



Lyman Gilmore Middle School

Grass Valley School District Parent Information

This packet contains the following information:

- 1. Superintendent's Letter**
- 2. General Information about Lyman Gilmore**
- 3. School Calendar for 2020/2021**
- 4. Administration of Medication Request Form**
- 5. Lunch Program**
 - Menu
 - Application For Free And Reduced Meals (*students who received free or reduced priced meals last year will continue for the first 30 days of school pending a new application and approval*).
- 6. Grass Valley After School Program Letter/Registration Form**
- 7. Materials Check Out Agreement**
- 8. Student / Parent School Agreement**
- 9. "All In" Health Care For All Families - Flyer**
- 10. Mandatory Signature Page – Items listed below available online at <http://www.gvsd.us>**
 - Annual Parent/Guardian Notice of Rights and Responsibilities (EC 48980)
 - Promotion/Retention – Board Policy #5210
 - Instruction/Parent Involvement – Board Policy #6054
 - Student Eligibility Certification (Indian Education Program)
 - Student Handbook
 - Sexual Harassment/Non Discrimination/Student Conduct – Board Policy #5100
 - Pesticide Notification and Registry
 - Uniform Complaint Procedures – Board Policy #1175
 - Student Acceptable Use Agreement (Terms and Conditions)
 - Request to Deny Access To Directory Information
 - Request for Non-Participation in Health, Family Life or Sex Education Instruction (5th – 8th Grade)
- 11. Student Insurance**
 - Myers-Stevens Low cost accident insurance (as low as \$16.00 per year) is available at parent expense. Please be advised the District does not insure your child during the school day and at school activities.
- 12. School Messenger Text Messaging Service – Opt-In Flyer**

Complete regulations and procedures available online at <http://www.gvsd.us>

If You Have Any Questions, Please Call 273-8479



10840 Gilmore Way
Grass Valley, CA 95945
(530) **273-4483**
FAX (530) **273-0248**

Grass Valley School District

Andrew Withers
Superintendent

Dear Grass Valley School District Parents or Guardians:

Welcome to the 2020/2021 school year. We are excited about kicking off another school year with the anticipation of a successful educational experience for all students. We know that the challenges of COVID-19 are impacting everyone however we also know that we will get through this by working together. This is one of the reasons why we have developed a districtwide theme for this year, GVSD - Better Together!

One of the traditions of starting the school year is the annual back to school packet for parents. This packet is intended to provide you with information and for us to gather important information from you. To make this process easier for parents we are providing the signature forms and less bulky information in the first day packet. All of the other information is provided on the district website.

To access the First Day Packet information on the district website please follow the process outlined below:

- Access the district website at www.gvsd.us
- On the home page, in the left hand column click on the "Forms and Documents" link
- Once you are on the Forms and Documents page click on the "Annual Parent Notification" link.
- On this page you can access all of the required notifications by school site by clicking on the "Annual Parent Notification" icon.
- After reviewing the notifications return to the "Forms and Documents" page and click on the "Mandatory Forms" icon. This link will provide you with the PDF for the "Mandatory Signature Form", which will need to be printed, signed, and returned to your child's teacher.
- The other links available on "Forms and Documents" page are "Optional Forms" (includes forms such as administration of medication form, Healthy families flyer, pest notification, etc.), "Free and Reduced Lunch Program", and "School Calendar".

It is important for parents to understand that the only forms that are required to be returned to the school site are the "Mandatory Signature Form" and the "Materials Check Out Agreement Form". We would also like to encourage all parents or guardians to complete and return the optional Free and Reduced Lunch Application form.

We hope that this dual process of sending some materials home in the First Day Packet and providing access to the information and forms on the website makes this process less cumbersome for your family. Thank you for your support by taking the time to complete and return these forms.

Sincerely,

Andrew Withers
Superintendent

Lyman Gilmore Middle School

10837 Rough & Ready Highway - Grass Valley, CA 95945

Phone: (530) 273-8479 Fax: (530) 273-1675

School Hours: 9:00am to 3:30pm

Office Hours: 8:00am to 4:30pm

| | | | |
|---------------------|--------------------|------------------|----------------|
| Principal | Lisa Lawell | Secretary | Vicky DeLaVega |
| Assistant Principal | Farah Friend | Attendance Clerk | Franca Nielson |
| Counselor | Mark Heine | Office Assistant | Cindy McKinney |
| Psychologist | Lorrie Fredrickson | District Nurse | Robyn Ettl |

IMPORTANT INFORMATION:

Absences

Parents **must** phone in or send a note regarding student absence(s) to the Student Center prior to readmission to classes. Excessive absences, tardiness, or early checkouts may be referred to the School Attendance Review Board (SARB).

Change Of Address, Phone Numbers, Emergency Contacts

Please inform the main office if you have a change of address, phone number, or new emergency contacts. This is very important so the school can notify parents of school activities and/or emergency situations.

Daily Bulletin

The student bulletin is read during 1st period each morning keeping students informed of activities, sports, and other information. Parents may read the bulletin online on our school website, gilmore.qvsd.us or our student information system, qvsd.illuminateed.com. You must create an account to view the bulletin and also to check your student's grades and attendance on Illuminate.

Deliveries

Floral and balloon, deliveries are considered disruptive and will not be delivered to students. Students will be called in to receive their delivery, and may pick them up in the office at the end of the day. Students who arrive at school with flowers or balloons will be asked to leave them in the office until the school day ends.

Early Check Out For Appointments

If a student needs to leave before the end of the school day, a parent may call or the student may bring a note to the Student Center *before* school starts indicating the checkout time.

Medication At School

Both physician and parent must sign a school district Administration of Medication form before staff may give ANY medication to students. Specific directions for the administration of prescription or non-prescription medication to be given at school must be included with a written statement from the health care provider clearly specifying the condition for which the drug shall be given, how it is given, dosage, and any other information. **Medications shall be brought to school by the parent in the original container.** No medication (prescription or non-prescription) may be transported by a student or be in the student's possession while at school.

Student Messages

Please help us to **AVOID class interruptions by communicating with your child before school regarding after school plans - including how to get home.** We will make every effort to get emergency messages to students. *The office cannot guarantee delivery of messages received after 3:00pm.*

Grass Valley School District

Student/Parent Calendar with Minimum Days 2020/2021 (Bell Hill/Scotten/Gilmore)

| July 2020 | | | | | | |
|-----------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | 1 |

| August 2020 (10 student days) | | | | | | |
|-------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | PD | 15 |
| 16 | WD | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

| September 2020 (20 student days) | | | | | | |
|----------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | H | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | PD | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

| October 2020 (17 student days) | | | | | | |
|--------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | B | B | B | B | B | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 |

| November 2020 (18 student days) | | | | | | |
|---------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | H | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | H | H | 28 |
| 29 | 30 | | | | | |

| December 2020 (14 student days) | | | | | | |
|---------------------------------|----|----|----|-----|----|----|
| S | M | T | W | T | F | S |
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | B | B | B | H | H | 26 |
| 27 | B | B | B | H/B | | |

| January 2021 (18 student days) | | | | | | |
|--------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | | H | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | H | 19 | 20 | 21 | PD | 23 |
| 24/31 | 25 | 26 | 27 | 28 | 29 | 30 |

| February 2021 (18 student days) | | | | | | |
|---------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | H | 13 |
| 14 | H | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | | | | | | |

| March 2021 (19 student days) | | | | | | |
|------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | EC | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | B | B | B | | | |

| April 2021 (18 student days) | | | | | | |
|------------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | | | B | B | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | EC | 24 |
| 25 | 26 | 27 | 28 | 29 | EC | |

| May 2021 (19 student days) | | | | | | |
|----------------------------|----|----|----|----|----|-----|
| S | M | T | W | T | F | S |
| 2 | 3 | 4 | 5 | 6 | 7 | 1/8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | EC | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | H | | | | | |

| June 2021 (9 student days) | | | | | | |
|----------------------------|----|----|----|----|----|----|
| S | M | T | W | T | F | S |
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

School Breaks and Holidays

| | |
|--------------------------|--|
| August 14, 2020 | Professional Development Day - No Students |
| August 17, 2020 | Teacher Work Day - No Students |
| August 18, 2020 | First Day of School (Minimum Day) |
| September 7, 2020 | Labor Day Holiday |
| September 21, 2020 | Professional Development Day - No Students |
| October 19-23, 2020 | Fall Break |
| November 11, 2020 | Veterans Day Holiday (Observed) |
| November 25, 2020 | Minimum Day |
| November 26 & 27, 2020 | Thanksgiving Holiday |
| December 18, 2020 | Minimum Day |
| December 21-31, 2020 | Winter Break |
| January 1, 2021 | New Years Day Holiday |
| January 18, 2021 | Martin Luther King Jr. Holiday |
| January 22, 2021 | Professional Development Day - No Students |
| Feb 12 & Feb 15, 2021 | Presidents Holiday |
| March 12, 2021 | Emergency Closure Day - Make Up If needed |
| March 29 - April 2, 2021 | Spring Break - No Students |
| April 23, 2021 | Emergency Closure Day - Make Up If needed |
| April 30, 2021 | Emergency Closure Day - Make Up If needed |
| May 17, 2021 | Emergency Closure Day - Make Up If needed |
| May 31, 2021 | Memorial Day Holiday |
| June 9, 2021 | Minimum Day |
| June 10, 2021 | Minimum Day |
| June 11, 2021 | Last Day of School / Minimum Day |

Student Early Release / Collaboration Days: **Every Wednesday - Dismissal at 1:35 p.m.**

| | | |
|---|--|--|
| Bell Hill Academy Parent Conferences 4:00 - 7:30 p.m. | Lyman Gilmore Parent Conferences 4:00 - 7:30 | Scotten School Parent Conferences 4:00 - 7:30 p.m. |
|---|--|--|

Board Approved 5/12/20

180 Student Days
186 Teacher Days
* Conferences are equivalent to 2 Teacher Days

Back to School Night (5:30 - 7:00 pm)

| | |
|----------------------|-----|
| Bell Hill Academy | TBD |
| Scotten | TBD |
| Lyman Gilmore | TBD |
| Grass Valley Charter | TBD |

Open House (5:30 - 7:00 pm)

| | |
|----------------------|-----|
| Bell Hill Academy | TBD |
| Scotten | TBD |
| Lyman Gilmore | TBD |
| Grass Valley Charter | TBD |

GRASS VALLEY SCHOOL DISTRICT

PARENT REQUEST FOR THE ADMINISTRATION OF MEDICATION DURING SCHOOL HOURS BY SCHOOL PERSONNEL

ATTENTION PARENTS/GUARDIANS:

Medications, prescription and non-prescription, that are to be given at school, require a written authorization from the physician, and a signed release from the parents/guardians for school personnel to administer any medication. Only one medication should be written per form.

Medical treatment is the responsibility of the parent and the family health care provider. Medications are rarely given in school. The only exceptions involve special or serious problems where it is deemed absolutely necessary to give the medication during school hours.

A school nurse often serves more than one school and would not be available every day to administer medication so other school personnel may be given this responsibility. **Consequently, the parent is urged, with the help of the family health care provider, to work out a schedule of giving medication outside school hours.**

Specific directions for the administration of the medication to be given at school must be included in a written statement from the health care provider clearly specifying the condition for which the drug shall be given, how it is to be given, dosage, and related information. Specific instructions should be included for the emergency treatment of allergic reactions such as those from bee stings, and they should clearly state what type of reaction for which the drug is being given, (i.e., localized, generalized, severe, mild).

Medication shall be brought to and from the school by the parent in the original container. No medication (prescription or non-prescription) may be transported by a student or be in the student's possession while at school or on a school bus.

The school will provide a safe place for the medication to be stored and maintain records. These procedures fulfill the legal requirements of California Education Code 49423 and the district policy. If you have further questions or need assistance please contact your child's school nurse at his/her school.

EDUCATION CODE SECTION 49423: Administration of Prescribed Medication for Pupil. Any students who is required to take, during the regular school day, medication prescribed for him/her by a physician, may be assisted by the school nurse or other designated school personnel if the school district received (1) a written statement from such physician detailing the method, amount, and time schedules by which such medication is to be taken, and (2) a written statement from the parent or guardian of the student indicating the desire that the school district assist the student in the matters set forth in the physician's statement.

(form on back)

Grass Valley School District

ADMINISTRATION OF MEDICATION AT SCHOOL

*Please have your physician/health provider complete this form
for each prescription or non-prescription medication.*

1. Name of pupil _____ Grade _____
2. Birthdate _____ 3. School of Attendance _____
4. Medication
(one per sheet) _____
5. Dosage, time and method of administration _____

6. Physical condition for which drug is to be given. (If allergic in nature, specify what type of reaction, i.e., localized, generalized, mild, severe). _____
7. Possible reactions that need to be reported to the physician/care provider. _____
8. Disposition of pupil following administration of medication, (i.e., rest, home, hospital, doctor's office, return to class, notification requests). _____

The above medication cannot be scheduled for other than during school hours and such medication may be administered by medically-untrained school personnel whenever necessary.

Physician/Health Care Provider Name _____ Phone _____

Address _____

Date of Request _____ Medication to be continued until _____ (Date)

Authorization and Signature of Licensed Physician/Health Care Provider

I request that my child (the above named pupil) be assisted in taking the above medication(s) at school by school personnel, and will comply with the policy and procedures of the school as outlined in the letter on the reverse side. I give my consent for the school nurse to communicate with the physician/health care provider and to counsel with school personnel regarding the above named pupil and medication as appropriate. I understand the school is not legally obligated to administer medication to any pupil and therefore agree to hold the district harmless from any liability resulting from the administration of above named medication(s).

Authorization and Signature of Parent/Guardian

Date

Contact Phone Number(s) _____



10840 Gilmore Way
Grass Valley, CA 95945

(530) **273-4483**

FAX (530) **273-0248**

Grass Valley School District

Andrew Withers
Superintendent

August 4, 2020

Dear Parents/Guardians,

This year our district is again sending First Day Packets with information and necessary forms home and we will continue to provide many of the forms and information on the district website.

- One of those important forms is the Free and Reduced Meal Program application. This is extremely important information, as it establishes the number of students that are eligible for the Free and Reduced Meal Program. Being eligible for this program not only provides support for your child by providing them free or reduced meals, but it also provides additional funding for your child's school program. So, even if you do not want your child to participate in the meal program, they can still benefit by participating in this program because of the additional funding that will be generated for the school that they attend. The funds generated by this program are required to be spent on eligible students.

Because of the significant impact that this program has on our school funding, we are making this application available through several resources. You can apply online through our District website in the Mealtime link, print out an application from the Grass Valley School District website (<http://www.gvsd.us>), and the paper application form that will be sent home in the First Day Packets.

To ensure that our schools do not miss out on available funding for our students, we are asking that all families complete this application even if you feel that you may not be eligible.

Once you have completed the attached application please return it to your child's school as soon as possible.

Only one form needs to be completed per family regardless of the number of children you have in the district.

If your families' financial circumstances change during the school year, your family may be eligible; you may submit an application anytime during the school year.

Please support your child and our instructional programs by filling-out this important application. All such information is kept strictly confidential.

Sincerely,

Andrew Withers

Superintendent

FREQUENTLY ASKED QUESTIONS ABOUT FREE AND REDUCED PRICE SCHOOL MEALS

Dear Parent/Guardian:

Children need healthy meals to learn. **Grass Valley School District** offers healthy meals every school day. Breakfast costs **[1.75]**; lunch costs **[\$3.50]**. **Your children may qualify for free meals or for reduced price meals.** Reduced price is **[\$0.00]** for breakfast and **[\$0.00]** for lunch. This packet includes an application for free or reduced price meal benefits, and a set of detailed instructions. Below are some common questions and answers to help you with the application process.

1. WHO CAN GET FREE OR REDUCED PRICE MEALS?

- All children in households receiving benefits from **[State SNAP]**, **[the Food Distribution Program on Indian Reservations (FDPIR)]** or **[State TANF]**, are eligible for free meals.
- Foster children that are under the legal responsibility of a foster care agency or court are eligible for free meals.
- Children participating in their school's Head Start program are eligible for free meals.
- Children who meet the definition of homeless, runaway, or migrant are eligible for free meals.
- Children may receive free or reduced price meals if your household's income is within the limits on the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on the attached chart.

HOW DO I KNOW IF MY CHILDREN QUALIFY AS HOMELESS, MIGRANT, OR RUNAWAY? Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and haven't been told your children will get free meals, please call or e-mail **[school, homeless liaison or migrant coordinator]**.

2. **DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** No. *Use one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: **[Your child's school]**.
3. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE ALREADY APPROVED FOR FREE MEALS?** No, but please read the letter you got carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact **[Jeff Coats 530-272-2236]** immediately.
4. **CAN I APPLY ONLINE?** Yes! You are encouraged to complete an online application instead of a paper application if you are able. The online application has the same requirements and will ask you for the same information as the paper application. Visit **[www.mymealtime.com/apps]** to begin or to learn more about the online application process. Contact **[Jeff Coats 530-272-2236]** if you have any questions about the online application.
5. **MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT A NEW ONE?** Yes. Your child's application is only good for that school year and for the first few days of this school year, through **[9/18/2020]**. You must send in a new application unless the school told you that your child is eligible for the new school year. If you do not send in a new application that is approved by the school or you have not been notified that your child is eligible for free meals, your child will be charged the full price for meals.
6. **I GET WIC. CAN MY CHILDREN GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please send in an application.
7. **WILL THE INFORMATION I GIVE BE CHECKED?** Yes. We may also ask you to send written proof of the household income you report.
8. **IF I DON'T QUALIFY NOW, MAY I APPLY LATER?** Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.

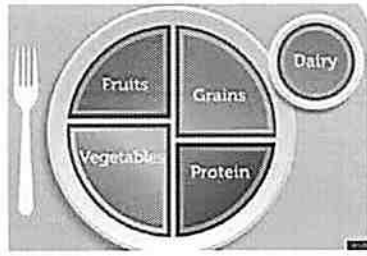
9. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: **[Jeff Coats 530-272-2236]**.
10. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You, your children, or other household members do not have to be U.S. citizens to apply for free or reduced price meals.
11. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
12. WHAT IF SOME HOUSEHOLD MEMBERS HAVE NO INCOME TO REPORT? Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. Whenever this happens, please write a 0 in the field. However, if any income fields are left empty or blank, those will also be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you meant to do so.
13. WE ARE IN THE MILITARY. DO WE REPORT OUR INCOME DIFFERENTLY? Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food, or clothing, it must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
14. WHAT IF THERE ISN'T ENOUGH SPACE ON THE APPLICATION FOR MY FAMILY? List any additional household members on a separate piece of paper, and attach it to your application. Contact **[Jeff Coats 530-272-2236]** to receive a second application.
15. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for **[State SNAP]** or other assistance benefits, contact your local assistance office.

If you have other questions or need help, call **530-272-2236**.

Sincerely,

Jeff Coats

Grass Valley School District Child Nutrition Services



Healthy Meals—Healthy Minds

August 18, 2020

Dear Grass Valley School District Parents and Guardians,

The National School Lunch Program is a federally funded program that assists schools and other agencies in providing nutritious breakfast and lunches to children at reasonable prices. In addition to financial assistance, the program provides commodity foods to help reduce meal program costs and is administered by the California Department of Education, Nutrition Services Division.

Parents/Guardians may apply for free and reduced meals for their students depending on financial need at any time during the school year. For an application contact your student's school office or the GVSD Child Nutrition Services Department. Parents/Guardians can also apply on line at www.mymealtime.com/Apps

STUDENT MEAL PROGRAMS

Free & Reduced Price Meals

Breakfast – no charge (additional breakfast \$1.75 each)

Lunch –no charge (additional lunch \$3.50 each)

Additional Milk or Milk without receiving a meal - \$0.50 each

Full Price Meals

Breakfast – \$1.75 (additional breakfast \$1.75 each)

Lunch – \$3.50 (additional lunch \$3.50 each)

Additional Milk or Milk without receiving a meal - \$0.50 each

- Parents/Guardians are required to maintain their student's meal account by sending money to the school or placing money on their student's account through MealTime Online. ***There is no charging of school meals or milk.*** Meal balance notifications are emailed and can be viewed on www.mymealtime.com. If a student's meal account is exhausted and not replenished the student will be sent to the office to call you or given an alternate snack/meal.

If you have any questions or concerns, please contact the nutrition services department at 272-2236.

We appreciate the opportunity to provide your student with nutritious meals.

GVSD CHILD NUTRITION SERVICES

MealTime Just Got Easier!

We offer a choice of how to manage your student's meal account.

Grass Valley School District has chosen MealTime Online to provide the opportunity for you to make credit card deposits into your student's cafeteria account or view your student's purchase history via the internet. YOU CAN STILL SEND A CHECK OR CASH TO SCHOOL WITH YOUR STUDENT AT NO CHARGE.

MealTime Online Prepayment Website

MealTime prepayment system offers different ways to manage your child's meal account. Make payments to your child's meal account. (There is a small website use fee that is subsidized 50 % by the district).

- Deposits can be made with any Discover, VISA, or MasterCard credit or debit card.
- Credit card processing is completed through a secure authorization process. MealTime Online does not retain or store Credit Card information and will never share your information with a third party.
- Online payments are processed immediately and will be reflected in the student's cafeteria account automatically, according to the district's scheduled transfer process.
- All student data that is transmitted is encrypted and authenticated every time you use the website.

You can associate multiple students, from multiple schools, with one parent profile.

View account deposits, balance and meal purchase transactions.

Set up free e-mail reminders to let you know when your child's meal balance is low.

To Use MealTime Online:

Visit your school or school district web site and locate the link to the school nutrition page. Find the link to online payments which will take you to MealTime Online. Or go directly to: www.mymealtime.com, www.gvsd.us or www.nevadacountycns.com

Step 1: Create a MealTime Online profile. Click on the "Create new profile" link and enter a Username and Password that you will use to login to MealTime Online. The Username and Password must be at least 6 characters. For example, Username: jsmith Password: pty845.

Step 2: Add your student. Login to your MealTime Online account (using the Username and Password that you created in Step 1), click on "Meal Account Deposits" then click the "Add New Student" link and add your student by entering their first name and student id. (Obtain this id number from your student's school or school's nutrition services).

Step 3: Make a Deposit. Click on the "Make Deposit" link to make a deposit into a school account. There is a transaction fee for making deposits.

Click on the "View Details" link next to your student's name to view their cafeteria account balance and purchase history.

Note:

Online Deposits are processed each night at 2:00 a.m. and will be automatically reflected in your student's account at that time. Deposits made after 2:00 a.m. will be processed the following night at 2:00 a.m.

For any additional information contact the food services department at 272-2236.

| INCOME ELIGIBILITY GUIDELINES | | | | | | | | | | | |
|---|----------------------------|-----------------------------|---------|-----------------|-----------------|--------|--------------------|---------|-----------------|-----------------|--------|
| Effective from July 1, 2020 to June 30, 2021 | | | | | | | | | | | |
| HOUSEHOLD SIZE | FEDERAL POVERTY GUIDELINES | REDUCED PRICE MEALS - 185 % | | | | | FREE MEALS - 130 % | | | | |
| | ANNUAL | ANNUAL | MONTHLY | TWICE PER MONTH | EVERY TWO WEEKS | WEEKLY | ANNUAL | MONTHLY | TWICE PER MONTH | EVERY TWO WEEKS | WEEKLY |
| 48 CONTIGUOUS STATES, DISTRICT OF COLUMBIA, GUAM, AND TERRITORIES | | | | | | | | | | | |
| 1 | 12,760 | 23,606 | 1,968 | 984 | 908 | 454 | 16,588 | 1,383 | 692 | 638 | 319 |
| 2 | 17,240 | 31,894 | 2,658 | 1,329 | 1,227 | 614 | 22,412 | 1,868 | 934 | 862 | 431 |
| 3 | 21,720 | 40,182 | 3,349 | 1,675 | 1,546 | 773 | 28,236 | 2,353 | 1,177 | 1,086 | 543 |
| 4 | 26,200 | 48,470 | 4,040 | 2,020 | 1,865 | 933 | 34,060 | 2,839 | 1,420 | 1,310 | 655 |
| 5 | 30,680 | 56,758 | 4,730 | 2,365 | 2,183 | 1,092 | 39,884 | 3,324 | 1,662 | 1,534 | 767 |
| 6 | 35,160 | 65,046 | 5,421 | 2,711 | 2,502 | 1,251 | 45,708 | 3,809 | 1,905 | 1,758 | 879 |
| 7 | 39,640 | 73,334 | 6,112 | 3,056 | 2,821 | 1,411 | 51,532 | 4,295 | 2,148 | 1,982 | 991 |
| 8 | 44,120 | 81,622 | 6,802 | 3,401 | 3,140 | 1,570 | 57,356 | 4,780 | 2,390 | 2,206 | 1,103 |
| For each add'l family member, add | 4,480 | 8,288 | 691 | 346 | 319 | 160 | 5,824 | 486 | 243 | 224 | 112 |
| ALASKA | | | | | | | | | | | |
| 1 | 15,950 | 29,508 | 2,459 | 1,230 | 1,135 | 568 | 20,735 | 1,728 | 864 | 798 | 399 |
| 2 | 21,550 | 39,868 | 3,323 | 1,662 | 1,534 | 767 | 28,015 | 2,335 | 1,168 | 1,078 | 539 |
| 3 | 27,150 | 50,228 | 4,186 | 2,093 | 1,932 | 966 | 35,295 | 2,942 | 1,471 | 1,358 | 679 |
| 4 | 32,750 | 60,588 | 5,049 | 2,525 | 2,331 | 1,166 | 42,575 | 3,548 | 1,774 | 1,638 | 819 |
| 5 | 38,350 | 70,948 | 5,913 | 2,957 | 2,729 | 1,365 | 49,855 | 4,155 | 2,078 | 1,918 | 959 |
| 6 | 43,950 | 81,308 | 6,776 | 3,388 | 3,128 | 1,564 | 57,135 | 4,762 | 2,381 | 2,198 | 1,099 |
| 7 | 49,550 | 91,668 | 7,639 | 3,820 | 3,526 | 1,763 | 64,415 | 5,368 | 2,684 | 2,478 | 1,239 |
| 8 | 55,150 | 102,028 | 8,503 | 4,252 | 3,925 | 1,963 | 71,695 | 5,975 | 2,988 | 2,758 | 1,379 |
| For each add'l family member, add | 5,600 | 10,360 | 864 | 432 | 399 | 200 | 7,280 | 607 | 304 | 280 | 140 |
| HAWAII | | | | | | | | | | | |
| 1 | 14,680 | 27,158 | 2,264 | 1,132 | 1,045 | 523 | 19,084 | 1,591 | 796 | 734 | 367 |
| 2 | 19,830 | 36,686 | 3,058 | 1,529 | 1,411 | 706 | 25,779 | 2,149 | 1,075 | 992 | 496 |
| 3 | 24,980 | 46,213 | 3,852 | 1,926 | 1,778 | 889 | 32,474 | 2,707 | 1,354 | 1,249 | 625 |
| 4 | 30,130 | 55,741 | 4,646 | 2,323 | 2,144 | 1,072 | 39,169 | 3,265 | 1,633 | 1,507 | 754 |
| 5 | 35,280 | 65,268 | 5,439 | 2,720 | 2,511 | 1,256 | 45,864 | 3,822 | 1,911 | 1,764 | 882 |
| 6 | 40,430 | 74,796 | 6,233 | 3,117 | 2,877 | 1,439 | 52,559 | 4,380 | 2,190 | 2,022 | 1,011 |
| 7 | 45,580 | 84,323 | 7,027 | 3,514 | 3,244 | 1,622 | 59,254 | 4,938 | 2,469 | 2,279 | 1,140 |
| 8 | 50,730 | 93,851 | 7,821 | 3,911 | 3,610 | 1,805 | 65,949 | 5,496 | 2,748 | 2,537 | 1,269 |
| For each add'l family member, add | 5,150 | 9,528 | 794 | 397 | 367 | 184 | 6,695 | 558 | 279 | 258 | 129 |

August 2020

K8 Lunch Menu

This institution is an equal opportunity provider.



We're Cooking
Healthy School
Lunches

| Monday | | Tuesday | | Wednesday | | Thursday | | Friday | |
|--------|--|---------|--|-----------|---|----------|---|--------|---|
| 3 | Pretzel Dog Mustard Ketchup Pea Pods Celery Sticks Nectarine 1% Milk FF Choc Milk | 4 | Chicken Sandwich WG Bun BBQ Beans Romaine Lettuce Dill Pickles Craisins 1% Milk FF Choc Milk | 5 | WG Pepp Pizza Romaine Lettuce Cucumbers Ranch Dressing Apples, Fresh FF Choc Milk 1% Milk | 6 | Orange Chicken WG Brown Rice WG Roll Carrots, Fresh Broccoli, Fresh Strawberry Cup 1% Milk FF Milk | 7 | WG Hoagie Roll Sliced Turkey Breast American Cheese Romaine Lettuce Dill Pickles Mayonnaise Cherry Tomatoes Raisins 1% Milk FF Choc Milk |
| 10 | Hot Dog WG Bun Potato Rounds Ketchup Mustard Carrots, Fresh Pears, canned 1% Milk FF Choc Milk | 11 | Hamburger BBQ Beans WG Bun Carrots, Fresh Dill Pickles Mustard Ketchup Plum 1% Milk FF Choc Milk | 12 | Pepperoni Pizza Bagel Romaine Lettuce Cucumbers Ranch Dressing Apples, Fresh 1% Milk FF Choc Milk | 13 | WG Chow Mein Chicken Fajita Strips Pea Pods Peaches, Canned 1% Milk FF Choc Milk | 14 | WG Pepp French Brd Pizza Carrots, Fresh Cucumbers Ranch Dressing Orange, Fresh 1% Milk FF Choc Milk |
| 17 | WG Mini Corn Dogs Potato Rounds Ketchup Mustard Carrots, Fresh Nectarine 1% Milk FF Choc Milk | 18 | Chicken Sandwich WG Bun BBQ Beans Romaine Lettuce Dill Pickles Craisins 1% Milk FF Choc Milk | 19 | WG Pepp Pizza Romaine Lettuce Cucumbers Ranch Dressing Apples, Fresh FF Choc Milk FF Milk | 20 | WG Egg Roll Teriyaki Chicken WG Brown Rice Carrots, Fresh Fresh Pear FF Choc Milk 1% Milk | 21 | WG Chicken Sticks Potato Rounds WG Roll Ketchup Celery Sticks Peaches, Canned 1% Milk FF Choc Milk |
| 24 | Pretzel Dog Mustard Ketchup Pea Pods Celery Sticks Nectarine 1% Milk FF Choc Milk | 25 | Hamburger BBQ Beans WG Bun Carrots, Fresh Dill Pickles Mustard Ketchup Peach 1% Milk FF Choc Milk | 26 | Pepperoni Pizza Bagel Romaine Lettuce Cucumbers Ranch Dressing Fresh Pear 1% Milk FF Choc Milk | 27 | Orange Chicken WG Brown Rice WG Roll Carrots, Fresh Broccoli, Fresh Raisins 1% Milk FF Milk | 28 | Corn Dog Two Bean Salad Celery Ketchup Mustard Pears, canned 1% Milk FF Choc Milk |
| 31 | Hot Dog WG Bun Potato Rounds Ketchup Mustard Carrots, Fresh Pears, canned 1% Milk FF Choc Milk | | | | | | | | |



Apply online:
www.mealtim

www.mealtime.com/apps

Check all that apply

Write only one case number in this space.

Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

How often?

B. All Adult Household Members (including yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

[illegible][illegible][illegible]☐ Check if no SSN

STEP 4

I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (check) the information. I am aware that if I purposefully give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Tadpole's den

0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99

INSTRUCTIONS

Sources of Income

| Sources of Income for Children | |
|---|---|
| Sources of Child Income | Example(s) |
| - Earnings from work | - A child has a regular full or part-time job where they earn a salary or wages |
| - Social Security - Disability Payments - Survivor's Benefits | - A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits |
| - Income from person outside the household | - A friend or extended family member regularly gives a child spending money |
| - Income from any other source | - A child receives regular income from a private pension fund, annuity, or trust |

| Sources of Income for Adults | | |
|---|---|---|
| Earnings from Work | Public Assistance / Alimony / Child Support | Pensions / Retirement / All Other Income |
| <ul style="list-style-type: none"> - Salary, wages, cash bonuses - Net income from self-employment (farm or business) <p>If you are in the U.S. Military:</p> <ul style="list-style-type: none"> - Basic pay and cash bonuses (do NOT include combat pay, FSSA or privatized housing allowances) - Allowances for off-base housing, food and clothing | <ul style="list-style-type: none"> - Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) - Cash assistance from State or local government - Alimony payments - Child support payments - Veteran's benefits - Strike benefits | <ul style="list-style-type: none"> - Social Security (including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household |

OPTIONAL

Children's Racial and Ethnic Identities

We are required to ask for information about your children's race and ethnicity. This information is important and helps to make sure we are fully serving our community. Responding to this section is optional and does not affect your children's eligibility for free or reduced price meals.

Ethnicity (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino
 Race (check one or more): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White

The **Richard B. Russell National School Lunch Act** requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four digits of the social security number of the adult household member who signs the application. The last four digits of the social security number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or when you indicate that the adult household member signing the application does not have a social security number. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

mail: U.S. Department of Agriculture
 Office of the Assistant Secretary for Civil Rights
 1400 Independence Avenue, SW
 Washington, D.C. 20250-9410

fax: (202) 690-7442; or
 email: program.intake@usda.gov

This institution is an equal opportunity provider.

Do not fill out

For School Use Only

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24 Monthly x 12

| | | | | | | | | | |
|----------------------------------|-----------------------|---------------------------------|-----------------------|--------------------------------|----------------------|--|-----------------------|-----------------------|-----------------------|
| Total Income | How often? | | | | Household Size | Categorical Eligibility <input type="checkbox"/> | Eligibility: | | |
| | Weekly | Bi-Weekly | 2x Month | Monthly | | | Free | Reduced | Denied |
| <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Determining Official's Signature | Date | Confirming Official's Signature | Date | Verifying Official's Signature | Date | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | |



Grass Valley School District Before and After School Program

August 3, 2020

Dear GVSD Families,

Welcome back to a different school year. The reopening of the Grass Valley School District Child Development Programs is dependent upon the guidance and direction received from the California Department of Education, state and local public health departments and the Nevada County Superintendent of Schools. Last fall, the Before and After School Program (BASP) offered an **affordable** TK/Kindergarten through 8th grade childcare at Bell Hill Academy, Scotten, and Lyman Gilmore Middle Schools.

Currently, we will continue to do our best to review all options for providing the Year-Round Program, After School Education and Safety Program and 21st Century Before School programs for our families. We are hopeful that we will be able to operate a program similar in ratio and scale to the summer care program currently in operation. At this time, we have no confirmed plans for offering childcare. We will send out updated communications if we are able to offer an on-site program.

Our goal is to ensure child and staff safety with current health and hygiene protocols. The Child Development Programs will follow the direction given by Superintendent, Andrew Withers and the GVSD School Board. Our district receives new information on an hourly and daily basis. When we know more regarding BASP programs reopening, we will communicate this information to our families.

Fill out the purple enrollment form if your family needs care during the 2020-2021 school year. Filling out the purple enrollment form confirms your **interest** and does not automatically enroll your child(ren).

As our district gains additional information regarding the reopening of the child development programs, we will share this information with our families.

Carol Viola
Child Development Director

Grass Valley School District Before and After School Program
(530) 273-9528



GVSD SCHOOL AGE PROGRAM ENROLLMENT FORM *

* Subject to availability

Today's Date: _____

Students School locations: ☐ Bell Hill (K-4) ☐ Scotten (TK/K-4) ☐ Lyman Gilmore (5-8)

1. Student Information

Name: _____ Special Ed/IEP: Yes ☐ No ☐
Last First Middle

Gender: ☐ Male ☐ Female Birth Date: _____ Age: _____ Primary Language: _____

Ethnicity: ☐ Black ☐ Hispanic ☐ American Indian ☐ Asian/Pac. Islander ☐ Caucasian ☐ Other: _____

School Teacher: _____ Current Grade Level: _____

Allergies: _____ Chronic Illness/Medication: _____

Names of siblings who will also attend After School Program: _____

Special Notes: _____

2. Parent/Guardian Information

Name: _____

Name: _____

Address: _____

Address: _____

Home#: _____ Cell#: _____

Home#: _____ Cell#: _____

Place of Work: _____

Place of Work: _____

Work#: _____

Work#: _____

Email: _____

Email: _____

3. Student Pick-up Information: ☐ Pick-up Only

Please list persons with phone numbers who you give permission to pick-up your child from the program.

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____



GVSD SCHOOL AGE PROGRAM ENROLLMENT FORM *

4. Emergency Contact Information

In the event of an emergency, please list three people we may contact who know your child and can take full responsibility should you not be available.

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

5. Parent/Guardian Consent for Movies, Photographs, and Internet Use

I give my consent to the Grass Valley School District Before and After School Program (GVASP) to photograph my child and to use such pictures and/or stories in connection with any of their work without consideration of compensation of any kind, and I do release GVSD from any claims whatsoever which may arise in said regards. ☐ Yes ☐ No

I give my consent to the GVASP to allow my child to use the Internet under the supervision of the Before and After School Program staff. ☐ Yes ☐ No

I give my consent to the GVASP to allow my child to watch G and PG rated movies under the supervision of the Before and After School Program Staff. ☐ Yes ☐ No

6. Parent/Guardian Agreements

I agree to the following terms as a condition of my child's enrollment in the GVASP. (Please initial each line)

GVASP begins each day at 7:00 a.m. and closes at 6:20 p.m. (6:30 Lyman Gilmore and Scotten) Parents whose children remain past 6:20 p.m. (6:30 Lyman Gilmore and Scotten) will be charged a fee of **\$1.00 per minute per child**. Fees will be collected on the day the child is picked up late. _____

My student has permission to ride the bus that is provided by Durham Transportation and GVASP _____

My student has permission to participate in walking field trips with GVASP _____

My student has permission to sign himself/herself out and walk home (Lyman Gilmore Only) _____

I understand the cell phone policy (Please see handbook for policy) (Lyman Gilmore Only) _____

I understand that my child must adhere to the behavioral guidelines of the program. If my child chooses not to follow these guidelines it could result in the dismissal from the program. (Please see our policy on behavior guidelines) _____

I understand the GVASP is not responsible for lost, stolen, or broken personal items. _____

I understand that the GVASP does not provide medical or accident insurance for individual students. (School insurance is available at parent expense). _____

Physician to be called in an Emergency

Name _____ Telephone _____

Address _____ Insurance Number _____

Medi-Cal Number _____ Medical Insurance _____

In case of an emergency, injury, or illness, I authorize the GVASP to call the paramedics. As legal guardian of the above listed student, a minor, I authorize the school representative designee to consent to any x-ray, examination, anesthetic, medical or surgical diagnosis, treatment, and/or hospital care to be rendered upon the advice of any licensed physician and/or dentist.

I have read and understand the above.

Parent/Legal Guardian Signature _____

Date _____

Updated 8/3/2020

Lyman Gilmore Middle School

Materials Check Out Agreement for:

Chromebooks, Library Books, Textbooks, Uniforms, PE Locks, etc.

Dear Parent/Guardian,

Students attending Lyman Gilmore Middle School may be issued textbooks which must be returned at the end of the school year or when a student changes schools. Additionally, school library books, Chromebooks, chargers, and their cases, uniforms checked out for classes, sports, or other activities, P.E. locks, or any other school property checked out to a student, must be returned by the designated due date or upon withdrawing from Lyman Gilmore School.

All textbooks, P.E. locks, library books, Chromebooks, chargers, and their cases, band, or sports uniforms are the responsibility of the student and must be paid for if lost or damaged. When items are returned, they will be examined for damages. Any damages found, over and above normal wear and use, will be billed to the parent or guardian. (If you haven't done so, please be sure to sign up for Chromebook insurance - only \$15.00)

Replacement costs are listed below:

Language Arts:

Houghton Mifflin- Journeys (5)
McGraw Hill- Study Sync (6, 7, 8)

Math:

Houghton Mifflin- Go Math (5) \$20.00
Pearson- Digits (6, 7, 8) \$25.00

Science:

Glenco- Focus on Earth (6) \$70.00
Holt- California Life Science (7) \$70.00
McDougal Littell- Focus on Physical (8) \$70.00

CPM Core Connection Algebra (8) \$60.00
CPM Student Text (supplemental for 7, 8) \$15.00
Pearson Common Core Algebra 1 (7, 8) \$60.00

Technology:

Chromebook \$50-200.00
Case \$20.00
Charger \$20.00
Hinges \$12.00

Social Studies:

TCI History Alive - (6) \$79.00
TCI Medieval World & Beyond (7) \$79.00
TCI- US Through Industrialism (8) \$79.00

Uniform (Band, Sports) \$_____

P.E. Lock \$6.00

_____ \$_____

Library Book \$_____

_____ \$_____
Other

Please fill in, sign, and return the section below. You may keep the above list for reference. Thank you.

SCHOOL MATERIALS AGREEMENT

I understand that my child _____, will be using a variety of school materials which must be returned to LGMS on a specified due date at the end of the school year, or upon my child's withdrawal from school. I agree to pay damage fees for any misused books, and I agree to be responsible for the full value of any item that is not returned or requires replacement.

I am aware that if my child owes for any materials s/he will not participate in some end of the year activities and that yearbooks, report cards, and diplomas will be withheld until all responsibilities have been taken care of.

Parent's Signature _____

Date _____

**Grass Valley School District
Lyman Gilmore Middle School
Student / Parent / School Agreement 2020/21**

Student Expectations for: _____
(Students Name)

School Attending: _____

Students are at school to learn. I will help myself and others to learn, by following these rules:

1. Follow the Golden Rule...Treat others the way you want them to treat you.
2. Be SAFE
3. Be RESPECTFUL
4. Be RESPONSIBLE
5. Be READY TO LEARN

Student Signature_____

Staff Expectations

The teaching of literacy, math, and social behaviors are our top priority. Therefore, the staff will:

1. Develop social behaviors and class routines during the first six weeks to be reviewed and re-taught as necessary during the year.
2. Communicate openly with each other and parents.
3. Welcome parent participation and provide appropriate parent training.
4. Take responsibility for all students and their learning.
5. Have high expectations for student success.

Teacher Signature_____

Parent Expectations

To support our children's education, we as parents or guardians will:

1. Have our children arrive on time and stay until dismissal.
2. Have our children fed, rested, dressed appropriately, and prepared with materials and class assignments.
3. Communicate openly with teachers and other school staff.
4. Discuss the school day with our children and read school communications.
5. Set aside time for homework or reading at home each day.
6. Parents will voluntarily participate in home visits or community meetings.

Parent Signature_____



HEALTH CARE FOR ALL FAMILIES

A PROJECT OF THE CHILDREN'S PARTNERSHIP

Enroll. Get Care. Renew.

Health Coverage All Year Long



The COVID-19 pandemic has made it clear that the health of each one of us is deeply interconnected with that of every Californian. The current public health emergency has re-emphasized the importance of having accessible health care coverage and a well-funded safety-net available for our most vulnerable communities.

Health Coverage Options

Medi-Cal:

- ▶ Children—regardless of immigration status—foster youth, pregnant women, and legally present individuals—including those with DACA status—may be eligible for no- or low-cost Medi-Cal.
- ▶ Medi-Cal covers immunizations, checkups, specialists, vision and dental services, and more for children and youth at no or low cost.
- ▶ Medi-Cal enrollment is available year round.
- ▶ During COVID-19, Medi-Cal plans began offering more services using telehealth. Ask your provider about accessing care over video or telephone.

Covered California:

- ▶ Covered California is where legal residents of California can compare quality health plans and choose the one that works best for them.
- ▶ Based on income and family size, many Californians may qualify for financial assistance.
- ▶ Enroll during Open Enrollment or any time you experience a life-changing event, like losing your job or having a baby. You have 60 days from the event to complete enrollment.

! **Immigrant Families** visit: www.allinforhealth.org/immigrantfamilies *Immigration status information is kept private, protected, and secure. It will not be used by any immigration agency to enforce immigration laws, but only to determine eligibility for health programs.*

You and your family may qualify for financial help:

| Household Size | If 2020 household income is less than... | | If 2020 household income is between... |
|----------------|--|---------------------------------------|---|
| 1 | \$17,609 | \$33,942 | \$17,609 - \$49,960 |
| 2 | \$23,792 | \$45,859 | \$23,792 - \$67,640 |
| 3 | \$29,974 | \$57,776 | \$29,974 - \$85,320 |
| 4 | \$36,156 | \$69,692 | \$36,156 - \$103,000 |
| 5 | \$42,339 | \$81,609 | \$42,339 - \$120,680 |
| 6 | \$48,521 | \$93,526 | \$48,521 - \$138,360 |
| ▶ | Adults may be eligible for Medi-Cal | Children may be eligible for Medi-Cal | May be eligible for financial help to purchase insurance through Covered California |

Enroll.

Three ways to enroll in Medi-Cal and Covered California:



www.coveredca.com

1 (800) 300-1506

Find in-person help:
www.coveredca.com/get-help/local/

Get Care.

- ▶ Find a primary care doctor in your network.
- ▶ Schedule an annual checkup for you and your family.
- ▶ Make sure to take your child to the dentist.
- ▶ Pay your monthly premium if your plan requires it.

Renew.

- ▶ Medi-Cal must be renewed every year. If you receive a renewal notice, complete and return. You can also renew online or by phone. For help, contact your local Medi-Cal office.
- ▶ Health plans through Covered California must be renewed every year. Renewal information will be mailed at the end of the year, or contact Covered California at: 1 (800) 300-1506.

For more information go to:
www.allinforhealth.org

July 2020



Student Name: _____ School: _____ Grade: _____

Please Print

Grass Valley School District

Mandatory Parent/Guardian Signatures (Form A)

The **Returning Registration Form** and this **mandatory signature page** must be signed and returned annually to the school office at your school site:

The policies and forms listed below are available in the school office or on our District website at www.gvsd.us (click on the Annual Parent Notification and then on your students school). Please sign below to acknowledge you have reviewed these policies and forms:

- Annual Parent/Guardian Notice of Rights and Responsibilities (EC 48980)
- Promotion/Retention – Board Policy #5210
- Parent Involvement Plan – Board Policy #6054
- Student Eligibility Certification (Indian Education)
- Student Handbook (provided by school site)
- Student Conduct - Board Policy #5100 (Sexual Harassment/Non-Discrimination)
- Pest Notification
- Uniform Complaint Procedures – Board Policy #1175

I hereby acknowledge receipt of the above information and policies

Parent Signature

Date

Student Acceptable Use Agreement (Terms and Conditions) and Mobile Device Contract

I understand and will abide by the Terms and Conditions for the use of the Grass Valley School District technology services, including Internet access. I further understand that any violation of the regulations is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken and/or appropriate legal action pursued. *I have also submitted a completed and signed Mobile Device Contract which was received via mail or website.*

Student Name: _____
Please Print *Student Signature* *Date*

Parent Name: _____
Please Print *Parent Signature* *Date*

Request To Deny Access To Directory Information **

If you **do not** wish directory information released, please sign below and return this page to the school office within the next 30 days. Note that this will **prohibit** the district from providing the pupil's name and other information to the news media, interested schools, parent-teacher associations, interested employers, and similar parties.

Do not release directory information regarding the above named student.

Date: _____ Signature: _____

**** YOUR SIGNATURE ON THIS SECTION MEANS THAT YOUR CHILD'S NAME WILL NOT APPEAR ON ANY PUBLICATIONS FOR HONOR ROLL, SCHOOL NEWSLETTERS, AWARDS, AND/OR RECOGNITION'S, SCHOOL WEBSITES, LOCAL NEWSPAPERS, ETC.)**

Request for Non-Participation in Health, Family Life or Sex Education Instruction (Grades 5th through 8th)

I do **not** wish

_____ participating in _____ for the following reasons:

Student Name

Class

_____ Conflict with religious training or beliefs.

_____ Personal moral convictions

Date: _____ Signature: _____



Grass Valley School District

Andrew Withers, Superintendent

2020/2021 School Year

Re: Student Injuries and Insurance

Dear Parent/Legal Guardian:

The safety of our students is one of our most important concerns. Even so, accidents do happen and resulting medical treatment (ambulance transport, surgery, hospitalization, etc.) can be very expensive.

Please know that the District does not assume responsibility for these costs. However, as a service to you and your child, your school has joined with 1,000's of others by offering you access to a low cost, voluntary purchase student accident/sickness insurance program. The program is arranged and administered by Myers-Stevens & Toohey & Co., Inc. a firm that has specialized in such coverage for 40 years. Details and an enrollment form are in the accompanying brochure. Please read it carefully.

Several plans are offered and rates for the entire school year start at around \$16 (*Dental Accident Plan*). You can limit coverage to school related injuries only (including sports) or opt for 24/7 protection. Also offered is a *Student Accident & Sickness Plan* (recommended if your child has no other health insurance) and a *pharmacy discount program* for your entire family. Whether your child currently has no other coverage or you want to "fill in the gaps" in other insurance, you will probably find an option to fit your needs.

While you can seek care from any doctor or hospital, you'll also have access to an extensive network of medical providers with discounted charges. Seeking care through contracted providers may further reduce your out-of-pocket costs, particularly if your child needs surgery or hospitalization.


To enroll, complete the enrollment form in full, select the plan(s) you want for your child, enclose the proper premium using a check, money order or credit card, seal and return as directed on the form. While your child is eligible to enroll at any time, you are encouraged to consider early enrollment to get maximum value from the plan(s) selected.

Note – Once processing is completed, an ID card verifying coverage will be mailed home to you. Because many parents have expressed interest in much higher limits of coverage for their children, at that time you'll also be sent information regarding a newly available *Supplemental Catastrophic Injury Plan* that can cover us to \$500,000/injury for up to five years.

If you have any questions, please call Myers-Stevens & Toohey at (800) 827-4695. Bilingual representatives are available for parents who need assistance in Spanish.

In order to document your having been notified of this matter, please sign and complete the bottom of this form and immediately send it back to the school with your child.

Sincerely,


Andrew Withers
Superintendent

As parent/guardian of _____, I understand that the School **does not** provide medical insurance for student injuries but does make voluntary student insurance available. I have received the information on this program.

_____ I will enroll my child in the program _____ I will not enroll my child in the program

Signed _____ Date _____



School will Start.
Immunizations
are still required.

Even though school opening dates may not have been firmly set **the fact is – school will start again.** And our children need ongoing protection from diseases that continue to threaten our community.

No organization is doing walk-ins. **APPOINTMENTS ONLY.** Do Not Wait. Get your children's immunizations up to date now.

NEVADA COUNTY: Chapa De (established) clients contact: (530) 477-1727
Sierra Care Pediatrics (530) 272-9780
Sierra Family Health Center: (530) 292-3478
Western Sierra Medical Clinic clients contact: (530) 274-9762
PHARMACIES administer some vaccines and bill insurance.
Nevada County Public Health: (530) 265-7265 or
(530) 265-7049

PLACER COUNTY: Contact your Primary Care Physician first for an appointment.
2nd Your local pharmacies administer some vaccines and bill insurance.
3rd School aged children only - Placer County Health & Human Services at (530) 889-7174 or
placer.ca.gov/immunization

Nevada County's Public Health Back-To-School Annual Event has been
CANCELLED for this year.

<https://www.mynevadacounty.com/614/Back-to-School-Immunization-Clinics>.

Parents and Guardians

You can take advantage of our Text Messaging Service

Our school utilizes the SchoolMessenger system to deliver text messages, straight to your mobile phone with important information about events, school closings, safety alerts and more.

You can participate in this free service* just by sending a text message of "Y" or "Yes" to our school's short code number, **67587**.

You can also opt out of these messages at any time by simply replying to one of our messages with **"Stop"**.

SchoolMessenger is compliant with the Student Privacy Pledge™, so you can rest assured that your information is safe and will never be given or sold to anyone.



**Opt-In from
your mobile
phone now!**



**Just send
"Y" or "Yes"
to 67587**

i Information on SMS text messaging and Short Codes:

SMS stands for Short Message Service and is commonly referred to as a "text message". Most cell phones support this type of text messaging. Our notification provider, SchoolMessenger, uses a true SMS protocol developed by the telecommunications industry specifically for mass text messaging, referred to as "short code" texting. This method is fast, secure and highly reliable because it is strictly regulated by the wireless carriers and only allows access to approved providers. If you've ever sent a text vote for a TV show to a number like 46999, you have used short code texting.

***Terms and Conditions** – Message frequency varies. Standard message and data rates may apply. Reply HELP for help. Text STOP to cancel. Mobile carriers are not liable for delayed or undelivered messages. See schoolmessenger.com/txt for more info.