

## HAZING/BULLYING COMPLAINTS

### Procedures

Students who believe they have been subjected to hazing/bullying are to report each incident to the principal, assistant principal, teacher, or other administrator in the school they attend. Incidents of hazing/bullying may be reported informally or through the filing of a formal complaint.

All reports of hazing/bullying will be held in confidence subject to all applicable laws and any due process rights.

Consistent with federal and state law, and due process rights, the following procedures will be employed in handling any report, investigation and remedial action concerning allegations of hazing/bullying.

### Informal Complaints

Students who believe they have been subjected to hazing/bullying may request that an informal meeting be held between themselves and a building administrator or administrative assistant. The purpose of such a meeting will be to discuss the allegations and remedial steps available. The administrator, if s/he is the principal, will then promptly discuss the complaint with the person alleged of hazing/bullying. If the administrator is not the principal, the administrator or administrative assistant will immediately report the incident to the principal who will proceed as outlined above. If the complaint is about another student, the principal may delegate the investigation and discussion to another building administrator. Should the person admit to the allegations of hazing/bullying, the principal or designee is to obtain a written assurance that the hazing/bullying will stop. Depending on the severity of the charges, the principal may recommend that further disciplinary action be taken.

The principal is to prepare a written report of the incident and inform the complainant of the resolution.

- a. If the complainant is satisfied with the resolution, the incident will be deemed closed. However, the complaint may be reopened for investigation if a recurrence of hazing/bullying is reported. It is essential that the complainant is to inform the principal of any recurrence of the hazing/bullying or any retaliatory action that might occur.

- b. Should the complainant be dissatisfied with the resolution, s/he may file a formal written complaint.
- c. If during the principal's informal attempt to resolve the complaint, the person alleged of hazing/bullying admits the allegations but refuses to give a written assurance that s/he will refrain from the unacceptable behavior, the principal is to file a report with the superintendent of schools. The report is to indicate the nature of the complaint, a description of what occurred when the supervisor and/or administrator informed the person alleged of hazing/bullying, the person's response to the allegations, and, if appropriate, a recommendation that stronger corrective measures be taken. This report should be accompanied by a formal complaint.
- d. Should the person alleged of hazing/bullying deny the allegations, the principal is to inform the complainant of the denial and state that a formal written complaint will be required for further investigation. The principal, in the case of a complaint against a district employee, will file a report with the superintendent of schools on what has transpired to date. If the complainant submits a formal complaint, a copy of it should accompany the principal's report with a recommendation concerning further action. In the case of a complaint against another student, the principal's judgment will guide her/his subsequent actions.
- e. In all cases of student complaints of hazing/bullying, the parents of students are to be notified of the complaint and the resolution.
- f. Any staff member who receives a disclosure of hazing/bullying from a student is to report same immediately to the principal, who will then follow the steps outlined above.

### Formal Complaints

Upon receipt of a formal or informal complaint a prompt, thorough and impartial investigation of the allegations must follow. The investigation is to be conducted diligently. Complainants are to be notified of the outcome of the investigation.

### Remedial Action

If the investigation reveals that hazing/bullying has occurred, the appropriate sanctions will be imposed in a manner consistent with any applicable law.

Anyone subjecting complaints or witnesses to any form of retaliation will also be subject to disciplinary action in the manner prescribed by the law.

If the investigation reveals that no hazing/bullying has occurred, and/or if the complainant is not satisfied with the remedial action taken after a finding of hazing/bullying, the complainant may appeal to the superintendent of schools. The appeal must include a copy of the original complain, all relevant reports, the specific action being appealed, and an explanation of why the complainant is appealing.

#### Post-Remedial Action

Following a finding of hazing/bullying, victims will be periodically interviewed by the appropriate administrative personnel to ensure that the hazing/bullying has not resumed and that no retaliatory action has occurred. These follow-up interviews will continue for an appropriate period of time. A report will be made of any victim's responses.

#### Complaint Records

Complainant should receive a copy of any resolution reports filed by the supervisor and/or administrator concerning his/her complaint.

#### Investigation in the Absence of a Complaint

The Superintendent, his/her designee, or the building principal, will, in the absence of a victim's complaint ensure that an investigation is started by the appropriate individuals, on learning of, or having reason to suspect, the occurrence of any hazing/bullying.

Adoption date: July 1, 2004

## STUDENT HEALTH SERVICES

The Board of Education recognizes that good student health is vital to successful learning and realizes its responsibility, along with that of parent(s) or guardian(s), to protect and foster a safe and healthful environment for the students.

The school shall work closely with students' families to provide detection and preventive health services. In accordance with law, the school will provide vision, hearing, and scoliosis screening. Problems shall be referred to the parent(s) or guardian(s) who shall be encouraged to have their family physician provide appropriate care.

Schools shall also provide first aid for students in accidental or unexpected medical situations.

A permanent student health record shall be part of a student's cumulative school record and should follow the student from grade to grade and school to school along with his/her academic record. This record folder shall be maintained by the school nurse.

### *Communicable Diseases*

It is the responsibility of the Board to provide all students with a safe and healthy school environment. To meet this responsibility, it is sometimes necessary to exclude students with contagious and infectious diseases, as defined in the Public Health Law, from attendance in school. Students will be excluded during periods of contagion for time periods indicated on a chart developed by the New York State Education Department.

It is the responsibility of the Superintendent of Schools, working through district health personnel, to enforce this policy and to contact the New York State Department of Health and the County Board of Health immediately upon notification of an outbreak, even if one student, of a communicable disease.

### *Administering Medication to Students*

Neither the Board nor district staff members shall be responsible for the diagnosis or treatment of student illness. The administration of prescribed medication to a student during school hours shall be permitted only when failure to take such medicine would jeopardize the health of the student, or the student would not be able to attend school if the medicine were not made available to him/her during school hours, or where it is done pursuant to law requiring accommodation to a student's special medical needs (e.g., Section 504 of the Rehabilitation Act of 1973). "Medication" will include all medicines prescribed by a physician.

Before any medication may be administered to or by any student during school hours, the Board requires:

1. the written request of the parent(s) or guardian(s), which shall give permission for such administration and relieve the Board and its employees of liability for administration of medication; and
2. the written order of the prescribing physician, which will include the purpose of the medication, the dosage, the time at which or the special circumstances under which medication shall be administered, the period for which medication is prescribed, and the possible side effects of the medication.

Both documents shall be kept on file in the office of the school nurse.

The Superintendent shall develop comprehensive regulations governing student health services. Those regulations shall include the provision of all health services required by law, procedures for the maintenance of health records, and procedures for the administering of medication to students.

Cross-ref: 4315.2, Safety Education  
4321, Programs for Students with Disabilities  
5191, Students with HIV-Related Illness  
8123.1, Contagious Diseases

Ref: Education Law §§901 et seq.  
Public Health Law §§680; 2164  
8 NYCRR Part 136

Adoption date: June 10, 2002

**STUDENT HEALTH SERVICES REGULATION***A. Immunization*

Each student must present a record of immunization upon registration signed by a doctor certified by a clinic or from the student's cumulative health record from a prior district. Students will not be allowed to attend classes without proper immunization. Minimum immunization requirements are outlined in the State Education Department publication, *Immunization Guidelines: Vaccine Preventable Communicable Disease Control*.

Students with legitimate religious or health reasons with the proper documentation to certify the condition may be excluded from the requirements.

*B. Administering Medication to Students in School*

The administration of prescribed medication to a student during school hours is permitted only when the medication is necessary to allow the student to attend school or failure to administer the medication would seriously affect the student's health.

Parent(s) or guardian(s) must present the following information:

1. a note from the family doctor containing the following information: student's name, the date and name of the medicine, dosage and time to be administered, and list of possible side effects;
2. a note from the parent(s) or guardian(s) giving the school nurse, teacher, Principal or other school staff permission to administer the medication; or
3. file a medication request form with the school-nurse teacher.

The school nurse shall implement procedures for the administration of medication, as stated in the Education Department publication on *Administration of Medicines in School Guidelines*, January, 1999.

*C. Student Medical Exams*

In accordance with Section 903 of the state Education Law, each student shall have a physical exam given by the school doctor or family physician upon entrance to school at grades 1, 3, 7 and 10. Findings are to be kept on record at the school on forms that can be obtained from the school nurse.

*D. Illness in School*

If a student becomes ill in school:

1. The nurse will determine if the student should remain in the dispensary or return to class.
2. The nurse will call the parent, guardian or substitute parent if he/she feels the student should go home. In general, a parent or guardian will pick up the student from school.
3. The nurse will contact the Building Principal if he/she feels the child should be transported home.
4. If no parent, guardian or substitute parent picks up the student at school, or if no parent/guardian or substitute parent will be home, the student will remain in the nurse's office until such time as a parent, guardian or substitute parent becomes available to assume responsibility for the child.

*E. Medical Emergency Record*

All students shall have on file a medical emergency record which shall state the name and telephone numbers of the following:

1. the student's parent(s) or guardian(s) at home and work;
2. the student's next of kin;
3. a neighbor;
4. the family physician; and
5. custodial/legal information

Adoption date: June 10, 2002

## REQUESTS FOR RELIGIOUS EXEMPTION FROM IMMUNIZATION

The Board of Education recognizes the need to balance the protection of public health against the constitutional right of parents to raise their children in accordance with their own religious views. To this end and in accordance with state law and regulation, parents have the right to request that their child receive an exemption from immunization based upon their genuine and sincere religious beliefs which are contrary to immunization.

The district has established a regulation for processing such requests. Parents who wish to request an exemption from immunization on religious grounds are to contact the School Nurse or Building Principal for information regarding the process and the type of information required.

Ref: Public Health Law §2164(9)  
*Lewis v. Sobol*, 710 F.Supp. 506 (S.D.N.Y. 1989)  
*Sherr v. Northport-East Northport UFSD*, 672 F. Supp. 81 (E.D.N.Y. 1987)  
*Appeal of Quigley*, 41 EDR 399 (2002)  
*Appeal of Swett*, 34 EDR 492 (1994)

Adoption date: July 6, 2006

**REQUESTS FOR RELIGIOUS EXEMPTION FROM IMMUNIZATION REGULATION**

The following procedures shall be followed for implementing a parent's request for religious exemption to immunization:

1. Upon request, the school nurse or principal's designee will provide the parent with:
  - The Request from Religious Exemption to Immunization Form-Parent/Guardian Statement; and the
  - Centers for Disease Control/Department of Health informational immunization materials.

If requested, the school nurse or designee will meet with the parent to provide guidance regarding the form's completion. However, such a meeting is not required.

2. The parent must return the signed and notarized form to the school nurse or designee. The form must be signed by the parent and notarized by a notary public or it will not be accepted.
3. The Building Principal shall review each request for a religious exemption to immunization. If, after review of the parent's statement, questions still remain about the existence of a sincerely held religious belief, the Principal may request supporting documents such as:
  - A letter or other literature from an authorized representative of a church, temple or other religious institution explaining the doctrine/beliefs that prohibit immunization. (*NOTE: Parents do not necessarily need to be a member of an organized religion or religious institution to obtain a religious exemption. However, the opposition to immunization must be based on religious beliefs instead of merely framed in terms of religious belief.*)
  - Other writings or sources upon which the parent relied in formulating religious beliefs that prohibit immunization;
  - A copy of any parental statements to healthcare providers or school district officials in a district of prior residence explaining the religious basis for refusing immunization;
  - Any documents or other information the parent may be willing to provide that reflect a sincerely held religious objection to immunization (e.g., disclosure of whether parent or other children have been immunized, parent's current position on allowing himself or herself or his or her children to receive or refuse other kinds of medical treatment.)

The principal may require the parent/guardian to attend a meeting with the Principal to provide further information about his or her sincerely held religious belief.

4. The principal shall inform the parent, **in writing**, of the approval or denial of the exemption request. If the request is denied, the notification letter must include the specific reason(s) for denial. Copies of this notice must also be forwarded to the school nurse or designee and the Superintendent of Schools.
5. If a request for a religious exemption is denied, a parent/guardian may appeal the denial to the Commissioner of Education within 30 days of the decision.

Adoption date: July 6, 2006

**REQUEST FOR RELIGIOUS EXEMPTION TO IMMUNIZATION FORM**  
*PARENT/GUARDIAN STATEMENT*

Name of Student \_\_\_\_\_

Identification Number \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

School District and Building Name \_\_\_\_\_

This form is for your use in applying for a religious exemption to Public Health Law immunization requirements for your child. Its purpose is to establish the religious basis for your request since the State permits exemptions on the basis of a sincere religious belief. Philosophical, political, scientific, or sociological objections to immunization do not justify an exemption under Department of Health regulation 10 NYCRR, Section 66-1.3 (d), which requires the submission of:

A written and signed statement from the parent, parents, or guardian of such child, stating that the parent, parents or guardian objects to their child’s immunization due to sincere and genuine religious beliefs which prohibit the immunization of their child in which case the principal or person in charge may require supporting documents.

In the area provided below, please write your statement. The statement **must** address **all** of the following elements:

- Explain in your own words why you are requesting this religious exemption.
- Describe the religious principles that guide your objection to immunization.
- Indicate whether you are opposed to all immunizations, and if not, the religious basis that prohibits particular immunizations.

You may attach to this form additional written pages or other supporting materials if you so choose. Examples of such materials are listed on page 3.

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You will be notified in writing of the outcome of this request. Please note that if your request for an exemption is denied, you may appeal the denial to the Commissioner of Education within thirty (30) days of the decision, pursuant to Education Law, Section 310.

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**SECTION BELOW FOR SCHOOL DISTRICT USE ONLY**

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To the Building Principal:

If, after review of the parental statement, questions remain about the existence of a sincerely held religious belief, Department of Health regulation [10 NYCRR, Section 66-1.3(d)] permits the principal to request supporting documents. Some examples include:

- A letter from an authorized representative of the church, temple, religious institution, etc. attended by the parent/guardian, literature from the church, temple, religious institution, etc. explaining doctrine/beliefs that prohibit immunization (Note: Parents/guardians need not necessarily be a member of an organized religion or religious institution to obtain a religious exemption);
- Other writings or sources upon which the parent/guardian relied in formulating religious beliefs that prohibit immunization;
- A copy of any parental/guardian statements to healthcare providers or school district officials in a district of prior residence explaining the religious basis for refusing immunization;
- Any documents or other information the parent/guardian may be willing to provide that reflect a sincerely held religious objection to immunization (for example: disclosure of whether parent/guardian or other children have been immunized, parent/guardian’s current position on allowing himself or herself or his or her children to receive or refuse other kinds of medical treatment.)

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**Reviewer Name (Building Principal):** \_\_\_\_\_

**Indicate Result of Request Review:**

**APPROVED**            - **Date of Approval** \_\_\_\_\_

**DENIED**            - **Date of Denial** \_\_\_\_\_



## WELLNESS

*The Babylon UFSD is committed to providing a school environment that enhances learning and development of lifelong wellness practices.*

Goals of the Wellness Policy are:

- That the Child Nutrition Program complies with federal, state and local requirements and is accessible to all children
- That sequential and interdisciplinary nutrition education is provided and promoted throughout the district
- That patterns of meaningful physical activity connect to students' lives outside of physical education
- That all school-based activities are consistent with the Wellness Policy's goals
- That all foods and beverages made available on campus (including vending, a la carte, student stores, parties and fundraising) during the school day will be consistent with the Matilda Cuomo legislation of 1987
- That all foods made available on campus adhere to food safety and security guidelines
- That the school environment is safe, comfortable, pleasing and should allow ample time and space for eating meals
- That food is not to be used as a reward or physical activity as a punishment
- That the district maintains an active Committee charged with the task of evaluating and maintaining this Wellness Policy and its effectiveness
- That the Committee will meet a minimum of eight times per year to make recommendations to the Board of Education

Adoption date: April 3, 2006

Revised: November 13, 2007

## ALLERGY

The increased prevalence of allergies and the risk of life-threatening anaphylaxis have impacted the school environment in recent years. Many environmental factors may serve as allergens. Food, insect stings and latex are examples of common allergens. While the Board of Education cannot guarantee an allergen-free environment, the Board will endeavor to provide an environment that limits the risk for students with life-threatening allergies. The Board of Education directs the Superintendent and/or his/her designees to take steps necessary to meet this objective.

### **Definitions (from NYS Making the Difference: Caring for Students with Life-threatening Allergies)**

**Allergen:** A substance that triggers an allergic reaction.

**Allergies:** An exaggerated response to a substance or condition produced by the release of histamine or histamine-like substances in affected cells. It is characterized by an overreaction of the immune system to protein substances - either inhaled, ingested, touches or injected - that normally do not cause an overreaction in non-allergic people.

**Allergic Reaction:** An immune system response to a substance that itself is not harmful but that the body interprets as harmful. When an allergen is eaten, the food allergic student produces histamine. Once the histamine is released in the body it causes chemical reactions which trigger inflammatory reactions in the skin (itching, hives, rash), the respiratory system (cough, difficulty breathing, wheezing), the gastrointestinal tract (vomiting, diarrhea, stomach pain), and the cardiovascular system (lowered blood pressure, irregular heartbeat, shock). Each person with a food allergy reacts to the allergy differently. Each reaction by a food allergic student may differ in symptoms.

**Anaphylaxis:** A life-threatening allergic reaction that involves the entire body. It may be characterized by symptoms such as lowered blood pressure, wheezing, vomiting or diarrhea, and swelling and hives. Anaphylaxis may result in shock or death, and thus requires immediate medical attention.

For students with severe allergies which may result in life-threatening reactions to various environmental triggers, it is necessary for the District to work cooperatively with the parent(s), guardian(s) and the healthcare provider to do the following:

- a) Develop an Emergency Care Plan that includes all necessary treatments, medications, training and educational requirements for the students.
- b) Obtain appropriate health care provider authorization in writing that includes the frequency and conditions for any testing and/or treatment, symptoms and treatment of any conditions associated with the health problem, and direction for emergencies.
- c) Secure written parent permission and discuss parental responsibility that includes providing the health care provider's orders, providing any necessary equipment, and participating in the education and co-management of the child as he/she works toward self-management.
- d) If the student is eligible for accommodations based upon the Individuals with Disabilities Act (IDEA), Section 504 of the Rehabilitation Act of 1973 or the Americans with Disabilities Act, the appropriate procedures will be followed regarding evaluation and identification.

The Superintendent and/or his/her designees will cause to be established a school level emergency plan to adequately deal with and treat potential anaphylactic reactions occurring in previously undiagnosed individuals, via a non-patient specific order. A non-patient specific order is a standing order or protocol issued by a physician or certified nurse practitioner, authorizing an RN to administer anaphylactic treatment agents to a student or staff member suffering an anaphylactic reaction even if there is no known history.

The District will work toward assisting students in the self-management of their chronic health conditions based upon the student's knowledge level and skill by doing the following:

- 1) Adequately training all staff involved in the care of the student.
- 2) Assuring the availability of the necessary equipment and/or medications.

The school must receive a documented diagnosis of allergies and clear, easy-to-follow written instructions from the student's physician for managing the student's allergies: avoidance measures, typical symptoms, dosing instructions for medications and emergency protocols. Parents are responsible for providing the allergic child's medication directly to the school health office in a properly labeled original container and for maintaining an adequate and up-to-date supply. Parents will provide written permission for the child's physician and school officials to consult on behalf of the child.

If the child is at risk of a lethal allergic reaction, the district strongly urges that he/she wear a medical information bracelet or necklace that identifies the specific items that may cause an anaphylactic reaction.

School officials in consultation with parents will determine which school personnel are made aware of the allergic student's condition. Appropriate school staff will receive details of the Emergency Care Plan.

Regulations will be promulgated by the District, consistent with applicable law, to provide for the allergic/anaphylactic child. These regulations may include development of an Emergency Care Plan, Epi-Pen or other medication to be used and staff training, staff in-service, forms and letters, consents, waivers and privacy issues and sharing information.

### **Food Allergies**

One of the more common forms of allergies involves food. Students may display a range of allergic responses from minor to life threatening. Serious food allergies appear to be increasing in frequency and the number of affected students is rising. In some cases, minute amounts of the food allergen, when eaten, touched or inhaled can make the allergic child very ill. In a small percentage of food allergic children, their allergic reaction may place them at risk for life-threatening anaphylaxis. Anaphylaxis is the medical term for a severe life-threatening allergic reaction and food allergy is the leading cause.

Currently, there is no cure for food allergies and avoidance is the only prevention; yet it is impossible to achieve complete avoidance of all allergic foods, as there can be hidden or accidentally introduced sources. Therefore, the child's parents and physician must prepare the school district for serious reactions that may occur despite precautions. To that end, parents are responsible for notifying the school of students with documented food allergies and and/or anaphylaxis and for providing the school with medical information and the family physician's treatment protocol. This notification should occur either at the time of enrollment or if the student is already enrolled, as soon after diagnosis as possible. The school district does not have a diagnostic responsibility with respect to medical conditions. Upon notification by the parent, a conference will be held to develop an Emergency Care Plan if necessary.

The District's goals for severe food-allergic children are to reduce the risk of exposure, identify and recognize symptoms of an adverse reaction and ensure prompt emergency treatment. In response to a specific case of food allergies, each school may place limitations on foods that may be brought into school from home or places where foods may be eaten. The District will seek cooperation from the school community. Implementation shall be consistent across the District.

When children have been identified by their parents and physicians as food-allergic/anaphylactic and have reported their medical information to the school nurse, the parents will be given a copy of this Board of Education policy and related regulations. Each will have a tear-off sheet to be signed by the parent indicating they received, read and had the opportunity to discuss the Board of Education policy and regulations with the school nurse and the principal.

Adoption date: July 3, 2009

## **Food allergies**

### **Lunch**

The food-allergic child will eat only food brought from home or approved by the parent if buying lunch. Parents of food-allergic children may prefer to have them bring lunch from home. In the cafeteria, attempts will be made so that the food-allergic child will eat or touch only the foods sent in by his/her parents. The parent must make the determination as to the safety of a cafeteria lunch for their child. If a child with food allergies is going to buy a school lunch, the parent must notify the teacher and send in a written permission note indicating the date and specific lunch to be purchased.

### **Cafeteria**

When parents and their physician inform the District/School of a child with food-allergies/high risk of anaphylaxis and request lunchroom accommodations, the School will institute lunchroom procedures to help protect the child with food allergies. Most commonly, this will include children with “nut” allergies. “Nuts” means peanuts or tree-nuts (e.g. cashews, hazel nuts or filberts, walnuts, Brazil nuts, almonds, macadamias, pecans, pine nuts and pistachios.) The school will designate certain cafeteria areas as “allergen controlled”. “Allergen controlled” areas will be supervised by cafeteria monitors. Prior to each lunch period, the designated table and seats will be cleaned with a wet soapy cleaner and wiped with disposable towels.

At the designated areas students will be directed that there will be no sharing or trading of food, utensils, or containers and no touching of the allergic-child’s food. The children at these tables should not put food directly on the table but rather on disposable trays or napkins. Children with “safe lunches” may sit at the allergen controlled areas. The child with severe food allergies should not dispose of food in the garbage paid to avoid accidental contact with wrappers, etc. that might have allergens. These children should not be seated near a garbage can or food service line.

A letter will be sent home to all families in the school seeking voluntary support for limiting food allergens brought in from home. A letter will also be sent home to classmates of children with food allergies explaining cafeteria and classroom rules. The classroom teacher will also inform the class about the rules and explain the seriousness in an age appropriate way.

### **Food Service**

When a food-allergic child has been identified by his parents and physician, a form with his name, picture, and food allergies will be shared with the food service staff. The cafeteria program will use disposable trays and utensils.

The School Lunch Director will continue to check ingredient labels for food products used in the School Lunch Program, including vending machine products. The Director will make a list of known technical, scientific and alternate names for common food allergens to be shared with each school.

### **Elementary Classrooms, Snack, and Parties**

At the elementary level, when the parent and family physician have informed the school of a child with a serious food allergy, a letter will be sent home to the class asking them not to bring in snacks or party foods that contain the food allergens. The child may be identified by name only with the written permission of the parents. A follow-up reminder will be provided at Meet the Teacher Night.

Food-allergic children will eat only foods brought in from their home. They will not be permitted to eat or touch food brought in by others for snacks or special events unless approved by the child’s parents. A parent of a food-allergic child may choose to send in their own foods for occasions such as these.

The teacher will educate children, in an age appropriate manner, about the seriousness of food allergies and the importance of enforcing the rule never to share or trade snack or party food with a food-allergic classmate. Teasing of any kind is unacceptable and will not be tolerated.

## **Field Trips**

When a child identified with a “serious medical condition”, such as food allergies/anaphylaxis, has a field trip his/her parent will be requested and encouraged to accompany the child on the trips. Teachers will give these parents lead time on upcoming special events so that they have time to plan ahead to attend. If it is part of their doctor’s treatment protocol, parents must provide an Epi-pen for field trips. If a parent will not attend, a designated person trained in their use will take the Epi-pen and keep the child in their group. Staff and chaperones will be briefed on the identity of the child, the specific allergies, and the symptoms to be aware of. On every field trip there will be access to a telephone, cell phone, or radio communication in case of emergency.

If the children bring their own lunches on a field trip, all parents will be asked to carefully avoid certain allergens. If the class will be eating at a restaurant, the child with food allergies must bring his/her own food or signed permission from the parent to eat out and what the child may eat. Children will be reminded not to share or trade any food.

## **School Buses**

Unless required by a medical condition, there will be no eating of food on school buses going to and from school. All food is to remain in backpacks. Eating on the bus presents both a choking hazard and an allergy danger. The bus driver will be informed about any child with severe food allergies. A list of students with allergies will be on each school bus. Bus drivers will be provided with a description of the signs and symptoms of an allergic response and anaphylaxis. There will be designated seats up front, particularly for young children. Parents may arrange for a friend to sit with their child. These designated seats will be cleaned with wet soapy cleaner and wiped with disposable towels. All buses will be equipped with a reliable communication device, a radio and/or cell phone.

If possible, when there is a substitute bus driver, prior to the first run he will speak to the dispatcher and be briefed on the list of the child with allergies.

## **Substitute Teachers**

The regular teacher will keep information about children with food allergies with the teacher’s substitute plans.

## **Parent Responsibilities**

When a child’s food allergies have been identified by his parents and physician, the school district will require that the parents:

1. inform the school of the child’s allergies and condition and provide written medical documentation that is updated regularly
2. provide the school with written medical instructions from their physician
3. provide the school with Epi-Pens (or Epi-Pen Jrs. If less than 60 pounds) and other medication, if appropriate, as prescribed by the family physician
4. be encouraged to provide the child with a medical information bracelet or necklace to be worn at school that lists allergies
5. assist in the schools’ communications plan
6. participate in the development of an Emergency Care Plan
7. provide safe foods for lunches, snacks, and special occasions
8. will be invited to attend field trips if possible
9. confer with teachers regarding lessons or projects that use food
10. teach their allergic child to recognize first symptoms, to communicate these to staff, to not share snacks, lunches, drinks and utensils, and to report any teasing
11. consent to share photographs and medical information with necessary employees
12. maintain up-to-date emergency contacts and phone numbers

## **In-Service**

Staff who interact with a child with food allergies-teaches, psychologists, cafeteria workers, monitors, and other appropriate staff-will be advised how to protect the child from exposure, about cross-contamination and labeling issues, how to recognize an allergic symptom, and how to respond to emergencies. Any Emergency Care Plan will be shared with these individuals. The training may include foods which contain specific allergens, symptoms of anaphylaxis, and administration of Epi-pens in the case of an emergency.

## **Letters**

When an elementary child with a severe food allergy anaphylaxis has been identified to the school by his parent and family physician, a general letter will be sent to the entire elementary school explaining the presence and the seriousness of the condition and requesting cooperation in reducing risk to the child. When a student is identified with a severe food allergy and is at high risk for anaphylaxis, a letter will also be sent to the parents of the child's class asking for assistance in making the classroom safer. Letters will be sent home prior to the start of the school year or when the school is notified. The allergic child will be identified in the letter only with written permission of the parents.

## **Privacy Issues and Sharing Information**

It is the responsibility of parents to report a child's food-allergic/anaphylactic condition to the child's school. Parents must consent in writing to the release of personal medical information to the school staff. The following guidelines should be implemented in order to protect the privacy of the child while educating students, staff and parents.

1. Identify the child and medical condition to the staff either individually or at a staff meeting before the start of the school year (teaching and non-teaching staff)
2. Allergy Policy and Regulations will be put in faculty handbook and on website
3. At the beginning of the school year each of the child's teaches will be given an allergy alert form with a photo, description, treatment, etc.
4. With permission of the parents, other students/families may be told and cooperation enlisted, in age appropriate ways
5. At the secondary level, identification to peers should be done only after consultation with the student, in addition to permission of the parents
6. Books and videos will be available to inform adults and staff and students about allergies and anaphylaxis
7. Food allergies/anaphylaxis may be explained in health classes
8. PTA's are encouraged to have an annual presentation for parents and members about food allergies/anaphylaxis. Parents of children with food allergies should be offered the opportunity to share information.
9. Informational articles about food allergies/anaphylaxis may be written in school publications.

## **Emergency Care Plan**

When parents and their physician identify a food-allergic/anaphylactic child to the school, the parents will consult with the school nurse. The parent will participate in the completion of any Emergency Care Plan form each year that provides up-to-date medical information and the treatment protocol from the family's physician. Parents will immediately inform the District of any change in the status of this information. Parents will supply medicines and Epi-Pens to schools as prescribed by their physician.

The Emergency Care Plan form should include information from the physician as to symptoms of the child's allergy, recognizing warning signs of reactions, administering medical and emergency treatment for the child, and any other pertinent information. The Emergency Care Plan will be shared with teachers, nurses, administrators, food service workers, cafeteria monitors, bus drivers, coaches and others responsible for the student. It will be provided to emergency responders if necessary. The Plan will go with the child on all field trips.

The Emergency Care Plan will also include phone numbers: child's home, parents' work and cell phone numbers, emergency contact numbers (relatives, friends, neighbors) and the child's doctor. Every Emergency Care Plan will also include the name of the local emergency Services and the direct phone number to dial for an anaphylactic emergency.

If exposure to an allergen occurs despite avoidance efforts, the school will follow the prescribing doctor's protocol to which the parents have given consent. Parents will be notified if any medicine has been administered. The school will tend to the child and administer the Epi-Pen if that is the treatment protocol. The Fire Department/Rescue Squad will be called specifying the need for a response to an allergic reaction/anaphylaxis.

Any child given an Epi-Pen injection will be transported immediately to a hospital even if symptoms resolve. An adult will be sent to accompany the child in the ambulance to the hospital, and to stay with the child until a parent arrives. After the call to the local Emergency Services, the parents and/or emergency contact, and then the doctor will be called.

### **Epi-Pens**

The use of Epi Pens is governed by Board of Education.

### **Athletic and Extracurricular Activities**

The Emergency Care Plan for all children with severe food allergies/high anaphylactic risk who are involved in athletic and extracurricular activities will be provided to the coach or supervisor. The coach or supervisor will be trained to administer an Epi-Pen. Parents may be asked to provide an additional Epi-Pen for these activities.

### **Before and After School Child Care**

These programs (including SCOPE) are not under the auspices of the Babylon School District. Parents are encouraged to speak with program officials directly.

### **Outside Organizations that utilize District facilities**

The District is not responsible for the practices regarding allergies of outside organizations that utilize District facilities.

**Sample letters for classes that have students with severe nut allergies and high risk of anaphylaxis**

September

Dear Parents or Guardian:

There is a student in your child's classroom that has a severe, life-threatening allergy to nuts, in particular peanuts. In addition, this child cannot tolerate tree nuts (such as walnuts, pecan, hazelnuts, etc.). To ensure a safe classroom environment, we will implement a few very important considerations for this child.

If this child were to accidentally eat, touch or inhale the "peanut/nut dust" from peanuts/nuts, he/she could have a life-threatening reaction: anaphylaxis. Because of this risk, we strongly suggest peanut-free and nut-free snacks for the entire class, including those provided for parties and celebrations. Please choose other healthy snacks that are peanut/nut-free and do not contain peanut/nut byproducts. Please check the food ingredients of the snacks you may pack for school.

Home baked goods and other foods prepared at home should not be sent into the classroom of a food-allergic child. Food brought in for special events in the classroom should be purchased in stores, commercially prepared, and contain complete ingredient lists with no nuts or nut products.

It is difficult at the best of times to get children to eat healthy snacks; however, I hope you will appreciate the seriousness of this condition and that you will assist us in our efforts to create as safe an environment as possible. With your cooperation, we can minimize the risk of a serious allergic reaction.

Anyone wishing further information about peanut/nut allergies may contact the school nurse.

Sincerely,

Principal

**Letters for schools that have students with severe nut allergies**

September

Dear Parents or Guardians:

There are currently students in our school with severe, medically documented allergy to peanuts and/or tree nuts. In a severely allergic child, exposure to these products can cause anaphylaxis, a life threatening reaction. The safety of our students is of the utmost importance. Therefore, we are asking for your cooperation regarding this matter.

To assist us in providing the safest, healthiest school environment for all students, we are encouraging all parents to send peanut-free and nut-free lunches, snacks and party food to school.

Thank you for your cooperation in our combined efforts at keeping our students healthy and safe at school.

Anyone wishing further information about peanut/tree nut allergies may contact the school nurse.

Sincerely,

Principal

## NOTIFICATION OF SEX OFFENDERS

The Board of Education acknowledges the efforts of local law enforcement to notify the district when a person with a history of sex offenses against a child is being paroled or released into the community, in accordance with the provisions of the Sex Offender Registration Act, commonly known as Megan's Law. The purpose of this notification is to protect members of the community, particularly children, by notifying them of the presence of individuals in their midst who may present a danger. Consistent with its duty to protect students under its care, the district shall cooperate, to the extent permitted by law, with local law enforcement agencies in this endeavor.

Any written notification provided by local law enforcement officials pursuant to Megan's Law shall be copied and distributed to the school buildings and made available to all staff and community residents. In addition, the Superintendent of Schools shall use best efforts to disseminate any such written notification to all staff who might come into contact with the offender in the course of doing their jobs, including Building Principals, staff who issue visitors' passes, bus drivers, custodians, playground monitors, security personnel, and coaches. Community residents shall also be reminded of the security measures and personal safety instruction provided at school. All staff requests for information provided by the law enforcement agencies shall be directed to the Building Principal. Requests for information from community residents shall be directed to the District Clerk.

The Superintendent shall establish any necessary regulations for implementing this policy with the advice of the school attorney.

Cross-ref: 1120, School District Records  
1240, Visitors to the Schools

Ref: 42 U.S.C. §1407(d)  
Correction Law, Article 6-C (Sex Offender Registration Act)  
*Doe v. Pataki*, 1998 WL 230955 (S.D.N.Y. May 7, 1998) (current injunction)  
*Doe v. Pataki*, 120 F.3d 1263 (2d. Cir. 1997), *cert. denied*, 118 Sup. Ct. 1066 (1998)

Adoption date: June 10, 2002

## **CHILD ABUSE, MALTREATMENT OR NEGLECT IN A DOMESTIC SETTING**

The Board of Education recognizes that because of their sustained contact with school-aged children, employees are in an excellent position to identify abused, maltreated or neglected children and refer them for treatment and protection. The Board further recognizes the specific dictates of law which require school officials to report suspected instances of child abuse, maltreatment (which includes neglect) in a domestic setting.

The purpose of mandatory reporting is to identify suspected abused and maltreated children as soon as possible, so that such children determined to be abused or maltreated can be protected from further harm and, where appropriate, can be offered services to assist him or her and his or her family.

School officials, who have reasonable cause to know or suspect that a child has been subjected to abuse or maltreatment, must immediately report this to the New York State Central Register for Child Abuse and Maltreatment (Central Register), as required by law. No conditions may be imposed which limit their responsibility to report. A school official is defined as:

- Teacher
- Guidance counselor
- Psychologist
- Nurse
- Administrator
- Any school personnel required to hold a teaching or administrative license or certificate.

The school official will also report the matter to the Building Principal.

The report shall be made by telephone or by telephone facsimile machine on a form supplied by the Commissioner of Social Services. A written report shall be made within forty-eight hours to the appropriate local child protective service, and to the statewide Central Register.

School employees who are not school officials, as defined above, but who have reasonable cause to know or suspect that a child has been subjected to abuse or maltreatment are encouraged to report to the Central Register. However, the school employee must report the matter to the Building Principal. If the matter has not yet been reported to the Central Register, the Building Principal shall make the report, in accordance with state law. In being required to file such report, the Building Principal does not have discretion.

School employees or officials may not contact the child's family or any other person to determine the cause of the suspected abuse or maltreatment. It is not the responsibility of the school official or employee to prove that the child has been abused or maltreated.

Any school official or employee who has cause to suspect that the death of any child is a result of child abuse or maltreatment must report that fact to the appropriate medical examiner or coroner.

In accordance with the law, any school official who fails to report an instance of suspected child abuse or maltreatment may be guilty of a Class A misdemeanor and may be held liable for the damages caused by the failure to report. The law grants immunity to persons who, in good faith, report instances of child abuse from any liability.

School employees will not be subject to retaliatory action, as defined in state law, as a result of making a report when they reasonably suspect that a child has been abused or maltreated.

The Board recognizes that knowingly reporting a false claim of child abuse is a violation of state law and this policy acknowledges that it is a crime to do so. The district will make every reasonable effort to ensure the integrity of the district's child abuse reporting process and procedure.

#### School District Relationship with Local Social Service District

The school district will cooperate to the extent possible with authorized child protective services workers in investigations of alleged child abuse. The Superintendent, or his or her designee, will represent the district when collaborating with local social service agencies to address instances of abuse or maltreatment, and in the development of policy and procedures regarding abuse or maltreatment (including educational neglect). In addition, the Superintendent will share a copy of the district's attendance policy, 5100, with the local social service district.

The school district shall maintain an ongoing training program which will address the identification and reporting of child abuse and maltreatment, including the legal implications of reporting and not reporting. Attendance at sessions of this training program shall be required of all school officials. Attendance records shall be kept, and notations will be made in personnel files as to the dates of attendance.

The Superintendent shall develop, with input from appropriate personnel, a plan for implementation of such a training program, to be approved by the Board. In addition, the policy and regulations will be included in all employee handbooks and distributed annually to all school officials who are not covered under existing handbooks. The Superintendent will prepare and implement all regulations as are necessary to accomplish the intent of this policy

Cross-ref: Attendance, 5100

Ref: Child Protective Services Act of 1973, Social Services Law §§411 et seq.  
Social Services Law §34-a  
Family Court Act §1012  
Family Educational Rights and Privacy Act,  
20 U.S.C. §1232g, 45 CFR §99.36  
Education Law §3209-a  
Penal Law 240.50

Adoption date: June 10, 2002

Revised date: November 9, 2009

**CHILD ABUSE, MALTREATMENT OR NEGLECT  
IN A DOMESTIC SETTINGREGULATION**

New York State Law (Child Protective Service Act of 1973, as amended) provides for reporting of suspected cases of child abuse by school officials. These regulations are designed to implement this law within the district and to help protect students from the harmful effects of child abuse.

*Definitions*

The definition of child abuse and maltreatment is established by law.

Abused Child, according to Social Services Law and the Family Court Act, is a child less than 18 years of age whose parent or other person legally responsible for his or her care:

- a. inflicts or allows to be inflicted upon such child physical injury by other than accidental means which causes or creates a substantial risk of death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ; or
- b. creates or allows to be created a substantial risk of physical injury to such a child by other than accidental means which would be likely to cause death or serious or protracted disfigurement, or protracted impairment of physical or emotional health, or protracted loss or impairment of the function of any bodily organ; or
- c. commits, or allows to be committed, a sex offense against such child, as defined in the penal law, provided, however, that the corroboration requirements contained therein shall not apply to proceedings under this article.

Neglected or maltreated child, according to the Family Court Act, is a child less than 18 years of age:

- a. whose physical, mental, or emotional condition has been impaired or is in danger of becoming impaired as a result of the failure of his or her parents or other person legally responsible for his care to exercise a minimum degree of care:
  - (1) in supplying the child with adequate food, clothing, shelter, or education in accordance with provisions of Part One, Article 65 of the Education Law, or medical, dental, optometrical or surgical care though financially able to do so or offered financial or other reasonable means to do so; or

In order for a report of educational neglect to be accepted, three elements need to be established:

- a. Excessive absence from school by the child
  - b. Reasonable cause to suspect that the parent is aware or should have been aware of the excessive absenteeism and the parent has contributed to the problem or is failing to take steps to effectively address the problem, and;
  - c. Reasonable cause to suspect educational impairment or harm to the child or imminent danger of such impairment or harm.
- (2) in providing the child with proper supervision or guardianship, by unreasonably inflicting or allowing to be inflicted harm, or a substantial risk thereof, including the infliction of excessive corporal punishment; or by using a drug or drugs; or by using alcoholic beverages to the extent that he/she loses self-control of his/her actions; or by any other acts of a similarly serious nature requiring the aid of the court; or
- b. who has been abandoned by his/her parent(s) or other person legally responsible for his/her care.

Person legally responsible includes the child's custodian, guardian, or any other person responsible for the child's care at the relevant time. Custodian may include any person continually or at regular intervals found in the same household as the child when the conduct of such person causes or contributes to the abuse or neglect of the child.

Impairment of emotional health and impairment of mental or emotional condition includes a state of substantially diminished psychological or intellectual functioning in relation to, but not limited to, such factors as failure to thrive, control of aggressive or self-destructive impulses, ability to think and reason, or acting out of misbehavior, including incorrigibility, ungovernability, or habitual truancy; provided, however, that such impairment must be clearly attributable to the unwillingness or inability of the parent, guardian, or custodian to exercise a minimum degree of care toward the child.

Reporting procedures and related information:

1. All school officials must, when they have reasonable cause to suspect that a child is abused or maltreated, report it to the New York State Central Register for Child Abuse and Maltreatment (800-342 3720). A school official, under state law, is defined as:
  - Teacher
  - Guidance counselor
  - Psychologist
  - Nurse
  - Administrator

- Any school personnel required to hold a teaching or administrative license or certificate.

Personnel have the right to request that information which would identify the individual making the report be withheld if furnishing such data might prove detrimental to the safety or interest of that individual.

2. The school official must also report the matter to the Building Principal who will determine if any additional steps need to be taken by the school district (for instance, contacting the school physician, social worker or other support services).
3. In the event that a school employee, who is not required to report under the law (such as a bus driver, custodian, cafeteria monitor, etc.), has reasonable cause to suspect that a child is abused or neglected, he/she is encouraged to make a report to the Central Register. The employee must, by district policy, report the matter to the Building Principal.
4. If the Building Principal is informed of a case of suspected child abuse or maltreatment that has not yet been reported to the Central Register, the Building Principal is required to:
  - (a) phone the New York State Central Register for Child Abuse and Maltreatment (800-342 3720) and inform them verbally of the problem; or
  - (b) contact the above agency by telephone facsimile machine on a form supplied by the Commissioner of Social Services; and
  - (c) file a written report with the local child protective services agency and the Central Register within forty-eight hours after the above report; and,
  - (d) determine if additional steps need to be taken by the school district, as outlined in step 2 above.
5. The Building Principal may take photographs or cause photographs to be taken of the areas of visible trauma on the child, and/or, if medically indicated, cause an examination to be performed. Such actions may be performed at public expense if they will provide appropriate documentation when filing the report. A camera and film shall be kept at the school and be available for this purpose.
6. The written report that must be filed shall include all information which the Commissioner of Social Services may require.
7. If it should be necessary for Child Protective Services to interview a child at school to ascertain whether he/she has been abused or maltreated, or to obtain documentation of such acts, the interview should be conducted in the presence of a school official, unless circumstances require otherwise. The school official shall examine and verify the credentials of Child Protective Services worker(s) before allowing such worker(s) to either interview the child or to examine the child's records.

If sexual abuse is indicated, the presence of a same-sex staff member during the interview is appropriate.

8. The Building Principal shall request a summary report of the investigation of a case referred to Child Protective Services so the district can take appropriate next steps.
9. The district shall maintain an ongoing training program which will address identification and reporting of child abuse and maltreatment. Attendance at sessions of this training program shall be required of all school officials.
10. Employee handbooks shall include a copy of these regulations and the related Board policy concerning child abuse and reporting requirements.
11. Only one report of any suspected abuse is required.
12. School personnel who, in good faith, make a report or take photographs of injuries and bruises have immunity from any liability, civil or criminal. The good faith of any person required to report cases of child abuse or maltreatment is presumed.
13. School personnel who have reasonable cause to suspect that a child has died as a result of child abuse or maltreatment shall report that fact to the appropriate medical examiner or coroner.
14. Any person required to report suspected cases of child abuse or maltreatment and who fails to do so may be found guilty of a class A misdemeanor and may be held civilly liable for the damages caused by this failure.
15. Any school employee who fails to comply with this policy is subject to discipline in accordance with collective bargaining agreements and/or policy.
16. If a report of child abuse or maltreatment has been determined to be unfounded, all records in school files shall be expunged.

Adoption date: June 10, 2002

Revised date: November 9, 2009

## STUDENT RECORDS

The Board of Education recognizes its legal responsibility to maintain the confidentiality of student records. The procedures for the confidentiality of student records shall be consistent with federal statutes, including the Family Educational Rights and Privacy Act of 1974 (FERPA) and its implementing regulations, and the Commissioner's Regulations.

The Board also recognizes its responsibility under the Local Government Records Law to maintain the orderly retention and disposition of the district's student records.

The Superintendent of Schools shall oversee compliance with federal statutes and the Commissioner's Regulations concerning student records.

### *Annual Notification*

At the beginning of each school year, the district shall publish in a local newspaper a notice to parent(s) or guardian(s) and students 18 years of age or older ("eligible students,") currently in attendance of their rights under FERPA and the procedures for pursuing them. The district shall also send home a bulletin listing these rights and procedures for pursuing them. The district shall also send home a bulletin listing these rights and procedures, which will also be included with a packet of material provided parents or an eligible student when the student enrolls during the school year.

A notice must set forth the district's procedures for inspection, review and amendment of student rights, and advise the parent or eligible student of his or her right to:

1. inspect and review the student's education records;
2. a specification of the intent of the district to limit the disclosure of personally identifiable information contained in a student's education records except:
  - a. by prior written consent of the student's parent(s) or guardian(s) or the eligible student
  - b. as directory information; or
  - c. under certain limited circumstances, as permitted by FERPA.
3. request an amendment of the appropriate student's records that he/she believes is inaccurate, misleading or in violation of a student's privacy rights;
4. file a complaint with the U.S. Department of Education alleging failure of the district to comply with FERPA and its regulations; and
5. the procedure for exercising the right to inspect, review, and request amendment of student records.

The policy applicable to the release of student directory information (see 2.b above,) applies equally to military recruiters, the media, colleges and universities, Department of Social Services, Child Protective Services, and Department of Health and prospective employers. Directory information includes, but is not limited to, the following: the student's name, parents' names, address, telephone number, date and place of birth, participation in school activities or sports, weight and height if a member of an athletic team, dates of attendance, degrees and awards received, and most recent educational institution attended.

Parents and eligible students may choose not to allow the district to release directory information.

The district shall arrange to provide translations of this notice, where necessary, to parents and eligible students in their native language or dominant mode of communication.

Ref: Family Educational Rights and Privacy Act, 20 USC 1232g; 34 CFR Part 99  
Education Law § 225  
Public Officers Law §87(2)(a)  
Arts and Cultural Affairs Law, Article 57-A (Local Government Records Law)  
8 NYCRR 185.12 (Appendix I) Records Retention and Disposition, Schedule ED-1 for Use by School Districts and BOCES

Adoption date: June 10, 2002

## STUDENT RECORDS REGULATION

It is recognized that the confidentiality of student records must be maintained. The following necessary procedures have been adopted to protect the privacy of student records.

Section 1. Pursuant to the "Family Educational Rights and Privacy Act of 1974" it shall be the policy of this school district with respect to parents or guardians of a student under 18 years of age and with respect to students 18 years of age or older (an "eligible student") to permit such persons to inspect and review any and all official records, files and data directly related to that student, including all personally identifiable materials that are incorporated into each student's cumulative record folder, and intended for school use or to be available to parties outside the school or school system, and specifically including, but not necessarily limited to, identifying data, academic work completed, level of achievement (grades, standardized achievement test scores,) attendance data, scores on standardized intelligence, aptitude and psychological tests, interest inventory results, health data, family background information, teacher or counselor ratings and observations, and verified reports of serious or recurrent behavior patterns.

Section 2. Parents or guardians of a student under 18 years of age or an eligible student shall have an opportunity for a hearing to challenge the content of that student's school records, on the grounds that he/she believes that the records are not inaccurate, misleading, or otherwise in violation of the privacy or other rights of students, and to provide an opportunity for the correction or deletion of any such inaccurate, misleading, or otherwise inappropriate data contained therein.

Section 3. In order to implement the rights provided for in Sections 1 and 2, hereof, the following procedures are adopted:

1. A parent or guardian of a student under 18 years of age or an eligible student shall make a request for access to that student's school records, in writing, to the Superintendent of Schools. Upon receipt of such request, arrangements shall be made to provide access to such records within 45 days after the request has been received.
2. A parent or guardian of a student under 18 years of age or an eligible student, who wishes to challenge the contents of that student's school records, shall submit a request, in writing, identifying the record or records which they believe to be inaccurate, misleading or otherwise in violation of the privacy or other rights of the student together with a statement with the reasons for their challenge to the record to the Superintendent.

3. Upon receipt of a written challenge, the Superintendent shall provide a written response indicating either that he/she finds the challenged record inaccurate, misleading or otherwise in violation and it will be corrected or deleted, or that he/she finds no basis for correcting or deleting the record in question, but that the parent or guardian or eligible student will be given an opportunity for a hearing. Such written response by the Superintendent shall be provided to the parent/guardian or eligible student within 14 days after receipt of the written challenge. Said response shall also outline the procedures to be followed with respect to a hearing, if desired by the parent/guardian or eligible student.
4. Within 14 days of receipt of the response from the Superintendent, a parent/guardian or eligible student may request, in writing, that a hearing be held to review the determination of the Superintendent.
5. Copies of records are available at 25¢ per page.

Section 4. Student records and any material contained herein, which is personally identifiable, are confidential and may not be released or made available to persons other than parents/guardians or students without the written consent of parents/guardians of students 18 years of age or younger except where disclosure is made pursuant to an exception under FERPA. Such records and material may be made available without the written consent of parents/guardians or eligible students under such exemptions of FERPA, including, but not limited to the following cases:

1. to other school officials, including teachers within the district who have legitimate educational interests;
2. to officials of another school in which the student intends to enroll, if the parents/guardians or student are notified of the transfer of records, are given a copy if they desire one, and have an opportunity for a hearing to challenge the content of the records;
3. to authorized representatives of certain designated federal and state agencies, including state educational authorities, for the purpose of the audit and in connection with the enforcement of federal legal requirements;
4. in connection with a student's application for or receipt of financial aid; and
5. pursuant to court order or subpoena, after notification to the parent/guardian or eligible student;
6. to child protective services, or where there exists an emergency to protect the health or safety of the student or others;
7. to the juvenile justice system as specified under the FERPA regulations.

Section 5. Whenever a student record or any material contained therein is to be made available to third persons, other than those covered by the exceptions

indicated in Section 4 hereof, the parent or guardian of a student under 18 years of age or an eligible student must file a written consent to such action and any third party to whom such records have been made available must sign a written statement that he/she will not further release such records without the consent of the parent/guardian or eligible student.

Section 6. All persons requesting access to such records except for those persons provided for in subdivision 1 of Section 4 hereof, state agencies provided for in subdivision 3 of Section 4 hereof and those persons provided for in subdivision 5 of Section 4 hereof shall be required to sign a written form which indicates a legitimate educational or other interest that such person has in inspecting the records. Such form shall be kept with the student's file.

Section 7. Whenever the district is requested to forward a student's school records, including health records, to a neighboring public school district within this BOCES, the following procedures shall be followed:

1. A student's school records, including health records, shall be forwarded to the neighboring public school district from which such a request is made upon the receipt of a request by the appropriate administrator of the requesting district.
2. The prior written consent of the student's parents/guardian or eligible student shall not be necessary. However, upon the forwarding of the student's records, the parent(s) or guardian(s) of the student or eligible student shall be notified in writing that the records have been transferred.

Such notice shall be by certified letter, return receipt requested and such letter shall be forwarded to the parents/guardians or eligible student not later than the close of business of the day upon which the student's records are forwarded to the neighboring district.

Section 8. All instructional material, including teachers' manuals, which are used in connection with a research or experimental program must be available for inspection by the parents or guardians of the children engaged in such program. "Research or experimentation program or project" is defined as a program or project "designed to explore or develop new or unproven teaching methods or techniques."

Section 9. A letter shall be sent to parents or guardians of students under 18 years of age and to eligible students informing them of their rights pursuant to the "Family Educational Rights and Privacy Act of 1974." See Exhibit 5500-E.1.

#### *Retention and Disposition of Student Records*

The Board adheres to state and federal law and regulations governing the retention and disposition of student records, including the Records Retention and

Disposition Schedule ED-1 setting forth the minimum length of time school district records must be retained. Student records that have been kept in excess of the minimum retention periods outlined in the schedule will be disposed of, except in the following cases:

1. Records being used in legal actions must be kept for one year after the legal action ends, or until the scheduled retention period has passed, whichever is longer.
2. The district will not destroy any education records while there is an outstanding request to inspect and review them.
3. Records being kept beyond the established retention period at the request of state or federal agencies will be kept until the district/BOCES receives the audit report, or the need is satisfied.
4. Personally-identifiable special education records which may be useful to a child when applying for social security or other benefits and which have been requested by a parent/guardian or eligible child may be kept beyond the minimum period of time.
5. Any school records predating 1910 require express written permission from the State Archives and Records Administration.
6. No record may be disposed of unless it is listed on this schedule or its disposition is covered by other laws. In cases where the district is uncertain as to the length of time a record must be kept, the district will contact the State Education Department.

For purposes of this regulation, the disposition of student records means the physical destruction, removal of personal identifiers from information so that it is no longer personally-identifiable, sale, gift, or other authorized means of disposal.

Some of the student records and their minimum retention dates are as follows:

#### *General Student Records*

A student's cumulative achievement record including information on school entry, withdrawal and graduation, subjects taken and grades received from examinations will be kept permanently. Other records will be kept for the minimum period of time listed in the schedule. (See ED-1.)

#### *Special Education Records*

The basic records in a student's special education file including a student's most recent Individual Education Program (IEP,) student information sheet and summary record will be kept 6 years after the student receives a diploma or 6 years after the student attains age 21, whichever is shorter. Other special education records in that file will be kept for the minimum period of time outlined in the schedule (See ED-1.)

In accordance with federal regulations, the school shall inform parents/guardians when personally-identifiable information that has been collected is no longer needed to provide educational services to the student. In informing parents/guardians about their rights, the school will remind them that these records may be needed by the child in connection with applications for social security or other benefits. If the parents/guardians then request that the information be destroyed and the school determines that the information is no longer needed to provide educational services to the student, the personally-identifiable information must be destroyed. However, a permanent record of a student's name, address, phone number, his/her grades, attendance record, classes attended, grade level completed and year completed will be kept without time limitation.

Personally-identifiable information on a child with a disability may be retained permanently unless the parents/guardians or eligible child request that it be destroyed.

Pursuant to the Family Educational Rights and Privacy Act and taking into consideration the age of the student and the type or severity of disability, the district may transfer the rights of parents/guardians regarding Special Education records to the student when the student becomes 18 years of age.

Adoption date: June 10, 2002