

RICHARD M. TEITELMAN SCHOOL DISTRICT



687 Route 9 – Cape May, NJ 08204
TELEPHONE: (609)884-3475 FAX: (609)884-4311

Gregory M. Lasher
Principal

Eric Simonsen
Assistant Principal

To: Parent(s)/Guardian(s)

From: Mrs. Sally D. Yerk, School Health Educator and Mr. Greg Lasher, Principal

This year 7th grade students will receive 6 weeks of Health and again as an 8th grader. The Health class is pulled-out from the Physical Education Classes.

The 7th grade program consists of the following topics: goal setting; responsible decisions making; nutrition/healthy eating choices; parenting skill and baby-sitting safety; puberty; reproduction and pregnancy; HIV/AIDS; marijuana/smoking facts; impact of drugs and inhalants on the body.

The 8th grade program consists of the following topics: family communication; family relationships; signs of mental illness and depression; review of human reproduction; birth of a baby; responsible decision making; challenges of teen parenthood; abstinence; diseases and vaccinations; drugs; addiction.

The Lower Cape May Regional School District recognizes that the most important adult a junior high school student should be able to turn to for help, support, and guidance are his/her parent(s) guardian(s). With this belief in mind, all class material will be available to you on-line at Mrs. Yerk's website which is:

<http://www.lcmrshooldistrict.com/mrsyerkrthealthpage/index.php>

If you have no access to a computer, a paper copy will be sent home through your student upon request.

Sincerely,

Greg Lasher

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August 2011 Annual Notification of Rights under FERPA

The Family Educational Rights and Privacy Act (FERPA) affords parents and students over 18 years of age ("eligible students") certain rights with respect to the student's education records. These rights are:

(1) The right to inspect and review the student's education records within 45 days of the day the School receives a request for access.

Parents or eligible students should submit to the School principal a written request that identifies the record(s) they wish to inspect. The Principal will make arrangements for access and notify the parent or eligible student of the time and place where the records may be inspected.

(2) The right to request the amendment of the student's education records that the parent or eligible student believes are inaccurate.

Parents or eligible students may ask the School to amend a record that they believe is inaccurate. They should write the School principal, clearly identify the part of the record they want changed, and specify why it is inaccurate. If the School decides not to amend the record as requested by the parent or eligible student, the School will notify the parent or eligible student of the decision and advise them of their right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the parent or eligible student when notified of the right to a hearing.

(3) The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.

One exception, which permits disclosure without consent, is disclosure to school officials with legitimate educational interests. A school official is a person employed by the School as an administrator, supervisor, instructor, or support staff member (including health or medical staff and law enforcement unit personnel); a person serving on the School Board; a person or company with whom the School has contracted to perform a special task (such as an attorney, auditor, medical consultant, or therapist); or a parent or student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.

A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.

Upon request, the School discloses education records without consent to officials of another school district in which a student seeks or intends to enroll.

(4) The right to file a complaint with the U.S. Department of Education concerning alleged failures by the *School District* to comply with the requirements of FERPA. The name and address of the Office that administers FERPA are:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202-5901

[NOTE: In addition, a school may want to include its directory information public notice, are required by § 99.37 of the regulations, with its annual notification of rights under FERPA.]

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Title I — Parents' Right-to-Know

Dear Parent/Guardian:

The law requires that all schools receiving Title I funds must inform parents of their right to ask schools about the qualifications of their child's teachers. Our school receives Title I funding and we are happy to share this information with you at your request.

We believe that nothing is more important to your child's education at school than having a well-prepared and highly qualified teacher. The law requires that all teachers who teach in core content areas must meet a specific legal definition of "highly qualified" in order to teach in schools that receive Title I funding. The legal definition of a "highly qualified teacher" has three parts. It states that the teacher must have the following:

1. A four-year college degree
2. A regular teaching certificate/license
3. Proof of his/her knowledge in the subject they teach

All of our teachers already meet this legal definition of highly qualified.

I encourage you to support your child's education and communicate with your child's teacher(s) on a regular basis. For more information on NCLB, and the role of parents, please visit the United States Department of Education (USDE) Web site at www.ed.gov/nclb.

By partnering, families and educators can provide your child with the best education possible.

Sincerely,

Greg Lasher, Principal

It is our mission to create a diverse learning environment in which all are motivated to find their purpose, to see their worth, to realize their full potential in this community of caring, and to race toward excellence.



Physical Education Class Policies

Students are expected to follow 4 regulations in the P. E. Class to be successful:

- Be on time for class.
- Be prepared with the proper gym attire (NO Pajamas).
- No Gum Chewing.
- Follow the Rules.



GYM ATTIRE

Acceptable clothing will be: shorts to the mid-thigh, school appropriate T-shirt, securely-TIED sneakers, and socks. Sweat suits are recommended for outdoor activities in late fall and early spring. Students must have a change of dress. Change of dress means clothing not worn to school! No zippers or belt loops!

NO JEWELRY may be worn during gym activities.

NO PROFANITY is to be used in class.

GRADING

- 5 points – proper dress (untied shoes will receive minus 10 points)
- 5 points – proper calisthenics
- 10 points – participation in activity of the day

20 total points/day

100 total points/week

*Points will be deducted if the students do not follow the class regulations!

ACCEPTABLE PHYSICAL EDUCATION EXCUSES



- Doctor/Hospital Medical Excuse – The student will not dress for gym and these absences do not need make-up work, unless it is more than 1 week. The student will be excused to the Media Center. Extended medicals will receive a PE packet to complete.
- School Nurse Excuse – This is a note written by a parent/guardian and given to the school nurse. The nurse will determine if the student will be able to participate in gym. STUDENTS MUST BRING CLOTHES AND STILL DRESS FOR GYM!
- All excuses must be given to the PE teacher at the beginning of class.



MAKE-UP WORK – TO BE TURNED WITHIN 3 DAYS AFTER ABSENCE!
A student will receive credit in P.E. for absence from class if they complete one of the following: a poster, picture collage, drawing, or a 100 word report on a sport.

Consequences when students are not prepared for P.E. class:

1st/2nd offense – warning by a P.E. teacher

4th offense – 4:00 detention

3rd offense – parent contact

5th offense – 5:15 detention

Roseanne Casiello, R.N.

School Nurse

RICHARD TEITELMAN SCHOOL
687 Rt. 9
Cape May, New Jersey 08204

Telephone 609-884-3475 Ext. 275
Fax 609-884-4311

Dear Parent or Guardian:

The State of New Jersey has issued guidelines requiring a physical examination to be done by the "home physician" (primary care provider) on each student.

The adolescent years are important growing years both physically and emotionally.

Developmental milestones occur throughout a child's lifespan and it is important to have your family doctor or pediatrician examine your child periodically.

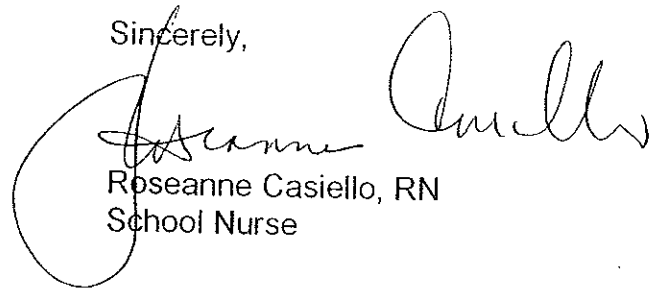
It is recommended that your family doctor evaluate particular growth markers that occur during the adolescent years at least once. The doctor will also evaluate and update particular immunizations that might be needed.

All students entering seventh grade require a physical. Those eighth grade students who had a physical last year do not need another one, unless the student is playing sports. Those in eighth grade who did not fulfill this requirement must fulfill it this year.

Enclosed is a physical form which should be filled out by your doctor and returned to the school nurse to be kept in your child's health record folder. This form is also for participation in sports.

Thank you.

Sincerely,



Roseanne Casiello, RN
School Nurse

LOWER CAPE MAY REGIONAL SCHOOL DISTRICT
687 ROUTE 9 - CAPE MAY NJ 08204
609-884-3475

Student's Name _____ ID# _____ Birthdate _____ Grade _____

Current Address _____
Street _____ City _____ Home Phone _____

To Parent or Guardian: To serve your child in case of accident or sudden illness, it is necessary that you give the following information for emergency calls:

Mother/Guardian _____
Home Address/Phone _____
Work Address/Phone _____
Cell Phone _____

Father/Guardian _____
Home Address/Phone _____
Work Address/Phone _____
Cell Phone _____

List two neighbors or nearby relatives who will assume temporary care of your child if you cannot be reached:

| | |
|--------------------|--------------------|
| Name _____ | Name _____ |
| Home Address _____ | Home Address _____ |
| Work Address _____ | Work Address _____ |
| Phone: Home _____ | Phone: Home _____ |
| Relationship _____ | Relationship _____ |
| | Work _____ |

SEE OTHER SIDE

Does child have health insurance:

Yes _____ If Yes, name of insurance company _____

No _____ NJ FamilyCare provides free or low cost health insurance for uninsured children and certain low income parents. For more information call 800-701-0710 or visit www.nifamilycare.org to apply online.

Cape Community Health Center's brochure is enclosed for those who have no health insurance.

List any medical/surgical care your child has received during the past year:

Allergy: Kind: _____ Medications: _____
Allergic Reaction: _____ Medications: _____

Restrictions: Type: _____

Doctor _____ Phone _____
Dentist _____ Phone _____
Hospital _____ Address _____ Phone _____

I, the undersigned, do hereby authorize officials of New Jersey Public Schools to contact directly the persons named on this card and do authorize the named physicians to render such treatment as may be deemed necessary in an emergency, for the health of said child.

In the event that physicians, other persons named on this card, or parents cannot be contacted, the school officials are hereby authorized to take whatever action is deemed necessary in their judgment, for the health of the aforesaid child.

I will not hold the school district financially responsible for the emergency care and/or transportation for said child.

Signature of Parent(s)/Guardian(s) _____ Date: _____