~417110 Health Science ~~OCP~~ OCR A	**FDMQA002** - Certified ~~Nursins~~ Nursing Assistant (Not ~~reauired~~ required for articulation ~~purposespurposes~~ourooses)	**Medical Assisting– PSAV**	Completion of the high school program of study. Student must receive a **grade of "B"** or better in each class in the **Technical Core** and must successfully complete all academics with an **overall GPA of "C" or higher.**	HSC 0003 Basic Health Worker (90 clock hours OCP A
dhood Education ~~503210~~E300100 ~~8~~405110 Early Childhood 1 ~~8~~405120 Early Childhood 2 ~~8~~405130 Early Childhood 3	~~NRAEF003-~~NRAEF003- - Certified Professional Food Manager (~~SERVESAFE~~SERVESAF) (Not used for articulation ~~purposespurposes~~ourooses) **8405100** Early Childhood Professional Certificate (Part 1-40 hours - DFC transcript required)	**Early Childhood Education - PSAV**	Completion of the high school program of study. Student must receive a grade of "B" or better in each class in the Technical Core and must successfully complete all academics with an overall GPA of "C" or higher.	HEV 0870 Child Care Worker 1 (150 Clock hc
echnology - H170211 Basic Health Care ~~CP~~ OCR A	~~NSTSA001-~~NSTSA001- - Certified Surgical Technologist (CST) (Not required for articulation)	**Medical Assisting– PSAV**	Completion of the high school program of study. Student must receive a grade of "B" or better in each class in the Technical Core and must successfully complete all academics with an overall GPA of "C" or higher.	HSC 0003 Basic Health Worker (90 clock hours OCP A

INFO ONLY

INFO ONLY

~~SS WHEREOF, the School Board of Suwannee County, Florida and The Board of Trustees, North Florida Community College, Suwanne~~
~~ed this agreement and caused it to be executed by their respective chairs and chief executive officers, in accordance with Section 1007.271,~~

~~n~~
~~s~~

Michael R. Williams

~~Chair, Board of Trustees,~~
~~North Florida Community College,~~
~~Florida~~

~~2oi^~~

President, North Florida Community College

Chair, District School Board of Suwannee County

~~2019~~

~~Superintendent, Suwannee County School District~~

~~2019~~

~~Career & Technical Education Coordinator, Suwannee County~~

~~)Ho/lj~~

INFO ONLY

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1 7.1
Date

Chair, Board of Trustees,
North Florida College, Florida

f|?i|Zoto
Date

President, North Florida College

Date

Chair, District School Board of Suwannee County

Date

Superintendent, Suwannee County School District

Date

Director, Career & Technical Education, Suwannee County School District

"Approved as to Form and Sufficiency
BY
Leonard J. Dietzen, III
Rumberger, Kirk & Caldwell, P.A.
Suwannee School Board Attorney"

INFO ONLY

INFO ONLY

Summary Report	
Title	**compareDocs Comparison Results**
Date & Time	3/2/2020 8:58:12 AM
Comparison Time	2.13 seconds
compareDocs version	v4.3.400.130

Sources	
Original Document	SCSB 2019-96 NFCC Career Pathways Fully Executed.pdf
Modified Document	SCSB 2020-85 NFC Career Pathways.pdf

Comparison Statistics	
Insertions	46
Deletions	43
Changes	45
Moves	0
Font Changes	0
Paragraph Style Changes	0
Character Style Changes	0
TOTAL CHANGES	134

Word Rendering Set Markup Options	
Name	Standard
Insertions	
~~Deletions~~	
Moves / ~~Moves~~	
Font Changes	
Paragraph Style Changes	
Character Style Changes	
Inserted cells	
Deleted cells	
Merged cells	
Changed lines	Mark left border.
Comments color	By Author.
Balloons	False

compareDocs Settings Used	Category	Option Selected
Open Comparison Report after saving	General	Always
Report Type	Word	TrackChanges
Character Level	Word	False
Include Headers / Footers	Word	True
Include Footnotes / Endnotes	Word	True
Include List Numbers	Word	True
Include Tables	Word	True
Include Field Codes	Word	True
Include Moves	Word	False
Flatten Field Codes	Word	True
Show Track Changes Toolbar	Word	True
Show Reviewing Pane	Word	True
Update Automatic Links at Open	Word	[Yes / No]
Summary Report	Word	End
Detail Report	Word	Separate (View Only)
Document View	Word	Print
Remove Personal Information	Word	False

2020- 2021 Inter District Agreement

LAFAYETTE COUNTY SCHOOL DISTRICT

Inter-District Private School Services Agreement

Agreement for School Year 2020 – 2021 and terminating by mutual agreement

Lafayette County School District

The Federal Elementary and Secondary Education Act (ESEA), in Title I Section 1120 and associated regulations (200.62(b)(1)(i) defines private school children as those who reside in participating public school attendance areas of a school district, regardless of whether the private school they attend is located in the same district in which they reside.

Therefore, the school district in which the child resides is responsible for providing services to the child, or to arrange to have services provided by another school district. For purposes of this agreement, the district in which the student resides will be called the **Residing District.** The district in which the student attends school will be called the **Receiving District.**

The purpose of this agreement is to provide for services to private school students who reside in Lafayette County School District but attend school in another district.

Responsibilities of Receiving District

1. Conduct all consultation requirements under S.200.63 for all private schools within the boundaries of its district.
2. Upon identifying a student attending an eligible private school in the Receiving District, inform the Resident district using Appendix B or another method that provides comparable information.
3. Upon confirmation that the student is address-eligible, provide services to the identified students according to the plan developed in consultation with the private school.
4. Provide equitable services to the parents of identified students.
5. Provide equitable professional development to the regular teachers of identified students.
6. Provide all necessary administrative services to carry out the items above.

7. Invoice the Resident District for services provided (exclusive of administrative costs); OR arrange for reciprocal services in an equal monetary amount to private school students for whom the roles of Receiving and Resident District are reversed.

Responsibilities of Resident District

1. Upon notification of a student by the Receiving district, verify in writing (email is acceptable) whether or not the student is address-eligible for Title I services.
2. Annually reserve equitable funds for any verified eligible private school students identified by a Receiving District.
3. Annually reserve equitable funds for the parents of identified private school students.
4. Annually reserve equitable funds for the regular teachers of identified private school students.
5. Notify the Receiving District regarding the amount of funds reserved.
6. Upon invoice from the Receiving District, pay the amount due for services rendered to eligible private school students, parents, and teachers; OR
7. Provide reciprocal services in an equal amount to private school students for whom the roles of Receiving and Resident District are reversed.

By our signatures on this document, the below signed agree that private school students, parents, and teachers will be provided equitable services and that all requirements of ESEA and related regulations and guidance will be met by the Receiving District on behalf of the Residing District, in return for compensation from the Resident District.

Signature Alissa Hingson

Name Alissa Hingson

Title Director of Teaching & Learning Services

Date 2-11-2020

Resident District: Lafayette County School District

Signature _____

Name Ted L. Roush

Title Superintendent of Schools

Date _____

Receiving District: Suwannee County School District

_____
Chairperson, Suwannee County School Board

"Approved as to Form and Sufficiency
BY _____
Leonard J. Dietzen, III
Rumberger, Kirk & Caldwell, P.A.
Suwannee School Board Attorney"

RECEIVED
JAN 0 3 2020

TRAVELERS

Travelers Casualty and Surety Company of America
Hartford, CT 06183

PUBLIC OFFICIAL BOND - FOR DEFINITE TERM

BOND NO. 107014084

KNOW ALL MEN BY THESE PRESENTS, That we ED DASILVA d/b/a -SUWANNEE COUNTY SCHOOL BOARD MEMBER of 1729 WALKER AVE. SW SUITE 200 LIVE OAK, FL 32064, as Principal, and Travelers Casualty and Surety Company of America, a corporation of CT, as Surety are held and firmly bound unto FLORIDA SECRETARY OF STATE in the penal sum of Twelve Thousand ($12,000.00) Dollars, lawful money of the United States of America, for the payment of which well and truly to be made, said principal binds himself/herself, his/her heirs, executors, administrators and assigns, and said Surety binds itself, its successors and assigns, jointly and severally, firmly by these presents.

SEALED and dated this 23 day of December, 2019.

WHEREAS, the said principal has been ☐ elected or ☐ appointed to the office of: Public Official Bond - Definite Term for a definite term beginning November 20, 2019 and ending November 17, 2020 and is required to furnish a bond for the faithful performance of the duties of the said office or position.

NOW, THEREFORE THE CONDITION OF THIS OBLIGATION is such that if the above bounden Principal shall (except as hereinafter provided) faithfully perform the duties of his/her said office or position during the said term, and shall pay over to the persons authorized by law to receive the same all moneys that may come into his/her hands during the said term without fraud or delay, and at the expiration of said term, or in case of his/her resignation or removal from office, shall turn over to his/her successor all records and property which have come into his/her hands, then this obligation to be null and void; otherwise to remain in full force and effect.

PROVIDED, HOWEVER, that the above named Surety shall not be liable hereunder for any loss of any public fund resulting from the insolvency of any bank or banks in which said funds are deposited; and, if this provision shall be held void, this entire bond shall be void.

AND PROVIDED FURTHER, that the Surety may cancel bond at any time during the said term by giving to the obligee a written notice of its desire so to cancel and at the expiration of thirty (30) days from the receipt of such notice by the obligee the surety shall be completely released as to all liability thereafter accruing. If this provision shall be held void, this entire bond shall be void.

WITNESS:

Karen Sager

ED DASILVA

(Seal)
(Principal)

Travelers Casualty and Surety Company of America

By:

Joseph L. Nespor — Attorney-in-Fact

S-2232-1 (07-97)

TRAVELERS

Travelers Casualty and Surety Company of America
Hartford, CT 06183

PUBLIC OFFICIAL BOND - FOR DEFINITE TERM

BOND NO. 107014095

RECEIVED
JAN 03 2020

KNOW ALL MEN BY THESE PRESENTS, That we TIM ALCORN of 1729 WALKER AVE. SW SUITE 200 LIVE OAK, FL 32064, as Principal, and Travelers Casualty and Surety Company of America, a corporation of CT, as Surety are held and firmly bound unto FLORIDA SECRETARY OF STATE in the penal sum of Twelve Thousand ($12,000.00) Dollars, lawful money of the United States of America, for the payment of which well and truly to be made, said principal binds himself/herself, his/her heirs, executors, administrators and assigns, and said Surety binds itself, its successors and assigns, jointly and severally, firmly by these presents.

SEALED and dated this 23 day of December, 2019.

WHEREAS, the said principal has been ☐ elected or ☐ appointed to the office of: Public Official Bond - Definite Term for a definite term beginning November 20, 2019 and ending November 17, 2020 and is required to furnish a bond for the faithful performance of the duties of the said office or position.

NOW, THEREFORE THE CONDITION OF THIS OBLIGATION is such that if the above bounden Principal shall (except as hereinafter provided) faithfully perform the duties of his/her said office or position during the said term, and shall pay over to the persons authorized by law to receive the same all moneys that may come into his/her hands during the said term without fraud or delay, and at the expiration of said term, or in case of his/her resignation or removal from office, shall turn over to his/her successor all records and property which have come into his/her hands, then this obligation to be null and void; otherwise to remain in full force and effect.

PROVIDED, HOWEVER, that the above named Surety shall not be liable hereunder for any loss of any public fund resulting from the insolvency of any bank or banks in which said funds are deposited; and, if this provision shall be held void, this entire bond shall be void.

AND PROVIDED FURTHER, that the Surety may cancel bond at any time during the said term by giving to the obligee a written notice of its desire so to cancel and at the expiration of thirty (30) days from the receipt of such notice by the obligee the surety shall be completely released as to all liability thereafter accruing. If this provision shall be held void, this entire bond shall be void.

WITNESS: Karen Lager

TIM ALCORN Tim Alcorn (Seal)
(Principal)

Travelers Casualty and Surety Company of America

By: Joseph L. Nespor
Joseph L. Nespor Attorney-in-Fact

S-2232-1 (07-97)

JERRY TAYLOR
DISTRICT 1
CATHERINE CASON
DISTRICT 2
TIM ALCORN
DISTRICT 3

ED DA SILVA
DISTRICT 4
RONALD WHITE
DISTRICT 5
LEONARD DIETZEN, III
BOARD ATTORNEY

1740 Ohio Avenue, South
Live Oak, Florida 32064
Telephone: (386) 647-4600 • Fax: (386) 364-2635

TED L. ROUSH
Superintendent of Schools

MEMORANDUM

TO: Ted L. Roush, Superintendent of Schools

FROM: Walter Boatright, Director of Human Resources WB

DATE: February 10, 2020

RE: Human Resources Transactions for March 24, 2020

Regular Meeting

RECOMMENDATION:

Pursuant to Section 1012.27 (1A) (1B), *Florida Statutes*, the Superintendent hereby submits the following written personnel recommendations.

SUWANNEE COUNTY SCHOOL BOARD
Human Resources Transactions
March 31, 2020

TO: District School Board of Suwannee County

FROM: Ted L. Roush
Ted L. Roush, Superintendent of Schools

Pursuant to Section 1012.27 (1A) (1B), Florida Statutes, I hereby submit the following written personnel recommendations.

RECOMMENDATIONS FOR THE 2019-2020 SCHOOL YEAR:

RESIGNATION: INSTRUCTIONAL:

Suwannee High School:
Eduardo Moreno, Teacher, effective March 26, 2020

RETIREMENTS: INSTRUCTIONAL:

Branford High School:
Daniel Taylor, Teacher, effective, May 29, 2020
(Revision from October 22, 2019 HR Transactions)

Suwannee High School:
Sid Allen, Teacher, effective, August 4, 2020
Sandra Young-Hurst, Teacher, effective August 10, 2020

RETIREMENT: NON-INSTRUCTIONAL/SCHOOL RELATED:

Transportation:
Earnestine Riley, Bus Driver, effective September 30, 2020

RECOMMENDATIONS: INSTRUCTIONAL:

SUPPLEMENTARY:

NAME	POSITION	LOCATION	REPLACES
John Blalock	Head Boys' Varsity Basketball Coach	BHS	
Brian Bullock	Head Boys' Track Coach	SHS	BJ Cohen
Erin Clark	Athletic Trainer	BHS	
Erin Clark	Girls' Track Coach	BHS	
Timothy Clark	Assistant Athletic Director	BHS	
Timothy Clark	Boys' Track Coach	BHS	
*Chris Ferguson	Boys' JV Head Basketball Coach	BHS	
Jimmie Green	Boys' JV Soccer Coach	SHS	
Kyler Hall	Assistant Track Coach	SHS	Nahjawan Dukes

Brooke Harrelson	Girls' JV Head Basketball Coach	BHS	
Frank Hufty	Head Flag Football Coach	SHS	
Laura Kinsel	JV Flag Football Coach	SHS	
Alex O'Quinn	Athletic Director	BHS	
Alex O'Quinn	Head Baseball Coach	BHS	
Josh McInnis	JV Baseball Coach	BHS	
Brad Mincks	Assistant Baseball Coach	BHS	
*John Perry	Girls' Varsity Assistant Basketball Coach	BHS	
Malcolm Pollock	Head JV Basketball Coach	SHS	Travis Henry
Oscar Saavedra	Head Varsity Softball Coach	BHS	
Alex Scarborough	Girls' Intramural Basketball	SMS	
Brad Scarborough	Boys' Intramural Basketball	SMS	
Carla Suggs	Girls' Varsity Head Basketball Coach	BHS	
Roger Ladon Terry	Head JV Softball Coach	BHS	
Chris Tomlinson	M/S Assistant Baseball Coach	BHS	
Misty Ward	Girls' Weightlifting Coach	BHS	
Brian Williamson	Head M/S Baseball Coach	BHS	
Kenneth Jay Wingate	Boys' M/S Head Basketball Coach	BHS	
Amy Yarick	Girls' Head Track Coach	SHS	Keith Cherry

**payment contingent upon completing certification*

LEAVE OF ABSENCE (ILLNESS IN THE LINE OF DUTY):

Branford Elementary School:
Juettie L. Kelley, Teacher, January 7, 2020, January 21, 2020, February 13, 2020, and February 26, 2020, for a total of 17.75 hours.
Jennifer Winnett, Teacher, December 17, 2010, January 22, 2020, January 30, 2020, February 5, 2020, and February 21, 2020, for a total of 17 hours.

LEAVE OF ABSENCE (PERSONAL/MATERNITY LEAVE):

Branford Elementary School:
Mandi Howard, Teacher, tentatively, March 16, 2020 through April 17, 2020, with pay, with the option of returning sooner if released by the doctor.

RECOMMENDATIONS: NON-INSTRUCTIONAL/SCHOOL RELATED:

Branford High School:
Leah Cribb, Food Service Worker, 3 hour, effective March 9, 2020
REPLACES: Donna Rightmire
Donna Rightmire, Food Service Worker, 6 hour, effective March 2, 2020
REPLACES: Deborah Crawford
(Revision from February 25, 2020 HR Transactions due to being reported at Branford Elementary School)

Information Technology:
Landon Messer, IT Technician, effective March 16, 2020
REPLACES: Edmund (Buddy) Thompson

Suwannee Elementary School:
Erika Delgado, Food Service Worker, 8 hour, effective March 17, 2020
REPLACES: Renee Perivolaris

Suwannee High School:
Dana Swords, Food Service Worker, 3 hour, effective March 9, 2020
REPLACES: Natelle Smith

Suwannee Primary School:
Brittany Lock, Lead Pre-K Paraprofessional, effective March 2, 2020
REPLACES: Betty Riley

Transportation:
Deseree Ansley, Bus Driver, effective February 24, 2020
REPLACES: Amanda Register

LEAVE OF ABSENCE (ILLNESS IN THE LINE OF DUTY):

Branford Elementary School:
Sharon C. Richardson, Registrar, February 7, 10, 18, 21, 2020, for a total of 17.25 hours.
Edna Roberts, ESE Pre-K Paraprofessional, February 14, 2020, February 18-21, 2020, February 25-28, 2020, and March 2, 2020, for a total of 72.5 hours.

LEAVE OF ABSENCE (PERSONAL LEAVE):

Transportation:
Toni Hansard, Bus Driver, tentatively, February 20, 2020 through March 31, 2020, without pay.

MENTOR	MENTEE	SCHOOL
Brooke Cox-Knowles	Jazmine Marrero Guerra	SOS

SUBSTITUTES:

The following to serve as Substitute Bus Attendants:

Richard Banks Paul Sweeney

The following to serve as a Substitute Bus Driver:

Christopher Dean

MISCELLANEOUS:

Student Services:

Approval of the following Paraprofessionals to work temporary in the migrant program 2 hours per week District-wide in these grant funded positions.

Susana Beltres	Stephanie Eady	Caitlin Hester	Amanda Hurst
Jazmin Marrero	Jennifer McMillan	Naela Salazar	Tiffany Sanders

VOLUNTEERS:

Christopher Aretino	Felicia Everett	Esperansa Luviano
Summer Bell	Celia Evitt	Alycia Manley
Sandra Bonds	Richard Gamble	Vanessa Maysonet
Carla Bryant	Janisleyui Garcia	Scott Miller
Devon Burns	Kelly Garrison	Ashley O'Quinn
Ryan Combee	Carolyn Griffis	Lynda Owens
David Cusick	Brenda Henson	Trevita Riley
Paxton Daniel	Zahra Hines	Benjamin Smith
Sandie Danko	Joan Howell	Jaclyn Touchton
Tiffany Dear	Candice Hudson	Dana VanEtten
Robert Dear III	Amanda Johnson	Andrea Walker
Alexander Del Valle	Tina Jones	Jay Watson
Zayra Diaz	Meaghann Lemus	Patrick Waugaman
Teisha Dukes	Jonathan Lugo	
Tamara Ely	Amanda Luviano	

End of List
2019-2020
School Year

CLINICAL EDUCATION AGREEMENT
BETWEEN
SHANDS TEACHING HOSPITAL AND CLINICS, INC.
AND
RIVEROAK TECHNICAL COLLEGE

THIS AGREEMENT, **effective as of the date of last signature below (the "Effective Date")**, is entered into by and between SHANDS TEACHING HOSPITAL AND CLINICS, INC. d/b/a UF HEALTH SHANDS HOSPITAL ("SHANDS") and **RIVEROAK TECHNICAL COLLEGE** ("BOARD" or "COLLEGE").

This is a mutual agreement between SHANDS and BOARD to provide students enrolled in BOARD's **SURGICAL TECHNOLOGY PROGRAM** Educational Program ("PROGRAM") supervised learning experiences in the care of patients in accordance with the provisions set forth in this Agreement.

It is mutually covenanted and agreed between the parties hereto as follows:

I. Responsibilities of SHANDS:

A. SHANDS, and the physicians with practice privileges with SHANDS, have ultimate responsibility for all patient care activities.

B. To provide to faculty and students of the BOARD available facilities and services in the planned learning experience.

C. To provide conference and meeting rooms as required and needed, as space is available.

D. To share in the responsibilities for the educational supervision of students in the PROGRAM.

E. To provide faculty and students in the PROGRAM access to emergency medical care when on SHANDS' premises. Payment for such care will remain the responsibility of the individual receiving treatment.

F. It is understood that SHANDS is not an agency or institution acting for BOARD, and that records that may be created and maintained by SHANDS on students are not education records as defined by the Family Educational Rights and Privacy Act ("FERPA"). To the extent SHANDS maintains education records at the request of BOARD, SHANDS agrees that it will not release, except to the BOARD or its agents or employees, such information , without the written consent of the student or as otherwise provided in FERPA.

G. To forward orientation material to BOARD to be handed out to students and faculty enrolled in the PROGRAM and to conduct its own on site orientation to SHANDS for incoming BOARD students and faculty.

II. Responsibilities of BOARD:

A. The BOARD has ultimate responsibility for all instructional activities of and for the grading of the students.

B. Selection of students under the various programs. Classes shall not exceed the teaching capabilities of SHANDS. SHANDS reserves the right to specify the number of students in a given program for optimum use of existing facilities. BOARD shall notify the appropriate SHANDS clinical department within 72 hours of any student's withdrawal from the PROGRAM. The specific number of students to be assigned to the PROGRAM, the scheduling of classes and other learning activities, the faculty's accessibility to the students, and other issues unique to the relationship will be set forth in writing and agreed to by the parties prior to the initiation of the PROGRAM.

C. To comply with established policies and practices of SHANDS, including all applicable legislation and regulations.

D. To recommend students and faculty to SHANDS in a manner consistent with State and Federal laws relating to non-discrimination.

E. To maintain standards of the PROGRAM as recommended and prescribed by all governing bodies regulating the PROGRAM.

F. To employ qualified individuals as faculty members, and give faculty members and students orientation material, as previously provided by SHANDS, prior to reporting to SHANDS. PROGRAM shall contact the appropriate SHANDS departmental representative to ascertain any documentation that may be required for faculty members who assume direct student supervision of patient care activities.

G. To ensure that students and faculty with direct supervision responsibilities comply with SHANDS requirements as set forth in Exhibit A, including but not limited to physical examinations, tuberculosis screening, certain immunizations, AIDS training, CPR training, health insurance, HIPAA training and background checks, prior to entrance upon premises under the PROGRAM.

H. To maintain the required degree of discipline among its students and faculty, giving full consideration to the institution's standard of conduct and performance. SHANDS may, at any time, withdraw or exclude any faculty or student from its facilities, premises or clinical areas, whose conduct or performance is not, or has previously not been, in accordance with PROGRAM or SHANDS departmental standards, or whose conduct or performance is, or has previously been, unprofessional or detrimental to either SHANDS or the BOARD. Written report of the circumstances of the withdrawal or exclusion shall be submitted to the appropriate BOARD administrator.

I. Classes shall be programmed within the capabilities of SHANDS.

J. To maintain individual records of class and practicum student competency and health.

K. Where applicable, to prepare any rotational plans for services to be used for experience and to secure the approval of this plan from SHANDS prior to the beginning of the educational PROGRAM within the facilities. Major changes made in the plans will not be effective until such time as they are approved by SHANDS.

L. To require its faculty and students to hold as confidential any patient information acquired. Any disclosure of patient information must be in accordance with Shands policy, Section 395.3025, Florida Statutes, and other applicable law.

M. For faculty with direct supervision responsibilities at SHANDS, BOARD shall at all times maintain professional liability insurance coverage in the minimum amount of one million dollars ($1,000,000) per occurrence and three million ($3,000,000) aggregate with an insurance company with a minimum Best Rating of "A." BOARD may satisfy this requirement by demonstration of self-insurance deemed fiscally sound by an independent casualty actuary. Such insurance or self-insurance shall be an occurrence based policy, or a claims based policy maintained for the Statute of Limitations period as set forth in Section 95.11, Florida Statutes. BOARD shall demonstrate compliance with this section by providing SHANDS with a Certificate of Insurance evidencing such coverage prior to the faculty member's arrival at SHANDS. BOARD will provide evidence of such insurance at any time on reasonable request.

N. To ensure that students shall at all times maintain professional liability insurance coverage in the minimum amount of one million dollars ($1,000,000) per occurrence and three million ($3,000,000) aggregate. Such insurance shall be an occurrence based policy, or a claims based policy maintained for the Statute of Limitations period, as set forth in Section 95.11, Florida Statutes. Student shall demonstrate compliance with this section by providing SHANDS with a Certificate of Insurance evidencing such coverage prior to his or her arrival at SHANDS. Student will provide evidence of such insurance at any time on reasonable request.

O. To ensure that a criminal background investigation in the student's state of residence for the prior seven years or, if the student is under the age of twenty-five (25), since the age of eighteen is conducted for each student prior to the student's assignment to the hospital pursuant to this Agreement. BOARD shall

notify SHANDS of any and all criminal convictions ascertained through the criminal background investigation.

III. General Conditions

A. SHANDS and the BOARD agree that each shall be treated for all purposes as independent contractors and that all students under the PROGRAM shall remain agents or students of the BOARD. The BOARD agrees that it will not act, or represent that it is acting, as an agent of SHANDS, or incur any obligations on the part of SHANDS, without first obtaining express written authority from SHANDS. This Agreement is not intended and shall not be construed to create the relationship of agency, partnership, joint venture, or association between SHANDS and BOARD, or to create an employment relationship between SHANDS and BOARD or SHANDS and the students in the PROGRAM.

B. BOARD agrees that it will not use the name of SHANDS in any advertising or commercial without first obtaining the express written authorization from SHANDS.

C. SHANDS and the BOARD agree that this Agreement shall continue in effect for two (2) years and shall be automatically renewed from year to year thereafter; provided, however, that either party may terminate this Agreement at any time by giving the other party notice in writing at least ninety days prior to the intended termination date. Provided further, that students currently enrolled in the PROGRAM shall be permitted to complete the course. Modification of this Agreement shall be made by mutual written consent of both parties. A memorandum noting the modification shall be attached to the Agreement and shall include the date and signatures of parties agreeing to it.

D. SHANDS and the BOARD agree that executed copies of this Agreement shall be placed on file with the appropriate Vice President of SHANDS and the Superintendant of the BOARD.

E. All notices by either party required or permitted by this Agreement shall be in writing and delivered by registered or certified mail with the United States Postal Services, postage prepaid, return receipt requested, by overnight deliver (for which evidence of delivery is obtained by sender), or by hand delivery, to the representatives specified herein.

If to the BOARD / College:

Attn: **Ted L. Roush**
Superintendent of the Board
1740 Ohio Ave South
Live Oak, FL 32064
(386) 647-4600
ted.roush@suwannee.k12.fl.us

If to Shands:

Attn: **Jean Bulmer, DNP, RN-BC**
Admin Director, Nursing Education
PO Box 100335
Gainesville, FL 32610
352.265.0194
bulmej@shands.ufl.edu

F. This Agreement is nonexclusive. The parties reserve the right to enter into similar Agreements with other institutions.

G. The terms set forth in this Agreement constitute all the terms and conditions agreed upon by the parties hereto and no other terms and conditions shall be valid and binding on the parties hereto unless reduced to writing and executed by the parties hereto.

H. This Agreement shall be governed by and interpreted in accordance with the laws of the State of Florida.

I. The parties to this Agreement shall comply with applicable state and federal laws, rules and regulations governing patient and medical record confidentiality. Additionally, BOARD shall cooperate with SHANDS so that SHANDS can

comply with the regulations promulgated by the Health Insurance Portability and Accountability Act.

J. This Agreement may not be assigned, in whole or in part, by either party, other than to a successor in interest, without the prior written consent of the other party.

IN WITNESS WHEREOF, the parties hereto have caused these presents to be executed in several counterparts, each of which shall be deemed an original, as of the day and year first above set forth.

Chairperson, Suwannee County School Board

RIVEROAK TECHNICAL COLLEGE

By: _____
TED L. ROUSH DATE:_____
SUPERINTENDENT OF THE BOARD

SHANDS TEACHING HOSPITAL AND CLINICS, INC.
d/b/a UF HEALTH SHANDS HOSPITAL

By:_____ DATE: _____
EDWARD JIMENEZ
CHIEF EXECUTIVE OFFICER

"Approved as to Form and Sufficiency
BY_____
Leonard J. Dietzen, III
Rumberger, Kirk & Caldwell, P.A.
Suwannee School Board Attorney"

EXHIBIT A

REQUIREMENTS FOR STUDENTS AND/OR FACULTY PARTICIPATING IN CLINICAL EXPERIENCE AT SHANDS

Students and faculty with on-site supervision responsibilities must provide proof that they meet the following requirements when they come to Shands to begin their clinical experience:

1. General Health Screening and/or physical examination.

2. Proof of two MMR vaccines, administered 4 weeks apart, OR
   Laboratory (serological) proof of immunity to measles and rubella.

   Documentation of immunity to Chickenpox (varicella) by one of the following:
   - Documentation of two varicella vaccinations, administered 8 weeks apart, OR
   - Laboratory (serological) proof of immunity, OR
   - Documentation of a history of varicella disease or herpes zoster ("shingles") by a licensed healthcare provider.

3. Tuberculosis screening: Documentation of a negative tuberculin skin test (PPD) or negative TB-IGRA blood test within 12 months of start of clinical rotation. If history of previous testing was positive, there must be documentation of 1) a chest x-ray showing no active tuberculosis disease and 2) completion of preventive therapy or treatment for active tuberculosis disease.

4. Hepatitis B vaccine:
   - Documentation of completion of hepatitis B vaccine series.
   - Documentation of Hepatitis B surface antibody serology **(optional, but recommended).**
   - Declination of Hepatitis B vaccination completed.

5. Tetanus / Diphtheria / Pertussis: Documentation of one dose of tetanus/diphtheria/pertussis (Tdap) vaccination.

6. Vaccination with the current season's quadrivalent formulation of the flu vaccine.

7. Completed training course on HIV and AIDS, as required by State Law.

8. CPR certified.

9. Evidence of health insurance. (May be waived for students demonstrating hardship).

10. Completed Shands' HIPAA training and orientation.

11. Criminal background check.

JERRY TAYLOR
DISTRICT 1
CATHERINE CASON
DISTRICT 2
TIM ALCORN
DISTRICT 3

ED DA SILVA
DISTRICT 4
RONALD WHITE
DISTRICT 5
LEONARD DIETZEN, III
BOARD ATTORNEY

1740 Ohio Avenue, South
Live Oak, Florida 32064
Telephone: (386) 647-4600 • Fax: (386) 364-2635

TED L. ROUSH
Superintendent of Schools

2020-2021 ENROLLMENT PACKET

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WELCOME TO SUWANNEE COUNTY SCHOOL DISTRICT (SCSD)

For your convenience, you may fill out this form online for data to automatically copy to other pages. Please complete this document entirely and submit a printed copy to your child's school along with his/her Birth Certificate. Your child's enrollment will reflect the name shown on his/her Birth Certificate. To ensure accuracy of records, please also submit your child's Social Security Card. A state-issued ID may also be requested for any parent or guardian to enroll his/her child into Suwannee County Schools. We look forward to educating your child.

SCHOOL OF ENROLLMENT:

CERTIFICATE OF DOMICILE

Student Last Name _____ First _____ Middle _____ Appendix _____
(a minor child, as shown on Birth Certificate or Other Official Document)

Student ID _____ Grade _____ DOB _____ Rt. # _____
(School Use Only)

The relationship of parent/guardian to said student is that of _____.
(Mother, Father, Grandparent, Legal Guardian, etc.)

The student has resided with the parent/guardian in the parent's/guardian's home for a period of _____.
(Length of time/# of years)

The parent/guardian is the proper person to receive all notices, reports or other communications pertaining to the educational progress and school conduct of the aforesaid minor child. The parent/guardian is the proper person to notify in the event of any emergency involving the aforesaid minor child.

The PRIMARY, true and correct address for the parent/guardian is:

_____
(Street Address)

_____, _____ _____
(City) **(State)** **(Zip Code)**

_____ _____
(Home Phone Number) **(Work, or other Phone Number)**

_____ **I understand that I must notify the school and fill out a new Certificate of Domicile immediately if this address changes.**
(Initial)

This **Certificate of Domicile** is made for the purpose of enrolling the above minor child as a student into the public school system of Suwannee County, Florida, and to ensure that the student is attending the appropriately zoned school/district.
The parent/guardian will notify the Suwannee County School Board of any changes with regard to any of the matters set forth herein above.

Families will need to provide proof of residency upon request (such as a current utility bill, driver's license, or apartment/home rental agreement).

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND ANY FALSE OR MISLEADING STATEMENT MAY RESULT IN MY CHILD BEING TRANSFERRED TO HIS/HER APPROPRIATELY ZONED SCHOOL.

Florida statute 837.06 provides that whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

_____ _____ _____
Signature of Parent/Legal Guardian **Printed Name** **Date**

SCSB Form #5100-049A

Approved: 04/23/13; Revised 04/10/14, 04/25/17, 04/24/18, 03/17/20

SCHOOL OF ENROLLMENT:

STUDENT REGISTRATION SHEET

Student Last Name _____ First _____ Middle _____ Appendix _____

Student Date of Birth _____ Current Age _____ ☐ Male ☐ Female

Mailing Address _____ City _____ State _____ Zip _____

911 Address (if different) _____ City _____ State _____ Zip _____

Home Phone _____ Social Security #: _____

Mother/Guardian _____ Cell Phone _____ Work Phone _____

Mother/Guardian Email _____

Father/Guardian _____ Cell Phone _____ Work Phone _____

Father/Guardian Email _____

Student Lives With: ☐ Both Parents (same address) ☐ Mother ☐ Father ☐ Guardian (Relationship) _____

☐ Shared Responsibility (Provide legal documentation)

If either biological parent is NOT permitted to check this child out of school, the school MUST have a copy of the custody papers.

Military Status (Indicate One):

☐ (1) Active duty in uniformed services

☐ (2) Medically discharged or retired for less than one year

☐ (3) Death during active duty or death as a result of injuries sustained on active duty; for a period of one year after death

☐ (4) Not Applicable

Has student attended SCSD previously? ☐ Yes ☐ No Has student attended any Florida Public School previously? ☐ Yes ☐ No

Did student attend Pre-K? ☐ Yes ☐ No; Pre-K Year _____ Pre-K Location _____

Does your child currently hold an IEP, 504 or EP? ☐ Yes ☐ No

Name of previous school: _____

City: _____ State: _____ Phone: _____ Fax: _____ District # _____ School # _____

_____	_____	_____
Signature of Parent/Legal Guardian	**Printed Name**	**Date**

OFFICE USE ONLY

Date of Entry into Suwannee County Schools _____ Teacher _____ ☐ Homeless Student ☐ Unaccomp

☐ Network/Internet; ☐ Photo/Electronic Release; ☐ No Directory; Race _____ Grade _____ Student ID#: _____

Guidance Notified _____ Date _____ Records Requested Date: _____

SCSB Form #5100-049B

Approved: 04/23/13; Revised 04/14/15, 04/25/17, 03/26/19, 03/17/20

SCHOOL OF ENROLLMENT:

STUDENT RACE/ETHNICITY FORM:

Student Last Name _____ First _____ Middle _____ Appendix _____

Student ID _____ Grade _____ Date of Birth _____

Please answer **BOTH** questions 1 and 2.

1. Is your child Hispanic or Latino? (Please choose only one.)

   ☐ **No**, my child is not Hispanic or Latino

   ☐ **Yes**, my child is Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. What is your child's race? (Please mark all that apply.)

   ☐ **White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

   ☐ **Black or African American** – A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."

   ☐ **American Indian or Alaska Native** – A person having origins in any of the origins in any of the original peoples of North and South American (including Central America) and who maintain 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, e.g., Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

   ☐ **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Signature of Parent/Legal Guardian	**Printed Name**	**Date**

SCHOOL OF ENROLLMENT:

ANNUAL STUDENT CONTACT FORM

School Year _____ Teacher _____

Student ID: _____ Grade _____ Bus Route # _____

Student Last Name _____ First _____ Middle _____ Appendix_____

Home Phone _____ DOB _____ ☐ Male ☐ Female Race _____ Primary Language _____

Mailing Address _____ City _____ State _____ Zip _____

911 Address (if different) _____ City _____ State _____ Zip _____

Home Phone _____ Social Security #: _____

Mother/Guardian _____ Cell Phone _____ Work Phone _____

Mother/Guardian Email _____

Father/Guardian _____ Cell Phone _____ Work Phone _____

Father/Guardian Email _____

Student Lives With: ☐ Both Parents (same address) ☐ Mother ☐ Father ☐ Guardian (Relationship) _____
☐ Shared Responsibility (Provide legal documentation)

If either biological parent is NOT permitted to check this child out of school, the school MUST have a copy of the custody papers.

Please list all siblings of student (including those not enrolled in Suwannee County Schools)

SIBLING	NAME	AGE	GRADE	SCHOOL
☐ Brother ☐ Sister				
☐ Brother ☐ Sister				
☐ Brother ☐ Sister				
☐ Brother ☐ Sister				

TRANSPORTATION: Please advise the office immediately of any changes.

My child goes home each day by: ☐ Parent Pickup at the pickup area ☐ Bus Route # _____ Bus stop address & phone # if not same as above _____

Daycare Name: _____ Daycare Phone: _____ or Other:_____

EMERGENCY CONTACTS: (other than parents)

Only the people you authorize on this form will be allowed to check your child out, NO EXCEPTIONS!

Photo ID is required when checking your child out. Please include any person that may be contacted in case of an emergency or may pick up your child at some time during the school year.

NAME	PHONE	RELATIONSHIP	PERMISSION TO CHECK OUT
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No

PERMISSION: I give permission for my child to leave school grounds under supervision of teacher for local class visits in Suwannee County, walking field trips, and other community events. ☐ Yes ☐ No

_____ _____ _____

Signature of Parent/Legal Guardian **Printed Name** **Date**

SCSB Form #5100-049D Approved: 04/23/13; Revised 07/22/14, 04/25/17, 04/24/18, 03/26/19, 03/17/20

SCHOOL OF ENROLLMENT:

REQUEST FOR RELEASE OF RECORDS

JERRY TAYLOR
DISTRICT 1
CATHERINE CASON
DISTRICT 2
TIM ALCORN
DISTRICT 3

ED DA SILVA
DISTRICT 4
RONALD WHITE
DISTRICT 5
LEONARD DIETZEN, III
BOARD ATTORNEY

1740 Ohio Avenue, South
Live Oak, Florida 32064
Telephone: (386) 647-4600 • Fax: (386) 364-2635

TED L. ROUSH
Superintendent of Schools

Student Last Name _____ First _____ Middle _____ Appendix _____

Student's Date of Birth: _____ Grade _____ ☐ Male ☐ Female Withdrawal Date _____

The above named student seeks to enroll in _____.

PLEASE LIST ALL SCHOOLS STUDENT HAS ATTENDED WITHIN THE LAST SCHOOL YEAR

Former School: _____ Date Last Attended: _____

Former School City, State: _____ Phone #: _____ Fax #: _____

Former School: _____ Date Last Attended: _____

Former School City, State: _____ Phone #: _____ Fax #: _____

Former School: _____ Date Last Attended: _____

Former School City, State: _____ Phone #: _____ Fax #: _____

WE REQUEST THAT YOU SEND COPIES OF THE ORIGINAL RECORDS CHECKED BELOW

☐ State ID and Alias ID
☐ FSA/State Test Scores
☐ Most Recent Report Card
☐ Education Record, including IEP if ESE, EP if Gifted, ELL if LEP/ESOL
☐ Discipline Records
☐ Behavioral Health Records
☐ Threat Assessment Records
☐ Full Course History Transcript (Preferred via FASTER)
☐ Withdrawal Grades
☐ Health Records, including School Physical, Immunizations, Birth Certificate, Social Security Number, Custodial Parent Information *(Please include hearing and vision screenings)*

Parental permission is no longer required when records are requested by authorized school personnel.
(Family Educational Rights and Privacy Act, CFR 99.31)

_____ _____ _____
Signature of Parent/Legal Guardian **Printed Name** **Date**

OFFICE USE ONLY

_____ _____
Registrar/School Secretary Office Telephone Number

_____
Registrar/School Secretary Email Address

PLEASE SEND RECORDS TO:

_____

_____

_____

1st Request / / 2nd Request / / 3rd Request / /

SCSB Form #5100-049E Approved: 04/23/13; Revised 04/10/14, 04/25/17, 04/24/18, 03/26/19, 03/17/20

SCHOOL OF ENROLLMENT:

PRIOR DISCIPLINE FORM

JERRY TAYLOR
DISTRICT 1
CATHERINE CASON
DISTRICT 2
TIM ALCORN
DISTRICT 3

ED DA SILVA
DISTRICT 4
RONALD WHITE
DISTRICT 5
LEONARD DIETZEN, III
BOARD ATTORNEY

1740 Ohio Avenue, South
Live Oak, Florida 32064
Telephone: (386) 647-4600 • Fax: (386) 364-2635

TED L. ROUSH
Superintendent of Schools

Student Last Name _____ First _____ Middle _____ Appendix _____

Student ID _____ Grade _____ Date of Birth _____

Dear Parent,
You are requested to furnish the following information regarding your child upon registration in a Suwannee County School.

Please indicate below:

☐ Yes ☐ No My child has had a previous school expulsion.

☐ Yes ☐ No My child is currently under expulsion from school.

☐ Yes ☐ No My child was being considered for expulsion at the time of withdrawal from a prior school.

☐ Yes ☐ No My child has an arrest record resulting in a charge.

☐ Yes ☐ No My child has been under Juvenile Justice Jurisdiction.

☐ Yes ☐ No My child is presently under Juvenile Justice Jurisdiction.

☐ Yes ☐ No My child has been placed in an Alternative School setting previously.

☐ Yes ☐ No My child is currently placed in an Alternative School setting.

☐ Yes ☐ No My child is currently treated for or has been referred for treatment of mental or behavioral health concerns in the past. If so, please provide details so that we may better serve your child: _____

_____

_____

If you answered yes to any of the above, you are required to discuss pertinent history with the principal or designee prior to completing registration.

Sincerely,
Ted L. Roush
Superintendent of Schools

_____ _____ _____

Signature of Parent/Legal Guardian **Printed Name** **Date**

SCSB Form #5100-049F

Approved: 04/23/13; Revised 04/25/17, 04/24/18, 09/24/18, 03/17/20

SCHOOL OF ENROLLMENT:

OCCUPATIONAL SURVEY

Student Last Name _____ First _____ Middle _____ Appendix_____

Parent's Name _____ Present Occupation _____

This school system is interested in providing help to children whose family has had to move from one school district to another so a member of the family could work/seek work in certain kinds of jobs.

Please assist us in finding out which children we will be able to serve in this special project by filling out this form.

1. Have you, or anyone in your family, crossed state or country lines to work or seek work in one of the following occupations, either full-time or part-time during the last three years? If so, please indicate below:

OCCUPATION OR TYPE OF WORK

☐ **Yes** ☐ **No** FARMING (plowing, planting, cultivating, harvesting, processing of farm crops)

☐ **Yes** ☐ **No** DAIRY WORK (feeding, milking, rounding up)

☐ **Yes** ☐ **No** POULTRY OR EGG FARMS

☐ **Yes** ☐ **No** PLANTING, GROWING OR HARVESTING OF TREES

☐ **Yes** ☐ **No** PINESTRAW BAILING

☐ **Yes** ☐ **No** COMMERCIAL FISHING (fresh/saltwater, crabbing, shrimping, clamming)

☐ **Yes** ☐ **No** FISH FARM

☐ **Yes** ☐ **No** NURSERY WORK (planting, potting, pruning)

If you checked YES in any category above, please continue on and answer Question 2.

If you checked NO to all items, you may stop at this point.

2. Did your child(ren) move with you? ☐ Yes ☐ No

_____ _____ _____

Signature of Parent/Legal Guardian **Printed Name** **Date**

_____ _____ _____ _____

Address **City** **State** **Phone Number**

OFFICE USE ONLY

Completed Occupational Surveys should be forwarded to Juanita Torres, Migrant-Homeless Liaison.
Phone: (386) 647-4653 Date forwarded: _____ Forwarded by: _____

SCSB Form #5100-049G Approved: 04/23/13; Revised 04/14/15, 04/26/16, 04/25/17, 04/24/18, 03/26/19

SCHOOL OF ENROLLMENT:

IMMIGRANT AND HOME LANGUAGE SURVEY

Student Last Name _____ First _____ Middle _____ Appendix_____

Student ID _____ Grade _____ Date of Birth _____

City of Birth _____ State of Birth _____

County of Birth _____ Country of Birth _____

What is the first date of entry into the United States? _____

What is the first date of entry into a United States School? _____

Student Immigrant Status (Indicate all that Apply):

☐ (A) Are ages 3 through 21
☐ (B) Not born in any state, the District of Columbia, or Puerto Rico
☐ (C) Have not attended USA schools for 3 + full academic years
☐ (D) Not Applicable

Is a language other than English used in the home? ☐ YES ☐ NO

What language is most frequently spoken in the home? _____

What is the native language of the student's parents? _____

Did the student have a first language other than English? ☐ YES ☐ NO

Does the student most frequently speak a language other than English? ☐ YES ☐ NO

What is the student's primary language? _____

Relationship of person completing the survey: ☐ Mother ☐ Father ☐ Guardian ☐ Self ☐ Teacher ☐ Grandparent

Signature of Parent/Legal Guardian	Printed Name	Date
_____	_____	_____

OFFICE USE ONLY

Completed Immigrant and Home Language Surveys should be forwarded to Angel Hill, Coordinator of Student & Family Support.
Phone: (386) 647-4648 Date forwarded: _____ Forwarded by: _____

SCSB Form #5100-049H

LEP-1 Approved: 04/23/13; Revised 04/10/14, 04/25/17, 04/24/18, 03/17/20

SCHOOL OF ENROLLMENT:

STUDENT RESIDENCY QUESTIONNAIRE

Your child/children may be eligible for additional educational services through Title 1 Part A, Title IX Part A Federal McKinney-Vento Assistance Act. Please answer the following questions to determine eligibility:

1. Please indicate if you and/or your family are presently living in one of the following situations:
   - ☐ Emergency or transitional shelter or FEMA trailer (A)
   - ☐ Family member or friend due to loss of housing, economic hardship or a similar reason; doubled up (B)
   - ☐ Car, park, temporary trailer park or campground due to lack of adequate housing, public space, abandoned building, substandard housing, public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings or similar settings. (D)
   - ☐ Hotel or motel. (E)
   - ☐ Awaiting foster placement. (F)
   - ☐ Not in the physical custody of a parent or a guardian (unaccompanied youth). (Y)

   IF YOU ARE NOT LIVING IN ONE OF THE SITUATIONS ABOVE, STOP HERE!
   

2. If you indicated any of the living situations above, please indicate the cause.
   - ☐ Man-made Disaster (Major) (D)
   - ☐ Earthquake (E)
   - ☐ Flooding (F)
   - ☐ Hurricane (H)
   - ☐ Mortgage Foreclosure (M)
   - ☐ Tropical Storm (S)
   - ☐ Tornado (T)
   - ☐ Wildfire or Fire (W)
   - ☐ Other – i.e., lack of affordable housing, long-term poverty, unemployment or underemployment, lack of affordable health care, mental illness, domestic violence, forced eviction, etc. (N)
3. Please provide the following information of your school-age child/children. You only have to complete this ONE time.

STUDENT NAME	GRADE	STUDENT ID	SCHOOL	CHECK IF ON MEDICAID
				☐
				☐
				☐
				☐

4. Have you moved in the past 3 years to seek work in pine straw, farming, dairy, chickens, or other? ☐ Yes ☐ No
5. Are there any 3 or 4-year-old siblings living in the home? ☐ Yes ☐ No

Signature of Parent/Legal Guardian **Printed Name** **Date**

Relationship to Student **Address** **Phone**

OFFICE USE ONLY

Signature of School Employee Official Witness | Printed Name | Title | Date

Liaison certifies the above named student qualifies for the Free Lunch Program under the provisions of the McKinney-Vento Act.

McKinney-Vento Liaison Signature | Printed Name | Date

Service Requested: ☐ School Physical; ☐ Immunization; ☐ School Supplies; ☐ Other _____

SCSB Form #5100-049I

Approved: 04/23/13; Revised 04/10/14, 04/25/17, 03/26/19, 03/17/20

SCHOOL OF ENROLLMENT:

STUDENT NETWORK USAGE & INTERNET ACCESS AGREEMENT

Student Last Name _____ First _____ Middle _____ Appendix_____

Student ID _____ Grade _____ Date of Birth _____

PLEASE INDICATE YOUR UNDERSTANDING AND ACCEPTANCE OF GUIDELINES BELOW

☐ I understand — The Suwannee County School District (SCSD) provides computers and network capabilities to students for the purpose of enhancing instruction through technological resources. K-5 classrooms are equipped with a class set of Chromebook devices for student use on campus. Students in grades 6-12 are issued a Chromebook device to use both on campus and at home, similar to the issuance of a textbook. If the device is damaged due to misuse, the parent/student may be responsible for the cost or repair not to exceed $200 for a device damaged beyond repair.

☐ I understand — The Suwannee County Schools Network is an electronic network which serves public education in accessing the Internet. The Internet is an "information highway" connecting thousands of computers and millions of individual people all over the world. Students, teachers, and support staff of Suwannee County Schools with network accounts have access to electronic mail (E-Mail) with the ability to communicate with people all over the world. Information, news, and data can also be received from a variety of world-wide sources.

☐ I understand — With access to computers and people all over the world comes the availability of some material that may not be considered to be of educational value within the context of the school setting. Efforts have been made to direct participation to education-related materials only. However, on a global network, it is impossible to control all materials. The Suwannee County School Board has established Acceptable Use Guidelines for all users of technology and the Internet in the school system. ***If any user violates any of these guidelines, his/her access to the network may be terminated and appropriate disciplinary and/or legal action will be taken.***

ACCEPTANCE OF GUIDELINES

As the parent or guardian of this student (or self if enrolling as an adult student), I have read the Acceptable Use Guidelines for technology use and Internet use and understand that Internet access via the Suwannee County Technology Network is being provided for educational purposes only. I understand that I and my student must read and be familiar with the IT Policies and Procedures Handbook, which can be found on the District website on the Information Technology Department web page. I further understand that it is impossible for the Suwannee County School System to restrict access to all controversial materials, and I will not hold the Suwannee County School System responsible for materials acquired on the Suwannee County Technology Network. I also understand that if I (if enrolling as adult student) or my child violates any of the rules of the Acceptable Use Guidelines, the Student Code of Conduct, or the Suwannee County School Board Policies/Rules regarding technology or Internet use, appropriate disciplinary/legal action will be taken.

☐ I understand — This agreement will be in effect until rescinded through a written request by me, the undersigned.

Signature of Parent/Legal Guardian **Printed Name** **Date**

SCSB Form #5100-049J

Approved: 04/23/13; Revised 04/25/17, 04/24/18, 03/17/20

SCHOOL OF ENROLLMENT:

ELECTRONIC DISTRIBUTION OF STUDENT DATA

Student Last Name _____ First _____ Middle _____ Appendix _____

Student ID _____ Grade _____ Date of Birth _____

PARENT RELEASE FOR PHOTO/VIDEO

☐ **Option 1:** I, as parent/guardian of a student enrolled in a SCSD school, hereby give SCSD my consent and permission to: 1) Record said student's participation and appearance on video tape, audio tape, film, photograph, or any other medium; 2) Use said student's name, likeness, voice, and biographical material in connection with these records; and 3) To exhibit or distribute such recording in whole or in part without restrictions or limitation for any educational or promotional purpose which the SCSD, and those acting pursuant to its authority, deem appropriate. It is specifically understood that the recording may be submitted for use by a school or district newsletter, the local press, the school, or district cable television programming, and the school or district website. I expressly agree and give permission to allow the use of said media in all forms without any royalties, commissions, or other remuneration due to me or any other party, or parties associated with this production. I expressly release and discharge the SCSD from any and all liability that may arise from the use of said media in this manner. Furthermore, I expressly waive any and all privacy rights that would otherwise have been accorded to these recordings or other media in accordance with §1002.20 and §1002.22 (2004), Florida Statutes; OR

☐ **Option 2:** I do not give permission for any of the Parent Release information noted in Option 1 of this area.

Signature of Parent/Legal Guardian	**Printed Name**	**Date**
Witness or School Administrator	**Printed Name**	**Date**

Witnesses required; must be at least 18 years of age, cannot be a current student.

DIRECTORY INFORMATION

The SCSD reserves the right to release "directory information" to the general public without obtaining prior permission from students or parents/guardians. Directory information includes the student's name, parent/guardian names, residential address, telephone number (if listed), date and place of birth, name of most recent previous school or program attended, participation in school sponsored activities and sports, height and weight of athletic team members, dates of school attendance, anticipated graduation date, honors and awards received, and diploma conferred. However, a student or his/her parents may notify the principal of the desire NOT to have directory information released. This notification must be submitted in writing to the principal within 30 days of distribution of the Student Conduct and Discipline Code or 30 days after initial enrollment. In that case, this information will not be disclosed except with the consent of a parent/guardian or eligible student, or as otherwise allowed by the Family Educational Rights and Privacy Act. In the absence of written notification to restrict the release of directory information, the school and the SCSD will assume that neither a parent/guardian of a student, or an eligible student, objects to the release of the designated directory information. The SCSD will routinely publish directory information in conjunction with press releases regarding school activities, honor roll announcements, athletic events, and other such activities. Under provisions of the National Defense Authorization Act and the Elementary and Secondary Education Act (No Child Left Behind), directory information may also be released to law enforcement agencies, other governmental agencies (U.S. Department of Justice, branches of Armed Forces, etc.) and to post-secondary programs to inform students of educational programs available to them. However, directory information shall not be released for commercial use, including among others, mailing lists for solicitation purposes.

SCHOOL OF ENROLLMENT:

ANNUAL EMERGENCY INFORMATION AND HEALTH UPDATE

School Year _____ Homeroom Teacher _____ Grade _____

Student Last Name _____ First _____ Middle _____ Appendix _____

Home Phone _____ DOB _____ ☐ Male ☐ Female Race _____ Primary Language _____

Mailing Address _____ City _____ State _____ Zip _____

911 Address (if different) _____ City _____ State _____ Zip _____

Mother/Guardian _____ Cell Phone _____ Work Phone _____

Other emergency numbers where you may be reached: 1) _____ 2) _____ 3) _____

Father/Guardian _____ Cell Phone _____ Work Phone _____

Other emergency numbers where you may be reached: 1) _____ 2) _____ 3) _____

Student Lives With: ☐ Both Parents (same address) ☐ Mother ☐ Father ☐ Guardian (Relationship) _____

☐ Shared Responsibility (Provide legal documentation)

If either biological parent is NOT permitted to check this child out of school, the school MUST have a copy of the custody papers.

List any health problems, physical disabilities, major illnesses or restrictions your child has and you feel school personnel should know about: _____

Does Student wear eye glasses or contact lenses? ☐ Yes ☐ No

Family Physician: _____ Phone: _____

Allergies (if any): _____

Medications your child takes on a regular basis: _____

PERSONS WHO MAY BE CONTACTED IN CASE OF AN EMERGENCY

(PERSONS MUST ALSO BE AUTHORIZED ON THE ANNUAL STUDENT CONTACT FORM TO BE PERMITTED TO CHECK OUT STUDENTS)

NAME	PHONE	RELATIONSHIP	PERMISSION TO CHECK OUT
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No

At some school sites, students receive health services from Suwannee County Health Department personnel.

The Suwannee County School Board, its authorized agents or employees will transport or otherwise deliver any child or ward of the undersigned to the nearest hospital or such other hospital as may be reasonably convenient, which is licensed by the state of Florida whenever, in the opinion of the teacher, principal, or other person designated by the principal, an emergency exists with respect to the health or welfare of the child or ward.

Certain Educational records of your child will be shared with the District's health care partners as needed to provide and evaluate health services to students. I understand that my child's medical treatment records created by health care personnel at school may be shared with school officials who have a legitimate educational purpose for accessing such treatment records.

Signature of Parent/Legal Guardian **Printed Name** **Date**

SCSB Form #5100-049L Approved: 04/23/13; Revised 04/10/14, 04/14/15, 04/25/17, 04/24/18, 09/24/18, 03/26/19, 03/17/20

SCHOOL OF ENROLLMENT:

NOTIFICATION OF SOCIAL SECURITY COLLECTION AND USE

In compliance with Florida Statute 119.071(5), Suwannee County School Board issues this notification regarding the purpose of the collection and use of an individual's Social Security Number.

The Suwannee County School Board recognizes that an individual's social security number is a unique form of identification that can be utilized to obtain sensitive information regarding that particular individual. However, as required by Florida Statute 1008.386, the Board must request that each student enrolled in the district provide his or her social security number and must use the Social Security Number in the management information system.

The Board further recognizes that under certain circumstances, both as an employer and an education institution, the collection of social security numbers is necessary to be able to properly perform its duties and functions and to ensure that such duties and functions are performed accurately and efficiently. Due to the sensitive nature of an individual's social security number, the Board will secure Social Security Numbers from unauthorized access and will never release them to unauthorized parties. Each student and employee will be issued a unique identification number for reporting purposes unless otherwise prescribed by law.

The Suwannee County School Board collects your social security number only for the following purposes:

Purpose	Statutory Authority	Mandated, Authorized or Business Imperative
Identification and verification – Identity management	Sec. 119.071(5)(a)(2)(a)(III), Fla. Stat. 1008.386, Fla. Stat.	Mandated
Benefit processing	Sec. 6109, I.R.C.	Mandated
Data collection, reconciliation, and tracking	Sec. 6109, I.R.C.	Mandated
Tax reporting	Sec. 6109, I.R.C.	Mandated
Criminal background checks	Sec. 119.071(5)(a)(2)(a)(III), Fla. Stat.	Business Imperative
Billing and payments	Sec. 6109, I.R.C.	Mandated
Payroll administration	Sec. 6109, I.R.C.	Mandated
Garnishments	Sec. 6109, I.R. C.	Mandated
State and federal educational and employment reporting	Sec. 6109, I.R.C.	Mandated
Financial aid programs	Sec. 6109, I.R.C.	Mandated
Vendor applications	Sec. 6109, I.R.C.	Mandated
Independent contractors	Sec. 6109, I.R.C.	Mandated
Employment applications	Sec. 6109, I.R.C.	Mandated
Student admissions - Student record management	Sec. 119.071(5)(a)(2)(a)(III), Fla. Stat. 1008.386, Fla. Stat.	Business Imperative
Volunteer applications	Not applicable	Authorized - SCSB Policy 6.78*

Additionally, Federal Legislation relating to the Hope Tax Credit requires that all postsecondary institutions report the Social Security Number of all postsecondary students to the Internal Revenue Service. This IRS requirement makes it necessary for RIVEROAK Technical College to collect the Social Security Number of every postsecondary student enrolled. A student may refuse to disclose his/her Social Security Number to RTC, but refusing to comply with the federal requirement may result in fines established by the Internal Revenue Services.

All Social Security Numbers are protected by federal regulations and are never released to unauthorized parties.

Suwannee County School District
2020 Summer School Schedule
(Monday – Thursday)

Elementary Programs

3rd Grade Summer Reading Camp

Eligibility:	Third grade students who have recent FSA performance at Level I or equivalent.	
	Third grade students who have recent FSA performance at Level II or equivalent for remediation purposes as space permits	
Schedule:	Seven (7) week session:	6/8/2020 – 7/20/2020 SES located at SMS & BES
		8:00 a.m. - 1:30 p.m. student day (5.5 hrs.)
		8:00 a.m. - 2:30 p.m. teacher day (6.5 hrs.)
Personnel:	Five teachers: One (1) BES and four (4) SES located at SMS	
	1:10 ratio as necessary depending state assessment scores	
Funding:	General Fund/Reading Allocation	

Pre-Kindergarten (VPK)

Eligibility:	Per DOE guidelines
Schedule:	6/2/2020 – 7/30/2020 SPS located at SMS
	7:30 a.m. - 4:30 a.m. student day (9 hrs.)
	7:00 a.m. - 5:00 a.m. teacher day (10 hrs.)
Personnel:	Six (6) teachers with a 1:12 ratio
Funding:	VPK Funds

ESE Consult/Extended Year Services (ESY)/Medically Fragile

Eligibility:	Elementary and/or secondary students IEP's indicate a need for extended year services	
Schedule:	Seven (7) week session:	6/8/2020 – 7/20/2020 SES located at SMS & BES
		8:00 a.m. – 12:30 p.m. (students)
		8:00 a.m. – 1:30 p.m. (teachers)
	Or as identified on student IEPs	
	Same student/teacher day as 3rd Grade Reading Camp	
Personnel:	Three (3) teachers: one (1) BES and two (2) SES located at SMS	
	Two (2) paraprofessionals: one (1) BES and one (1) SES located at SMS	
	One (1) nurse at SMS to serve all students @ SMS attending summer school	
Funding:	IDEA Grant	

Secondary Programs

Suwannee Middle School

	Credit Recovery Grade 4
Schedule:	6/8/2020 – 7/20/2020 at SMS
	8:00 a.m. – 2:00 p.m.
Personnel:	One (1) teachers: one (1) 4th (6 hours per day)
	One (1) Dean (200 hours each) to serve all students at SMS attending summer school
	One (1) Guidance Counselor (50 hours)
Funding:	Federal Programs/General Fund

3/12/2020 - cf

Suwannee High School

Driver's Education

Schedule:	6/8/2020 – 7/20/2020 at SHS 8:00 a.m. – 3:00 p.m.
Personnel:	Two (2) teachers – as needed for SHS, SVS, BHS (up to 7 hours per day)
Funding:	Federal Programs/General Fund

Credit Recovery Grades 8-11

Schedule:	6/8/2020 – 7/20/2020 at SHS 8:00 a.m. – 2:00 p.m.
Personnel:	Five (5) teachers (6 hours per day) Two (2) paraprofessionals (6 hours per day) One (1) Dean (6 hours per day)
Funding:	Federal Programs/General Fund

Branford High School

Credit Recovery Grades 8-11

Schedule:	6/8/2020 – 7/20/2020 at BHS 8:00 a.m. – 2:00 p.m.
Personnel:	Two (2) teachers (6 hours per day) One (1) paraprofessional (6 hours per day) One (1) Guidance Counselor (50 hours)
Funding:	Federal Programs/General Fund

Suwannee Virtual School

Virtual Instruction Grades 6-12

Schedule:	6/8/2020 – 7/20/2020 at SVS
Personnel:	Twelve (12) teachers (1 hour per day)
Funding:	General Fund

Federal Programs

21st Century Summer School Program

Eligibility:	As determined by grant – any student grades PK - 5	
Schedule:	Seven (7) week session:	6/2/2020 – 7/16/2020 SES, SIS, SPS located at SMS & BES 8:00 a.m. - 12:00 p.m. student/teacher (4 hrs.) 7:30 a.m. – 12:30 p.m. site coordinators (5 hrs.)
Personnel:	Four (4) Site Coordinators: Three (3) SES, SIS, SPS located at SMS and One (1) at BES Four (4) Paraprofessionals: Three (3) SES, SIS, SPS located at SMS and One (1) at BES	
Funding:	21st Century Community Learning Centers Grant	

Migrant Summer Program

Eligibility:	Students meeting the Migrant definition
Schedule:	6/8/2020 – 7/23/2020 8:00 a.m. – 1:00 p.m. Providing support with other district programs to serve all schools
Sites:	SMS, SHS, BES, BHS and In Home
Personnel:	Six (6) paraprofessionals (based enrollment numbers)
Funding:	Title I Part C

3/12/2020 - cf

Transportation

All transportation will be arranged through the Director of Transportation, as available.

Schedule: 6/8/2020 – 7/20/2020
Personnel: Two (2) bus drivers, two (2) bus attendants – as needed for ESE Travel
Funding: Federal Funding as available

Coordinators

Kelli Williams – 120 hours
Keith Stavig – 120 hours

Food Service

Meals for students in summer school will be arranged through the Director of Food Service.
Schedule and personnel requested through the Director of Food Service.

RIVEROAK Technical College Programs

Practical Nursing

Schedule: Monday - Friday, classroom, on campus from 8:00 a.m.– 3:30 p.m.
Monday and Thursday, clinical rotations will be off-site or labs on campus 8 hours
(Times will vary per site)
Graduation: July 2, 2020
New class begins: August 12, 2020

IV Therapy

Schedule: July 7-10, 2020
Monday, Tuesday, Wednesday 8:00 a.m. – 4:00 p.m.

Pharmacy Technology

Schedule: Monday, classroom on campus 8:10 a.m. - 2:45 p.m.
Clinical rotations will be off-site Tuesday, Wednesday, Thursday 8:00 a.m. - 5:00 p.m.
beginning March 19, 2020 – July 2020
Classes end: July 27, 2020
Graduation: July 30, 2020
New class begins: August 24, 2020 (tentative)

Nail Technician/Facial Specialty/Cosmetology

Schedule: Monday-Wednesday 9:00 a.m.- 3:30 p.m.
Classes begin: June 1, 2020
Classes end: Upon completion of 240 class hours (Facial 260)

Surgical Technology

Schedule: Monday - Friday 8:00 a.m.- 2:30 p.m. (Cohort 2)
Clinical rotation will be off-site, Monday - Friday times will vary (Cohort 1)
Graduation: July 16, 2020 (tentative)
New class begins: September 9, 2020

Phlebotomy

Schedule:	Monday & Wednesday 5:30 p.m. – 8:00 p.m. Clinical rotations off-site (days & times vary per site)
Graduation:	March 16, 2020
New classes begin:	June/July 2020 (TBD)

Night Welding

Schedule	Monday – Thursday 5:00 p.m. – 9:15 p.m. NO Graduation
New class begins:	June 8, 2020
Class ends:	Continue to Fall 2020

SUWANNEE COUNTY SCHOOL DISTRICT

Office of Student Services

1740 Ohio Avenue, South Live Oak, Florida 32064

Consent to Invite Agency Representatives to Transition IEP Meetings & Release of Information to Transition Agencies

Student: _____ **DOB :** _____ **Grade :** _____

School : _____ **Phone Number:** _____

Address: _____

Primary Exceptionally: _____ **Parent/Guardian:** _____

For the purpose of transition planning, you are being asked to give permission for us to invite an agency representative to your child's IEP meeting. The agencies will use this information exclusively in planning available services for your child and it may not be shared with anyone else without your consent. We would like to invite a representative of an agency or agencies listed below who may be responsible for providing transition services.

☐ **Yes,** I give consent for my child's name, exceptional student classification(s), date of birth, address, and phone number to be sent to the local office of the agencies listed below, and for a representative to be invited to the IEP review for transition planning.

☐ **No,** I do not give consent for my child's name, exceptional student classification(s), date of birth, address, and phone number to be sent to the local office of the agencies listed below, and for a representative to be invited to the IEP review for transition planning.

AGENCIES *(check all agencies that apply)*

☐ Division of Vocational Rehabilitation ☐ Community College ☐ Division of Blind Services

☐ Agency for Persons with Disabilities ☐ Division of Hearing Impaired ☐ Other *(specify)* _____

I, _____ hereby authorize: Suwannee County School District to release the following portion of records to transition agencies, regarding my child _____, which includes: All Psychological Reports, Educational Data, Tests of Intellectual Process/Academic Abilities, present levels of subject area performance, projectives, adaptive & behavioral scales, social & medical history (shared with school), individual educational plans, and other _____

TRANSITION PLANNING *(Consent for mutual exchange of information for transition services):* I hereby authorize the exchange of information and records pertaining to the above named child among the County School District, the members of the interagency community transition team, Department of Children and Families, Vocational Rehabilitation, Agency for Persons with Disabilities, Alcohol, Drug Abuse & Mental Health, Division of Blind Services, Community College System, State University System, Private Industry Council, and other agencies and providers including other schools, hospitals, clinics, physicians, psychologists, etc. that have had significant contact with my child. Information will not be disclosed to any party except personnel with a legitimate educational interest without prior written consent of the parent or legal guardian. I understand that this provides consent to release information and to invite agency representatives to IEP meetings.

Parent/Guardian/Adult Student Signature	*Print Name*	*Date*

You may revoke consent any time via a written letter to the Suwannee County School District Student Services Department.
Please keep your copy of signed consent.
If you have any questions, please feel free to call the Student Services Department at (386) 647-4630.