

PORT TOWNSEND SCHOOL DISTRICT NO. 50
6:00 p.m. Regular School Board Meeting
September 26, 2016
“Learning Through a Sense of Place”

Mission:

Through community-focused maritime place-based projects, students develop effective thinking, effective action, and effective relationships. As a result, our students demonstrate meaningful accomplishments as engaged citizens.

Vision: We create and enable the culture, competence and conditions to ensure each student is prepared for meaningful work and engaged citizenship in our diverse and rapidly changing world.

01. Location/Time

01.01 Gael Stuart Building, Room S-11, 1610 Blaine St., 6:00 p.m.

02. Call to Order

- 02.01 Roll Call
- 02.02 Pledge of Allegiance

03. Agenda

03.01 Agenda Approval

04. Recognition

- 04.01 Superintendent
- 04.02 Board

05. Approval of Minutes

- 05.01 Minutes of the August 22, 2016 Budget Hearing
- 05.02 Minutes of the August 22, 2016 Regular Meeting
- 05.03 Minutes of the September 12, 2016 Work/Study Meeting

06. Public Comments

07. Consent Agenda

- 07.01 Consent Agenda Approval
- 07.02 Approval of Personnel Action
 - 07.020 Recommend Natalie Kasnick as 6 hr./day Special Education para educator, Blue Heron School, effective the 2016-17 school year
 - 07.021 Recommend Patrick Murphy as 5 hr./day Special Education para educator, Grant Street Elementary, effective the 2016-17 school year
 - 07.022 Recommend Jennifer Matney as 5 hr./day Special Education para educator, Grant Street Elementary, pending pre-employment testing, effective the 2016-17 school year
 - 07.023 Recommend Irina Scott as 6.5 hr./day Title 1 para educator, pending completion of and passing pre-employment screening, effective the 2016-17 school year
 - 07.024 Recommend Beth Johnson as 6.17 hr./day Special Education para educator, pending completion of and passing pre-employment screening, effective the 2016-17 school year
 - 07.025 Approve transfer of Michael McKell, Blue Heron School para educator, to the 6.25 hr./day Special Education para educator position at Port Townsend High School, effective the 2016-17 school year.
 - 07.026 Approve transfer of Shannon Grewell, Blue Heron School para educator, to the 6.5 hr./day para educator/library position at Blue Heron School, effective the 2016-17 school year
 - 07.027 Accept resignation of Lisa Minnihhan, para educator, Blue Heron School, effective August 17, 2016
 - 07.028 Accept resignation of Tom Webster, High School Baseball Coach, effective immediately
 - 07.029 Accept resignation of Zach Wilson, Blue Heron Assistant Track Coach, effective immediately

- 07.03 Approval of Financial Reports
 - 07.030 Accounts Payable 2015-16 school year
 - 07.031 Accounts Payable as of September 26, 2016
 - 07.032 Payroll – August, 2016
- 07.04 Donations
 - 07.040 Accept donation from SOS Printing for high school football programs and the parent calendar for 2016-17, valued at \$1,527.92
 - 07.041 Accept donation of a grant for math and the maritime program from Lisa Cartwright via the McCarthy Dressman Education Foundation in the amount of \$7,500
- 07.05 Contracts
 - 07.050 Approval of contract with ACE-IT Employment & Transition Services, LLC in the amount not to exceed \$26,000 for transition service for special education students ages 18-21
- 07.06 Out of State Travel
 - 07.060 Cara Kasperson World Language Conference, Portland, Oregon, 10/12-10/13/2016

08. Board Correspondence - None

09. Reports

- 09.01 Superintendent
 - 09.01 Calendar of Events
- 09.02 Business Manager
 - 09.020 Enrollment

08. Action Items

- 08.01 Approve Policy 1620 – Board/Superintendent Relationship
- 08.02 Approve Policy 1630 – Evaluation of the Superintendent
- 08.03 Approve OCEAN Field Trip to Mt. Rainier, September 28 – October 1, 2016
- 08.04 Approve Maritime CTE Classes Grades 9-12 Field Trip on the Schooner Adventuress- October 20-22, 2016
- 08.05 Approve the new elementary school design
- 08.06 Approve the budget estimate for the new elementary school construction

09. Unfinished Business

10. New Business

- 10.01 Schedule Board Retreat for January

11. Policy Review

- 11.01 Policy 3122 – Excused and Unexcused Absences – First Review

12. Board Member Announcements/Suggestions for Future Meetings

13. Next Meeting

- 13.01 Work/Study Board Meeting, October 10th, 2016, 1610 Blaine St., Room S-11, 6:00 pm

14. Executive Session – (if necessary)

15. Adjournment

Board Chair Nathanael O'Hara called the budget public hearing to order at 5:32 p.m. PRESENT: Nathanael O'Hara, Connie Welch, Laura Tucker, and Keith White via SKYPE. Excused: Jennifer James-Wilson. Also present were Superintendent John Polm, staff, and community members.

Connie Welch led the Pledge of Allegiance.

Agenda Approval

Laura Tucker moved to approve the agenda. Connie Welch seconded and the motion carried 4-0.

Public Hearing: Budget Revision for 2015-16

Business Manager Amy Khile explained this budget revision is necessary because the beginning fund balance for 2015-16 was approximately \$117,000 higher than anticipated. Ms. Khile said school districts cannot spend over the budgeted expenditure amount adopted in the annual budget, and receipt of additional funding from some grants, Safety Net, MDS (Maritime Discovery Schools), and federal forest dollars all contributed to increased revenue and starting cash, necessitating a revision to the 2015-16 budget; this revision will give the District ability to spend those revenues. Audit expenses, special education funding, Running Start, and employee benefits were discussed.

The meeting was adjourned by consensus at 5:55 p.m.

Respectfully submitted,

John A. Polm, Jr., Secretary

ATTEST: _____
Nathanael O'Hara, Board Chair

Board Chair Nathanael O'Hara called the meeting to order at 6:00 p.m. PRESENT: Nathanael O'Hara, Laura Tucker, Connie Welch, and Keith White via SKYPE. EXCUSED: Jennifer James-Wilson. Also present were Superintendent Polm, staff, and community members.

Laura Tucker led the Pledge of Allegiance

Agenda Approval

Ms. Tucker moved to approve the agenda. Mr. White seconded and the motion carried 4-0.

Recognition

Superintendent

Superintendent Polm presented a Hero Award to Amy Wilson, Blue Heron Teacher, for helping to sort the new math curriculum. He also presented a Certificate of Appreciation to Amy Khile for picking up the new math curriculum, saving the district substantial shipping costs. Dr. Polm also recognized the award presented to the District by the Jamestown S'Klallam Tribe in support of the team name change for Port Townsend High School.

Board

Connie Welch commented on the ceremony at Fort Worden on July 5, 2016 when the plaque recognizing the high school team name change was presented to the district. Ms. Tucker said she has heard many positive comments about that ceremony.

Approval of Minutes

The following minutes were brought for approval:

- April 23, 2016, WSSDA (Washington State School Directors' Association) Regional Meeting
- July 11, 2016 Budget Hearing
- July 11, 2016 Regular Meeting
- August 8, 2016, Special Meeting

Ms. Welch moved to approve all the minutes as presented. Ms. Tucker seconded and the motion carried 4-0.

Public Comments - None

Consent Agenda

Included on the consent agenda were the following items: 1) Payroll for July, 2016; 2) Accounts Payable for August 22, 2016; 3) Ms. Tucker moved to approve the consent agenda. Mr. White seconded and the motion carried 4-0. Recommend the following actions:

Hires:

Recommend transfer of Ann Healy-Raymond, K-12 Library Media Specialist to Director of Instruction and Technology, effective the 2016-17 school year
Recommend Rachel Wyda as a 1.0 FTE Kindergarten Teacher, Grant Street Elementary, pending appropriate certification, effective the 2016-17 school year
Recommend Jeanne Turner as .6 FTE School Counselor, Leave Replacement, Grant Street Elementary, effective the 2016-17 school year
Recommend Alex Heilig as 1.0 FTE Permanent Substitute Teacher, effective the 2016-17 school year

Recommend Ashley Quinn as 6 hr./day Preschool Special Education Para educator, Grant Street Elementary, pending successful pre-employment testing, effective the 2016-17 school year

Recommend Faith Pray, 6 hr./day Special Education para educator, Grant Street Elementary, pending successful pre-employment testing, effective the 2016-17 school year

Recommend Alex Heilig as High School Head Football Coach, effective the 2016-17 school year

Recommend Aliina Lahti as High School Girls' Assistant Soccer Coach, effective the 2016-17 school year

Recommend Jeni Little as Blue Heron Middle School Cross Country Coach, effective the 2016-17 school year

Recommend Cheryl Garnet Harris as .5 FTE Reading Specialist, Grant Street Elementary, effective the 2016-17 school year

Retirements/Resignations: Accept resignation of Cheryl Garnet Harris, 1.0 FTE Classroom Teacher, Grant Street Elementary, and rescind 2016-17 leave of absence effective the end of the 2015-16 school year

Accept resignation of Anneliese Rice, 6.25 hr./day Para educator, Grant Street Elementary, effective the end of the 2015-16 school year

Accept resignation of David Dickson, Bus Driver, effective the end of the 2015-16 school year

Board Correspondence - None

Reports

Superintendent

Dr. Polm discussed the following:

- Walk-through of school campuses today in preparation for the first day of school
- His tour of Proctor House, an alternative juvenile justice facility in Port Townsend
- Changes in Food Service for the new school year, including automatic low balance reminders through Skyward, the District's student information system.
- Designation of the Lincoln Building as an historical site, and how that may affect demolition

Business Manager

Business Manager Amy Khile reported on revenues, expenditures, and budget status for all funds for June and July, 2016. The remodel of the bus barn in Chimacum was discussed.

JeffCo Aquatic Coalition

Peter Braden, teacher at Grant Street, and Phillipa Lance, Occupational Therapist for the District, who are both also members Jefferson Aquatic Coalition, explained use of the pool at the Mountain View campus and spoke about the new YMCA facility proposed in Port Townsend, where two pools are planned. Mr. Braden and Ms. Lance said the Jefferson Aquatic Coalition encourages the District, as property owner of that proposed site, and one of five partners involved, to support the proposed YMCA facility. Discussion followed.

Action Items

Approval of Resolution 16-12: Participation in City of Port Townsend Natural Hazards Mitigation Plan

Superintendent Polm explained that the Jefferson County Department of Emergency Management reviews and revises, if necessary, this plan approximately every 5 years. Ms. Tucker moved to approve Resolution 16-12. Ms. Welch seconded and the motion carried 4-0.

Approval of Resolution 16-13: Attendance Awareness Month

Superintendent Polm explained that this resolution supports OSPI's (Office of Superintendent of Public Instruction) recommendation to promote attendance awareness. He explained the average daily attendance for all schools in the district for 2015-16. Ms. Welch moved to approve Resolution 16-13. Mr. White seconded and the motion carried 4-0.

Approval of Resolution 16-14: Budget Revision for 2015-16

Ms. Welch moved to approve Resolution 16-14. Ms. Tucker seconded and the motion carried 4-0.

Approval of Policy 3240 – Student Conduct

Ms. Tucker moved to approve Policy 3240. Mr. White seconded and the motion carried 4-0.

Approval of Policy 3241 – Classroom Management, Discipline, and Corrective Action

Dr. Polm explained this policy reflects the new state laws regarding suspensions and expulsions. Ms. Welch moved to approve Policy 3241. Mr. White seconded and the motion carried 4-0.

Approve Port Townsend Education Association Contract 2016-17 through 2017-18

Superintendent Polm explained some of the changes from the last contract, including additional TRI (time, responsibility, incentive) days. Dr. Polm reported that members of the PTEA approved the contract overwhelmingly. Ms. Welch moved to approve the Port Townsend Education Association Contract, 2016-17 through 2017-18. Ms. Tucker seconded and the motion carried 4-0.

Approve School Health Consultants, Inc. Contract

Superintendent Polm explained this contract provides .6 FTE of nursing services with School Health Consultants, and the reasoning behind changing from the previous provider, Jefferson Community Health. Ms. Tucker moved to approve the contract for School Health Consultants. Mr. White seconded and the motion carried 4-0.

Unfinished Business – none

New Business – none

Policy Review – none

Board Member Announcements/Suggestions for Future Meetings

Ms. Tucker said she feels making sure the community knows of any meetings where the determination of the Lincoln Building is discussed is important. Mr. O'Hara said he and Amy Khile plan to attend the PUD meeting on August 24, 2016 where proposed rate increases will be discussed.

Next Meeting: September 12, 2016, Work/Study Meeting, 1610 Blaine Street, Room S-11, 6:00 p.m.

Adjournment

The meeting was adjourned by consensus at 7:15 p.m.

Respectfully submitted,

John A Polm, Jr.

ATTEST: _____
Nathanael O'Hara, Board Chair

Board Chair Nathanael O'Hara called the meeting to order at 6:00 p.m. PRESENT: Nathanael O'Hara, Keith White, Laura Tucker, Connie Welch, Jennifer James-Wilson. Also present were Superintendent Polm, staff, and community members.

Keith White led the Pledge of Allegiance.

Agenda Approval

Jennifer James-Wilson moved to approve the agenda. Keith White seconded and the motion carried 5-0.

Recognition

Superintendent Polm presented Hero Awards to Karmen Meier and Lisa Cartwright for their efforts with the new math curriculum.

Dr. Polm also discussed:

- Presentation of book: The Five Dysfunctions of a Team to each board member
- Student participation at the Wooden Boat Festival
- Approximate enrollment for September
- Emphasis in school buildings on attendance awareness, and recognized the proclamation from the City in regards to attendance.

Board

Mr. White: student participation at the Wooden Boat Festival and the high school football team's success

Ms. Welch: mentors and retreat for incoming 9th graders at the high school

Ms. Tucker: recognized high school student Xandra Sonandre who took on implementing recycling at the Wooden Boat Festival as a senior project, with the help of several other high school students.

Ms. James-Wilson: Appreciated the first newsletter from Superintendent Polm for the new school year

Public Comments – None

Board Correspondence – None

Reports

Update on Construction of New Elementary School

Brian Carter and Shannon Payton from Integrus Architecture explained the schematic design process. The proposed site plan was reviewed, and plans for the library, kitchen, gym, stage, learning spaces, solar panels, roof materials and design, and parking were discussed

Kirk Robinson, Project Manager, explained cost estimate procedure and the budget for the building.

Action Items

Approval of Sports Cooperative for 2016-17

Scott Wilson explained no sports are combined with Chimacum, but instead a co-op is used with Chimacum sharing coaching, etc. with sports not offered in each district, which includes cross-country, tennis, wrestling, and swimming and diving. No costs are involved to enter into this co-operative. Transportation to practices was discussed. Ms. James-Wilson moved approve the sports cooperative for those sports. LT seconded. Motion carried 5-0.

Approval of Minimum Basic Education Requirement Compliance for 2016-17

Superintendent Polm explained the district annually reviews and certifies that the minimum number of instructional hours is met for the district. Ms. Tucker moved to approve the minimum basic education compliance for 2016-17. Mr. White seconded and the motion carried 5-0.

Approval of Accounts Payable, August 22, 2016

Ms. Tucker moved to approve accounts payable for August 22, 2016. Ms. Welch seconded and the motion carried 5-0.

Approve of Resolution 16-15, Cancellation of Warrants.

Superintendent Polm explained that these are checks that have not been cashed, and the district can only carry those for a year, then they have to be cancelled. Ms. James-Wilson moved to approve Resolution 16-15. Ms. Welch seconded and the motion carried 5-0.

Policy Review

Policy 1620 – Board/Superintendent Relationship

Superintendent Polm explained that the District does not currently have a Policy 1620 which is recommended by WSSDA (Washington State School Directors' Association)

Policy 1630 – Evaluation of the Superintendent

Superintendent Polm explained WSSDA recommended some minor modifications to this policy. Port Townsend District also added time periods for the superintendent evaluations. Possible modifications to Paragraph 2 were discussed.

Board Member Announcements/Suggestions for Future Meetings

Executive Session

Mr. O'Hara adjourned the regular meeting at 7:25 p.m. for approximately 10 minutes to executive session to discuss performance of a public employee. The executive session was adjourned at 7:38 p.m., and the regular meeting was reconvened.

Adjournment

The meeting was adjourned by consensus at 7:40 p.m.

Respectfully submitted,

John A. Polm, Jr., Secretary

ATTEST: _____
Nathanael O'Hara, Board Chair



Blue Heron School



Port Townsend School District #50

3939 San Juan Avenue * Port Townsend, Washington 98368

Main Office Tel # ~ 360.379.4540 * Fax# ~ 360.302.2505

Principal – Matthew Holshouser

Dear Dr. Polm and PTSD Board of Directors,

I hope this note finds you all well. I wanted to take a moment and recommend a candidate for a one on one para-educator Special Education position here at Blue Heron School for the 2016-2017 school year.

Ms. Sarah Natalie Kasnick will serve as a one on one Special Education para-educator here at Blue Heron School for a special needs student in our Life Skills classroom.

Ms. Kasnick brings an array of talents and experiences that will be advantageous to both our special needs students and staff here at Blue Heron School. Ms. Kasnick has served as CNA in a home and care facility as well as a para-educator via our Blue Heron Extended Year Programing. I believe that these experiences help Ms. Kasnick understand the scope of our daily educational duties and this will certainly equal success in this special needs role with our Blue Heron School students.

In closing, I highly recommend Ms. Sarah Natalie Kasnick as a para-educator position on the Blue Heron School campus within the Port Townsend School District. I believe she will be a welcomed addition to the Blue Heron team as well as immediate impact upon the academic and overall success on many of our 4th to 8th grade special needs learners.

Effective hiring date is Tuesday, September 6, 2016, pending completion and passage of the pre-employment screening.

Thank you for your time and consideration.

Be Well,

Matthew Holshouser

LISA M. MINNIHAN
91 C Street
Port Hadlock, WA 98339
(360) 774-1649
lisa.minnihan@yahoo.com

August 17, 2016

Port Townsend School District #50
ATTN: Vickie Lowrie and Laurie McGinnis
1610 Blaine Street
Port Townsend, WA 98368

RE: Resignation

Dear Vickie and Laurie,

It is with great excitement, and a bit of sadness, that I write this letter of Resignation. As of now, I have officially been hired on at Discovery Behavioral Healthcare, formerly known as Jefferson Mental Health, as their Human Resource Generalist in the Administrative Department. Given that this new opportunity correlates directly with my MBA in Human Resource Management, which I attained in November of 2015, it was too good an opportunity to pass up. I wanted to thank you both, as well as all the other District Staff, for providing such a wonderful work environment these past two years. It has been an honor working for the district that gave me my own education growing up here in Port Townsend.

All my best to PTSD in the future,



Lisa M. Minnihan, MBA-HRM



GRANT STREET ELEMENTARY
PORT TOWNSEND SCHOOL DISTRICT NO. 50
1637 Grant Street, Port Townsend, WA 98368
Main Office 360. 379.4535, Fax 360.379.4261 Lisa Condran, Principal

August 30, 2016

Dear Dr. Polm

Please accept this letter as recommendation for Patrick Murphy as a Special Education Paraeducator five hours per day at Grant Street Elementary for the 2016-17 school year, pending successful pre-employment testing.

Patrick has experience teaching abroad as a professor in the area of Teaching English to Speakers of Other Languages. Patrick holds a master's degree in curriculum and instruction and graduated cum laude from Princeton University. In addition, he has worked with the literacy tutoring program in Chimacum with primary aged students.

During the interview, we were impressed with Patrick's intelligence, love of teaching, and attention to detail. Patrick's references also spoke of him and his work with the highest praise.

Jess Winsheimer joined me as members of the interview committee.

Sincerely,

Lisa Condran
Principal, Grant Street Elementary



GRANT STREET ELEMENTARY
PORT TOWNSEND SCHOOL DISTRICT NO. 50
1637 Grant Street, Port Townsend, WA 98368
Main Office 360.379.4535, Fax 360.379.4261 Lisa Condran, Principal

August 27, 2016

Dear Dr. Polm

Please accept this letter as recommendation for Jennifer as a Special Education Paraeducator five hours per day at Grant Street Elementary for the 2016-17 school year, pending successful pre-employment testing.

Jennifer was a substitute paraeducator last year with Grant Street Elementary and was very flexible and versatile in the service she provided to students and staff. Grant Street staff members were impressed with Jennifer's kindness, patience, and willingness to work as part of team.

During the interview, it was clear that Jennifer has a love of working with special needs students and would be devoted to helping students gain skills and independence to maximum their academic, social, and emotional growth.

Shelly Kienle and Mary Barnes joined me as members of the interview committee.

Sincerely,

Lisa Condran
Principal, Grant Street Elementary

Date :9-1-16

To: Laurie McGinnes

From: Patrick Kane 

RE: Hire for HS para-educator

Betsy Snyder-Johnson and I interviewed Mike McKell for the para-educator position for the Life Skills room. Betsy and I feel that Michael would be an appropriate fit for the program and recommend that he be transferred from his position at Blue Heron to Port Townsend HS.



Blue Heron Middle School



Port Townsend School District #50

3939 San Juan Avenue * Port Townsend, Washington 98368

Main Office Tel # ~ 360.379.4540 * Fax# ~ 360.302.2505

Principal ~ Matthew Holshouser

Dear Dr. Polm and PTSD Board of Directors,

September 4, 2016

I hope this note finds you all well. Please find the information below as a letter of recommendation for hire for Ms. Shannon Grewell to serve as a Para-educator within the Blue Heron School Library for the 2016-2017 school year.

Ms. Shannon Grewell has been serving as a Title I para-educator with an array of students here at Blue Heron School these past school years. She has received much literacy training via our school district and with rich student, classroom, and district level experience; she is adequately prepared to well serve and positively work with our Blue Heron School students as a para professional within our within our Blue Heron School Library and learning community.

Thank you for your time and thoughtful consideration and we greatly look forward to welcoming Ms. Shannon Grewell to our Blue Heron School team.

Ms. Grewell's BHL Library duty is effective immediately in preparation for the first school day, Tuesday, September 6th, 2016.

Please do not hesitate to inquire if you have any thoughts or questions.

Be Well,

Matthew Holshouser

Blue Heron School Principal



Blue Heron Middle School



Port Townsend School District #50

3939 San Juan Avenue * Port Townsend, Washington 98368

Main Office Tel # ~ 360.379.4540 * Fax# ~ 360.302.2505

Principal ~ Matthew Holshouser

Dear Dr. Polm and PTSD Board of Directors,

I hope this note finds you all well. I wanted to take a moment and highly recommend a candidate for the Title para-educator position here at Blue Heron School for the 2016-2017 school year.

Ms. Irina Scott will serve as the Title-I para-educator here at Blue Heron Middle School for all grade levels 4th to 8th grade.

Ms. Scott brings an array of talents and experiences that will be advantageous to both our students and staff here at Blue Heron Middle School. Ms. Scott has served as a para-educator in Anchorage, Alaska for the last 13 years as well as holds elementary teaching credentials from Russia.

In closing, I highly recommend Ms. Irina Scott to the Title I para-educator position on the Blue Heron Middle School campus within the Port Townsend School District. I believe she will be a welcomed addition to the Blue Heron team as well as immediate impact upon the academic and overall success on many of our 4th to 8th grade learners.

Effective hiring date is Thursday, September 21, 2016, pending completion and passage of the pre-employment screening.

Thank you for your time and consideration.

Be Well,

Matthew Holshouser

Blue Heron Middle School Principal



Blue Heron School



Port Townsend School District #50

3939 San Juan Avenue * Port Townsend, Washington 98368

Main Office Tel # ~ 360.379.4540 * Fax# ~ 360.302.2505

Principal ~ Matthew Holshouser

Dear Dr. Polm and PTSD Board of Directors,

I hope this note finds you all well. I wanted to take a moment and recommend a candidate for a one on one para-educator Special Education position here at Blue Heron School for the remainder of the 2015-2016 school year.

Ms. Beth Johnson will serve as a one on one Special Education para-educator here at Blue Heron School for a special needs student.

Ms. Johnson brings an array of talents and experiences that will be advantageous to both our students and staff here at Blue Heron School. Ms. Johnson has served as a para-educator at Grant Street Elementary last school year and has been serving as a substitute in this role since the beginning of our 2016-2017 school year. She has performed very well to date and is inspired to continue to make that positive impact.

In closing, I recommend Ms. Beth Johnson as a para-educator position on the Blue Heron School campus within the Port Townsend School District. I believe she will be a welcomed addition to the Blue Heron team as well as immediate impact upon the academic and overall success on many of our 4th to 8th grade special needs learners.

Effective hiring date is Thursday, September 21, 2016, pending completion and passage of the pre-employment screening.

Thank you for your time and consideration.

Be Well,

Matthew Holshouser

Blue Heron School Principal

Laurie McGinnis

From: T. Webster <nikecat7@gmail.com>
Sent: Tuesday, September 06, 2016 9:51 PM
To: Laurie McGinnis
Subject: PTHS VARSITY BASEBALL

It is my intention to resign as Head Coach of PTHS Varsity Baseball. I have discussed this matter with the Athletic Director and I would like to focus my attention on being the Head Coach of Boys Varsity Basketball and apparently, being a full time Football Assistant Coach. Thank you for your immediate attention to this matter.

Sincerely,
Tom Webster
PTHS Athletics

Dear Scott R. Wilson and Lysa Falge: Athletic Directors

I, Zachary Scott Wilson am officially resigning my position as Assistant Track Coach at Blue Heron Middle School.

Thank you for the opportunity to serve as Assistant Coach. I am attending school in Corona, California at the Young Americans College of Performing Arts. Therefore, will be unable to coach in the spring of this academic year.

Thank you,

Zach Wilson

2015-16

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$40,391.78. The payments are further identified in this document.

Total by Payment Type for Cash Account, CAPITAL PROJECTS:
Warrant Numbers 3293 through 3297, totaling \$40,391.78

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
3293	BANK OF AMERICA VISA	08/31/2016	89.00
3294	NORTHWESTERN TERRITORIES INC	08/31/2016	39,398.85
3295	PERKINS COIE LLP	08/31/2016	546.00
3296	Taylor, Brad James	08/31/2016	52.38
3297	TERRAPIN ARCHITECTURE PC	08/31/2016	305.55
5	Computer	Check(s) For a Total of	40,391.78

2015-14

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$7,469.70. The payments are further identified in this document.

Total by Payment Type for Cash Account, ASSOCIATED STUDENT BODY:
Warrant Numbers 10460 through 10468, totaling \$7,469.70

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
10460	BANK OF AMERICA VISA	08/31/2016	1,713.06
10461	BOOST PROMOTIONAL GROUP INC	08/31/2016	1,432.77
10462	DL LOGOS	08/31/2016	1,427.52
10463	Heilig, Alex T	08/31/2016	190.38
10464	HUDL	08/31/2016	2,069.38
10465	JEFF COUNTY PUBLIC HEALTH	08/31/2016	172.00
10466	Parcher, Kelli	08/31/2016	260.00
10467	SAFEWAY	08/31/2016	41.09
10468	STATION SIGNS & PRINTING	08/31/2016	163.50
9	Computer	Check(s) For a Total of	7,469.70

2015-16

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$51,663.45. The payments are further identified in this document.

Total by Payment Type for Cash Account, GENERAL FUND:
Warrant Numbers 61383 through 61416, totaling \$51,663.45

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
61383	BANK OF AMERICA VISA	08/31/2016	11,261.70
61384	Bledsoe, Kirsten Katharina	08/31/2016	312.50
61385	BONZON, JANET R	08/31/2016	353.60
61386	BRYSON SALES & SERVICE OF WA	08/31/2016	910.30
61387	BUTLER, ROBERTA L	08/31/2016	210.00
61388	CANON FINANCIAL SERVICES INC	08/31/2016	207.07
61389	CENTURYLINK	08/31/2016	702.80
61390	CHIMACUM SCH DIST#49-CO-OP TRA	08/31/2016	1,907.19
61391	Freeman, Amos C	08/31/2016	301.86
61392	GAYNE, ZACHARY J	08/31/2016	462.50
61393	Gronwall, Gail R	08/31/2016	187.65
61394	Hageman, Brandi R	08/31/2016	108.70
61395	HI-TECH SECURITY INC	08/31/2016	2,750.00
61396	HOUGHTON MIFFLIN HARCOURT	08/31/2016	327.00
61397	JEFFERSON MENTAL HEALTH	08/31/2016	9,484.73
61398	JW PEPPER & SON INC	08/31/2016	178.77
61399	McMahon, Ann	08/31/2016	280.00
61400	Nielsen, Jennifer Marie	08/31/2016	175.55
61401	Noiret, Isabelle Catherine	08/31/2016	30.54
61402	PART WORKS INC	08/31/2016	88.26
61403	PEBC	08/31/2016	841.81
61404	PENINSULA PEST CONTROL INC	08/31/2016	70.85
61405	POSTAGE BY PHONE RESERVE ACCOU	08/31/2016	1,025.00
61406	PUBLIC UTILITY DISTRICT	08/31/2016	8,871.02
61407	RENAISSANCE LEARNING INC	08/31/2016	6,073.52
61408	SCHETKY NORTHWEST SALES INC	08/31/2016	715.03
61409	Shaw, Sheri Janell	08/31/2016	415.00
61410	Sherwood, Lois C	08/31/2016	74.46
61411	SHORT STOP TRUCK REPAIR	08/31/2016	1,244.41
61412	SOS PRINTING	08/31/2016	335.01
61413	SUPPLYWORKS	08/31/2016	103.58
61414	TARBOO RIDGE EXTINGUISHERS	08/31/2016	1,206.63
61415	WASHINGTON TRACTOR	08/31/2016	409.06

Check Nbr	Vendor Name	Check Date	Check Amount
61416	WESTBAY AUTO PARTS	08/31/2016	37.35
34	Computer	Check(s) For a Total of	51,663.45

ASB 2015-16

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$611.14. The payments are further identified in this document.

Total by Payment Type for Cash Account, ASSOCIATED STUDENT BODY:
Warrant Numbers 10469 through 10472, totaling \$611.14

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
10469	Fraser, Alice K	09/15/2016	134.56
10470	Massie, Samantha G	09/15/2016	50.22
10471	SAFEWAY	09/15/2016	228.36
10472	STEEPLEWEB	09/15/2016	198.00
4	Computer	Check(s) For a Total of	611.14

GF 2015-16

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$41,003.03. The payments are further identified in this document.

Total by Payment Type for Cash Account, GENERAL FUND:
Warrant Numbers 61417 through 61448, totaling \$41,003.03

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
61417	BONZON, JANET R	09/15/2016	410.00
61418	CDW GOVERNMENT	09/15/2016	167.86
61419	CENEX FLEETCARD	09/15/2016	172.07
61420	CHIMACUM SCH DIST#49-CO-OP TRA	09/15/2016	11,025.88
61421	CITY OF PT TOWNSEND	09/15/2016	6,495.17
61422	CLARK SECURITY PRODUCTS INC	09/15/2016	68.79
61423	Condran, Lisa	09/15/2016	108.00
61424	COOPER FUEL & AUTO REPAIR	09/15/2016	195.37
61425	COSTCO	09/15/2016	164.26
61426	EMBI TEC	09/15/2016	227.00
61427	ESD 114	09/15/2016	600.00
61428	FALLON, MARY (MOLLY)	09/15/2016	710.00
61429	FOOD SERVICES OF AMERICA	09/15/2016	2,365.78
61430	HADLOCK BUILDING SUPPLY	09/15/2016	19.81
61431	Hageman, Brandi R	09/15/2016	36.66
61432	HENERY HARDWARE	09/15/2016	879.32
61433	Larsen, Stacey C	09/15/2016	194.15
61434	MASCO PETROLEUM	09/15/2016	301.20
61435	NEW YORK TIMES	09/15/2016	30.00
61436	NORTHWEST MARITIME CENTER	09/15/2016	200.00
61437	OLYMPIC SPRINGS	09/15/2016	112.87
61438	PACIFIC OFFICE EQUIPMENT	09/15/2016	690.23
61439	PEBC	09/15/2016	1,276.69
61440	PENINSULA PEST CONTROL INC	09/15/2016	130.80
61441	PLATT	09/15/2016	152.55
61442	Polm JR, John A	09/15/2016	297.60
61443	Quayle, Darlene E	09/15/2016	822.27
61444	Rubenstein, Sarah Margaret	09/15/2016	196.07
61445	SHRED-IT US JV LLC	09/15/2016	617.36
61446	SKOOKUM CONTRACT SERVICES	09/15/2016	2,770.48
61447	SOS PRINTING	09/15/2016	1,750.38
61448	West Brook Angus	09/15/2016	7,814.41

Check Nbr	Vendor Name	Check Date	Check Amount
32	Computer	Check(s) For a Total of	41,003.03

CP 2015-16

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$68,793.42. The payments are further identified in this document.

Total by Payment Type for Cash Account, CAPITAL PROJECTS:
Warrant Numbers 3298 through 3303, totaling \$68,793.42

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
3298	ABSHER CONSTRUCTION CO	09/15/2016	34,359.93
3299	FREDERICKSON ELECTRIC INC	09/15/2016	10,415.44
3300	HEFFRON TRANSPORTATION INC	09/15/2016	8,400.81
3301	NORTHWESTERN TERRITORIES INC	09/15/2016	8,364.86
3302	Taylor, Brad James	09/15/2016	52.38
3303	THE ROBINSON COMPANY INC	09/15/2016	7,200.00
6	Computer	Check(s) For a Total of	68,793.42

Comp Tax for July 2016

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$1,603.51. The payments are further identified in this document.

Total by Payment Type for Cash Account, Wire Transfers:
Wire Transfer Payments 201500063 through 201500063, totaling \$1,603.51

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
201500063	DEPARTMENT OF REVENUE	09/01/2016	1,603.51
1	Wire Transfer Check(s) For a Total of		1,603.51

Comp Tax - Aug 2016

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$3,418.96. The payments are further identified in this document.

Total by Payment Type for Cash Account, Wire Transfers:

Wire Transfer Payments 201500064 through 201500065, totaling \$3,418.96

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
201500064	DEPARTMENT OF REVENUE	09/01/2016	3,290.01
201500065	DEPARTMENT OF REVENUE	09/01/2016	128.95
2	Wire Transfer Check(s) For a Total of		3,418.96

2016-17

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$36,118.81. The payments are further identified in this document.

Total by Payment Type for Cash Account, GENERAL FUND:
Warrant Numbers 61449 through 61465, totaling \$36,118.81

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
61449	COUNCIL EXCEPTIONAL CHILDREN	09/15/2016	230.00
61450	DIGITAL INSURANCE INC	09/15/2016	500.00
61451	DM DISPOSAL CO INC	09/15/2016	4,394.64
61452	DRAMATISTS PLAY SERVICE	09/15/2016	480.00
61453	eSchool Solutions LLC	09/15/2016	1,635.00
61454	HANKINSON, JANELLE	09/15/2016	1,155.00
61455	JAMESTOWN NETWORKS	09/15/2016	2,256.30
61456	JEFFERSON TRANSIT	09/15/2016	88.00
61457	JIVE COMMUNICATIONS, INC.	09/15/2016	5,527.90
61458	MAKE MUSIC	09/15/2016	140.00
61459	PENINSULA PEST CONTROL INC	09/15/2016	386.95
61460	SCHOOL HEALTH CONSULTANTS, INC	09/15/2016	4,400.00
61461	SIEMENS INDUSTRY INC	09/15/2016	7,970.00
61462	SUPPLYWORKS	09/15/2016	4,501.03
61463	VALLEY ATHLETICS	09/15/2016	941.49
61464	WASA	09/15/2016	937.50
61465	WSPA	09/15/2016	575.00

17 Computer Check(s) For a Total of 36,118.81

ASB 2016-17

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$893.93. The payments are further identified in this document.

Total by Payment Type for Cash Account, ASSOCIATED STUDENT BODY:
Warrant Numbers 10473 through 10474, totaling \$893.93

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
10473	BADEN SPORTS	09/15/2016	683.49
10474	SAFEWAY	09/15/2016	210.44
2	Computer	Check(s) For a Total of	893.93

CP 2016-17

The following vouchers, as audited and certified by the Auditing Officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, are approved for payment. Those payments have been recorded on this listing which has been made available to the board.

As of September 26, 2016, the board, by a _____ vote, approves payments, totaling \$52.38. The payments are further identified in this document.

Total by Payment Type for Cash Account, CAPITAL PROJECTS:
Warrant Numbers 3304 through 3304, totaling \$52.38

Secretary _____	Board Member _____
Board Member _____	Board Member _____
Board Member _____	Board Member _____

Check Nbr	Vendor Name	Check Date	Check Amount
3304	Taylor, Brad James	09/15/2016	52.38
1	Computer	Check(s) For a Total of	52.38

PORT TOWNSEND SCHOOL DISTRICT NO. 50

Payroll for the month of August, 2016

We, the undersigned, do hereby certify that the foregoing payroll is just, true and correct; that the persons whose names appear hereon actually performed services as stated for the time shown, and that the amounts are actually due and unpaid,

Clerk of District

Approved gross in the sum of	\$	<u>737,869.14</u>	Employee Gross
		<u>272,957.17</u>	Employer Contribution
		_____	Payroll Adjustment*
		<u>1,010,826.31</u>	Total Distribution

DIRECTORS:

*Provision is made for the adjusting of employee and employer benefits as necessary.

Donation of Gift(s) Report

To the Board of the Port Townsend School District:

Date of donation: 9-28 and 10-2-2016

Name of donor: SOS Printing

Mailing address of donor: 2319 Washington St.
Port Townsend, WA 98368

Item(s) donated:

Approximate Value:

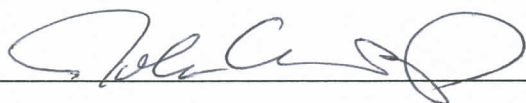
\$744.00 printing donation
for 2016 High School Football Programs

\$ 744.00

\$783.92 printing donation
for 2016-17 Parent Calendars

\$ 783.92

Received by: Mary Colton



Administrator (Building Principal and/or Superintendent)

Donation of Gift(s) Report

To the Board of the Port Townsend School District:

Date of donation: 9/6/14

Name of donor: Lisa Cartwright via The McCarthy Dressman Education Found.

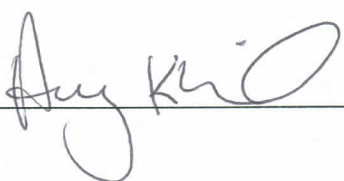
Mailing address of donor: 1014 E. St.
Port Townsend, WA 98368

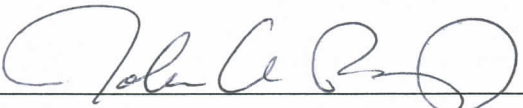
Item(s) donated:

Approximate Value:

Grant for math +
maritime program

\$ 7,500

Received by: 



Administrator (Building Principal and/or Superintendent)

8/25/14



PORT TOWNSEND
School District

To: Governing Board
From: John Polm, Superintendent
Subject: ACE-IT Contract - Informational
Date: September 26, 2016
cc: Patrick Kane, Special Education Director

The contract with ACE-IT Employment would replace Skookum as a service provider to work with students in the Transition Program during the 2016-17 school year. ACE-IT operates locally as opposed to Skookum Services. Skookum has an office in Port Townsend but the management staff in is Bremerton. ACE-IT personnel have worked with our students since October, 2015 to date. In the opinion of Special Education Director, Patrick Kane, ACE-IT personnel know the needs of the students and are prepared to meet those needs.

The contract is brought to the Board of Directors for approval since it may be up to \$26,000 in total cost.

PORT TOWNSEND SCHOOL DISTRICT
Transition Project Proposal

ACE – IT!

Achieving Community Employment In Transition

In collaboration with:

Fort Worden PDA

**ACE - IT Employment &
Transition Services, L.L.C.
1609 Spruce Street
Port Townsend, WA**

August 23, 2016

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1) Abstract

- The aim of the ACE-IT Transition Program is to assist students with developmental disabilities between the ages of 18-21 to learn employability skills and gain marketable work experience that will lead to competitive paid employment upon graduation. ACE - IT will serve students of Port Townsend School District and/or students from local high schools that are chosen by the District. ACE - IT staff will provide job coaching and job developing services catered to each student. Work experiences are of great importance to the students as they allow students to discover career-related preferences, navigate interpersonal relationships more effectively, and develop greater self-determination. In addition to work based learning opportunities, on site education will include independent living skills such as transit training, self-advocacy, and communication.

2) Statement of Need

- Currently, in Jefferson County there are no community employment related services for adults with disabilities between the ages of 18-21. It is proven that these are crucial years for developing and learning necessary skills to gain independence and transition to a productive adult life (High levels of quality paid employment, independent living, post secondary education, and community engagement). When compared to general ed peers, students with disabilities are less likely to enroll in postsecondary programs, less likely to be employed after leaving school, less likely to have a checking account or manage their own money when they do not have access to Transition services. Since young adults do not receive long term job coaching services until the age 21, the ACE - IT Transition Program will serve as a bridge to support youth with disabilities during these crucial years.

3) Community Collaboration

- ACE - IT staff has strong ties to the Port Townsend Community, including local businesses and Fort Worden PDA. These collaborations will positively impact both students and local business. Students with disabilities will gain knowledge about specific careers and marketable skills by working with supervisors and peers and performing specific job tasks. ACE - IT staff will ensure that students receive appropriate accommodations at each of their work sites.
- Community businesses also benefit from students participating in work-based learning opportunities. Full inclusion in work-based learning increases the supply of skilled

workers available to fill positions. Employers also gain practice in working with an individual to create a work environment that maximizes productivity and minimizes the impact of the disability.

- Positive work experience can reduce the most significant barrier, which is negative attitude, faced by people with disabilities pursuing employment (Burgstahler, 2001) Students who are given the opportunity to participate in a broader range of career developments outside of the classroom and who have been employed during the school year are in better positions to find or continue their jobs into the summer. Previous work experience is strongly associated with employment outcomes (Sweden, Carter, Trainor, Ditchman & Owens, 2009).
- The ACE - IT program will support the collaboration between Special Education Teachers and Directors, student's families, vocational rehabilitation staff, as well as the students themselves in the employment-planning process. There is a positive correlation between self-determination skills and adult outcomes and an individual's perception of his or her quality of life (McGuire & McDonnell, 2008). Students will be an integral part of the employment planning process, working toward setting own goals based on their preferences and interests.

4) Program Description

- The ACE - IT Transition Program will consist of 4 hours per day. Students will be off campus, participating in work based learning opportunities and learning relevant employment and independent living skills.
- During the first year, this project will serve four (4) students identified by the District.
- ACE - IT staff will:
 - Provide Employment Specialists to work with students on internship sites at Fort Worden PDA or other local businesses.
 - Work with participating departments to identify volunteer internship worksite opportunities for individuals with disabilities, perform job analyses and assess and coordinate accommodation needs.

- Assist with internal job development for paid positions: examine existing open positions within teams and determine their applicability for ACE-IT students; determine high turnover, entry level support positions, or other applicable positions for proactive cost analysis and job development, and recommend customized positions to the Fort Worden PDA.
- Collect data on student outcomes including productivity levels, hours worked per week, jobs, (wages, and benefits received if applicable) and share with partners when appropriate.
- Develop a cost analysis showing financial savings for each position created under the Fort Worden PDA and provide a copy for each supervisor and employee personnel file (updated every year).
- Train students on business model tracking and reporting tools to strengthen direct relationship with employers.
- Assist with program organization, planning, travel training, and internship site planning.
- Coordinate regular student meetings with Parents, Special Education Teacher of Record, Developmental Disabilities Administration case manager and Division of Vocational Rehabilitation counselor to discuss and evaluate student progress.
- Provide expertise in adaptations and accommodations, and implement as necessary.
- Assist with education and training to Fort Worden PDA employees regarding supporting people with disabilities in the workplace as necessary, including training students to provide this information directly when possible.
- Coordinate and participate in the Partnership Committee (quarterly meetings with the Business Liaison from Fort Worden, ACE - IT staff, County Coordinator and Special Ed Director) to evaluate program progress, report outcomes, work toward continuous improvement.

- Work with Special Education Director to develop a transition curriculum and instructional materials that encompass employability skills, functional academics, transition, job development and job readiness.
 - Assist students to develop a Job Search Notebook to include an employment resume (paper or video), cover letter, job search tracking tool with detailed action steps/timelines, business card holder and employer letters of recommendations that will serve as a transition tool towards Adult Employment Services.
 - Assist with public relation activities in partnership with other team members when promoting Fort Worden PDA and the ACE-IT program at School Board Meetings, DD Advisory Board Meetings and other Community Presentations. This includes the development of ACE-IT PR materials.
 - Work with the Division of Vocational Rehabilitation to assist with obtaining adaptations and accommodations as necessary, and to help secure funding for job coaching and job development.
 - Communicate with the Jefferson County Public Health for needed technical assistance and other issues related to model integrity.
- 5) Documentation:
- ACE - IT will maintain accurate case notes of all services provided to individual students and program development for billing and record keeping purposes.
 - Documentation will remain confidential under HIPPA Privacy Rule standards.
- 6) Timeline and Budget
- The term shall be from September 6th, 2016 to June 16th, 2017. (41 weeks)
 - During the term of October 3rd, 2016 to June 16th, 2017 (37 weeks) Direct Service to students will be provided twenty (20) hours per week (employability skills, job coaching, transit training, and independent living skills). Two (2) hours

ACE – IT

Achieving Community Employment In Transition

per week will be allocated to meetings and communication with Special Ed Director, teachers, students' families, work site supervisors, and will be billed on an as-needed basis. Services will be reimbursed at the rate of \$31.25 per hour.

- Starting September 6th, Direct Support Service will be provided to students that are determined in need by the District, for initial job training support, at a rate of \$13.00 per hour, and will be billed on an as-needed basis with prior approval from District. Services shall be provided for two (2) per day for up to but no more than 20 days throughout the contract term.
- The contract will not exceed \$26,000.00

7)

- ACE - IT Employment & Transition Services, L.L.C. shall procure and maintain for the duration of the Term a certificate of commercial and professional liability for a minimum of:
 - \$500,000 each person, personal injury, including death
 - \$1,000,000 each occurrence, personal injury, including death
 - \$250,000 each occurrence, property damage liability
 - \$2,000,000 aggregate
 - \$1,000,000 Errors and Omissions per occurrence
 - \$1,000,000 Errors and Omissions aggregate

Port Townsend School District #50

LEAVE/TRAVEL REQUEST

Employee Name: Cara Kasperson Building PTHS

Date(s) of Absence: Wed. Oct 12 & Thurs. Oct. 13

Substitute: Not Required Required : 10/12 + 10/13/16
Date(s) Substitute Required

Type of Leave Requested:

- Sick Leave
- Annual Leave (classified)
- Personal Leave (certificated)
- Bereavement Leave
- Family Illness
- Professional Development Leave Workshops/Conferences (Must Complete Lower Portion)
- Parental Leave
- Maternity Leave
- Association Leave
- Non-Paid Leave (attach letter to Supt. stating specifics)
- Emergency Leave (attach letter to Supt. stating specifics)
- Jury Duty
- Court Appearance
- Military Leave
- Other Leave

Request for Professional Development Travel:

- Ten working days prior approval required to attend any conference, workshop or meeting.
- Out of State Travel requires Board approval. Request must be submitted fifteen working days prior to the School Board Meeting.
- Please attach workshop/conference/meeting information.

Workshop/Meeting/Conference Title: COFLT/WAFLT World Languages Conference

Destination/Location: Portland, Oregon

Travel Reimbursement Requested For:

- Meals Lodging Mileage Other Transportation Registration
- Other-Specify _____

Charge Expenses to: PGO

C. G. Hubbard (Budget Account Code) 9/21/16
Principal Date

Cara M. Kasperson 9-21-16
Employee Signature Date

[Signature] 9-23-16
Superintendent/Designee Date

Director _____ Date _____

Approved Not Approved

Port Townsend School District No. 50
SUBSTITUTE REQUEST FORM

Today's Date _____ School Site: PTHS

Reason for Absence Professional Development Account Code: _____

Name	Absence Date	Time Sub Needed	Name of Sub Requested	Assignment
<u>Cara Kasperson</u>	<u>9-12-16</u>	<u>all day</u>	<u>C. G. Hubbard</u>	
<u>Cara M. Kasperson</u>	<u>9-12-16</u>	<u>all day</u>	<u>C. G. Hubbard</u>	

Signature of person requesting substitutes: Cara M. Kasperson Signature of Principal: C. G. Hubbard

BOARD OF DIRECTORS

Board-Superintendent Relationship

The successful operation of schools requires a close, effective working relationship between the board and the superintendent. The relationship must be one of trust, goodwill and candor. As the legally designated governing body, the board retains final authority within the district. The board exercises powers expressly required and implied by law. The superintendent is the board's professional advisor, to whom the board delegates executive responsibility, including such powers required to manage the district in a manner consistent with board policy and state and federal law.

The superintendent, as an executive officer of the board (Secretary), is responsible for the administration of the schools under applicable laws and policies of the district. The board delineates the duties of the superintendent and uses them as the basis for evaluating the superintendent's performance. Unless specifically limited, the superintendent may delegate to other staff the exercise of any powers and the discharge of any duties imposed by district policy or a vote of the board. The delegation of power or duty does not relieve the superintendent of responsibility for the actions taken under such a delegation.

In order to perform their responsibilities, board members must be familiar with the operations within the schools. The superintendent will establish communication procedures which can enhance the board member's understanding of student programs and school operations.

Legal References:	RCW 28A.320.010	Corporate powers
	RCW 28A.330.100	Additional powers of the board (First Class Districts Only)
	RCW 28A.400.010	Employment of superintendent — Superintendent's qualifications, general powers, term, contract renewal
	RCW 28A.400.030	Superintendent's duties

Management Resources: *Policy & Legal News*

February 2013

Date: _____

BOARD OF DIRECTORS

Evaluation of the Superintendent

The board shall establish evaluative criteria and shall be responsible for evaluating the performance of the superintendent.

~~The superintendent shall have the opportunity for confidential conferences with the board members on no less than two occasions in each school year, the purpose of which shall be the aiding of the superintendent in his/her performance. The board, on the basis of the evaluation, may renew and/or extend the superintendent's contract for periods not to exceed three years.~~

The Board will conduct three performance conferences/evaluations with the superintendent each year. Two informal conferences will be completed, one (1) prior to October 31st, and another prior to January 31st, and a formal evaluation to be completed prior to June 30th. *The board, on the basis of the evaluation, may renew and/or extend the superintendent's contract for periods not to exceed three years.*

Legal References: RCW 28A.400.010 Employment of Superintendent – superintendent's qualifications, general powers, term, contract renewal

Date: 6/4/01; 3/8/04 _____

PORT TOWNSEND SCHOOL DISTRICT NO. 50

Port Townsend School District -- STUDENT TRAVEL STUDENT TRAVEL AUTHORIZATION - TRANSPORTATION REQUEST

DUE TO PRINCIPAL AT LEAST 14 DAYS IN ADVANCE OF TRIP
(30 DAYS IN ADVANCE OF OVERNIGHT TRIP, TO ENSURE BOARD APPROVAL)

Field Trip
 ASB Activity
 Other _____

Submitted by: Molotsky Date of Request: 9/8/16
(teacher/advisor/coach)

School/Group (include Grade level): OCEAN K-12

Date(s) of trip(s): 9/28/16 - 10/1/16 # of Students: 20-25 # of Adults: 10

School/Pick-up Point: OCEAN Portable Departure time: 4:30 am/pm

Destination(s): Mt Rainier Return time: 4:30 am/pm

Address City/State Zip Code Contact name/Phone

Funding Source: OCEAN Charge to GF: 10 E 530 0290 21 007x ⁷⁰⁵⁹⁻¹⁰⁴
Description Account Code:

Charge to ASB: 40 E 530 00 0000
Account Code:

FIELD TRIPS:

District Policy/Procedure #2320P: "Field trips are defined as travel away from school premises, under the supervision of a teacher, with an approved course of study, for the purpose of affording students a direct learning experience not available in the classroom."

Reason for trip (List educational purpose of the trip, objectives/activities planned): _____

- Ecology and Geography of WA State
- Physical Education
- Ranger Program Sub-Alpine Ecology
- Using National Park: Where Rivers Begins Curriculum.

How will students be transported?: District Bus District Van Other Parent Driver's

Yes / No -- Substitute(s) required? Yes _____ How many? _____

Yes / No -- Sample itinerary and parent permission slip attached?

Yes / No -- Food Services notified? NA

• Parents drive own children
• Ceth Parent drivers can take other students

DISTRICT TRANSPORTATION REQUEST:

Bus Transport _____ estimated #
 District Van 1 estimated #

of Student in Wheelchairs: _____ *Ferry Required -- Yes / No Which Terminal? _____

Other Information: _____

*(WSDOT requests notification 72 hours in advance of all school travel by ferry - bus, van, or walk-on; must include estimated number of students under 90 lbs.)

Building Approval:

District Approval (out-of-state &/or overnight trips)

(Principal) (Date) (Superintendent/Designee) (Date)

Distribution – White & Yellow: District Office Pink: Teacher Goldenrod: Building Secretary

**OCEAN K-12 Port Townsend School District
Parent Permission**

Name of Student: _____

Activity: Mt. Rainier Camping Field Trip Sept. 28th – Oct. 1st

I give my permission for this student to participate in the above mentioned activity. I understand that students are expected to remain with the group unless written permission is given to do otherwise.

HOLD HARMLESS

In consideration of this student being allowed to participate in the above activity, I agree to hold the Port Townsend School District harmless from any claim by or against it arising out of any negligent or wrongful action by the student.

I give the school permission to seek the services of a licensed medical person in case of any accident or illness requiring medical aid for this student.

In the space provided below, please give any special instructions such as medication being taken, allergies to food or drugs, special diets, or other medical concerns we need to be aware of _____

Parent/Legal Guardian signature

Student signature

Relationship

Home phone

Work phone

Address

Please give the name and telephone number of a relative or friend who can be contacted in case of emergency if you cannot be reached.

Name

Telephone

I would like to attend as a chaperone _____.
Parent Name

I am requesting a scholarship for my child _____.
Parent and student name

The OCEAN Fall 2016 - Mt. Rainier Field Studies Campout

Trip Itinerary

Dates: September 28 to Oct. 1

Departing Wednesday afternoon and returning home on Saturday.

3 days hiking and educational program studies—geology, geography, flora, fauna, and history of our incredible home state. Ranger program on sub-alpine ecology. Utilizing *Where Rivers Begin* National Park Curriculum. Visiting nature centers and park visitor centers. Lots of Physical Education and Team Building.

3 nights camping

Wednesday 28th – Depart 4:30 – Drive to Mt. Rainer Camp at Silver Springs Campground on the White River just outside of Mt. Rainier National Park.

Thursday 29th – Hike at Sunrise. Visit nature center. Camp at Ohanapecosh campground in Mt. Rainier National Park

Friday 30 – Hike in Ohanapecosh area, visit nature center. Camp at Ohanapecosh campground in Mt. Rainier National Park.

Saturday Oct. 1st. Visit Paradise area. Hike and ranger program.

Port Townsend School District -- STUDENT TRAVEL STUDENT TRAVEL AUTHORIZATION - TRANSPORTATION REQUEST

DUE TO PRINCIPAL AT LEAST 14 DAYS IN ADVANCE OF TRIP
(30 DAYS IN ADVANCE OF OVERNIGHT TRIP, TO ENSURE BOARD APPROVAL)

Field Trip
 ASB Activity
 Other _____

Submitted by: KELLY WATSON (teacher/advisor/coach) Date of Request: 9/19/2016

School/Group (include Grade level): MARITIME CTC CLASSES 9-12 grade

Date(s) of trip(s): Oct 20-22 # of Students: 22 # of Adults: 2-3

School/Pick-up Point: PTHS - START; END: BEATHAVEN Departure time: 9:50 am/pm

Destination(s): Schooner Adventure Return time: 2:30 am/pm

Address: Round Trip Sailing trip to: From BEATHAVEN, PORT TOWNSEND.
City/State Zip Code Contact name/Phone

Funding Source: PTHS - MDS FUNDS Charge to GF: 10 E 530 007x
Description Account Code:
+ PRIVATE DONATIONS Charge to ASB: 40 E 530 00 0000
Account Code:

FIELD TRIPS: District Policy/Procedure #2320P: "Field trips are defined as travel away from school premises, under the supervision of a teacher, with an approved course of study, for the purpose of affording students a direct learning experience not available in the classroom."

Reason for trip (List educational purpose of the trip, objectives/activities planned):
to gain hands on Maritime skills of sailing, navigation, Maritime careers: Boatwork.

How will students be transported?: District Bus District Van Other Walking to BEATHAVEN
 Yes / No -- Substitute(s) required? Yes ___ How many? ___
 Yes / No -- Sample itinerary and parent permission slip attached?
 Yes / No -- Food Services notified? N/A

DISTRICT TRANSPORTATION REQUEST: Bus Transport _____ estimated # District Van Luigi estimated # only
 # of Student in Wheelchairs: 0 *Ferry Required -- Yes / No on Thursday Which Terminal?
 Other Information: _____
*(WSDOT requests notification 72 hours in advance of all school travel by ferry - bus, van, or walk-on; must include estimated number of students under 90 lbs.)

Building Approval:
C. Ehrhardt 9-21-16
Principal (Date)

District Approval (out-of-state &/or overnight trips)
[Signature] 9-21-16
(Superintendent/Designee) (Date)

Port Townsend High School Field Trip Permission Form

As parent/legal guardian of _____, I grant (Print Student's Name) permission for him/her to participate in the fieldtrip described below.

Schooner Adventuress Overnight Field Trip.

Dates: October 20 - 22, 2016 (Meet after 1st period on 10/20 in PTHS shop).

Departure: Port Townsend High School (transportation provided to Point Hudson Marina).

Arrival/Ending Time: Saturday, October 22nd at 2:30 pm.

Nature or purpose of the trip: Students will gain valuable hands on skills in operating a 104 year old, 133 foot Schooner. This is the foundational knowledge for work in the Maritime PTHS Classes.

Sponsors/Chaperones: Kelley Watson Maritime Studies Teacher, PTHS.

Cost of Trip Per Child: This is a "Pay What You Can" trip. Please make a donation that is reasonable to your budget in support of this trip. Sound Experience and the *Schooner Adventuress* as well as High School Funding generously provides scholarships to cover the total costs.

Checks can be made out to Sound Experience and may be turned into Teacher Kelley Watson.

_____ Signature of Parent/Guardian _____ Date

Students:

I am aware that when I am on a school sponsored trip, I am under the jurisdiction and supervision of the school employed sponsors/chaperones and that my behavior must conform to the Code of Student Conduct, the school's Student Handbook, and reasonable instructions from chaperones. I understand I will be subject to appropriate disciplinary action for violations of these rules and regulations.

_____ Signature of Student _____ Date

Acknowledgement of Liability Limitations and Assumption of Risk Law provides that governmental entities, including school districts and their agents or employees, are not ordinarily liable for property damage, personal injury or accidental death, except in instances of gross negligence. Accordingly, parents assume risks any time students are permitted to travel and/or participate in school-related events. The School District acknowledges that you are not waiving your child's or your personal rights, as defined under the liability limitations (outlined in the state's tort claims law) by signing this permission authorization. However, the above-signed parent/guardian acknowledges disclosure that the School District reserves all rights, immunities, and qualified defenses available to it under the law in connection with the permitted activities subject of this authorization.

SIGN HERE IF YOU ARE DECLINING THE OPPORTUNITY TO PARTICPATE IN THIS YEAR'S TRIP.

I understand the unique opportunity of this field trip, but my child is unable to participate in this year's trip.

_____ Parent Signature _____ Date

_____ Student Signature _____ Date

Information about upcoming Adventuress Overnight Field Trip

Hello Parents and Guardians of Maritime Career and Technical Students,

We are off to a great start for the school year in all three of our Maritime Classes. Thus far students have begun building wooden stools, kayak paddles, and have gotten out on the water to learn more about boats.

Coming up in October we have an exciting field trip for 22 of our Maritime Students to go sailing aboard the 133 foot, 104 year old *Schooner Adventuress*. This field trip from Thursday, October 20 – Saturday, October 22, is key in laying the foundational knowledge in which much of our learning for the school year will be based upon. Please be aware that while this should be a very fun field trip it is also an integral part of your child's maritime education. Please do not consider it as "skipping school," but please understand that it is an important part of learning about boats. This coming January all students will be working aboard the *Schooner Adventuress*, during their maintenance period, and familiarity with the ship is very important. Time will be given aboard the ship for students to work on their homework for their other classes.

Please carefully consider if your child may join us for this trip, as not only will they gain valuable and hands on sailing skills relevant to their Maritime classes, but they will gain invaluable team building, communication, and self-reliance skills. It is my intention for you to make a joint decision about this field trip with your child, because of the potential positive impacts that it could have on your child's life. **Whether or not your child can attend the field trip, please fill out the attached Field Trip Permission form and return it to me as soon as possible and no later than September 30th.** If your child can attend, please fill out the accompanying medical and getting to know you forms and include a donation that is within your abilities.

The *Adventuress* and Sound Experience are fundraising for this trip, however, it is my sincere hope that all families who wish to send their child will contribute to help cover the costs of this trip. A typical trip aboard the *Adventuress* costs \$100 per student per day. This is a "pay what you can" trip, so please consider donating to make this trip possible! Checks may be made out to Sound Experience (the non-profit that runs *Adventuress*) and placed in an envelope along with the forms and returned to Maritime Teacher Kelley Watson at PTHS. These funds will only be used if your child is selected for the trip (in the case of needing to hold a lottery for spaces on the field trip).

This trip begins at Port Townsend High School on the morning of Thursday, October 20th. Students may drop off their luggage at the high school shop prior to school starting. Students will then attend first period and will report back to the shop after 1st period. The trip ends at Boat Haven on Saturday, October 22 at 2:30 pm. Please plan on picking your child up at the Boat Haven (look for the biggest ship in the harbor!).

Please feel free to contact me with any questions via email or you may leave a phone message at 360-344-3026 and I will return it within one business day.

Many thanks!

Kelley Watson

kwatson@ptschools.org

SOUND EXPERIENCE - Release Agreement

PO Box 1390 · Port Townsend, WA 98368 · (360) 379-0438 · Fax: (360) 379-0439 · programs@soundexp.org

PLEASE PRINT

For **DAY TRIPS** – Please bring with you to the ship.

For **OVERNIGHT TRIPS** – Please send to office **ONE MONTH** prior to voyage.

A separate agreement is required for each minor and adult participant. Agreements for participants under age 18 must be signed by parent or legal guardian.

Name _____ Age (if youth) _____
Group _____ Trip Date _____
Parent/Guardian of Minor _____
Phone Day _____ Evening _____
Address _____ City _____ State _____ Zip _____
Email _____ *Sign me up for Sound Experience E-News:* Yes No
Emergency Contact _____
Phone Day _____ Evening _____

I am a current member of Sound Experience: Yes No
I would like to receive information about: Educational Programs Corporate Membership

Medical Release

I hereby give permission to the Sound Experience Staff and/or any adult member of the participating group to transport myself/my child to a doctor and/or hospital for treatment. I authorize all medical, surgical, diagnostic and hospital care procedures which may be performed or prescribed for myself/or my child by a licensed physician or hospital, when efforts to contact me are unsuccessful, and when deemed immediately necessary or advisable by the physician to safeguard myself/or my child. I waive my right of informed consent to such treatment. *If, for religious or other reasons, you wish NOT to authorize treatment, please attach a letter of explanation.*

Photo Release

I hereby give permission for Sound Experience Staff and/or any person acting on their behalf to photograph myself/my child and allow Sound Experience to use these pictures as it sees fit. I release all publication rights to said photos. *If, for any reason, you wish NOT to authorize release of photos, please attach a letter of explanation.*

Participation Release

I acknowledge that I have voluntarily chosen and HEREBY GIVE permission for myself/my child to participate in a program conducted by Sound Experience. I hereby certify that I am cognizant of the inherent dangers of sailing and water related activities and I hereby assume such risks. I HEREBY UNDERSTAND AND AGREE that Sound Experience, its owners, directors, officers, operators, agents, employees, instructors, staff and crew together with other unnamed assistants, shall not be held liable in any way for any occurrence in connection with any accident, injury or occurrence to myself or the above named participant in connection with the activities of Sound Experience unless the same is as a result of the negligence on the part of the above referred entities and persons. I further hereby waive and release any claim for personal injury or death against the above referred entities and persons. I further hereby waive and release any claim for personal injury or death against the above referred entities and persons. I further hereby waive and release any claim for damages to me, the above named participant, my estate, my family, heirs and assigns. In consideration of myself or the above named participant being allowed to participate in the activities of Sound Experience, I hereby personally assume all risks in connection with said activities, whether foreseeable or unforeseeable and further to save and hold harmless said program, entities and persons from any claim by me, the above named participant, our families, estates, heirs and/or assigns arising out of my or the above named participant's enrollment and participation in this program. I further agree to indemnify Sound Experience for all claims, demands, costs, or judgments arising out of my own acts or omissions arising from by participation. I further state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document as my voluntary act.

I HAVE FULLY INFORMED MYSELF OF THE CONTENT OF THIS AGREEMENT BY READING IT BEFORE SIGNING.

Participant x _____ Date _____

Parent/Guardian of Minor participant _____ Date _____

Natural or Adoptive Parent Legal Guardian

SOUND EXPERIENCE – Medical Health History Form

Sound Experience · PO Box 1390 · Port Townsend, WA 98368 · (360) 379-0438 · Fax: (360) 379-0439

Please return to office **ONE MONTH** prior to voyage

Name _____ Gender _____ Today's Date _____
Family Physician _____ Phone (____) _____ Date of Birth _____
Family Medical/Hospital Insurance Carrier: _____ Policy # _____

Part I: Illnesses and Injuries (check all that apply and give appropriate dates)

Please indicate all Chronic or Recurring Illnesses:

Ear Infection Bleeding/Clotting Disorders Hypertension Asthma
 Heart Defect/Disease Musculoskeletal Disorders Seizures Diabetes
 Other (specify) _____

Date of last health examination: _____

Describe any complicating medical problems noted in last health exam: _____

Is participant currently under the care of a physician or psychologist? _____

Please indicate all conditions participant has had since her/his last health exam:

- A serious injury requiring medical attention Any prescribed or over-the-counter medication
 Treatment in a hospital or emergency room Any exposure to contagious diseases
 Any restrictions concerning physical activities

Please explain details of all conditions indicated above: _____

Part II: Allergies (check those that apply and specify nature of allergic reaction.)

Animals _____ Hay Fever _____ Pollen _____
 Food _____ Medicines/drugs _____ Insect Stings _____
 Plants _____ Other _____

Part III: Other Health Conditions (check all that apply)

Bed Wetting Emotional Disturbances Constipation Menstrual Cramps
 Hearing Impairment Motion Sickness Sickle Cell Trait or Decease Nosebleeds
 Special Dietary Regimen Sleep Disturbances Glasses or Contact Lenses Fainting

Please explain any items that are checked. Indicate any information useful to the adult in charge in relation to any of these health conditions. Also, indicate any activities to be encouraged or restricted: _____

Drugs / Prescriptions: Medications MUST be in the original container and labeled for the participant. No minors will be permitted to carry medication unless written permission is given. Please list all medications to be brought on board:

Current Medications:	Amount / Frequency Administered:	Purpose:

Part IV: Immunization History (Diphtheria, Pertussis, Measles, Mumps, Rubella, Oral polio, Hbpy)

Date of last Tetanus shot _____ Date of most recent Tuberculin test _____

Other: _____

Part V: Authorization to Distribute Medication

I authorize the Medical Officer to distribute OTC medication (such as Tylenol) to my child. Circle one: YES NO

Signed: _____ Date: _____

Sound Experience- Participant Information: Getting to Know You

PO Box 1390 · Port Townsend, WA 98368 · (360) 379-0438 · Fax: (360) 379-0439 · programs@soundexp.org

Please mail or fax this form one month prior to your trip to the Sound Experience office. For youth groups send this to your group leader/teacher first.

referred
Name: _____ Trip Departure Date _____

Group/Voyage Name _____

We are excited that you will be joining us aboard *Adventuress*. In order to help us prepare for your trip, please take the time to answer the following questions. Please feel free to add any information we should know. Thanks for your help!

1. Have you been aboard *Adventuress* before? If so, what program?
2. What experience do you have with marine/environmental science or maritime skills? Is there anything specific you want to learn and/or do while on this trip?
3. What seems challenging about this trip? Do you have any concerns?
4. What seems exciting about this trip?
5. Please tell us three things about yourself (work, interests, hobbies, travel, etc):
6. What do you feel you will contribute to the group during your trip?
7. Do you have any special needs we should know about (physical, dietary, language, etc)?
8. Is there anything else you'd like us to know?

Pre-Trip Questionnaire

Please let us know if you agree with these statements so we can better know you:

	No way!		Maybe		Yes, for sure!
Can you describe the role of plankton in our marine ecosystem?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
Do you know what the scientific concept of adaptation means?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
Do you think about how you use natural resources in your daily life?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
Do you know ways in which you impact the environment?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
Could you define a closed environmental system to a friend?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
Do you feel connected to the Salish Sea?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

Sound Experience- Participant Information: Getting to Know Your Child

PO Box 1390 · Port Townsend, WA 98368 · (360) 379-0438 · Fax: (360) 379-0439 · programs@soundexp.org

Please mail or fax this form one month prior to your trip to the Sound Experience office. For youth groups send this to your group leader/teacher first.

Participant Name _____ Trip Departure Date _____

Group/Voyage Name _____

Please take a few moments to answer the following questions. This information will help us work with your child in the most beneficial way during the trip. Your input is important to us. Thank you for your support!

1. How do you view this trip as a positive experience for your child? What do you hope your child will take away from this experience?
2. What do you feel they will contribute to the trip aboard *Adventuress*?
3. Do you see them as being able to apply themselves and respect others in a close living and learning environment? Are there any discipline issues we should be aware of?
4. Is your child on any medications? Please describe the reason for medication:
5. What can our crew do to make this the best possible experience for your child?
6. Is there anything else our crew should know?(Please list details and severity of any known dietary restrictions or severe food allergies)

SOUND EXPERIENCE-Code of Conduct

PO Box 1390 · Port Townsend, WA 98368 · (360) 379-0438 · Fax: (360) 379-0439 · programs@soundexp.org

Please mail or fax this form ONE MONTH PRIOR to your trip to the Sound Experience office. For youth groups send this to your group leader/teacher first.

Participant Name _____ Trip Departure Date _____

Group/Voyage Name _____

We are excited you will be joining us aboard the *Adventuress*. We take our commitment to you seriously and hope you will do the same.

You will be participating in an active learning voyage. You will be immersed in an experience that requires cooperation, respect and thorough application of yourself. Our voyages are different than other residential programs. The ship requires full attention, moves around to different harbors. Private/personal time is very limited, and your actions will have consequences on everyone aboard.

If one person decides not to participate or wants to leave—this will put stress on the entire ship. “Time away” is not an option as in other residential programs.

Please think carefully about your commitment to yourself and to your shipmates before coming on board.

1. If I must leave the ship for any reason parent/guardians (for youth) will be responsible for picking me up at a designated port based on the ship’s location. Sound Experience will not be responsible for the additional cost of transportation.

2. No alcohol, illegal drugs, or weapons are allowed on board the ship.

3. Smoking is not allowed during the program.

4. All medication (prescription/non-prescription) must be given to the Program Coordinator or Group Leader upon arrival to the ship if youth are on board. Adult Participants or Parents/Guardians are responsible for any costs of refills that must be

secured on the voyage.

5. Sound Experience expects that all participants will come prepared to put forth their best effort, try new activities, work as a part of the group, and follow instructions, especially where safety is concerned.

6. During the program exclusive relationships are highly discouraged outside of married couples. Married and non-married couples should reserve any personal activity for off the boat to secure the community atmosphere and comfort of others in tight quarters with limited privacy.

7. Removal from the program for any of the above reasons will result in forfeiture of tuition.

I understand and agree to abide by the above policies and procedures while on board the schooner *Adventuress*.

Participant
Signature: _____ Date _____

Parent/Guardian
Signature (if participant under 18): _____ Date _____

Overnight Gear List

This checklist is for your comfort and safety. As you are packing, keep in mind that the weather on Puget Sound can be very unpredictable. Be prepared for cool, wet weather as well as hot, sunny weather. In summer, daytime temperatures are typically in the 70s to low 80s, with much cooler evenings (50s and 60s are common). That being said, there are warmer spells at times and occasional rain. Layers of warm-when-wet fabrics like wool, polypropylene, and synthetic fleece will help you keep up with the changes in conditions. Expect to get dirty and wet; don't bring anything too elegant, but focus on functional clothing. **You may want to bring less than you think. Afterwards, most people feel they brought too much clothing for the trip.** This gear list is for trips of up to 6 days, so please take into account the length of your trip when packing. Please use a soft pack or duffel bag if you have one available. You will be stowing your bag every day and space is limited.

- Warm coat or jacket
- Rain gear
- 1 wool or fleece sweater
- 2-3 t-shirts or long-sleeved shirts
- 1-2 pairs of long pants
- Wool or synthetic socks (wicking is best—not cotton)
- Underwear
- One set of long underwear or sweats (tops and bottoms—also function as pajamas)
- Closed toed shoes (Closed-toed sport sandals such as Keen's are acceptable, but must have a heel strap— **No flip-flops while underway!**)
- Sleeping bag, outdoor weight
- Small pillow
- Basic toiletries (there are no showers aboard)
- Warm hat and sunhat
- Gloves for warmth
- Water bottle with your name on it
- Medicine/Devices (to be stored and locked when youth aboard)

The following items may be nice to bring, but are optional:

- Bag for dirty laundry and wet clothes
- Journal and writing utensils
- Camera (an inexpensive one is best)
- Binoculars
- Day pack
- Cloth napkin / hand towel
- Poems or other readings / music to share
- Red flashlight for anchor watch

PLEASE DO NOT BRING

- ⇒ Personal music devices
- ⇒ Personal communication devices: *Phones may be stowed or used for taking pictures.*
- ⇒ Personal digital game or web devices
- ⇒ Drugs or alcohol
- ⇒ Weapons
- ⇒ Cigarettes: *Smoking is not permitted on the vessel.*
- ⇒ Candy, gum, or personal snacks
- ⇒ Any electrical devices such as hair dryers or electric shavers. CPAP OK.

PORT TOWNSEND SCHOOL DISTRICT NO 50
CALENDAR OF EVENTS
September 26, 2016 – October 24, 2016

September 26	School Board regular meeting, 6 pm
September 28	2-hr. early release, all schools
September 29	College Fair, HS gym, 1-3 pm Parent College Planning Night, HS Library, 4:30 pm Freshman parent meeting, HS Library, 6-7:30 pm BH curriculum night, 5:30 – 7:00 pm
October 5	Bike/Walk to School Day 2-hr. early release GS and BH only
October 6	HS parent financial aid night, HS Library, 5:30 pm
October 10	School Board work/study meeting, 6 pm
October 11	GS PTA meeting
October 12	2-hr. early release GS and BH
October 14	State Professional Day, NO SCHOOL
October 18	HS 6-week grading period ends
October 19	2-hr. early release, GS and BH
October 20	GS hearing and vision screening
October 21	GS picture day National College Fair, Seattle Convention Center, 12:00-4:00 pm HS homecoming game
October 22	National College Fair, Seattle Convention Center, 12:00-4:00 pm HS homecoming dance, 8-11 pm
October 24	School Board regular meeting, 6 pm
September 12	OCEAN classes begin First full day for kindergarten School Board work/study meeting, 6 pm

PTSD ENROLLMENT FY 2016-2017
September-2016

Prelim Official
Final

9/12/16
9/12/16

COMPARE TO BUDGET

	Bldg - Grant St		ICE/OCEAN - ALE		OPEPO/Other		Headcount	FTE *
	Headcnt	FTE	Headcnt	FTE	Headcnt	FTE		
K	70	68.80	-	-	-	-	70	68.80
Grade 1	93	93.00	1	1.00	-	-	94	94.00
Grade 2	77	75.07	4	4.00	-	-	81	79.07
Grade 3	87	87.00	3	3.00	-	-	90	90.00
TOTAL-Elem	327	323.87	8	8.00	-	-	335	331.87

	FY16 AAFTE * BUDGET	VARIANCE from Sep Target	Over/<Under>
95.0	(1.00)		
75.0	4.07		
96.0	(6.00)		
354.0	(22.13)		

	Bldg - Blue Heron		ICE/OCEAN - ALE		OPEPO/Other		Headcount	FTE *
	Headcnt	FTE	Headcnt	FTE	Headcnt	FTE		
Grade 4	60	60.00	8	8.00	10	10.00	78	78.00
Grade 5	66	66.00	10	10.00	11	11.00	87	87.00
Grade 6	110	109.72	7	7.00	-	-	117	116.72
Grade 7	78	76.67	5	4.85	-	-	83	81.52
Grade 8	79	76.62	6	6.00	-	-	85	83.31
TOTAL-Middle	393	389.01	36	35.85	21	21.69	450	446.55

77.0	1.00	
80.0	7.00	
110.0	6.72	
80.0	1.52	
77.0	6.31	
424.0	22.55	

	Bldg - PTHS		ICE/OCEAN - ALE		OTHER		Headcount	FTE *
	Headcnt	FTE	Headcnt	FTE	Headcnt	FTE		
Grade 9	73	72.40	7	6.60	-	-	80	79.00
Grade 10	70	68.80	4	3.40	-	-	74	72.20
Grade 11	80	72.80	11	9.40	-	-	91	82.20
Grade 12	103	93.00	14	10.60	-	-	117	103.60
TOTAL-High	326	307.00	36	30.00	-	-	362	337.00

72.0	7.00	
77.0	(4.80)	
77.0	5.20	
95.0	8.60	
321.0	16.00	

SUB-TOTAL
- (w/out RunStart) **1,046.00** **1,019.88** **80.00** **73.85** **21.69** **1,147** **1,115.42**

1,099.0 **16.42**

Running Start -- non-CTE (n/a for September)
Running Start -- CTE (n/a for September)

29.00
2.00

TOTAL FTE including Running Start **1,147** **1,115.42**

1,130.00

STUDENTS

Excused and Unexcused Absences

Students are expected to attend all assigned classes each day. ~~Teachers shall keep a record of absences and tardiness.~~ *Upon enrollment and at the beginning of each school year, the district will inform students and their parents/guardians of this expectation, the benefits of regular school attendance, the consequences of truancy, the role and responsibility of the district in regard to truancy, and resources available to assist the student and their parents and guardians in correcting truancy. The district will also make this information available online and will take reasonable steps to ensure parents can request and be provided such information in a language they can understand. Parents will be required to date and acknowledge review of this information online or in writing.*

Excused Absences

Regular school attendance is necessary for mastery of the educational program provided to students of the district. Students at times may appropriately be absent from class. *School staff will keep a record of absence and tardiness, including a record of excuse statements submitted by a parent/guardian, or in certain cases, students, to document a student's excused absences.* The following principles shall govern the development and administration of attendance procedures within the district:

~~A. Absences due to illness or a health condition; a religious observance, when requested by a student's parent(s); school approved activities; family emergencies; and, as required by law, disciplinary actions or short term suspensions shall be excused. The principal may, upon request by a parent, grant permission in advance for a student's absence provided such absence does not adversely affect the student's educational progress. A student, upon the request of a parent, may be excused for a portion of a school day to participate in religious instruction provided such is not conducted on school property, or involves the school to any degree.~~

A. The following are valid excuses for absences:

- 1. Participation in a district or school approved activity or instructional program;*
- 2. Illness, health condition or medical appointment (including, but not limited to medical, counseling, dental or optometry);*
- 3. Family emergency, including, but not limited to a death or illness in the family;*
- 4. Religious or cultural purpose including observance of a religious or cultural holiday or participation in religious or cultural instruction;*
- 5. Court, judicial proceeding or serving on a jury;*
- 6. Post-secondary, technical school or apprenticeship program visitation, or scholarship interview;*
- 7. State-recognized search and rescue activities consistent with RCW 28A.225.055;*
- 8. Absence directly related to the student's homeless status;*
- 9. Absence resulting from a disciplinary/corrective action (e.g. short-term or long-term suspension, emergency expulsion); and*
- 10. Principal (or designee) and parent, guardian, or emancipated youth mutually agreed upon approved activity.*

The school principal (or designee) has the authority to determine if an absence meets the above criteria for an excused absence.

- B. If an absence is excused, the student will be permitted to make up all missed assignments outside of class under reasonable conditions and time limits established by the appropriate teacher except that in participation-type classes a student's grade may be affected because of the student's inability to make up the activities conducted during a class period.
- C. An excused absence shall be verified by the parent/guardian *or a responsible adult*, emancipated ~~minor~~ or appropriately-aged student, or school authority responsible for the absence. *If attendance is taken electronically, either for a course conducted online or for students physically within the district, an absence will default to unexcused until such time as an excused absence may be verified by a parent or other responsible adult.* If a student is to be released for health care related to family planning or abortion, the student may require that the district keep the information confidential. Students thirteen and older have the right to keep information about drug, alcohol or mental health treatment confidential. Students fourteen and older have the same confidentiality rights regarding HIV and sexually transmitted diseases.
- ~~D. A student's grade may be affected if an activity or assignment occurs during the period of time when the student is absent.~~
- ~~E. The school shall notify a student's parent or guardian in writing or by telephone whenever the student has failed to attend school after one unexcused absence within any month during the current school year. The notification shall include the potential consequences of additional unexcused absences.~~
- ~~Not later than the student's fourth unexcused absence in a semester the district shall enter into an agreement with the student and parents that establishes school attendance requirements, refer the student to a community truancy board or file a petition and affidavit with the juvenile court alleging a violation of RCW 28A.225.010.~~
- ~~— A conference with the parent or guardian shall be held after five unexcused absences within any semester during the current school year. After five unexcused absences within a semester, a petition will be filed with Jefferson County Juvenile Services, and the student will be required to attend Truancy Court.~~
- ~~— A conference shall be scheduled to determine what corrective measures should be taken to ameliorate the cause for the student's absences from school. If the parent does not attend the conference, the parent shall be notified of the steps the district has decided to take to reduce the student's absences.~~
- ~~— If such action is not successful, the district shall file a petition and affidavit with the juvenile court alleging a violation of RCW 28A.225.010 by the parent, student or parent and student no later than the seventh unexcused absence within any month during the current school year or upon the tenth unexcused absence during the current school year.~~
- ~~F. All suspensions and/or expulsions shall be reported in writing to the superintendent within 24 hours after imposition.~~

Unexcused Absences

- A. Any absence from school for the majority of hours or periods in an average school day is unexcused unless it meets one of the criteria above for an excused absence.**
- B. As a means of instilling values of responsibility and personal accountability, a student whose absence is not excused will experience the consequences of his/her absence, which may include school discipline. In some cases, a student's grade may be affected if a graded activity or assignment occurs during the period of time when the student is absent.**
- C. The school will notify a student's parent or guardian in writing or by telephone whenever the student has failed to attend school after one unexcused absence within any month during the current school year. The notification will include the potential consequences of additional unexcused absences.**
- D. A conference with the parent or guardian will be held after two unexcused absences within any month during the current school year. In rare situations, a student may be suspended or expelled for habitual truancy. Prior to suspension or expulsion, the parent will be notified in writing in his/her primary language that the student has unexcused absences. A conference will be scheduled to determine what corrective measures should be taken to ameliorate the cause for the student's absences from school. If the parent does not attend the conference, the parent will be notified of the steps the district has decided to take to reduce the student's absences.**
- E. Not later than the student's fifth unexcused absence in a month the district will enter into an agreement with the student and parents that establishes school attendance requirements, refer the student to a community truancy board, or file a petition and affidavit with the juvenile court alleging violation of RCW 28A.225.010**
- F. If such action is not successful, the district will file a petition and affidavit with the juvenile court alleging a violation of RCW 28A.225.010 by the parent, student, or parent and student no later than the seventh unexcused absence within any month during the current school year or upon the tenth unexcused absence during the current school year.**
- G. All suspensions and/or expulsions will be reported in writing to the superintendent within 24 hours after imposition.**

The superintendent will enforce the district's attendance policies and procedures. Because the full knowledge and cooperation of students and parents is necessary for the success of the policy and procedures, the procedures shall be disseminated broadly and made available to parents and students annually ~~in the Student Handbook and when deemed necessary by school administration.~~

Students dependent pursuant to Chapter 13.34, RCW

A school district representative or certificated staff member will review unexpected or excessive absences of a student who has been found dependent under the Juvenile Court Act with that student and adults involved with the student. Adults includes the student's

caseworker, educational liaison, attorney if one is appointed, parent or guardians, foster parents and/or the person providing placement for the student. The review will take into consideration the cause of the absences, unplanned school transitions, periods of running from care, in-patient treatment, incarceration, school adjustment, educational gaps, psychosocial issues, and the student’s unavoidable appointments that occur during the school day. The representative or staff member must proactively support the student’s management of the school work.

Cross References:	<i>Policy 3120</i> Policy 3230 <i>Policy 3240</i> <i>Policy 3241</i>	<i>Enrollment</i> Student Privacy <i>Student Conduct Expectations and Reasonable Sanctions</i> <i>Classroom Management, Discipline and Corrective Action</i>
Legal References:	RCW 13.34.300 RCW 28A. 225 WAC 180-16-215(4) WAC 180-40-235 WAC 180-40-260 <i>WAC 392-400-325</i>	Relevance of failure to cause juvenile to attend school to neglect petition Compulsory School Attendance and admission (<i>new section added pursuant to SSHB 2449 (2016 legislative session)</i>) Minimum 180 school day year Discipline—Conditions and limitations Long term suspension—Conditions and limitations <i>Statewide definition of excused and unexcused daily absences</i>
Mangmt. Resources	<i>Policy News:</i> <i>2016-July</i> <i>2015-June</i> <i>2012- December</i> <i>2011-December</i> <i>2011-June</i>	

Date: 2/12/70; 3/2/92; 9/23/96; 8/21/97; 7/26/99; 10/28/02; 6/24/03; 5/23/05 _____

Donation of Gift(s) Report

To the Board of the Port Townsend School District:

Date of donation: 9-28 and 10-2-2016

Name of donor: SOS Printing

Mailing address of donor: 2319 Washington St.
Port Townsend, WA 98368

Item(s) donated:

Approximate Value:

\$744.00 printing donation
for 2016 High School Football Programs

\$ 744.00

\$783.92 printing donation
for 2016-17 Parent Calendars

\$ 783.92

Received by: Mary Colton



Administrator (Building Principal and/or Superintendent)

Board Chair Nathanael O'Hara called the budget public hearing to order at 5:32 p.m. PRESENT: Nathanael O'Hara, Connie Welch, Laura Tucker, and Keith White via SKYPE. Excused: Jennifer James-Wilson. Also present were Superintendent John Polm, staff, and community members.

Connie Welch led the Pledge of Allegiance.

Agenda Approval

Laura Tucker moved to approve the agenda. Connie Welch seconded and the motion carried 4-0.

Public Hearing: Budget Revision for 2015-16

Business Manager Amy Khile explained this budget revision is necessary because the beginning fund balance for 2015-16 was approximately \$117,000 higher than anticipated. Ms. Khile said school districts cannot spend over the budgeted expenditure amount adopted in the annual budget, and receipt of additional funding from some grants, Safety Net, MDS (Maritime Discovery Schools), and federal forest dollars all contributed to increased revenue and starting cash, necessitating a revision to the 2015-16 budget; this revision will give the District ability to spend those revenues. Audit expenses, special education funding, Running Start, and employee benefits were discussed.

The meeting was adjourned by consensus at 5:55 p.m.

Respectfully submitted,

John A. Polm, Jr., Secretary

ATTEST: _____
Nathanael O'Hara, Board Chair