Houghton Middle School

Student Enrollment Form

Child's Legal Name								☐ Male	☐ Female
(as shown on birth certificate)								Grade Ent	ering
/	Last	First			Middle				<u> </u>
Birth Date	_Place of Birth				_Multiple I	Birth Status:	☐ Single	☐ Twin	☐ Triplet
Residential Address									
		Street Address			City				Zip
Mailing Address									
(if different from residential add	lress)	Street Address			City				Zip
Resident School District: ☐ Ho ☐ Osceola — 31100 ☐ Baraga									ke Linden — 31130
Home Phone Number		_Township				Is this chil	d a court-pl	aced foster	child? • Yes • No
Is your child's native tongue a language other than English? ☐ Yes ☐ No		Is the primary language used in your child's home or environment a language other than English? ☐ Yes ☐ No							
Immigration Date, if not born in	U.S		Number o	f full schoo	l years chil	d has attend	led any U.S.	. school	
Ethnicity			Race						
Is this student Hispanic/Latino (Choose only one) ☐ No, not Hispanic/Latino ☐ Yes, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)				The question to the left is about ethnicity, not race. No matter what you selected, please continue to answer the following by marking one or more boxes to indicate what you consider your child's race to be. American Indian/Alaska Native Asian American Black/African American White					
Last School Attended Please Check: Michigan Pul Did your child receive any speci Check all that apply Specia	blic School Out of of of olic School olic School	State Public School	☐ Church/P	Private Scho		school cate the type	es of service		eceived)
Name of Primary Parent/Guardian Residing in the Home Place of Employment		t	Work Pho	ork Phone Cell Phone E-1		E-mail add	dress		
Relationship:	ther Grandparent	☐ Guardian ☐ Self (student enro	olling) 🗖	Other:				
Name of Secondary Parent/Guar the Home	rdian Residing in	Place of Employmen	t	Work Pho	Phone Cell		e	E-mail add	dress
Relationship: Father Mo	ther Grandparent	☐ Guardian ☐ Self (student enro	olling)	Other:				
Name of Parent Living Elsewhe	re	Relationship to Child	I		Home Pho	one	Work Pho	ne	Cell Phone
Address		1				ody papers			ct? Yes No
Custody Restrictions									
			-		-				

	OTHER	R CHILDREN IN THE FAM	MILY		
	Name (First and Last)	Birth Date	School of Atten	dance	
-					
Are there any m	edical alerts or related concerns we should be aware of	? □ Yes □ No			
If yes, please ex	plain				
041					
Other emergenc	y contacts for the student:				
Name	Home Phone	Cell phone		Relationship to student	
Name	Home Phone	Cell phone		Relationship to student	
				1	
☐ Yes ☐ No	Is this student the youngest or only child from this ho				
☐ Yes ☐ No	Is this student the youngest or only child from this household attending Houghton-Portage Township Schools?				
☐ Yes ☐ No	Houghton Middle School has permission to publish n	ny child's photograph.			
☐ Yes ☐ No	I give permission for my child to participate in school-sponsored field trips.				
☐ Yes ☐ No	We have adequate insurance to protect my child in case of an accident.				
☐ Yes ☐ No	I give permission to administer first aid to my child. In case of an emergency, my child may be transported to the hospital. It is understood that all expenses incurred in such situations shall be my responsibility and not that of the Houghton-Portage Township School District, nor any of its Board of Education members, administration, faculty, and other school personnel.				
☐ Yes ☐ No	We have read and understand the student handbook.				
	dissing Children's Act, MCL 380.1135 of the Revised Stool district with a certified copy of the pupil's birth cer				
Please check: ☐ I have brough	nt a certified copy of my child's birth certificate to prov	ide to the school.			
OR					
☐ I am unable t	o provide a certified copy of my child's birth certificate	for the reason below. Instead	I am providing:		
□ Baptismal certificate including date and place of birth □ Court Records □ County, military, or immigration records □ Doctor or hospital records accompanied by sworn statements □ A sworn statement from a parent or guardian (notarized)					
In accordance w	rith MCL 380.1135(1)(b), please explain the reason for			,	
in accordance w	in well 300.1133(1)(0), please explain the reason for	your maonity to provide a cor	tiffed copy of the child 3 of	nui confincace.	
-					
The undersigned inform the appro	d hereby acknowledges that the information provided or opriate school office if and when any of the information	n this form is true and accurat on this form changes.	te. The undersigned undersi	tands that it is his/her responsibility to	
Parent or Guard	ian Signature		Date	;	

HOUGHTON-PORTAGE TOWNSHIP SCHOOLS

Houghton Middle School

1603 Gundlach Road Houghton, MI 49931

Office: (906) 482-0450 Fax (906) 483-2566

Student Records Request

School_				
Address				
Phone _			Fax	
(Family 17, 1976	Educational Rights a	and Privacy Act, Final Rage 14673). Therefore,	Rule on Education	by authorized school personnel. al Records, Federal Register, June with the following information in
Student's	Name	Birthdate	Grade	Previous Michigan School Use Only UIC #
Student's	Name	Birthdate	Grade	UIC#
Student's	Name	Birthdate	Grade	UIC#
	end the entire Cumulasted student(s).	ative Record folder, inc	luding any Specia	al Education files, concerning the
	previous school ye Standardized test: Psychological/Phy All discipline reco policies. Any other data pe	ears, along with an expl records and scores. vsiological/Health repor	anation of your greats. ons, expulsions, are	nd other violations of school ividual needs.
Sincerel	y,			
Kay Wait	e	HMS Sec	cretary	Date

The following documents must be presented at registration:

Birth Certificate

Acceptable items are: birth certificate, passport, baptismal certificate indicating date and place of birth, court records, state-issued I.D., county, military or immigration records, doctor or hospital records with sworn statements, life insurance policy, or a notarized statement from a parent or guardian.

Immunization Records

Proof of Residency

In most cases, we do have a proof of residency document in the file, but the family address has changed since the time of enrollment. Our pupil accounting auditors require that we have proof of each student's *current* residence. Acceptable proofs are: voter registration, lease agreement, purchase agreement, moving bill, utility bill, or even the envelope from a piece of junk mail received at your home address.

PO Box items cannot be used for proof of residency.

Schools of Choice Application

Available from any district office.

Houghton Portage Township Schools/Houghton Middle School

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 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 disclosures of information from his or her education records.

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

I authorize <u>Houghton Portage Township</u>	<u>Schools</u> to release my
child's immunization record to the Michigan i	Department of Health and Human Services and
Local Health Department. I understand this in	nformation will be used to improve the quality and
timeliness of immunization services and to he	elp schools comply with Michigan Law. This includes
any immunization information and limited pe	rsonally identifiable information from the school.
Student's Name:	Date of Birth://
Signature of Parent/Guardian	
or Eligible Student:	Date: / /
-	
Printed Parent/Guardian Name:	
Triffica rafefit/ Guardian Name.	

Parent Notification Regarding Child Custody

As per State and Federal Law (MCL 722.30 & FERPA), please be advised, Houghton Portage Twp. Middle School recognizes the equal rights of parents and guardians as indicted on a certified birth certificate or legal court order.

In cases where parents/guardians are legally separated, divorced and/or those parents who simply have ongoing custody issues between them, the parental rights of both parties will be equally recognized by your child's school, <u>unless and until</u> a parent/guardian has a legal court order that specifically restricts or denies the non-custodial parent's access to the child at school, the child's school records, or other protective order.

To accommodate a custodial parent's request to deny non-custodial parent's rights to access any information on a child, the school <u>must</u> have a copy of the most recent court order on file that indicates on parent's access and information rights are inhibited. Otherwise either parent with proper identification, may have access to the child at school, request and receive information and be included in the child's educational process.

Please sign to indicate you have read this affidavit and understand the schools position.

Student Name:	DOB:	Grade:
Parent/Guardian Name – Please Print		
Parent/Guardian Signature		
Date		

Houghton-Portage Township Schools

Student Residency Questionnaire

A student may be eligible for additional educational services through Title I Part A, Title I Part-C Migrant, and/or Federal McKinney-Vento Assistance. Eligibility can be determined by completing this questionnaire. *All information provided on this form is confidential.* Complete one form per <u>FAMILY</u>.

Where are you and your family currently staying? (Check one box)

SF	CTION A					
Rent/own our own home.						
ST	OP : If you rent/own your own	home, sign below	and submit	form to so	chool personnel.	
	, , , , , , , , , , , , , , , , , , , ,	-,-0			г	
SE	CTION B					
	Temporarily with another fan	nily because we ca	annot afford	or find aff	ordable housing.	
	With an adult that is not a pa	•			_	
	In a hotel/motel.					
	In a vehicle of any kind, traile	r park or campgro	und without	t running v	water/electricity, al	bandoned building or
	substandard housing.					
	In an emergency/transitional	shelter.				
	Awaiting foster care/tempora	ary foster care plac	cement, or c	urrently in	n first six months of	f foster care
	Unsheltered					
	Unaccompanied youth: not in	the physical cust	ody of a par	ent or gua	rdian.	
	Other (specify):					
If you checked a box in Section B, your child/children may be eligible for additional educational services through Title I, Part A, Title I Part C-Migrant, or Title X, Part C-Federal McKinney-Vento Assistance Act. Please complete the information requested below.						
Stı	udent Name	Male/Female	DOB	Grade	School Name	
Would you like to be contacted by a member of the school system's Education for Homeless Children and Youth program staff? Yes No The undersigned certifies that the information provided above is accurate.						
<mark>Pri</mark> i	Print Parent/Guardian Name/Adult Caring for Student Signature Date					
Phone Number Street Address				City Zip		Zip
Scl	hool Use Only					
☐ Free or Reduced Price Meals Form Submitted/Signed ☐ Declined Services						
 Pri:	nt School Contact	Title		S	Signature	Date

Educational Material for Parents and Students (Content from MDHHS Requirements)

Sources: Michigan Dept. of Health and Human Services. Created through a grant to the CDC Foundation from 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" Lost Consciousness 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 DON'T HIDE IT, REPORT IT. Playing or practicing with concussion symptoms is dangerous and can lead to a longer recovery. 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. 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 heath 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.
 - Appears dazed or stunned
 - Is confused about assignment or position
 - Forgets an instruction

SIGNS OBSERVED BY PARENTS:

- 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 must be kept out of athletic activity the day of the injury. The student shall only return to activity (practice, scrimmage or competition) with written unconditional permission from an MD, DO, Physician's Assistant or Nurse Practitioner. 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.

Concussion Educ. Materials & Acknowledge Form (May 2016)

This portion below may be substituted for the signatures on the MHSAA Physical Form

CONCUSSION AWARENESS

EDUCATIONAL MATERIAL ACKNOWLEDGEMENT FORM

	edge in accordance with Public Acts 342 and 343 of 2012 ussion Fact Sheet for Parents and/or the Concussion Fact
	Sponsoring Organization
Participant Name Printed	Parent or Guardian Name Printed
Participant Name Signature	Parent or Guardian Name Signature
Date	 Date

Return this signed form to the participant's MHSAA member school. The school should keep this document on file for five years following the student's high school graduation.

Participants and parents please review and keep the educational materials available for future reference.

PARENTS – How to Stay Informed

THE HOUGHTON WEBSITE http://www.hpts.us

FACEBOOK: Houghton Middle School

FOR DAILY HOMEWORK WEBSITE INFORMATION:

- Go to: http://www.hpts.us
- Click on Middle School Link
- Scroll down to HOMEWORK ASSIGNMENTS (middle of the page) and click on the title. Assignments are posted at noon every day.
- A calendar will appear. Click on the date and grade you would like to view.

POWERSCHOOL-Grades, Attendance and Lunch Balances

Create a parent access account on PowerSchool. You may choose to log in and view this information or subscribe to a variety of email reports. If you have issues with PowerSchool please call the middle school office. If your child is a returning student, parent access information will be the same as before and you will not need to set up an account.

LISTSERV: To subscribe to the middle school listserv send an email to msparents+subscribe@hpts.us. You will receive an automated reply. Reply to the message or click on the "Join this Group" link in the body of the automated message to confirm your subscription. A daily bulletin is sent via the listserv with the daily announcements. The bulletin includes upcoming events, activities, deadlines and sports activities.

Listserv- How to unsubscribe: There are two ways to unsubscribe. The easiest is to click on the unsubscribe link at the bottom of any email you receive from the listserv. If this link does not show for some reason, send a blank email to msparents+unsubscribe@houghton.k12.mi.us .The second method will automatically remove you from the list.

BUS DELAYS: To receive messages via text letting you know of any bus delays go to www.remind.com. Create an account and password and select "I'm a parent." You will be prompted to select a class. The class name is "busnot." Continue by entering your cell# and hit enter. You should receive a message on your phone with a confirmation code. Enter that code on the website and choose parent as your role. You have now completed the request.

SCHOOL CANCELLATIONS OR DELAYS: To receive messages via text, send a text to (906) 934-6014 and type @hpts in the message area. After sending your first text, please reply with your name to confirm. Standard text message rates may apply and you can opt-out of messages anytime by replying with 'unsubscribe@htps' in the message area. This is a one-way text messaging system. Parents may also use www.remind.com to set up notifications for school closings. The class name is "HPTS District."

ATTENDANCE LINE: 906-482-0450; Option 2 for Middle School; Options 1 for the attendance line or Option 2 for the office. Please remember to call the attendance line (available 24/7) when your student(s) will be absent, leaving early or coming in late. If you make a same day appointment or need to pick up your student immediately, please call the office directly. We check the attendance line regularly between 8:00-10:00 and at 12:30. Please remind your student to sign in and out of the office.

Have questions about busing? Call Lamers at 906-482-4866.

Have questions about the school lunch and breakfast program? Call Shelby Turnquist at 906-482-0450, option 5 or reach her by email at sturnquist@hpts.us. If you will be submitting a free and reduced meals application, please be aware only one form is needed per family, even if you have children attending in more than one building. Families who were eligible last year must complete a new application every school year to remain eligible.

Have questions about athletics? Contact our athletic director, John Sanregret, at 906-482-0450, option 6. Please be aware your child must have a current sports physical form on file to be able to participate. This includes practices. A physical is considered current if it was completed on or after April 15 of the previous school year.

Key Points Regarding Claiming a Nonmedical Waiver for Michigan Schools

Michigan modified the administrative rules that change how nonmedical waivers for immunizations will be processed for schools. The new rule went into effect on January 1, 2015. With Michigan having one of the highest waiver rates in the country, a proactive approach has been established to help inform everyone regarding the benefits of vaccinations and the risks of disease.

Key Points:

- The new rule applies to all children who are enrolled in a public or private: Licensed childcare, preschool, and Head Start programs, Kindergarten, 7th grade, and any newly enrolled student into the school district
- The new rule does not take away your right to obtain a nonmedical waiver.
- Nonmedical waivers (religious or philosophical (other) objections) will need to be obtained from a county health department; *the school will not have them*.
- Parents and Guardians must follow these steps when requesting a **nonmedical waiver**:
 - 1. Contact your county health department for an appointment to speak with a health educator. (Western U.P. Health Dept. 906-482-7382)
 - 2. During the visit, there will be an opportunity to have a discussion about immunizations with the county health department staff.
 - 3. If at the end of the visit, you may request a nonmedical waiver for your child, you will receive a copy of the current, certified (stamped and signed) State of Michigan Nonmedical Waiver Form.
 - 4. Schools will only accept the current, official State of Michigan form dated January 1, 2015.
 - 5. Forms cannot be altered in any way (such as crossing information out).
 - 6. Take completed, certified waiver form to your child's school.

If your child has a **medical reason** (a true contraindication or precaution) for not receiving a vaccine, a physician must sign the State of Michigan Medical Contraindication form; this form is available at your doctor's office (not the county health department).

Based on the public health code, a child without either an up-to-date immunization record, a certified nonmedical waiver form or a physician signed medical waiver form can be excluded from school. For more information, please visit www.michigan.gov/immunize then click on Local Health Departments > then click on Immunization Waiver Information.

Your student(s) complete and updated immunization record is due on or before Friday, August 30, 2019.

Extra-Curricular Activities

Builders Club (7 & 8)

The Builders Club offers middle school students the opportunity to develop emerging leadership in their school and their community. Members elect officers, suggest ideas for projects and carry out projects. The local Kiwanis Club and Kiwanis International sponsor this service organization.

Drama Productions (6–8)

The middle school presents a performance during the second semester of the school year. Auditions are open to students in Grades 6-8. Auditions generally take place prior to Christmas recess; with performances scheduled for the beginning of February.

First Tech (6-8)

Team members are challenged to build autonomous robots using Lego mind storms kits and explore an area of science in preparation for sports-like tournaments where learning is more important than winning. Competition consists equally of robot design, performance of predefined tasks, presentation of a unique solution to a research problem and teamwork. Members do all the research, problem solving, building and programming. They learn skills reinforcing classroom learning, respect of others and their ideas, creative thinking, perseverance, time management, teamwork and leadership skills.

Middle School Yearbook (6-8)

The yearbook staff meets on a regular basis throughout the year. Activities include photography and producing a yearbook for the current school year.

Middle School Student Council (6-8)

The Middle School Student Council consists of a representative from each homeroom. Representatives are elected by blind ballot at the beginning of each school year. The representatives are expected to pass information to and from the student body. The Senate plans dances, fun-nights, fundraisers, community service projects and Middle School Month.

Math Counts (6-8)

Students attend weekly coaching sessions to improve their skills in mathematical problem solving. There will be two inschool math competitions and a U.P. and state competition.

Other School Year Activities - Open to Grades 6-7-8

Geography Bee
Michigan Math League and AMC8 (6–8)
Michigan History Day
Presidential Challenge Physical Fitness Program
Science Fair
Spelling Bee

Athletics

The Houghton-Portage Township School District encourages participation in interscholastic athletics, both boys and girls. The sports offered to middle students are listed below:

6th Grade Flag Football - Fall
7th and 8th Grade Tackle Football - Fall
6th, 7th and 8th Grade Boys' and Girls' Cross Country - Fall
7th and 8th Grade Girls' Basketball - Fall
7th and 8th Grade Boys' Basketball - Winter
6th Grade Boys' and Girls' Basketball - Winter
7th and 8th Grade Boys' and Girls' Track - Spring
Volleyball Camp - Spring