

Howell Public Schools



KINDERGARTEN and BEGINDERGARTEN Registration

Tuesday, March 5, 2019

9:30 a.m. - 1 p.m. and 4:00 p.m. - 6:30 p.m.

Welcome students and families of the Howell Public Schools Class of 2032,

We are so excited to welcome you to Howell Public Schools and Highlander Nation! Whether you currently have a student enrolled in the district or are new to the district, we are excited and honored to have you as part of the Howell Family. We look forward to partnering with you to ensure that your child reaches their full potential.

As your child begins their education with us, our teachers and staff will work to instill a love of learning in him/her. All of our teachers are highly qualified and work tirelessly to create a safe, welcoming, caring, and fun learning environment.

While Begindergarten or Kindergarten is just the start of your child's educational journey, endless opportunities await them as they progress through Howell Public Schools. We are continually looking for new ways to enhance our students' learning. From opportunities to be involved in the elementary FIRST Robotics Program to solving real-world problems using Project Based Learning, learning is always fun at Howell Public Schools. As your child moves into middle school, there are STEM, world language, performing arts courses, and electives

offered. Howell High School truly provides opportunities for every student.

During our Kindergarten and Begindergarten Registration event on March 5, 2019, you and your child will have the opportunity to tour their school, meet their principal, kindergarten and begindergarten teachers, and explore a school bus.

Again, welcome to Howell Public Schools. We are honored to be your partner in your child's education.

Sincerely,

Erin J. MacGregor, Ed.S.
Superintendent
Howell Public Schools

An Exemplary Learning Community

Program Information

Any child who turns five-years-old on or before September 1, 2019*, is eligible for enrollment in either our Kindergarten or Beginnergarten programs. Parents have the choice to send their child to either program. The descriptions below may help guide your decision. Students will participate in art, music, technology, and physical education in both programs. Below are descriptions of both Kindergarten and Beginnergarten as well as indicators of Kindergarten Readiness.

Kindergarten

- Designed for students who have turned five-years-old by September 1* and who are able to stay focused and pay attention during activities, follow directions, control impulses and self-regulate, and complete basic tasks such as those listed in the next column
- Is the traditional next step from the informal learning at home/ preschool experiences to formal entry into the K-12 education system
- Primary focus is on instructing each student in reading, writing, math, science, and social studies based on the needs of the student; students also receive art, music, physical education, and technology
- Instruction utilizes hands-on experiences, the use of manipulatives, movement, and differentiation based on student needs
- Allows students to develop a healthy concept of self, physical skills and coordination, language skills and vocabulary, and the skills and knowledge needed to move to first grad

Kindergarten Readiness

Parents often ask for help in determining Kindergarten readiness. Some indicators of Kindergarten readiness are:

- Recognize shapes and forms
- Knows most of the alphabet
- Recognize their name in print
- Can describe what is happening in pictures
- Count 10 objects
- Listen attentively to a story for five minutes or more
- Follow directions
- Work and play with peers
- Recognize rhyming words
- Can speak in simple sentences
- Can express, needs, feelings, and opinions
- Control impulses and self regulate
- Express curiosity and excitement for learning
- Initiate conversations
- Show muscle coordination
- Attempts to put on their coat, shoes, hats, etc.

While these are some Kindergarten readiness indicators, please know that our highly qualified teachers are skilled in meeting the needs of all eligible Kindergarten and Beginnergarten students.

Beginnergarten

- Beginnergarten provides students with an additional year to grow academically, emotionally, and socially before starting Kindergarten
- Designed for students who are young fives (September December 1, birthdays) or who would benefit from additional time and support before entering Kindergarten
- Beginnergarten addresses academics in addition to language development, fine motor skills, and most importantly, social and emotional growth
- The Beginnergarten curriculum is based on Kindergarten standards, modified to meet the academic, social and emotional needs of younger students
- Provides children with the opportunity to learn new skills and explore new ideas, as they are ready
- Children will move from Beginnergarten to traditional Kindergarten
- Offered as full day and half day classes
- Meets five days a week and operates on the district-wide school calendar; the same as other elementary classes
- Taught by a qualified Howell Public Schools certified teacher
- Class size limited to 23 students

Vision Screening

Per Michigan law, a child must have a vision screening prior to the first day of kindergarten. The Livingston County Health Department offers free vision screening appointments in June, July, and August. Please contact the Health Department at 517.546.9860 after May 15, 2019, to schedule your child's appointment.

*According to Michigan Law, if a student will not be five-years-old by September 1, 2019, but will be five-years-old by December 1, 2019, they may be enrolled in Kindergarten or Beginnergarten if their parent or legal guardian notifies the school district in writing that he or she intends to enroll their child in Kindergarten or Beginnergarten. A waiver form is included in the registration packet.



Where to Register

Kindergarten and Beginndergarten Registration for the 2019-2020 school year will be held on Tuesday, March 5, 2019, at each Howell elementary school. Please register your child at their home school.

Parents may register their child online at HowellSchools.com/kdg. Registering online will allow parents to complete all of the required forms prior to attending the Kindergarten and Beginndergarten Registration event. Parents will still need to show the child's certified birth certificate and proof of residency at the registration event. Registration packets will be available at the registration event.

If you are unable to attend the Kindergarten and Beginndergarten Registration event on March 5, 2019, please preregister online at HowellSchools.com/kdg or pick up a Kindergarten registration packet at any elementary school or at the District Registration Office located in the Howell High School Freshman Campus, 411 N. Highlander Way, Suite E, in the administration wing. Completed packets may be returned to the District Registration Office, Monday through Friday, 7 a.m. to 4:30 p.m.

If you have any questions, please contact our District Registrar Helen Hughes at 517.548.6232 or Helen@HowellSchools.com.



Important Information

To enroll in Kindergarten or Beginndergarten for the 2019-2020 school year, students must be five years-old by September 1, 2019.*

For more information, or to find your child's home school, please call Helen at 517.548.6232 or visit our website at HowellSchools.com/kdg.

*According to Michigan Law, if a student will not be five-years-old by September 1, 2019, but will be five-years-old by December 1, 2019, they may be enrolled in Kindergarten or Beginndergarten if their parent or legal guardian notifies the school district in writing that he or she intends to enroll their child in Kindergarten or Beginndergarten. A waiver form is included in the registration packet.

What to Bring

Whether a child is preregistered or is registered in person at the Kindergarten and Beginndergarten Registration event, parents should bring the following documents:

- Child's certified birth certificate
- All immunization records
- Vision screen results
- Proof of residency (driver's license, current utility bill or purchase or lease agreement)

What to Expect

During the Kindergarten and Beginndergarten Registration event, parents and their child will:

- Tour their new school
- Meet the school's Kindergarten and Beginndergarten teachers and principal
- Explore the school playground and a school bus

School Locations

Challenger Elementary
1066 W. Grand River
517.548.6375

Hutchings Elementary
3503 Bigelow
517.548.1127

Northwest Elementary
1233 Bower Street
517.548.6297

Southwest Elementary
915 Gay Street
517.548.6288

Three Fires Elementary
4125 Crooked Lake Road
517.548.6387

Voyager Elementary
1450 Byron Road
517.552.7500

Immunization Info

- All children who enter schools in Michigan are required by state law to be vaccinated
- New enrollees, including kindergartners and beginndergarten, must provide proof of immunization and cannot attend without the required immunizations or waiver
- The Livingston County Health Department offers walk in immunization clinics every Wednesday. For more information please call 517.546.9850
- Effective January 1, 2015, parents/guardians must obtain a certified non-medical waiver from a local health department
- Parents who would like to sign a waiver must schedule an appointment for a waiver education course with the Livingston County Health Department by calling 517.546.9850

Kid's Kare & KinderFriends

Before & After School Care

Kid's Kare and KinderFriends offer high-quality child care at reasonable rates at each Howell elementary school.

Kid's Kare sessions are available before school starting at 6:30 a.m. and after school until 6 p.m.

KinderFriends is available during the regular school day to complement the half day Begindergarten program.

In both programs, children will participate in arts and crafts, outdoor play, board games, homework time and more!

For more information:

Lisa Zehnder
517.540.8276
zehnderl@HowellSchools.com

Jennifer Myers
517.548.6310
myersj@HowellSchools.com





HOWELL
PUBLIC SCHOOLS

Student Registration Form

The information gathered on this form will be used by school staff to plan educationally for your child. Some information is required for state/federal reporting purposes.

For Office Use Only

Start Date: _____ B/C: _____

IMM: _____ Residency: _____

Student Information

Legal Name (last/first/middle): _____

Home Address: _____ City/State/Zip: _____

Mailing Address: _____ City/State/Zip: _____

Birth date (MM/DD/Year): _____ Gender: Female _____ Male _____

Phone Number: _____ Type: Home _____ Cell _____ Unlisted _____

Race: American Indian _____ Asian/Pacific Islander _____ Black or African American _____

Hispanic _____ Caucasian/Non-Hispanic _____ Non-Resident/Other _____

Enrollment Information: Grade: _____ School Year _____ School _____

Parent/Guardian Information

Name (last/first/middle): _____

Address: _____ City/State/Zip: _____

Extra Mailing: _____ Employer: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Relation to Student: _____ Legal Guardian: Yes _____ No _____

Name (last/first/middle): _____

Address: _____ City/State/Zip: _____

Extra Mailing: _____ Employer: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Relation to Student: _____ Legal Guardian: Yes _____ No _____

Sibling Information

Name: _____ Birth date: _____ School _____ Grade: _____

Name: _____ Birth date: _____ School _____ Grade: _____

Over

Student Language Information

Is your child's native tongue a language other than English?

Yes _____ No _____ If yes, what language? _____

Is the primary language used in your child's home or environment a language other than English?

Yes _____ No _____ Is yes, what language? _____

Was your child born outside the United States? Yes _____ No _____

What grade did your child first attend school (K-12) in the United States? _____

Emergency Contacts

Contact 1: _____ Telephone: _____

Contact 2: _____ Telephone: _____

Contact 3: _____ Telephone: _____

Contact 4: _____ Telephone: _____

Medical Information

Medical Problems/Concerns/Medications that Howell Public Schools would need to be aware of:

Wears Glasses/Contact Lenses? Yes _____ No _____ Wears Hearing Aids? Yes _____ No _____

Student Services

Is the student currently eligible for special education services? Yes _____ No _____

Eligibility Category: _____ IEP Date: _____

Check any supports that the student received in the previous school:

_____ 504 Plan _____ Occupational Therapy _____ Math Support

_____ Social Work _____ Physical Therapy _____ Reading Support

_____ Resource Room _____ Speech/Language Therapy _____ Enrichment

_____ Counseling Support _____ English Language Learner Support Other: _____

In case of an emergency, your student will be transported to the nearest medical facility. The parent(s)/guardian(s) is responsible for all expenses incurred. My Signature below authorizes emergency medical care for my child and release of medical condition(s) to school administrative personnel.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



Early Childhood Education Questionnaire

As part of Michigan's Third Grade Reading legislation, districts are required to collect the following information as part of the state's Kindergarten Readiness Assessment. The information provided below **will not** determine the placement of your child in a school or program. It is for informational purposes only.

Did your child attend:

- ☐ Daycare
- ☐ Great Start Readiness Program
- ☐ Head Start Program
- ☐ Great Start/Head Start Blend
- ☐ Pre-School
- ☐ Early Childhood Special Education Classroom
- ☐ Other

Where was this provided?:

- ☐ In-home
- ☐ School
- ☐ Day Care Center
- ☐ Other

Did your child attend full day or half day?:

- ☐ Full Day
- ☐ Half Day

How many days per week did your child attend?: _____



Kindergarten/Begindergarten Registration Preference

Student Name: _____

Parent Name: _____

Address

City

Zip Code

Phone

Please choose your program preference for your child.

Kindergarten classes will be offered for all students at their home school. Begindergarten and half-day Begindergarten are offered at select schools depending on parent interest. Transportation for the half-day program will be offered to school each morning, and parents will be responsible for after school (12 p.m.) transportation.

Program Preference	Preferred School
Kindergarten	
All day Begindergarten	
Half-day Begindergarten	



Kindergarten Notification Request for 2019-2020 School Year

According to Michigan Law (MCL 380.1147), if a child residing in Howell Public Schools is not five (5) years of age on September 1, 2019 but will be five (5) years of age not later than December 1, 2019 the parent or legal guardian of that child may enroll the child in Kindergarten for the current school year if the parent or legal guardian notifies the school district in writing.

A school district that receives this written notification may make a recommendation to the parent or legal guardian as to whether the child is ready or not ready to enroll in Kindergarten due to the child's age or other factors. Regardless of the District's recommendation, the parent or legal guardian retains the sole discretion to determine whether or not to enroll the child in Kindergarten if the student is five (5) years of age not later than December 1.

Student Name: _____

Date of Birth: _____

Verification of Age (*Check one*):

- Birth Certificate _____
- Government Record _____
- Hospital Record _____
- Court Record _____
- Citizenship Paper _____
- Other _____

Evidence of School Readiness (provided by parent):

1. _____
2. _____
3. _____
4. _____

Parent/Guardian's Printed Name

Parent/Guardian's Signature

Date



Residency Affidavit

I, _____
(Parent/Guardian Name)

declare that I physically reside at

(Street Address, City, State, Zip Code)

and that I have no other residence other than that listed on this affidavit. I also declare that I am in compliance with the State of Michigan General School Laws, which require that students attend school in the district in which they live with their parents or legal guardians*.

In order to affirm my residency in the Howell Public School district, I have presented certain documents with my address to school officials. I declare that the documents are true and accurate and further, I am aware that the deliberate falsification of information for school attendance purposes is unlawful. I am aware also of the policy of Howell Public Schools, which states that if a student is found to have established residency in our district by using false or inaccurate information, the student will be immediately dismissed from school, and the parents of the student will be held liable for all costs incurred while the student was enrolled in Howell Public Schools.

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

Student Name: _____

Residence: _____
(Street Address, City, State, Zip Code)

*A parent may place his or her child in the home of a relative, and if the placement is for purposes of providing a **suitable home** to the child, the child is a resident of the district in which the relative resides.



Student Residency Questionnaire/Affidavit

This document is intended to address the McKinney-Vento Assistance Act. Your answers will help determine documents necessary to enroll your child quickly.

Student Name: _____

The student lives in the following situation:

- ☐ Owner-occupied home
- ☐ Rental unit
- ☐ Emergency shelter or transitional housing*
- ☐ Motel/hotel*
- ☐ Campground*
- ☐ Public or private place that is not designed for or ordinarily used for regular sleeping accommodations for humans, including cars, parks, public spaces, abandoned buildings, substandard housing, and a bus or train*
- ☐ Foster care placement for 6 months or less*
- ☐ Long-term, stable cooperative living arrangement*
- ☐ Temporary, shared housing with friends, family or others*

Other location _____

**Living in these situations may qualify you for services, including immediate enrollment, transportation, school supplies, education advocacy and community referrals.*

If you are living in temporary shared housing, please answer the following questions:

- Is the living situation intended to be temporary or long-term? _____
- How long have you lived there? _____
- Do you consider yourself a guest in the home? ☐ Yes ☐ No
- Are you paying rent? ☐ Yes ☐ No
- Are you looking for a place to live? ☐ Yes ☐ No
- Do you plan to move out soon? ☐ Yes ☐ No
- Do you have a legal right to be in the home? ☐ Yes ☐ No
- Can the student or family be asked to leave at anytime with no legal recourse? ☐ Yes ☐ No
- Did the student move into the home as an urgent measure to avoid being on the street or in another precarious situation? ☐ Yes ☐ No
- How many people live in the home? _____
- How many bedrooms are in the home? _____
- Where does the student sleep? _____



Student Technology Acceptable use and Safety Agreement

To access and use District Technology Resources (see definition in Bylaw 0100), including a school-assigned e-mail account and/or the Internet at school, students under the age of eighteen (18) must obtain parent permission and sign and return this form. Students eighteen (18) and over may sign their own forms.

Use of District Technology Resources is a privilege, not a right. The Board of Education's Technology Resources, including its computer network, Internet connection and online educational services/apps, are provided for educational purposes only. Unauthorized and inappropriate use will result in loss of this privilege and/or other disciplinary action.

The Board has implemented technology protection measures that protect against (e.g., block/filter) Internet access to visual displays/depictions/materials that are obscene, constitute child pornography, or are harmful to minors. The Board also monitors online activity of students in an effort to restrict access to child pornography and other material that is obscene, objectionable, inappropriate and/or harmful to minors. Nevertheless, parents/guardians are advised that determined users may be able to gain access to information, communication, and/or services on the Internet that the Board has not authorized for educational purposes and/or that they and/or their parents/guardians may find inappropriate, offensive, objectionable or controversial. Students using District Technology Resources are personally responsible and liable, both civilly and criminally, for unauthorized or inappropriate use of the Resources.

The Board has the right, at any time, to access, monitor, review and inspect any directories, files and/or messages residing on or sent using District Technology Resources. Messages relating to or in support of illegal activities will be reported to the appropriate authorities. Individual users have no expectation of privacy related to their use of District Technology Resources.

Please complete the following information:

Student User's Full Name (please print): _____

School: _____ Grade: _____

Parent/Guardian's Name: _____

Parent/Guardian

As the parent/guardian of this student, I have read the Student Technology Acceptable Use and Safety Policy and Guidelines, and have discussed them with my child. I understand that student access to the Internet is designed for educational purposes and that the Board has taken available precautions to restrict and/or control student access to material on the Internet that is obscene, objectionable, inappropriate and/or harmful to minors. However, I recognize that it is impossible for the Board to restrict access to all objectionable and/or controversial materials that may be found on the Internet. I will not hold the Board (or



any of its employees, administrators or officers) responsible for materials my child may acquire or come in contact with while on the Internet. Additionally, I accept responsibility for communicating to my child guidance concerning his/her acceptable use of the Internet - i.e., setting and conveying standards for my daughter/son to follow when selecting, sharing and exploring information and resources on the Internet. I further understand that individuals and families may be liable for violations.

To the extent that proprietary rights in the design of a web page, site, service or app hosted on Board-owned or District-affiliated servers would vest in my child upon creation, I agree to assign those rights to the Board.

Please check each that applies:

☐ I give permission for the Board to issue an e-mail account to my child.

☐ I give permission for my child's image (photograph) to be published online, provided only his/her first name is used.

☐ I give permission for the Board to transmit "live" images of my child (as part of a group) over the Internet via a web cam.

☐ I authorize and license the Board to post my child's class work on the Internet without infringing upon any copyright my child may own with respect to such class work. I understand only my child's first name will accompany such class work.

Parent/Guardian's Signature: _____ Date: _____

Student

I have read and agree to abide by the Student Technology Acceptable Use and Safety Policy and Guidelines. I understand that any violation of the terms and conditions set forth in the Policy and Guidelines is inappropriate and may constitute a criminal offense and/or may result in disciplinary action. As a user of District Technology Resources, I agree to communicate over the Internet and through the Technology Resources in an appropriate manner, honoring all relevant laws, restrictions and guidelines.

Student's Signature: _____ Date: _____

Teachers and building principals are responsible for determining what is unauthorized or inappropriate use. The principal may deny, revoke or suspend access to and use of the Technology Resources to individuals who violate the Board's Student Technology Acceptable Use and Safety Policy and related Guidelines, and take such other disciplinary action as is appropriate pursuant to the Student Code of Conduct.

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Consent for Disclosure of Immunization Information to Local and State Health Departments

Immunizations are an important part of keeping our children healthy. Schools and State and local health departments must monitor immunization levels to ensure that all communities are protected from potentially life-threatening diseases and, if necessary, respond promptly to an emerging public health threat. It is important that disease threats be minimized through the monitoring of students being immunized.

Sharing immunization and personally identifiable information including the student's name, date of birth, gender, and address with local and state health departments will help to keep your child safe from vaccine-preventable diseases. The Michigan Care Improvement Registry (MCIR) benefits health care organizations, schools, licensed child care programs, pharmacies, and Michigan's citizens by consolidating immunization information from multiple providers into a comprehensive immunization record. This consolidation reduces vaccine-preventable diseases and over-vaccination, allowing providers to view up-to-date patient immunization history in one system.

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g, requires written parental consent before personally identifiable information from your child's education records is disclosed to the health department. If your child is 18 or over, he or she is an "eligible student" and must provide consent for disclosure of information from his or her education records.

You may withdraw your consent to share this information in writing at any time.

I authorize HOWELL PUBLIC SCHOOLS to release my child's immunization record to the Michigan Department of Health and Human Services and Local Health Department. I understand this information will be used to improve the quality and timeliness of immunization services and to help schools comply with Michigan Law. This includes any immunization information and limited personally identifiable information from the school.

Student's Name: _____ Date of Birth: __/__/__

Signature of Parent/Guardian
or Eligible Student: _____ Date: __/__/__

Printed Parent/Guardian Name
or Eligible Student: _____

Educational Material for Parents and Students (Content Meets MDCH Requirements)

Sources: Michigan Department of Community Health, CDC and the National Operating Committee on Standards for Athletic Equipment (NOCSAE)

UNDERSTANDING CONCUSSION

Some Common Symptoms

Headache
Pressure in the Head
Nausea/Vomiting
Dizziness

Balance Problems
Double Vision
Blurry Vision
Sensitive to Light

Sensitive to Noise
Sluggishness
Haziness
Fogginess
Grogginess

Poor Concentration
Memory Problems
Confusion
“Feeling Down”

Not “Feeling Right”
Feeling Irritable
Slow Reaction Time
Sleep Problems

WHAT IS A CONCUSSION?

A **concussion is a type of traumatic brain injury** that changes the way the brain normally works. A concussion is caused by a fall, bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. A concussion can be caused by a shaking, spinning or a sudden stopping and starting of the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. A concussion can happen even if you haven’t been knocked out.

You can’t see a concussion. Signs and symptoms of concussions can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If the student reports any symptoms of a concussion, or if you notice symptoms yourself, seek medical attention right away. A student who may have had a concussion should not return to play on the day of the injury and until a health care professional says they are okay to return to play.

IF YOU SUSPECT A CONCUSSION:

- 1. SEEK MEDICAL ATTENTION RIGHT AWAY** – A health care professional will be able to decide how serious the concussion is and when it is safe for the student to return to regular activities, including sports. Don’t hide it, report it. Ignoring symptoms and trying to “tough it out” often makes it worse.
- 2. KEEP YOUR STUDENT OUT OF PLAY** – Concussions take time to heal. Don’t let the student return to play the day of injury and until a health care professional says it’s okay. A student who returns to play too soon, while the brain is still healing, risks a greater chance of having a second concussion. Young children and teens are more likely to get a concussion and take longer to recover than adults. Repeat or second concussions increase the time it takes to recover and can be very serious. They can cause permanent brain damage, affecting the student for a lifetime. They can be fatal. It is better to miss one game than the whole season.
- 3. TELL THE SCHOOL ABOUT ANY PREVIOUS CONCUSSION** – Schools should know if a student had a previous concussion. A student’s school may not know about a concussion received in another sport or activity unless you notify them.

SIGNS OBSERVED BY PARENTS:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Can’t recall events prior to or after a hit or fall
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes

CONCUSSION DANGER SIGNS:

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. A student should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people/places
- Becomes increasingly confused, restless or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously.)

HOW TO RESPOND TO A REPORT OF A CONCUSSION:

If a student reports one or more symptoms of a concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of athletic play the day of the injury. The student should only return to play with permission from a health care professional experienced in evaluating for concussion. During recovery, rest is key. Exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse. Students who return to school after a concussion may need to spend fewer hours at school, take rests breaks, be given extra help and time, spend less time reading, writing or on a computer. After a concussion, returning to sports and school is a gradual process that should be monitored by a health care professional.

Remember: Concussion affects people differently. While most students with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

To learn more, go to www.cdc.gov/concussion.

Parents and Students Must Sign and Return the Educational Material Acknowledgement Form

PARENT & ATHLETE CONCUSSION INFORMATION SHEET



WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury.

If an athlete reports one or more symptoms of concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of play the day of the injury. The athlete should only return to play with permission from a health care professional experienced in evaluating for concussion.

DID YOU KNOW?

- Most concussions occur without loss of consciousness.
- Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion.
- Young children and teens are more likely to get a concussion and take longer to recover than adults.

SYMPTOMS REPORTED BY ATHLETE:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not “feeling right” or is “feeling down”

SIGNS OBSERVED BY COACHING STAFF:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can’t recall events prior to hit or fall
- Can’t recall events after hit or fall



Concussion Awareness Educational Material Acknowledgement Form

By my name and signature below, I acknowledge in accordance with Public Acts 342 and 343 of 2012 that I have received and reviewed the Concussion Fact Sheet for Parents and/or the Concussion Fact Sheet for Students provided by Howell Public Schools.

Participant Name Printed

Parent/Guardian Name Printed

Participant Signature

Parent/Guardian Signature

Date

Date

Graduation Year:

Howell Public Schools must retain signed Educational Material Acknowledgment Form on file for the duration of student's participation or until age 18.

Participants and parents/guardians, please review and retain the educational materials for future reference.



Howell Public Schools Early Childhood Education Programs

Howell Public Schools Early Childhood Education offers several child care and enrichment programs for Kindergarteners and Beginnergarteners:

Safety Camp: A summer enrichment program that teaches children how to be safe in their environment. Fire Safety, School Bus Safety, Bicycle Safety, Playground Safety, and more will be explored through hands-on activities and classroom visits by local community agencies. This program is open to children either entering or completing Kindergarten or Beginnergarten.

Kids Kare: A childcare program offering flexible, affordable before and after school care at each elementary building. We also provide half and full day care during Teacher Work Days, Professional Development Days, and during several school breaks. The program is in operation from 6:30 a.m. until the start of the school day and again at the end of the school day until 6:00 p.m. During this time, students are offered a variety of activities including arts and crafts, board games, gym or outdoor time, and homework or reading time. This program is available to all children enrolled in elementary school.

KinderFriends: A childcare program designed to support Beginnergarten students that attend a half-day program. This program offers students an engaging environment to gain more practice of the skills and concepts being taught in the Beginnergarten classroom. Availability varies depending on the type of program offered at the individual elementary buildings.

In addition to the programs listed above, HPS Early Childhood Education Programs also offer the following child care and preschool programs:

Summer Kids Kare: A full day childcare program for children during the summer months. This program is open to children that have completed Kindergarten or Beginnergarten through 12 years of age. Thematic activities, group games, arts and crafts, special interest clubs, field trips, and much more fill the days with fun.

Little Howeller's Child Care Center: Our fully licensed and developmentally appropriate childcare program for children, birth to five years of age, is available on a year-round basis (summer attendance is not required). Our program consists of an infant and toddler room for children, birth through three years of age, and a full day preschool room for children three through five years of age.

Half Day Preschool: Our traditional half-day preschool programs are available to children that are fully potty-trained and at least three years of age by September 1, 2018. These programs focus on the social, emotional, physical and cognitive development of each individual child. The goal of these programs is to offer a fun, stimulating, and structured first school experience.

For further information on program dates, location and pricing please call or email us at:

Jennifer Myers
517.548.6310
myersj@HowellSchools.com

Lisa Zehnder
517.540.8276
zehnderl@HowellSchools.com

Howell Safety Camp

Join us for two fun-filled weeks as we explore all different types of safety! This comprehensive safety program is open to children entering or having just completed Kindergarten or Begindergarten. Children will learn about how to be safe through hands-on classroom activities and presentations from local community agencies.

Monday through Friday
July 15-26, 2019
9:30-11:30 a.m.

\$90.00 per child

Pre-registration is required.
Please call 517.548.6310 for more information.



Topics Covered Include:

- Bicycle Safety
- Electrical Safety
- Fire Safety
- Playground Safety
- Poison Safety
- School Bus Safety
- Stranger Danger
- Water Safety

Please return the bottom portion with payment to: Howell Early Childhood Department, 861 E. Sibley St., Howell, MI 48843

Child's Name: _____ Birthday: _____

Address: _____ City: _____ Zip: _____

Parent's Names: _____

Phone number where you can be reached while your child is at the Howell Safety Camp

Home: _____ Cell: _____ Work: _____

Please list the names of any person other than parent or legal guardian that the child may be released to:

Method of payment

____ Check payable to Howell Public Schools

____ Visa or Mastercard Card number: _____ Expires: _____ CSV Code: _____

Note: Checks will not be cashed until after July 1, 2019