

CAMBRIDGE PUBLIC SCHOOLS

159 THORNDIKE STREET CAMBRIDGE, MASSACHUSETTS 02141



August 21, 2017

Dear Families,

Welcome back to a new school year! I hope that you are having a restful and enjoyable summer vacation.

This annual mailing contains very important forms that we need you to complete and return on the first day of school. Some pages are designed for you to keep at home and refer to later. This information is being mailed in either Spanish or English, based on your home language. We have electronic copies available in other languages on our website, but if you need it to be translated into another language, please don't hesitate to ask. You are important to us, and we want to make sure that all families have what you need to support your student's success.

When I think of the over 70 languages spoken in our schools, I'm inspired by the rich diversity within our classrooms. Our public schools have long offered students a global perspective—but I believe we can take our students to even higher levels of success.

Over the course of my first year as your Superintendent, I have engaged with educators, families and community partners to shape a more audacious vision for our school district. Our vision includes providing "rigorous, joyful, and culturally responsive learning with personalized support" for our students. I believe that CPS is on the brink of a major transformation in the culture and consistently high standards within our schools.

You, the families of our students, are crucial to our ability to accomplish great things for all CPS students. I look forward to working with you in the coming year—and to sharing more details of our ongoing district planning process.

In the meantime, enjoy the remaining days of the summer break. I look forward to working with you and your children in the new school year.

Sincerely,

Kenneth N. Salim, Ed.D.
Superintendent

Cambridge Public Schools 2017-18 Annual Student Forms

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Letter from Superintendent Salim

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PLEASE KEEP FOR YOUR INFORMATION

- Guide to Policies for Students & Families
- Emergency Reunification Procedures
- Online Resources & Help Getting Online
- School Committee Information

LAST UPDATED JULY 2017

These forms are very important. Translations of these documents can be found on the CPS website: www.cpsd.us or ask your child's school for assistance. Please return these forms with your child on the first day of school.

تكتسب هذه الاستمارات أهمية بالغة. يمكن العثور على ترجمات لهذه المستندات في موقع CPS على الويب: www.cpsd.us، أو يمكنك الاتصال بمدرسة الطفل للحصول على المساعدة. يُرجى إعادة هذه الاستمارات مع الطفل في اليوم الأول من العام الدراسي.

እነዚህ ቅጾች አጅግ አስፈላጊ ናቸው። የእነዚህ ሰነዶች ትርጉሞች በ CPS ድርጣቢያ፡ www.cpsd.us ላይ ይገኛል። ወይም የልጅዎን ትምህርት ቤት እገዛ ይጠይቁ። እባክዎ እነዚህን ቅጾች ከልጅዎ ጋራ ሆነው በትምህርት ቤት መከፈቻ የመጀመሪያው ቀን የመልሱ።

Estos formularios son muy importantes. Puede consultar la versión traducida de estos documentos en el sitio web de CPS: www.cpsd.us o solicite ayuda en la escuela de su hijo/pupilo. Devuelva estos formularios el primer día de clases.

এই ফর্মগুলি অত্যন্ত গুরুত্বপূর্ণ। এই নথিগুলির অনুবাদ CPS ওয়েবসাইটে পাওয়া যাবে: www.cpsd.us অথবা আপনার সহায়তার জন্য আপনার সন্তানের স্কুলে জিজ্ঞাসা করুন। অনুগ্রহ করে আপনার সন্তানের প্রথম স্কুলের দিনে এই ফর্মগুলি ফিরে দনি।

Fòmilè sa yo enpòtan anpil. Ou kapab jwenn tradiksyon dokiman sa yo nan sitwèb CPS la: www.cpsd.us, sinon mande lekòl pitit ou pou ede ou. Tanpri remèt fòm sa yo ak pitit ou premye jou lekòl.

这些表格非常重要。可在 CPS 网站 www.cpsd.us 上找到这些文档的翻译，也可向您的孩子所在的学校寻求帮助。请在您的孩子入学的第一天上交这些表格。

Estes formulários são muito importantes. As traduções destes documentos podem ser encontradas no website da CPS: www.cpsd.us ou solicite o auxílio da escola do seu filho. Retorne estes formulários através de seu filho no primeiro dia de aulas.

Stay informed!

There are many ways to stay in touch with the Cambridge Public Schools



Cambridge Public Schools (Official Site)



@Cambridge_CPSD



cambridgepublicschools



Cambridge Public Schools



Download the CPS App
from Google Play or the App Store

Check out our website:

www.cpsd.us

- Latest News
- Calendars & events
- Curriculum information
- School Committee updates
- Forms & policies
- Online tools for families
- Job opportunities
- More!

Arrival & Dismissal Survey



Student Name: _____ Grade: _____ (CRLS) LC: _____ Teacher/Homeroom: _____

A PLEASE HELP US UNDERSTAND HOW FAMILIES GENERALLY TRAVEL TO/FROM SCHOOL

On a typical day, assuming good weather, how will your student travel to school in the morning and get home in the afternoon? Please circle only 1 option for AM and 1 for PM.

	(choose 1)	(choose 1)
School bus	AM	PM
Bicycle with parent/caregiver	AM	PM
Bicycle independently	AM	PM
Walk, scooter, skateboard with parent/caregiver	AM	PM
Walk, scooter, skateboard independently	AM	PM
Parent driving with only children from your family	AM	PM
Carpool with other families	AM	PM
Public transportation (MBTA bus or subway, EZRide)	AM	PM
Taxi/Uber/Lyft	AM	PM

B (K-8 ONLY) PLEASE DETAIL YOUR CHILD'S WEEKLY SCHEDULE TO HELP US AT DISMISSAL TIME

Which days of the week (circle)?

☐ My student will be picked up by: _____ M T W TH F

☐ My student will go home independently (Grades 3-5) M T W TH F

☐ My student will go home on the (name) _____ bus M T W TH F
Bus Stop: _____

☐ My student will take an SP&R mini bus or van M T W TH F

☐ My student will take the bus to an afterschool program or other location (up to 2)

Bus Name: _____ Stop: _____ M T W TH F

Program Name / Destination Description: _____

Street #: _____ Street Name: _____ Zip: _____

2nd Bus Name: _____ Stop: _____ M T W TH F

Program Name / Destination Description: _____

Street #: _____ Street Name: _____ Zip: _____

NOTE TO BUS RIDERS: If your student needs a different AM bus, or their schedule can't be captured here, you **MUST** complete a *Transportation Change Form*, which is mailed with transportation eligibility letters. The form is also available in the school office or online at www.cpsd.us/departments/transportation.

NEW Online Bus Finder

Find a bus route at:
www.cpsd.us/Departments/Transportation

Policy Acknowledgements



Please initial that you understand and agree to each one, then sign below.

Student Name: _____ Parent/Guardian Name: _____

School: _____ Grade: _____ (CRLS) LC: _____ Teacher/Homeroom: _____

This statement acknowledges that my household has received a copy of the *Guide to Policies for Students and Families*. We understand that it contains important information on codes of conduct, civil rights and other federal and state laws and regulations related to your child's education as well as School Committee policies and school rules.

We, the undersigned parent(s)/guardian(s), agree to work with school staff to be sure that the student identified above attends school every day, except for excused absences; completes homework and follows the Codes of Conduct contained in the Rights and Responsibilities Handbook, and school-based rules. We, the undersigned, have reviewed the following specific policies with our child/children and agree to abide by their terms:

STUDENT ATTENDANCE POLICY (Page 6)

(initial) _____ We, the undersigned, have reviewed the Attendance Policy and understand the consequences of class cutting and unexcused/excused absences.

WEAPONS POLICY (Page 19)

(initial) _____ We acknowledge that we have received and read the Cambridge Public Schools Weapons Policy and the statutory prohibition against drugs, weapons, and assault on school staff. The signatures below indicates that we understand the Cambridge Public Schools Weapons Policy and the statutory prohibition against drugs, weapons, and assault on school staff and agree to comply with the mandates as written.

ACCEPTABLE USE POLICY & SOFTWARE CODE OF ETHICS (Page 49-50)

(initial) _____ Our signatures below indicate that we understand the Acceptable Use Policy and the Software Code of Ethics and agree to comply with its mandates as written.

(Grades 6-12 Only) RECEIPT OF ANTI-HAZING LAW (Page 24)

(initial) _____ We hereby acknowledge that we have received and read a copy of M.G.L. Chapter 269, Sections 17-19, An Act Prohibiting the Practice of Hazing. We understand that a copy of this law must be distributed to members, plebes, pledges and applicants for membership of each student group, team and/or student organization at my school. We also understand and agree to comply with this law.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

MILITARY FAMILY STATUS

Children in military families are entitled to special consideration aimed at resolving the negative impact of frequent transitions between school districts. Responding to this form is optional, but will help CPS determine how many of our students are members of a military family.

Is the student a member of a military family? (Please initial your response)

- _____ No, the student is not a member of a military family (00)
- _____ Yes, a parent/guardian is an active duty member of the military (01)
- _____ Yes, a parent/guardian is a veteran or has retired or been medically discharged for 1 year (02)
- _____ Yes, a parent/guardian died while on active duty in the military (03)

Student Name: _____ Parent/Guardian Name: _____

School: _____ Grade: _____ (CRLS) LC: _____ Teacher/Homeroom: _____



General Media Release Opt-In

Cambridge Public Schools (CPS) celebrates the accomplishments of students, faculty, and staff through a variety of print, audio, and online media. To grant permission to include your student, please sign below.

I authorize the Cambridge Public Schools and/or my son/daughter's School to record, film, photograph, audiotape or videotape my child's name, image, likeness, spoken words, student work, performance and movement, and learning experiences in any form (hereinafter collectively referred to as "Works"), and to display, publish, distribute or exhibit these Works or any part thereof, in all manner and media, for the purpose of and in connection with any material that may be created by the Cambridge Public Schools and/or the School for the Cambridge Public Schools and/or the School, including, without limitation, for posting on the Cambridge Public Schools and/or School's website and social media such as Facebook, LinkedIn and Twitter; any website that has been approved by the Cambridge Public Schools Educational Technology Department and/or for broadcasting on television including Cambridge Educational Access (CEA) and/or displaying, publishing, distributing or exhibiting such information at community or school-based events (such as: posting within a classroom, in a school hallway, in school projects, school newsletters, at a school open house or a public exhibition of student work or announcement of a student's scholarship, awards, honors and/or post-high school plans or as part of classroom instruction) (all of which are collectively defined as "Media Events.")

By signing this form, I grant permission as stated herein and expressly authorize Cambridge Public Schools and/or the School to use, in whole or in part, my child's name, likeness, image, spoken words, student work, learning experiences, performance and movement in all manner and media and any Media Events, as Cambridge Public Schools and/or the School determines in their sole discretion.

By entering into this informed consent I release the Cambridge Public Schools and my child's School and their respective officers, directors, agents and/or employees from and against any and all liability, loss, damage, costs, claims and/or causes of action arising out of or related to my child's participation in Media Events or use of my child's Works in Media Events.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

Family Contact Books Opt-In

Includes your family in a school-based directory of families

Do you wish to participate in a school-based "Family Contact Book," which will be distributed to families within your student's school? By default, the 2017-18 family contact book will contain the student's name, grade, classroom, and the name, phone number and email address of both the "Primary Contact" and the "Secondary Contact" (if any) listed on the front of this mailing.

By signing below, I authorize and grant permission for Cambridge Public Schools to include my family information in a school-based Family Contact Book, and I understand that all families and students attending my son/daughter's school and all school staff may receive and/or have access to the school-based Family Contact Book.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

Coming Soon! You will be offered an opportunity to customize your entry in October, when an invitation to sign up or make corrections will be sent via email.

Student Name: _____ Parent/Guardian Name: _____
School: _____ Grade: _____ (CRLS) LC: _____ Teacher/Homeroom: _____



Student “*Directory Information*” Opt-Out



Leave blank to allow this information to be released. Sign to keep this information private.

“Student directory information” (name, dates of attendance, class or grade, participation in officially recognized activities and sports, photographs/videos, membership on athletic teams, degrees, honors and awards, major field of study, and post high school plans) may be released by the Cambridge Public Schools without the consent of the parent/guardian of the student. However, parents/guardians may opt out of releasing this information.

By signing this form, I indicate that I DO NOT want my child’s name, class or grade or other information that is specified in the Cambridge Public Schools *Guide to Policies* on page 5 in the student records section released without my prior written consent.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

Cambridge Public Library Card Opt-Out



Kindergarten Only. **LEAVE BLANK** if you want a library card for your student.

The Cambridge Public Schools and Cambridge Public Library want all kindergarten students to have library cards. The Cambridge Public Schools will provide the Cambridge Public Library with your child’s name and date of birth, home address(es), and telephone number(s) so that the library can give your child a library card.

IF YOU WANT YOUR CHILD TO RECEIVE A LIBRARY CARD
SKIP THIS FORM - DO NOT SIGN IT.



If you **do not** want the Cambridge Public Schools to give this information to the library, please complete this opt-out form and return it to your child’s school.



I do NOT want my child’s information to be released to the Cambridge Public Library.

Parent/Guardian Signature: _____

Date: _____



Student Name: _____ Parent/Guardian Name: _____
School: _____ Grade: _____ (CRLS) LC: _____ Teacher/Homeroom: _____



Release of Basic Contact Information Opt-Out (Page 6)

High School Only - sign under each category if you do NOT want information released

A provision of the No Child Left Behind Act of 2001, a federal law, requires secondary schools, upon a receipt of a request, to release the names, addresses, email addresses and telephone numbers of students attending the high school to United States military recruiters, colleges, universities and other educational institutions and prospective employers. You have the option of NOT having this information released by completing the form below.

TO OPT OUT OF THE RELEASE OF BASIC CONTACT INFORMATION, SIGN BELOW

I acknowledge and understand that I may opt out of having my son/daughter's contact information released to United States military recruiters, colleges, universities and other educational institutions and prospective employers. Accordingly, I hereby request that Cambridge Rindge and Latin School NOT DISCLOSE my son/daughter's basic contact information (name, address, email address and telephone number) during the current school year to the entities indicated below without my prior permission:

UNITED STATES MILITARY RECRUITERS

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

PROSPECTIVE EMPLOYERS

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

COLLEGES, UNIVERSITIES & OTHER EDUCATIONAL INSTITUTIONS

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

If this form is NOT received by October 1st, the student's basic contact information WILL be released in accordance with the applicable provisions of the *No Child Left Behind Act of 2001*.



<<School Name>> <<LC>>
 <<School Address>>
 Cambridge, MA <<Zip>>

Contact Information Update Form



INSTRUCTIONS: Please review the following information to make sure it is correct, then sign here to confirm that you have updated your contact information.

Signature: _____ Date: _____

PRIMARY CONTACT

Note: If Parents/Guardians live at the same address, they will be listed as "Primary Contact." Secondary Contact will be blank unless the parent/guardians live at separate addresses..

<<Parent/Guardian Name>>
 Parent/Guardian of <<Student Name>>
 <<Street #>> <<N/S..>><<Street Name>> <<Appt#>>
 <<City>>, <<State>> <<Zip>>

WRITE CORRECTIONS IN THIS SPACE:

Relationship to Student: <<Relationship>>

Primary Phone	Cellphone?	Mother/Father • Home/Work
<<Phone 01>>	<<Cell>>	<<Description>>
<<Phone 02>>	<<Cell>>	<<Description>>
<<Phone 03>>	<<Cell>>	<<Description>>

Email Addresses: <<Email 01>> <<Email 02>>

SECONDARY CONTACT

<<Parent/Guardian Name>>
 Parent/Guardian of <2 <<Student Name>>
 <<Street #>> <<N/S..>><<Street Name>> <<Appt#>>
 <<City>>, <<State>> <<Zip>>

Relationship to Student: <<Relationship>>

Secondary Phone	Cellphone?	Mother/Father • Home/Work
<<Phone 01>>	<<Cell>>	<<Description>>
<<Phone 02>>	<<Cell>>	<<Description>>
<<Phone 03>>	<<Cell>>	<<Description>>

Email Addresses: <<Email 01>> <<Email 02>>

EMERGENCY CONTACTS

These individuals will be notified if parents/guardians can't be reached.

<<Name>>, <<Relationship>>, <<Phone>>

<<Name>>, <<Relationship>>, <<Phone>>

The Cambridge Public Schools (CPS) will use the information listed above to send automated phone calls, text messages and/or email messages notifying parents/guardians of emergency situations including unexcused absences, late arrivals, school cancellations and other types of school emergencies as well as providing outreach about school events. By signing this form you are consenting to receive all school communications, including non-emergency school communications, via cell phone number(s) and/or text messages provided above in addition to receiving such messages via land line and/or email. By signing this form you are also indicating that you understand that you are obligated to notify CPS of any changes in your contact information and that you are agreeing to indemnify the City of Cambridge, CPS, Cambridge School Committee and its officers, directors, members, employees and against any claims or causes of action arising out of or related to your failure to notify CPS of a change in your contact information. By signing this form you also are indicating that you understand that you can opt out of receiving non-emergency cell phone calls and/or text messages by contacting your child's school and asking to be removed from the outreach calls list.

Student ID# - Clip & Save

Cut on the dotted line and save this number, which is required for many online services.



<< Student Name>>
 ID# <<Student ID>>