

Student's Full Name (Please Print)

School

Grade Level

**STUDENT ACKNOWLEDGEMENT
2019-2020**

I RECEIVED the information by having it read and/or viewed via projection. The 2019-2020 *Code of Student Conduct & Policy Guide* includes the following:

- Family Educational Rights & Privacy Act
- Americans with Disabilities Act Title II
- Civil Rights Act of 1964 Title VII
- Florida Civil Rights Act of 1992
- Florida Educational Equity Act
- Individuals with Disabilities Education Act, Child Find
- McKinney-Vento Homeless Assistance Act of Title VII-B
- Title IX of Education Amendments of 1972
- Notification of Risk
- Section 504 of the Rehabilitation Act of 1973
- Public Safety Information Act of 1997
- Student Acceptable Telecommunications/Electronic Communications Use Policy and Agreement
- Protection of Pupil Rights Amendment

**Responsibility Makes a
Difference**

**Becoming a responsible
adult begins with
becoming a responsible
student!**

I understand that the 2019-2020 *Code of Student Conduct & Policy Guide* is online; therefore, not relieving me of the responsibility for compliance with the *Code of Student Conduct & Policy Guide*. I have also reviewed the "Bus Conduct Rules" presentation and am aware of the consequences for bus violations.

Student Signature_____
Date of Signature

Student's Full Name (Please Print)

School

Grade Level



2019-2020 Code of Student Conduct & Policy Guide and Parent's Guide

DIGITAL NOTIFICATION

The 2019-2020 editions of Lake County Schools "Code of Student Conduct & Policy Guide" and "Family and School Partnership for Student Achievement: A Parent's Guide to Help your Child Succeed in School" are now available electronically.

The Code of Student Conduct is published to communicate the expectations of the School Board for students' behavior in pre-kindergarten through grade 12, including Lake County Virtual, high school students attending either the Lake Technical Center or college dual-enrollment program and to summarize the policies of Lake County Schools related to the management of student conduct. Accordingly, this handbook:

- Defines the **responsibilities** and **rights** of students;
- Defines the **rules of conduct** and the **behavioral expectations** for students;
- Establishes the **consequences for violations** of the rules of conduct; and
- Describes the **procedures for processing disciplinary violations**.

The Code of Student Conduct is published once a year and may not contain subsequent changes in policy or procedure. When a policy or procedure is revised, the change will be communicated through school newsletters or other means of communication, at which time the revision will be posted electronically and shall replace previous information.

Help Lake County Schools conserve resources by downloading copies of these two booklets from the following website addresses:

- Code of Student Conduct & Policy Guide
<https://www.lake.k12.fl.us/studentconduct>
Printed books are available at schools and Student Services located at 512 S. Palm Ave., Howey-in-the-Hills, FL 34737
- Family and School Partnership for Student Achievement: A Parent's Guide to Help your Child Succeed in School
<https://www.lake.k12.fl.us/departments/teachinglearningandleadership/curriculum-instruction-and-assessment/curriculum-and-instruction/parent-student-resources>
Printed books are available at schools and the Learning Resource Center located at 510 S. Palm Ave., Howey-in-the-Hills, FL 34737.

☐ **YES**, I will obtain copies electronically of the "Code of Student Conduct & Policy Guide" and "Family and School Partnership for Student Achievement: A Parent's Guide to Help your Child Succeed in School" from the websites listed. I will review these documents with my child.

Please sign and return this form to your school.

Failure to return this acknowledgement form will not relieve a student or the parent/guardian of the responsibility for compliance with the Code of Student Conduct & Policy Guide or accountability for loss or damage to Lake County School property.

Print Student Name

Student Signature

Date

Print Parent/Guardian Name

Parent/Guardian Signature

Date

Mascotte Charter School

Student's Full Name (Please Print)

School

Grade Level

2019-2020 PARENT OPT-OUT NOTIFICATIONS

Please mark your decisions in the four (4) opt-out areas below and return a copy of this form to your child's school.

Opt-Out 1: Internet Usage (For more information, contact the Information & Instructional Technology Department)

As the parent/guardian of this student, I have read and understand *the Lake County Schools Student Acceptable Telecommunications/Electronic Communications Use Policy and Agreement* in Section VI. I have also discussed it with my son/daughter. I understand that my son/daughter may have access to the Internet through the school network and the school system may not be able to restrict access to all inappropriate and controversial materials on the Internet. I will not hold the School Board of Lake County, Florida, responsible for materials my son/daughter acquires as a result of the use of the Internet from school facilities. I hereby release the district and its personnel from any and all claims and damages arising out of my son/daughter's use of the Internet through the district's network. For more information, I may call the school's Technology Contact or Media Specialist, or the Lake County Schools' Information and Instructional Technology Services Department. I understand that I may opt-out of this provision to prevent my son/daughter from accessing the Internet through the school network. However, in order to opt-out I must check below. By statute, criminal penalties may also be imposed. Section 815.06, Florida Statutes [SBP: 8.601 & 8.60]

☐ **I ELECT TO OPT-OUT OF THE ABOVE PROVISION AND DO NOT GRANT PERMISSION FOR MY SON/DAUGHTER TO ACCESS THE INTERNET THROUGH THE SCHOOL NETWORK.**

Opt-Out 2: Parent Release (For more information, contact the Communications Department)

Unless I opt-out by checking below, I, as parent or legal guardian of a student enrolled in a School Board of Lake County, Florida, school, hereby give the School Board of Lake County, Florida, my consent and permission to: (i) record said student's participation and appearance on video tape, audio tape, film, photograph or any other medium; (ii) use said student's name, likeness, voice and biographical material in connection with these recordings; and (iii) to exhibit or distribute such recording in whole or in part without restrictions or limitation for any educational or promotional purpose which the School Board of Lake County, Florida, 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 media (print, broadcast, and online), local cable television programming, and the school or district web site and social media pages. 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 School Board of Lake County, Florida, 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 Sections 1002.20 and 1002.22, Florida Statutes.

☐ **I ELECT TO OPT-OUT OF THE ABOVE PROVISION AND DO NOT GRANT PERMISSION FOR ANY OF THE PARENT RELEASE INFORMATION NOTED ABOVE.**

Opt-Out 3: Directory Information (See Section III: Public Notice - FERPA. For more information, contact the Student Services Department)

Under the guidelines stipulated in 34 CFR §99.3, the School Board of Lake County, Florida, reserves the right to release "Directory Information" to the general public without obtaining prior permission from students or parents/guardians/eligible students. Directory information includes, but not limited to, 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, grade level/anticipated graduation date, honors and awards received, district student email, and diploma conferred.

☐ **I ELECT TO OPT-OUT OF THE ABOVE PROVISION AND DO NOT GRANT PERMISSION FOR ANY OF THE DIRECTORY INFORMATION NOTED ABOVE TO BE RELEASED.**

Opt-Out 4: District Student E-mail Account for Academic Purposes (For more information, contact the Information & Instructional Technology Department)

Unless I opt-out by checking below, I, as a parent or legal guardian of a student enrolled in a School Board of Lake County, Florida, school, hereby give the School Board of Lake County, Florida, my consent and permission to be issued a District Student E-mail account to be used for academic purposes.

I expressly release and discharge the School Board of Lake County, Florida, from any and all claims and damages arising out of my son/daughter's use of student e-mail through the District's network. For more information, I may call the schools' Technology Contact or Media Specialist, or the Lake County Schools' Information and Instructional Technology Services Department or refer to Section VI in the Code of Student Conduct. I understand that I may opt-out of this provision to prevent my son/daughter from accessing Student E-mail through the school network. However, in order to opt-out, I must check below.

☐ **I ELECT TO OPT-OUT OF THE ABOVE PROVISION AND DO NOT GRANT PERMISSION FOR MY SON/DAUGHTER TO HAVE A DISTRICT E-MAIL ACCOUNT FOR ACADEMIC PURPOSES.**

Signatures below indicate your opt-out request for areas checked above.

Student

Date

Parent/Guardian

Date

Witness

Date

Witness OR School Personnel

Date

Note: Witnesses are required and must be at least 18 years of age and cannot be a current Lake County School student.

LAKE COUNTY SCHOOLS
MASCOTTE CHARTER SCHOOL

I / We hereby grant permission for _____
(Student's Full Name)

to participate in an educational field trip or **in all 2019-2020 Field Trips**
OTHER

*** All School Field Trips** to various locations during the **2019-2020** school year and to make incidental stops enroute and return, when determined to be necessary desirable.

I / We authorize the school representative to obtain medical treatment in event of injury or illness and agree to pay any expense incurred for this treatment.

I / We understand that under present Florida law, if my / our child is riding in a private automobile, which is involved in an accident, he/she will be primarily covered for bodily injury under my/our family automobile policy. and

I / We agree to submit any medical bills incurred to my/our insurance company for payment. If my / our policy has been issued with a deductible clause relative to the personal injury protection,

I / We understand that I / We have assumed that deductible amount when I / We purchased the policy.

TWO WITNESSES: (18 years of age or older)

1. _____

(Signature of Parent or Guardian)

2. _____

*(Street Address -**DO NOT** USE PO BOX)*

OR

(City & Zip Code)

(School Authority)

(Emergency Telephone Number)

1. One copy must be retained by the administration and a duplicate copy must accompany the program sponsor when leaving the school property.
2. For after school activities, the reverse side of this form must be filled out completely.

***Grade levels will send announcements of specific field trips.**

Effective Date: 07/01/93



2019-2020 STUDENT / TEACHER / ADMINISTRATOR / PARENT COMPACT

As Principal, I am committed to providing a safe and orderly environment that is conducive to learning. As the Instructional Leader of the School, I will support the teachers in their effort to teach all students. Opportunities for the establishment and attainment of high expectations will be made available to all students. I will remain committed to having high expectations for our staff and students.

Tiffany Mayhugh-Rego

08/01/2019

Tiffany Mayhugh-Rego, Principal

Date

STUDENT RESPONSIBILITIES

1. Come to school every day prepared to learn, work hard, and take responsibility for my own behavior.
2. Know and follow school and class rules.
3. Communicate regularly with my parents and teachers about school experiences so that they can help me to be successful in school.
4. Be respectful to school personnel, other students and school property.
5. Have a positive attitude and Growth Mindset towards self, others, school and learning.

I pledge to **SOAR** every day,
Staying **Safe** in every way.
I am **Optimistic** about my tasks,
And **Accountable** for what teachers ask.
I will **Respect** myself and my peers,
And have a successful Eagle year!

PARENT / GUARDIAN RESPONSIBILITIES

1. Monitor assignments and assist with homework completion.
2. Make sure my child attends school regularly, is on time, and is prepared to learn, with homework completed.
3. Communicate frequently with my child's teacher through notes and conversations and participate in 2 conferences about my child's academic progress.
4. Promote a positive attitude and Growth Mindset about school in order to appreciate the value of a good education.
5. Encourage my child to demonstrate respect for school personnel, his/her classmates and school property.

PLEASE INITIAL at Conferences:

Conference 1 _____
 Date Initials

Conference 2 _____
 Date Initials

TEACHER RESPONSIBILITIES

1. Provide quality teaching and leadership to my students and their families.
2. Treat each child with dignity and respect.
3. Strive to address the individual needs of each student and accurately inform parents of their child's progress.
4. Have high expectations and help every child to develop a love of learning and a Growth Mindset.
5. Acknowledge that parents are vital to the success of this school and its students.

I pledge to **SOAR** every day,
Safety is the only way.
I am **Optimistic** about our tasks,
And **Accountable** for what students ask.
I will **Respect** my students' revelations,
And always have high expectations!

Student Signature

Date

Parent / Guardian Signature

Date

Teacher Signature

Date

LEARN.GROW.ACHIEVE

MASCOTTE CHARTER SCHOOL: TECHNOLOGY ACCEPTABLE USE POLICY, 2019-2020

Copy Available on our Website: <https://mse.lake.k12.fl.us/information/policies>

Mascotte Charter and Lake County Schools provide computers and network access to enhance instruction. Students are responsible for good behavior while using the devices and accessing the network.

We are not a BYOD school.

Mascotte Charter students will follow the Technology Rules under *Section V: Policies Government Student Behavior, Bullying or Harassment* and *Section VI: Technology* of the Lake County School (LCS) **2019-2020** Code of Conduct (CoC) that include the following (*please initial each*):

Student Initials	Parent Initials	
_____	_____	Bullying or Harassment: Cyberbullying and Cyberstalking (CoC Section V);
_____	_____	Cell Phones and/or any Electronic Communications Devices (CoC Section VI);
_____	_____	Student Acceptable Telecommunications/Electronic Communications Use Policy Agreement (CoC Section VI);
_____	_____	District Student E-Mail Account for Academic Purposes (CoC Section VI).

I PLEDGE THAT I WILL (*please initial each*):

_____	_____	Honor & Respect the Mascotte Charter Student Handbook (2019-2020)
_____	_____	Honor & Respect the Lake County Schools' Code of Conduct and Policy Guide (2019-2020).
_____	_____	Be Responsible with any technology (hardware, software, network) that I use.
_____	_____	Not remove any technology from school property without teacher and administration approval.
_____	_____	Access only the websites and/or software assigned by my teacher(s), school staff and/or administration.
_____	_____	Not search or display inappropriate images/videos.
_____	_____	Not record any pictures/videos of students without my teacher's permission.
_____	_____	Turn off and store personal devices in a secure location while on school property.
_____	_____	Not connect personal devices to the school network.
_____	_____	Not wear earbuds without teacher approval.
_____	_____	Not use Bluetooth / Wireless headphones.
_____	_____	Not use or share another individual's username or password.
_____	_____	Log off technology so no one can access my account without my permission.
_____	_____	Not download or stream any music, videos and/or games without teacher and administration approval.

I UNDERSTAND THAT (*please initial each*):

_____	_____	Mascotte Charter is not responsible for any personal device(s) that is lost, stolen and/or damaged while on school property.
_____	_____	I am liable for the expense of any lost, stolen and/or damage to school technology that is assigned to my responsibility.
_____	_____	All Student e-mail will pass through a Message Security System.
_____	_____	Technology is a privilege, not a right, and inappropriate use will result in the cancellation of this privilege by IT and/or disciplinary action by school officials

CONSEQUENCES (*please initial each*):

_____	_____	Students will lose their privileges to use the computer except for necessary testing with supervision.
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Student Name (Please Print):

Student Signature:

Date:

Parent/Guardian Name (Please Print):

Parent/Guardian Signature:

Date: