# JEFFERSON COUNTY ALTERNATIVE SCHOOL



Charles Kokiko, Superintendent Jefferson County ESC
Vance Miller, Director
Jose Davis, Assistant Educator
Joe Porter, Resource Officer
Jason Swartzmiller, Aide

Jefferson County Alternative School
Quest Center
2550 Cherry Avenue
Steubenville, OH 43952
740.381.7150

#### Jefferson County Educational Service Center

2023 Sunset Boulevard Steubenville, OH 43952

Telephone: (740) 283-3347 FAX: (740) 283-2709

Dr. Charles Kokiko Superintendent (740) 283-3347 Ext 122 Vance Miller Director

Telephone: (740) 381.7150 Email: vmiller@jcesc.org

On behalf of the Jefferson County Educational Service Center, I would like to welcome the students to our Alternative School. This school will provide the students with an opportunity to succeed academically in a different type of learning environment. We will demand discipline and respect for all students and staff. Our goal is to deliver each student with an individual education plan, counseling services, transitional planning, and to have each student return to his or her school and community with a positive attitude toward learning. We wish you a successful school year!

Sincerely,

Jefferson County Alternative School Staff

#### Rules & Regulations

- Doors will close for entry at 9am unless you provide a documented excuse.
- Cell phones will be powered off, placed in a basket with our resource officer and will be handed back when it is time for your departure.
- It is very helpful that we receive a working/active contact number for any guardian that we may reach out to regarding any feedback for the student.
- There will be no talking with other Alternative students during school hours. If the student has any questions or concerns he/she can reach out to any of the staff members present.
- We have **ZERO TOLERANCE** for arguing. If you feel the need, you will be sent home immediately and the time missed will be made up.
- We require 5 NEW assignments be completed daily with a grade of 70% or higher. If the score is lower than 70%, it will be sent back with 1 opportunity to redo.
- There is **ZERO TOLERANCE** for sleeping at the Alternative School. If you can't stay awake, you will be asked to leave and that time will be made up. Laying your head down is also considered sleeping.
- Profanity will not be permitted.
- Social media websites are not permitted.
- No Backpacks; No fanny packs;
- No hoodies (hood pulled up), bandanas or hats are to be worn at the Alternative School.
- Pants are to be worn waste high with no under garments showing.
- Masks will be worn at all times. Can take off to eat or drink.
- Wearing headphones is a privilege that WE give here at the Alternative School. Breaking any of the above rules gives US the right to take away the headphones privilege.

STUDENT:	DATE:
GUARDIAN:	DATE:

Subject: Smoking on Alternative School Premises

#### DIRECTIVE:

- 1. It is illegal for students to smoke or possess tobacco on Alternative School premises. (3313.751 ORC)
- 2. School premises are defined as the entire building grounds and parking lots and garages known as the Jefferson County Alternative School.
- 3. Tobacco products will be confiscated and destroyed.
- 4. Students observed violating this order are to be apprehended by the Jefferson County Alternative School Resource Officer.

Jefferson County Alternative School Staff

#### JEFFERSON COUNTY ALTERNATIVE SCHOOL

## **MISSION**

The mission of the Jefferson County Alternative School is to provide a highly structured and safe learning environment that meets the educational, physical and emotional needs of our students. We will foster the development of character in our students which will enhance their chances of becoming productive members of their communities.

#### **VISION**

The vision of the Jefferson County Alternative School is to create a positive learning environment in which our students are motivated to strive for excellence, be responsible citizens and respect the rights of others, as well as the diversity of others.

#### **PREFACE**

The Jefferson County Alternative School was created by participating school districts and is operated by the Jefferson County Educational Service Center to provide a structured educational opportunity for those students unable to adjust to alternative programs available in their home schools.

It is the Alternative School's mission and purpose to provide each student with a safe learning environment to develop their self-esteem so that they may move on academically and socially. Student's work will earn them credit from their home school.

The academics of the Alternative School is based on the Ohio learning standards, which includes courses in math, english language arts, social studies, science and electives. All work completed at the Alternative School will be graded and forwarded to student's home school for credit.

Students will also participate in counseling programs provided by Coleman Professional Services.

Students will be provided with supplies.

#### DAILY SCHEDULE

School hours will be from 8:00 AM - 2:00 PM. Searches will be conducted at time of entry and at any time deemed necessary by the staff, resource officers or juvenile court personnel. Be certain that you do not possess any item forbidden by this handbook. Any item confiscated may result in immediate arrest. Students may be drug tested at any time while attending the Jefferson County Alternative School.

#### **REQUIREMENTS FOR PARENTS**

Parents/Guardians of students attending Alternative School must cooperate with Alternative School Staff and The Jefferson County Educational Service Center to ensure the behavioral and educational success of their child. Failure to cooperate with the Alternative School in the education of your child could result in Unruly (A): Wayward and disobedient filed against students/parents/guardians.

Parents/Guardians must report all absences to the Alternative School daily. **Telephone-(740) 381-7150** Absences will only be excused for extreme illness accompanied with doctor excuse, family emergency or death in family. Students who need to be dismissed early for any reason must have a note from their parent/guardian stating reason for dismissal as well as contact number of parent/guardians.

Parents/Guardians of any student who is taking prescription medication must deliver medication to Alternative School Staff. Non-prescription medication is not permitted. A medical release must be signed by parents/guardian.

All students entering the Alternative School will be required to participate in an intake assessment administered by Coleman Professional Services and complete any and all necessary student documentation and/or releases.

## <u>REQUIREMENTS FOR STUDENTS</u>

- 1. Attendance for all assigned days is mandatory. Any days missed will be added to the end of their assigned time.
- 2. All pants worn must be worn at the waist. Staff members will determine waist location. All shirts must be tucked in all times while in school. No facial jewelry or tongue bars may be worn at any time. All students are required to wear tennis shoes.
- 3. Talking is not permitted at any time unless the student is recognized and permission is granted.
- 4. Students will be assigned a seat and are not to move from the seat unless permission is given by a staff member.
- 5. Restrooms breaks may be requested by raising one's hand. Only one student will be permitted in the restroom at one time. Students must sign in and sign out when entering and leaving the restroom.
- 6. All coats, hats and other personal items will be placed in the appropriate area. None of these items are permitted at student's desk.
- 7. Electronic items such as cellphone, gaming devices, etc. are not permitted at the Alternative School. Any item brought to the school after the first assigned day will be confiscated and returned to the student on last assigned day.
- 8. Students will be searched every day when entering the school and at any other time staff members feel would be appropriate.
- 9. Profanity or obscene gestures will not be tolerated.
- 10. Students will be assigned responsibilities to help maintain the community of the school.
- 11. Computer use is only to be used for the purpose of academic and elective courses. Inappropriate use of the computer will result the removal of technology for that student for the entire placement.
- 12. Students will be given a breakfast and lunch at the Alternative School. All areas will be cleaned before a student is dismissed.

## **Grading System**

All grades will have completed as a percentage, which will reflect the letter grade adopter by the student's home school district.

Each student's grade will reflect absences each quarter. Parents and students will be advised of achievement and progress each nine-week period. Progress reports will be mailed to parents every five completed days.

## **Discipline**

Discipline is a key component in developing a safe and orderly environment conducive to education. Discipline must also be corrective and a learning experience for students. Our goal cannot be just to punish; we must also correct and improve. With this in mind, the entire staff will be working as a team in setting the tone in the building. We will be fair, caring and firm, while at the same time treating all students as individuals. In the event that a discipline situation has not been resolved, charges may be filed with the Jefferson County Juvenile Court by the Resource Officer.

#### Consequences for Violating Alternative School Policy/Procedures

- 1st -3rd Violation- Student will be given a written assignment on the "Requirements for Students" located in the handbook.
- 4<sup>th</sup>-6<sup>th</sup> Violation- Student will be required to attend after school detention, written assignment and removal of all technology.
- 7<sup>th</sup>-10<sup>th</sup> Violation- Student will be required to attend after school detention all week, written assignment, removal of all technology and will also be subject to a formal complaint being filed with the Jefferson County Juvenile Court.

Each parent/guardian and student will receive a copy of the rules and regulations of the Alternative School and will be required to sign the rules and regulations page to ensure that they received the rules and regulation and that they were understood.

# ALTERNATIVE SCHOOL STUDENT PROFILE

School	Co	ontact		
Student				
Grade	_ DO	)B	Age	
Parent/Guardian_	Father (First)	Mother (First)	Last	
AddressStree	et/RD/PO Box	City	Zip	
		·		
Alternate Phone				
Special Education	n NA□ SL	D ID	ED□	ОНІ
Social Security N	umber:			
Initial Placement	: Date	<u> </u>		
Reason for	Duic			
Placement(Prevention)				
Date	_ No	tes		

## Consent to Release Confidential Information

I,, hereby give full consent to the (PARENT/GUARDIAN NAME)
disclosure of the information and/or the records of
the Social Educator and/or to any persons of the Jefferson County Alternative School properly in need of such information for the purpose of assisting them in developing a
comprehensive service and treatment plan for the above name.
<ul> <li>I understand that this information will be released when appropriate to any and all agencies providing services to families in Jefferson County and elsewhere. Information that may be released may include:         <ul> <li>Student Demographics, Attendance, Grades, Individualized Education Plan (I.E.P)</li> <li>Financial Information (Free and Reduced Lunch Applications)</li> <li>Pertinent Medical, Psychological, and/or Social History Information</li> <li>Any other information that may be beneficial</li> </ul> </li> </ul>
I further understand that these records are protected by the state and/or federal confidentiality regulations, and cannot be disclosed without written consent unless otherwise provided for in the regulation. I also understand that in that I may revoke this consent at any time. In any event, this consent expires automatically one year after the date below. A photocopy of this authorization shall have the same force as the original.
Signed this day of, 20
Signature
Witness

## Medical Authorization Form

Medication I  Medication I	(STUDENT NAME) Son County Alter Dosage	X a Day
ive my permission to the staff of the Jeffers im/her their prescribed medication.  Medication I  Medication I	on County Alter	X a Day
ive my permission to the staff of the Jeffers im/her their prescribed medication.  Medication I  Medication I	on County Alter	X a Day
im/her their prescribed medication.  Medication I  Medication I	Dosage	X a Day
Medication I  Medication I  Medication I		
Medication I  Medication I		
Medication I  Medication I		
Medication I	Dosage	X a Day
MedicationI		
Known medical and/or food allergies:	_	
Known medical and/or food allergies:	Dosage	X a Day
Known medical and/or food allergies:		
Parent/Legal	Guardian	
Staff Membe	er	

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#### 3 INTANGIBLES OF SUCCESS

Parent/Guardian	Date
Ctudent	Doto

**(D)** 

1.) SHOW UP!

2.) GREAT ATTITUDE!3.) GREAT EFFORT!

# <u>Jefferson County Alternative School</u> <u>Drug Testing</u>

I,	(Parent/Guardian), hereby
give permission to the Jefferson County A	Alternative School to screen my
child,	
	(Student Name) for drug or
alcohol use. In order for the school to ma	aintain a safe environment, the
above named student is also subject to ra-	ndom searches by the Alternative
School staff. I understand I will receive a	•
~	
	(Parent Signature)
	(1 archt Signature)
	(Data)
	(Date)

## Internet Safety for the Computer Network

To be read and signed by parent/guardian of students who are enrolled at Jefferson County Alternative School.

As the parent/guardian of	(stu	ıdent
name), I agree that my child shall com	ply with terms of Acceptable I	Jse and
Internet Safety. I understand that acce	ss is being provided to the stud	lents for
educational purposes only. However,	<b>O</b> 1	
completely impossible for the Alternat	<del>_</del>	
to all offensive and controversial mate		
child's responsibility for abiding by th		-
policy and agree to indemnify and hole the computer network and internet acc and costs that may result from my chil networks.	d harmless the Alternative Schoess against all clams, damages	ool. For
Check ONE box only		
I give my child permission to us outlined above.	se computers and the Internet a	S
I do not give my child permission	on to use the computers and Int	ernet.
	(Parent/Guardian Signature)	
	(Date)	

# Alternative School Checklist Complete and Return

1.) Student Profile (A)	
2.) Release of Information (B)	
3.) Medical Authorization Form (C)	
4.) Rules and Regulations (D)	
5.) Drug Testing (E)	
6.) Internet Safety (F)	