

## ANDOVER PUBLIC SCHOOLS

[www.aps1.net](http://www.aps1.net)

### Andover High School Enrollment Process

Welcome to the Andover Public Schools. Please find all the registration information and forms needed to complete your registration process. After collecting all required documents and completing the Student Registration packet with the Assistant Principals and/or Registrar. Please note you will not be able to meet with any other school personnel until the registration is processed. You should expect your child will begin classes within 3-5 school days after your appointment. Thank you for your patience.

All Andover High School registration **MUST BE DONE IN PERSON** and by appointment only with the Assistant Principals and/or Registrar.

**Both STUDENT AND PARENT/GUARDIAN MUST ATTEND REGISTRATION APPOINTMENT.**

Documents to Bring:

- **Completed Registration Form**
- **Original birth certificate** and Passport if the child was not born in the United States.
- **Immunization records, in English**
  - A physical examination within the last year should be presented and immunizations will be reviewed. (*Immunizations required by the Commonwealth of Massachusetts are listed in the Registration Packet.*)
  - Approval by the school clinic is required prior to class scheduling.
  - A physical exam must be obtained in the United States.

**Previous school records**, in English. Complete records are required for class placement.

- Original Official *current* High School transcripts are required for transferring students entering Grades 9 through 12.
- Students registering for Grade 9 are required to bring copies of their 7<sup>th</sup> and 8<sup>th</sup> grade report cards that show promotion.
- International Students must bring current school year, plus previous two years translated records.

Required ~ Proof of Andover Residency (complete list of acceptable proofs shown on next page).

**International Students must meet the same requirements listed.**

**All documents submitted should be current, translated to English and notarized.**

## ANDOVER PUBLIC SCHOOLS

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### Andover High School Enrollment Process

#### STEP 1

- \_\_\_ Fill out the attached Student Registration Forms.  
 \_\_\_ Call your child's school to schedule an appointment.

#### STEP 2

- \_\_\_ Gather the following paperwork and bring it to your meeting. We will make copies of documents for which we require the original to be presented. Please note there are ***some forms that need to be notarized.*** **All submitted documents should be current and translated to English.**

___ <b>Original Birth Certificate</b> (should be translated and notarized if in any language other than English).									
___ <b>Proof of Residency</b> (you must have the required number of documents from <b>EACH</b> of the three (3) categories.									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%; background-color: #d9ead3;">Group A 1 proof from this group</th> <th style="width: 33%; background-color: #f4cccc;">Group B 2 proofs from this group</th> <th style="width: 33%; background-color: #d9ead3;">Group C 1 proof from this group</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;"> <b>FOR HOMEOWNERS:</b> <ul style="list-style-type: none"> <li>Copy of Deed &amp;/or a record of the most recent mortgage payment</li> <li>Property tax bill and the most recent payment</li> <li>Copy of settlement statement and a record of the most recent payment.</li> </ul> </td> <td style="vertical-align: top;"> <b>FOR HOMEOWNERS &amp; RENTERS:</b>            A utility bill dated within the past 45 days or a statement of service showing the service address and connection date from the following list:           <ul style="list-style-type: none"> <li>Cable/Satellite TV bill</li> <li>Electric bill</li> <li>Gas bill</li> <li>Home Telephone Bill (cell phone is NOT acceptable)</li> <li>Car Insurance bill</li> <li>Home/renters insurance bill</li> </ul> </td> <td style="vertical-align: top;"> <b>FOR HOMEOWNERS &amp; RENTERS:</b> <ul style="list-style-type: none"> <li>Valid government-issued photo identification that shows the current address;</li> </ul> <b>OR</b>            Dated within the past year:           <ul style="list-style-type: none"> <li>W-2 form that shows the current address;</li> </ul> <b>OR</b>            Dated within the past 45 days:           <ul style="list-style-type: none"> <li>Payroll stub that shows the current address;</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>Bank statement that shows the current address.</li> </ul> </td> </tr> <tr> <td style="vertical-align: top;"> <b>FOR RENTERS:</b> <ul style="list-style-type: none"> <li>Copy of current lease and a signed Landlord Living Agreement</li> <li>Signed Landlord Living Agreement and a record of the most recent rent payment</li> </ul> </td> <td></td> <td></td> </tr> </tbody> </table>	Group A 1 proof from this group	Group B 2 proofs from this group	Group C 1 proof from this group	<b>FOR HOMEOWNERS:</b> <ul style="list-style-type: none"> <li>Copy of Deed &amp;/or a record of the most recent mortgage payment</li> <li>Property tax bill and the most recent payment</li> <li>Copy of settlement statement and a record of the most recent payment.</li> </ul>	<b>FOR HOMEOWNERS &amp; RENTERS:</b> A utility bill dated within the past 45 days or a statement of service showing the service address and connection date from the following list: <ul style="list-style-type: none"> <li>Cable/Satellite TV bill</li> <li>Electric bill</li> <li>Gas bill</li> <li>Home Telephone Bill (cell phone is NOT acceptable)</li> <li>Car Insurance bill</li> <li>Home/renters insurance bill</li> </ul>	<b>FOR HOMEOWNERS &amp; RENTERS:</b> <ul style="list-style-type: none"> <li>Valid government-issued photo identification that shows the current address;</li> </ul> <b>OR</b> Dated within the past year: <ul style="list-style-type: none"> <li>W-2 form that shows the current address;</li> </ul> <b>OR</b> Dated within the past 45 days: <ul style="list-style-type: none"> <li>Payroll stub that shows the current address;</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>Bank statement that shows the current address.</li> </ul>	<b>FOR RENTERS:</b> <ul style="list-style-type: none"> <li>Copy of current lease and a signed Landlord Living Agreement</li> <li>Signed Landlord Living Agreement and a record of the most recent rent payment</li> </ul>		
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___ <b>IMMUNIZATION RECORDS</b> (Should be translated if any language than English).									
___ <b>PREVIOUS SCHOOL RECORDS</b> Including most recent IEP or 504 plan if applicable. (Should be translated if in any language other than English).									
___ <b>CUSTODY PAPERWORK</b> (if applicable).									

#### STEP 3

- \_\_\_ **ELL Language Screening (if applicable)** If your student speaks more than one language or if English is not his/her first language, a language screening may be required. A member of the ELL team will contact you to arrange the screening.





**FORM #1****PER THE DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION, THIS FORM IS REQUIRED TO BE FILLED OUT:**

The DESE needs to collect data on race and ethnicity for every child in the state. Each school district needs to update its current student data to conform to the new federal reporting categories.

The law requires school districts to collect and maintain basic demographic data for each student. This includes information regarding gender, age, ethnicity, national origin and race. The Department uses this information to track demographic trends, to carry out its responsibilities under state law (for example, under the state racial imbalance law) and to ensure that students are receiving equal opportunities. In addition, federal law requires the Department to report such information to the U.S. Department of Education for purposes of monitoring enforcement of civil rights laws.

This change will be made to comply with the Federal Office of Management and Budget (OMB) revisions to the standards for classification of Federal data on race and ethnicity announced in the Federal Register Notice of October 30, 1997.

<b>ETHNICITY:</b> (select one)	<b>RACE:</b> (select one or more)	<b>ALIEN REG. NUMBER:</b> _____
<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> American Indian/Alaskan Native	
<input type="checkbox"/> Not Hispanic/Latino	<input type="checkbox"/> Asian	
	<input type="checkbox"/> Black	
	<input type="checkbox"/> Hawaiian/other Pacific Islander	
	<input type="checkbox"/> White	
	<input type="checkbox"/> I choose not to answer	

**LOW INCOME STATUS**

The student meets ANY ONE of the following definitions of low income:

1. The student is eligible for free or reduced price lunch; or
2. The student receives Transitional Aid to Families benefits; or
3. The student is eligible for food stamps.

00 Student is not low income as defined above  
 01 Student is low income as defined above

**MIGRANT STATUS**

An indication of whether an individual or a parent/guardian accompanying an individual maintains primary employment in one or more agricultural or fishing activities on a seasonal or other temporary basis and establishes a temporary residence for the purpose of such employment.

00 Not a migratory child-A child whose parents/guardians are not migrant workers.  
 01 Currently a migratory child.

**EMERGENCY IMMIGRANT EDUCATION PROGRAM STATUS**

To be eligible for the Emergency Immigrant Education Program, a student must

1. Not have been born in any State AND
2. Not have completed 3 full academic years of school in any state.

00 Student is not eligible for the Emergency Immigrant Education Program  
 01 Student is eligible for the Emergency Immigrant Education Program.

If student is eligible, the Country of Origin is \_\_\_\_\_

**LIMITED ENGLISH PROFICIENCY**

Limited English Proficient Students are defined as children who were

1. Not born in the US whose native tongue is a language other than English and who are incapable of performing ordinary class work in English or
2. Born in the United States of non-English speaking parents and who are incapable of performing ordinary class work in English.

\_\_\_ 00 Student who is capable of performing ordinary class work in English.

\_\_\_ 01 Student who is not capable of performing ordinary class work in English.

**ENGLISH LANGUAGE LEARNERS PROGRAM**

An indication of the type English Language Learners Program a student is enrolled as of the time of reporting.

\_\_\_ 00 Not enrolled in an English language learner program at any time during the current school year.

\_\_\_ 01 Sheltered English immersion – receiving instruction in English with modifications.

\_\_\_ 02 Two-way bilingual – receiving instruction in English & another language.

\_\_\_ 03 Other bilingual education

\_\_\_ 04 LEP student whose parent/guardian has consented to opt out of ELL programs in district

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**FORM #2 (CERTIFICATION OF ADDRESS \*)**

**ANDOVER PUBLIC SCHOOLS [www.aps1.net](http://www.aps1.net)  
Affidavit of Residency (Homeowners)**

I/we, the undersigned parent(s) or legal guardian(s) of \_\_\_\_\_, hereby certify as follows:

1. I/we reside at \_\_\_\_\_  
Home Address – Apartment Number – Andover, MA - Telephone: Home/Cell
2. I/we wish to enroll/continue the enrollment of the above named student in the Andover Public Schools for the \_\_\_\_\_ school year.

I/we understand that pursuant to Massachusetts law and Andover Public Schools Committee policy, students who actually reside in the Town of Andover may attend the Andover Public Schools and students who do not actually reside in the Town of Andover may not attend the Andover Public Schools, unless a policy exception applies. I/we hereby acknowledge that no such policy exception applies to the above-named student.

3. I/we hereby certify that the above named student resides with me at the Andover Massachusetts address shown on this form.
4. I/we acknowledge that I am/we are required to notify the Principal/Assistant Principal of the above student’s school, **in writing**, of any change in said student’s address within five (5) calendar days of such change of address and **to provide new proof of residency** pursuant to the Andover Public Schools Admission policy, as amended on 12/4/2014.
5. I/we understand that this affidavit will be relied upon by the Andover Public Schools for the purpose of determining the above student’s eligibility to attend the Andover Public Schools on the basis of residency. If said student is enrolled in the Andover Public Schools based upon the information contained in this affidavit and it is subsequently determined that the student does not actually reside in Andover, I/we understand that the student’s enrollment in the Andover Public Schools may be promptly terminated and I/we may be held jointly and severally liable to the Andover Public Schools for the student’s tuition for the full academic year.
6. I/we further certify that I am/we are the parent(s) or legal guardian(s) of the above student.

**Signed under the pain and penalties of perjury on this** \_\_\_\_\_  
(Day) (Month) (Year)

\_\_\_\_\_  
**Parent/Guardian 1**

\_\_\_\_\_  
**Parent/Guardian 2**

**\*\*\* NOTARIZED DOCUMENT REQUIRED ONLY FOR ALL NEW REGISTRATIONS \*\*\***

**Notary Public:**

\_\_\_\_\_

**County:** \_\_\_\_\_, **State:** \_\_\_\_\_ **personally appeared and subscribed and sworn before me, this,** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_.

*This information contained in this legal affidavit is subject to verification by a residency investigator.*

**For Official Use Only:** New Enrollments-Group A, B & C proofs needed plus notarized form;  
\*Cert of Address: Grades 6 and 9<sup>th</sup> only: Group B proofs needed – utility bill must be w/in past 45 days\*

**FORM #2A: "TENANT @WILL"**

**ANDOVER PUBLIC SCHOOLS [www.aps1.net](http://www.aps1.net)  
Affidavit of Residency by Owner/Lessee**

**Instructions:**

Any applicant for the Andover Public School System, who cannot produce a property deed or lease, must ask the **owner or lessee of the property** where the applicant lives to complete and sign this legal affidavit. It is the **responsibility of the applicant (not the person who completes this affidavit) to attach a record or recent rent payment**, unless this affidavit affirms in #3 below that the tenancy does not require payment or rent.

My name is: \_\_\_\_\_ and I hereby depose and certify as follows:

1. I am the owner/lessee of the property located at \_\_\_\_\_ in the Town of Andover.
2. \_\_\_\_\_, who is the parent or legal guardian of \_\_\_\_\_, leases or subleases this property as their principal residence from me, without a written lease, in a tenancy at will, from month to month.
3. Check one.

- I have received within the last thirty (30) days rental payment for the lease or sublease of these premises.
- Alternatively, I hereby state that the party named above resides with me at the address above with no payment of rent.

I agree that if the Andover Public Schools investigate and find these statements to be false, that I may be responsible for repayment of any tuition or educational costs due to the Andover Public Schools for the education of the above referenced children. I agree that if the tenants listed above move out of the dwelling listed above, that I will notify the Andover Public Schools of this change of residence.

Signed under the pain and penalties of perjury on this \_\_\_\_\_ (Day) \_\_\_\_\_ Month) \_\_\_\_\_ (Year)

\_\_\_\_\_  
Signature Printed Name

Printed Address: \_\_\_\_\_

**\*\*\* NOTARIZED DOCUMENT REQUIRED FOR ALL NEW REGISTRATIONS \*\*\***

Notary Public: \_\_\_\_\_

County: \_\_\_\_\_, State: \_\_\_\_\_ personally appeared and subscribed and sworn before me, this, the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

*This information contained in this legal affidavit is subject to verification by a residency investigator.*

**For Official Use Only:** Receipt of most Recent Rent Payment \_\_\_\_\_ (if applicable)





**HEALTH REQUIREMENTS FOR NEW STUDENTS  
ENTERING ANDOVER PUBLIC SCHOOLS**

STUDENT SERVICES

36 BARTLET STREET, ANDOVER, MA 01810

978/623.8540; FAX: 978/623.8543

Welcome to the Andover Public Schools. The **Massachusetts Department of Public Health** requires that a **student may enter school only** after the following requirements are met:

- **Health History** completed by parent/guardian prior to enrollment
- **Physical Examination** performed and signed by a US health care provider completed within one year prior to entry.
- **Lead level and vision screening** completed before entry to kindergarten. Your health care provider is required to test your child's vision. Please have your PCP include the results with the immunization records or physical exam.
- **Immunization documentation** must be translated and is required before entry. Dates must include month and year and in some cases, exact day may be necessary to fully establish your child's immune status. (schedule below)

Please arrange to meet with your school nurse to plan for any special health care needs or for the administration of any essential medications or procedures that are prescribed during the school day.

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH (MDPH)  
SCHOOL IMMUNIZATION REGULATIONS

**REQUIRED FOR SCHOOL ENTRY**

	<b>Preschool/PK</b>	<b>K - Grade 4</b>	<b>Grades 5-6 and 11-12</b>	<b>Grades 7-11</b>
<b>Hepatitis B</b>	3 doses	3 doses	3 doses	3 doses
<b>DTaP/DPT/DT/Td<sup>1</sup></b>	≥ 4 doses	≥ 4 doses	≥ 4 doses	≥ 4 doses plus 1 Tdap booster
<b>Polio<sup>2</sup></b>	≥ 3 doses	≥ 4 doses	≥ 4 doses	≥ 4 doses
<b>Hib</b>	1-4 doses	--	--	--
<b>MMR<sup>3</sup></b>	1 dose measles 1 dose mumps 1 dose rubella	2 doses measles 2 doses mumps 2 doses rubella	2 doses measles* 1 dose mumps* 1 dose rubella	2 doses measles 2 doses mumps 2 doses rubella
<b>Varicella<sup>3</sup></b>	1 dose	2 doses	1 dose*	2 doses

<sup>1</sup> Five doses unless 4<sup>th</sup> dose was given after 4<sup>th</sup> birthday, then only 4 doses.

<sup>2</sup> Four doses unless 3<sup>rd</sup> dose was given after 4<sup>th</sup> birthday, then only 3 doses.

<sup>3</sup> Measles and Varicella vaccinations must have been given on or after 1<sup>st</sup> birthday.

**\*Two doses of MMR and two doses Varicella or MMRV combined is recommended.**

(Physician verification of disease or serologic proof of immunity is acceptable.)

The Andover Public Schools are required by MDPH to perform the following screenings annually:

- Hearing: Grades Pre K, KG, 1, 2, 3, 7, 10
- Vision: Grades Pre K, KG, 1, 2, 3, 4, 5, 7, 10
- Height and Weight/Body Mass Index (BMI): Grades 1, 4, 7, 10
- Postural screening: Grades 5, 6, 7, 8, 9

If the results do not fall within the appropriate guidelines for hearing, vision and scoliosis screening, we will contact you and recommend further follow-up with your child's physician. We recognize that some parents/guardians may prefer to have the screening performed by a physician. For your child to be exempt from screening in school, please provide the following documentation **before September 15th**.

Hearing and Vision: a copy of the screening results from the physician for the current school year.  
Postural screening: a copy of the screening results from the physician for the current school year or documentation that the student is under care for scoliosis.

Body Mass Index (BMI) calculations are determined by measuring height and weight in Grades 1, 4, 7, and 10 and letters will be sent home to parents of all students in these grades with this information. **Parents and legal guardians must provide a written request to the school clinic if they do not wish their child to participate in this program or if they do not wish to receive a letter with BMI screening results. Please note: screenings will commence after the 2<sup>nd</sup> week of school in September.**

We will ensure privacy and confidentiality during the screening procedures. Guidelines may be found at the following website: <http://www.mass.gov/dph/regs/reg105cmr200.pdf>

Rita Casper  
Director of Nursing  
[rcasper@aps1.net](mailto:rcasper@aps1.net)

Rev. 12/2014



**HEALTH STATUS**

Has the student had any of the following? ***If additional space is needed, please use the back of this form.***

	When/Date	Treatment (specify if current)
Asthma	_____	_____
Bladder/Kidney conditions	_____	_____
Congenital Conditions	_____	_____
Diabetes	_____	_____
Dizziness/Fainting	_____	_____
Gastro-intestinal Complaints	_____	_____
Headaches/Migraine	_____	_____
Heart Concerns	_____	_____
Nose Bleeds	_____	_____
Painful Joints	_____	_____
Seizures	_____	_____
Skin conditions	_____	_____
Neurological Disorders	_____	_____
ADD/ADHD	_____	_____
Anxiety	_____	_____
Bipolar	_____	_____
Depression	_____	_____
Emotional	_____	_____
Other	_____	_____

Does the student wear glasses/contact lenses? \_\_\_\_\_

Does the student wear hearing aids or use other assistive devices? \_\_\_\_\_

Can your child participate in full school activities including physical education, recess and fieldtrips? If no – please explain \_\_\_\_\_

**MEDICAL CARE**

Primary Care Physician \_\_\_\_\_ Telephone # \_\_\_\_\_

Special Consultant \_\_\_\_\_ Specialty \_\_\_\_\_ Telephone # \_\_\_\_\_

Dentist/Clinic \_\_\_\_\_ Telephone# \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

**Andover Public Schools  
ESL Program**

**HOME LANGUAGE SURVEY**

*Massachusetts law G.L. c. 71A requires schools, annually, to identify students who have a primary home language other than English. The law defines an English learner as "a child who does not speak English or whose native language is not English, and who is not currently able to perform ordinary classroom work in English." All Massachusetts districts must determine the number of English learners in the district, and to classify them according to grade level, primary language, and the English learners program in which they are enrolled. Please note that even if your child speaks a language other than English, it does not necessarily mean your child will be identified as requiring ESL support.*

**Student's Name** \_\_\_\_\_ **Current School** \_\_\_\_\_

**Place of Birth** \_\_\_\_\_ **Birth Date** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**Parent/Guardian's Name** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

1. What was the first language your child spoke? \_\_\_\_\_
2. What language(s) are spoken by people living in your home? \_\_\_\_\_
3. What language do you most frequently use to speak to your child? \_\_\_\_\_
4. What language does your child use when speaking with brothers and sisters? \_\_\_\_\_
5. What language does your child use when speaking with other family members?  
(grandparents, aunts, uncles, etc.) \_\_\_\_\_
6. What language does your child use when speaking with friends in  
the neighborhood? \_\_\_\_\_

If your child's **primary** language is **not English**, please complete the following:

- A. What languages does your child read? \_\_\_\_\_
- B. Has your child attended English as a Second Language (ESL) classes? Yes No  
Where? \_\_\_\_\_ When? \_\_\_\_\_
- C. Please indicate whether you need essential written communication translated to your  
home language. Yes No

**For Office Use Only**

**Instructions:**

1. Refer student to ESL teacher if questions 1-6 indicate a primary language other than English.
2. Note the following before filing form: \_\_\_\_\_ Date of referral to ESL teacher. (Please provide ESL teacher with a copy of this form.)
3. File Home Language Survey form in student's cumulative folder.
4. ESL teacher please use back of survey form to note any relevant comments from student's classroom teacher(s).

## ACCEPTABLE USE POLICY-TECHNOLOGY

### I. Purpose

- A. The primary purpose of the technology program is to provide access for students and employees of the Andover Public Schools to the system and network, including access to external networks, for educational purposes. Educational purposes shall be defined as classroom instruction and activities, career and professional development, and high quality self-discovery activities of an educational nature.
- B. The system and network also is intended to facilitate financial and personnel management; to increase communication among students, staff, and parents; to enhance productivity through the more efficient and economical dissemination of information; and to provide access to electronically stored information for educational research purposes.
- C. The system and network is to be utilized to provide information to students and staff and to the community, including parents, governmental agencies, and businesses. Whenever possible and practical, electronic communications, including electronic mail (Email) and Internet Web pages, shall be used in place of paper communications. An exception to the foregoing rule applies to student records. Information concerning a specifically identifiable student which is of importance to his/her educational process shall ordinarily not be the subject of Email communication. In the event that Email is used in such circumstances, a hard copy shall be printed out and maintained in the "temporary record" as defined in 603 CMR 23.02.

### II. Availability

- A. The superintendent or designee shall implement, monitor and evaluate the district's system and network for educational and administrative purposes. Access to the system and network, including external networks, shall be made available to employees and students for educational and administrative purposes and in accordance with administrative regulations and procedures. The district will provide opportunities for training to users in the proper use of the system and network. Principals or their designee will ensure that training is provided to users on appropriate use of electronic resources. The district will provide each user with copies of the Acceptable Use Policy and Regulations and Procedures. Principals or their designee will be responsible for disseminating and enforcing policies and enforcing procedures in the building(s) under their control.
- B. Access to the system and network is a privilege and is not a right or entitlement. All users shall be required to acknowledge receipt and understanding of all administrative regulations and procedures governing use of the system and network and shall agree in writing to comply with such regulations and procedures. Access will be granted to permanent employees and to students with a signed access agreement. Access will be granted to substitutes, contractors, and student teachers with a signed access agreement and with the principal's signature. Principals or their designee will ensure that all users complete and sign the applicable access agreements. Noncompliance with applicable regulations and procedures may result in suspension or termination of user privileges and other disciplinary actions consistent with the policies of the Andover Public Schools. Violations of law may result in criminal prosecution as well as disciplinary action by the Andover Public Schools. Upon a user's withdrawal, transfer, or graduation from the Andover Public Schools or upon a user's termination/departure from employment with the Andover Public Schools, any and all Email accounts of that user shall be promptly closed.

### III. Acceptable Use

- A. The Superintendent or designee shall develop and implement administrative regulations, procedures, and user agreements, consistent with the purposes and mission of the Andover Public Schools as well as with law and policy governing copyright. Teachers, staff members, and volunteers who utilize school information technology for instructional purposes have a duty to supervise use by students and to ensure that students' use is consistent with their access agreements and with the Andover Public Schools' Acceptable Use Policy.

### IV. Monitored Use/No Expectation of Privacy

- A. Emails and other uses of electronic resources of the Andover Public Schools system and network by students and employees shall not be considered confidential and are the property of the Andover Public Schools. Copies of all information created, sent or retrieved are stored on the computer network's back-up files. These files may be monitored or reviewed at any time by designated staff to ensure appropriate use for instructional and administrative purposes, as well as to ensure proper use of resources and to conduct routine network maintenance and upgrading. The issuance and use of passwords is to protect the user's information from access by other users and by third persons but shall not create any expectation of privacy with respect to the Andover Public Schools' access to such information.
- B. The Andover Public Schools recognizes that appropriate so-called "electronic classrooms" and similar sites operated by third-party vendors or hosts are acceptable instructional tools and learning environments for students and teachers. Because activities which occur on such sites do not take place on the Andover Public Schools' system and network, however, a condition of such use is that all users' passwords for accessing such sites or any subsites thereon must be provided to the Principal or designee. Failure to do so will be considered a violation of the Andover Public Schools' Acceptable Use Policies and appropriate penalties thereunder will be administered.
- C. The Andover Public Schools reserves the right to report to law enforcement authorities any activities involving the use of the system and network which in the judgment of the Andover Public Schools may involve illegality or may present or reveal a danger to the safety and welfare of persons. The Andover Public Schools will cooperate fully with any investigation by law enforcement authorities which concerns use of the system and network.

### V. Liability

- A. The Andover Public Schools shall not be liable for users' inappropriate use of electronic resources or violations of copyright restrictions; for users' mistakes or negligence; for costs incurred by users without express permission in advance from a building administrator; or for any loss or corruption of data resulting from the use of electronic resources. The Andover Public Schools shall not be responsible for ensuring the accuracy or usability of any information found on external networks.

Approved: August 20, 2013

Dennis Forgue, Chairperson

Original filed in the Office of the Superintendent of Schools

SOURCE: Andover

DWLIBDB\272109.1 10089/00



**ACCEPTABLE USE POLICY – REGULATION OF USE BY STUDENTS**

1. Any and all commercial use of the system/network is prohibited.
2. Copyrighted software or data shall not be placed on the district system/network without permission from the holder of the copyright and the Andover Public Schools Director of Digital Learning and/or Chief Information Officer or his/her designee.
3. All passwords must be kept confidential by the user to whom the password belongs/is assigned. All passwords shall be protected by the user and not shared or displayed. All actions taken under user name and password are the responsibility of the user to whom the user name/password belongs/is assigned.
4. Anyone giving his/her password to another person and the recipient of that password are subject to disciplinary action.
5. Using another person's user account is prohibited.
6. Students completing required course work will have first priority for after hour use of the equipment.
7. Individual users shall, at all times, be responsible for the proper use of accounts issued in their names.
8. The system/network may not be used for illegal purposes, in support of illegal activities, or for any activity prohibited by district policy. This includes, but is not limited to, discrimination; hate crimes; cyberbullying; hazing; harassment; the making of threats or communicating acts of violence; gambling/wagering; and the purchase or sale of alcohol or drugs/controlled substances.
9. Users shall purge electronic information as directed by the Director of Digital Learning and/or the Chief Information Officer, or his/her designee.
10. Users may redistribute copyrighted materials only with the written permission of the copyright holder or designee. Such permission must be specified in the document or in accordance with applicable copyright laws, district policy and administrative procedures.
11. Only the Network Administrator(s) or person(s) with permission from the Director of Digital Learning and/or Chief Information Officer or his/her designee may upload/download public domain programs to the system/network.
12. Any malicious attempt to harm or destroy equipment, materials, data or programs is prohibited. Any attempt to gain unauthorized access to system programs, including but not limited to attempts to override firewalls, any attempt to engage in "hacking", and any attempt to gain unauthorized access to computer equipment is prohibited.

13. Deliberate attempts to degrade or disrupt system performance may be viewed as violations of district policy and/or as criminal activity under applicable state and federal laws. This includes, but is not limited to, the uploading or creation of computer viruses.
14. Vandalism will result in the cancellation of system privileges and will require restitution for costs associated with hardware, software and system restoration.
15. Forgery or attempted forgery is prohibited.
16. Attempts to read, delete, copy or modify the electronic mail of other users or to interfere with the ability of other users or send/receive electronic mail is prohibited.
17. Use of appropriate language is required; swearing, vulgarity, ethnic or racial slurs, and other inflammatory language is prohibited.
18. Pretending to be someone else when sending/receiving messages is prohibited.
19. Transmitting/viewing of the following is prohibited: obscene or sexually explicit material; material which advocates or promotes the use of illegal substances; material which involves advocacy of, instruction in, or access to bombs, weapons, explosives, firearms, incendiary devices, or similar items.
20. Revealing personal information (such as full names, addresses, phone numbers, etc.) is prohibited.
21. Users shall not use the system: to access or download material that is not relevant to approved uses, assignments or school course work/study; for recreational purposes, including but not limited to games/movies/"youtube"/music; or to access "chat rooms" or similar sites.
22. Users shall not use the system to send "chain letters" or "broadcast" messages to lists or individuals or to subscribe to "listserves" or "newsgroups" without prior permission from a teacher or Principal/Assistant Principal.
23. Users shall not use the network or system to proselytize or advocate the views of any individual or non-school organization, including but not limited to political or religious interests, or to raise funds for any non-school-sponsored purpose or organization. Users shall not use the network or system for any communication of the user's personal views on any matter in a manner which represents that they are the views of the Andover Public Schools or which reasonably could be interpreted as making that representation.
24. Users shall not open or forward any Email attachments from any unknown or suspicious sources.
25. Users are required to report immediately to a teacher or to a Principal/Assistant Principal all material which the user encounters on the system which: constitutes a threat of any kind to the safety of any other person; constitutes cyberbullying; or causes the user to feel uncomfortable or unsafe.

26. No privately owned computer(s) and/or computer equipment will be permitted to be installed and/or operated on the Andover Public Schools' computer network without the express written permission of the Director of Digital Learning and/or the Chief Information Officer. When permission is obtained and as time permits, all privately owned computer(s) and/or computer equipment must be reconfigured and re-imaged by the Andover Public Schools' Technology Network Administrator to conform to the school district's operating system, application software, configuration requirements, and security restrictions.
27. A user who violates district policy or administrative procedures will be subject to suspension or termination of system/network privileges and will be subject to appropriate disciplinary action and/or prosecution. Any user who is uncertain whether his/her activity on the network or system is prohibited by this policy must obtain approval from a teacher or the Principal before engaging in such activity.

Revised Policy: August 20, 2013  
Original Policy: May 20, 2003

Dennis Forgue, ASC Chairperson

SOURCE: Andover

DWLIBDB\272134.1 10089/00

**STUDENT USER AGREEMENT FOR PARTICIPATION IN AN ELECTRONIC COMMUNICATIONS SYSTEM**

<b>For Teacher Use</b>
New password needed _____
New account needed _____
Sent to: _____
RM/School: _____

<b>For Office Use</b>
Date Received: _____
Returned: _____
LASID _____
Date sent: _____
To: _____
Disabled: _____
Enabled: _____
Initials: _____

User Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

School: \_\_\_\_\_ Homeroom: \_\_\_\_\_

I have read the district's Acceptable Use Policy and Regulation of Use by Students and agree to abide by their provisions. I understand that violation of these provisions may result in disciplinary action including but not limited to suspension or revocation of privileges, suspension or expulsion from school, termination of employment, and criminal prosecution.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Parent/Guardian Sponsor**

I have read the district's Acceptable Use Policy and Regulation of Use by Students. In consideration for the privilege of using the district's system/network, and in consideration for having access to the public networks, I hereby release the district, its operators, and institutions with which they are affiliated from any and all claims and damages of any nature arising from my child's use of, or inability to use, the system/network, including, without limitation, the type of damage identified in the district's policy and administrative procedures.

Please place your INITIALS in the space provided to the left of the statement(s) of your choice:

\_\_\_\_ I give my permission for my child to participate in the Andover Public School's system/network.

\_\_\_\_ I do not give permission for my child to participate in the Andover Public School's system/network.

\_\_\_\_ I give permission for my child's name to appear on the student, school, and/or district web page should one be developed.

\_\_\_\_ I give permission for my child's photo to appear on the student, school, and/or district web page should one be developed.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

Print parent/guardian name

SOURCE: Andover

**ANDOVER PUBLIC SCHOOLS GOOGLE APPS FOR EDUCATION***PLEASE FILL OUT ONLY IF YOUR CHILD(REN) ARE IN GRADES 3-12*

Dear Parents/Guardians,

Andover Public Schools will be utilizing Google Apps for Education for students in **Grades 3 -12**, teachers, and staff within district. This permission form describes the tools and student responsibilities for using these services. As with any educational endeavor, a strong partnership with families is essential to a successful experience.

**The following services are available to each student and hosted by Google as part of Andover Public Schools online presence in Google Apps for Education:**

- **Drive** - word processing, spreadsheet, drawing, and presentation tools; 30 GB of cloud-based storage
- **Calendar** - a student calendar providing the ability to organize schedules, daily activities, and assignments
- **Sites** - an academic and collaborative website creation tool
- **Search** - a great source of instant knowledge, providing answers about real-world places, people and things
- **Mail** - an academic email account for school use managed by the Andover Public Schools
- **Contacts**--a way to store and organize teacher and student information
- **Groups** - a way to send messages to groups of teachers and students

Using these tools, students collaboratively create, edit and share files as well as websites for school related projects and communicate via email with other students and teachers. These services are entirely online and available 24/7 from any Internet connected device. Examples of student use include showcasing class projects, building an electronic portfolio of school learning experiences, and working in small groups on presentations to share with others.

***Technology use in Andover Public Schools is governed by federal laws including:***

**Children's Online Privacy Protection Act (COPPA)**

COPPA applies to commercial companies and limits their ability to collect personal information from children under 13. By default, advertising is turned off for Andover School District's presence in Google Apps for Education. No personal student information is collected for commercial purposes. This permission form allows the school to act as an agent for parents in the collection of information within the school context. The school's use of student information is solely for education purposes.

-COPPA – <http://www.ftc.gov/privacy/coppafaqs.shtm>

## **Family Educational Rights and Privacy Act (FERPA)**

FERPA protects the privacy of student education records and gives parents the rights to review student records. Under FERPA, schools may disclose directory information but parents may request the school not disclose this information. Parents are provided the opportunity annually to opt out of disclosing their student's directory information on the District's Enrollment Form.

-FERPA – <http://www.ed.gov/policy/gen/guid/fpco/ferp>

### **Guidelines for the responsible use of Google Apps for Education by students:**

- 1. Official Email Address** - All students will be assigned a [username@k12.andoverma.us](mailto:username@k12.andoverma.us) email account. This account will be considered the student's official APS email address until such time as the student is no longer enrolled with Andover Public Schools.
- 2. Prohibited Conduct** - Please refer to the Andover Public Schools Student Handbook. Access to and use of student email is considered a privilege accorded at the discretion of the Andover Public School District. Additional personal accounts may not be created with the student's email. Andover Public Schools maintains the right to immediately withdraw the access and use of these services including email when there is reason to believe that violations of law or policies have occurred. In such cases, the alleged violation will be referred to a building Administrator for further investigation and adjudication.
- 3. Access Restriction** - Access to and use of student email is considered a privilege granted at the discretion of the Andover Public Schools. The District maintains the right to immediately withdraw the access and use of these services including email when there is reason to believe that violations of law or District policies have occurred. In such cases, the alleged violation will be referred to a building Administrator for further investigation and adjudication.
- 4. Security** - Andover Public Schools cannot and does not guarantee the security of electronic files located on Google Systems. Although Google does have a powerful content filter in place for email, the school system cannot assure that users will not be exposed to unsolicited information.
- 5. Privacy** - The general right of privacy will be granted to the fullest extent possible in the electronic environment. Andover Public Schools and all electronic users should treat electronically stored information in individuals' files as confidential and private. However, users of student email are strictly prohibited from accessing files and information other than their own. The school system reserves the right to access the student's Google Apps for Education Account including current and archival files when there is reasonable suspicion that unacceptable use has occurred.

**Andover Public Schools Google Apps for Education Parent Permission Form: 2015 - 2016**

**Please review the above information; complete and return this portion to school.**

By signing below, I confirm that I have read and understand the following:

I understand that by participating in Google Apps for Education, my child's first name, last name, and username information will be collected and stored electronically in Andover Public Schools' Google Apps for Education domain. I have read the privacy policies associated with use of Google Apps for Education (<http://www.google.com/a/help/intl/en/edu/privacy.html>). I understand that I may ask for my child's account to be removed at any time.

\_\_\_\_\_ **YES**, I give permission for my child to be assigned an Andover Public Schools Google Apps for Education account. This means my child will receive an email account and access to Google Drive, Search, Groups, Calendar, and Sites.

\_\_\_\_\_ **NO**, I do not give permission for my child to be assigned an Andover Public Schools Google Apps for Education account. This means my child will NOT receive an email account or access to Google Drive, Search, Groups, Calendar, and Sites. This also means my child will receive alternate assignments in lieu of digital assignments.

Student Name: (Print): \_\_\_\_\_

Grade: \_\_\_\_\_ School \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Student  
Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**ANDOVER PUBLIC SCHOOLS [www.aps1.net](http://www.aps1.net)****STATEMENTS OF PARENTAL CONSENT****HIGH SCHOOL STUDENTS**

To be completed by the student's custodial parent/guardian  
Please answer the following questions by circling **YES** or **NO**

**Note:** Information regarding Non-Custodial Parent access to student records may be obtained in the School Office.

- |   |            |           |
|---|------------|-----------|
| 1. Do you give consent for your child's name and demographic information to be included in the School Directory? (address, phone and email)   | <b>YES</b> | <b>NO</b> |
| 2. Do you give consent for photographs, videotaping and interviews of your Child to be used in school/classroom projects and publications?  | <b>YES</b> | <b>NO</b> |
| 3. Do you give consent for photographs, videotaping and interviews of your child to be used on the APS website and outside media related to school activities (i.e., newspapers, television, cable, etc.) | <b>YES</b> | <b>NO</b> |

**Note:** Pursuant to the "No Child Left Behind Act of 2011" schools receiving federal funds are required to provide names, address and telephone numbers of secondary school students upon a request made by military recruiters or an institution of higher education, unless requested not to do so by a parent/guardian.

- |  |            |           |
|--|------------|-----------|
| 4. Do you consent for your child's name, address, and home number to be released to military recruiters? | <b>YES</b> | <b>NO</b> |
| 5. Do you give consent for your child's name to be provided to institutions of higher education?         | <b>YES</b> | <b>NO</b> |

**Previous School History:**

- |  |            |           |
|--|------------|-----------|
| 6. Has your child ever been suspended from school for more than five (5) days?                 | <b>YES</b> | <b>NO</b> |
| 7. Has your child ever been expelled from school?  | <b>YES</b> | <b>NO</b> |
| 8. Has your child ever had an Individual Education Plan (IEP)?                                 | <b>YES</b> | <b>NO</b> |
| 9. Does your child have an Individual Education Plan (IEP)?                                    | <b>YES</b> | <b>NO</b> |
| 10. Has your child ever had a 504 Plan   | <b>YES</b> | <b>NO</b> |
| 11. Does your child have a 504 Plan  | <b>YES</b> | <b>NO</b> |
| 12. Has your child ever been suspended for a felony under Mass General Laws Chapter 70, 37H ½? | <b>YES</b> | <b>NO</b> |

\_\_\_\_\_  
Signature of Custodial Parent/Guardian

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Date



**ANDOVER PUBLIC SCHOOLS [www.aps1.net](http://www.aps1.net)****Andover High School****Request for Student Records**

Please send all academic records for the below named student including an

- Official transcript with earned credits,
- Key to grading system
- Health records
- Results of all standardized tests (SAT, ACT, MCAS, PARCC, etc)
- IEP/Psychological Evaluations
- 504 Plans
- Discipline Records
- Attendance records.

We would appreciate it if you would send the following information to Andover High School as soon as possible. Thank you for your attention to this matter.

Student's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grades or years in attendance \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature or Student's Signature (if over 18)

Parent/Guardian of the above named student has been informed that we are taking this action.  
\_\_\_\_ (Parent/Guardian initials)

Per Federal Law 99.21 "no parent signature is required for release of school records to other educational institutions."

**School Transferring Form**

School Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

School Official Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

**Enrolling School**

Andover High School

80 Shawsheen Road

Andover, MA 01810

Christine Gould, Registrar

[cgould@aps1.net](mailto:cgould@aps1.net)

Phone: 978/623.8608; Fax: 978/623.8663



# TOWN OF ANDOVER

36 Bartlet Street  
Andover, MA 01810  
978-623-8530  
[www.andoverma.gov](http://www.andoverma.gov)  
[www.aps1.net](http://www.aps1.net)

## **CRIMINAL OFFENDER RECORD INFORMATION (CORI) ACKNOWLEDGMENT FORM MUST BE COMPLETED ANNUALLY**

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES

**Town of Andover/Andover Public Schools** is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the Department of Criminal Justice Information Services (DCJIS). I hereby acknowledge and provide permission to Town of Andover/Andover Public Schools to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing Town of Andover/Andover Public Schools with written notice of my intent to withdraw consent to a CORI check.

**FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:** The Town of Andover/Andover Public Schools may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that Town of Andover/Andover Public Schools must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
POSITION

\_\_\_\_\_  
DEPARTMENT/SCHOOL

Your identity and signature must be verified by examining a government-issued identification **in person**, sending in a photocopy of an ID is no longer acceptable.

**\*All CORI forms must be returned to Human Resources or one of the Schools, in person, along with your ID\***

If you are unable to deliver the CORI in person, you may submit a completed CORI form acknowledged by the subject before a notary public.



# TOWN OF ANDOVER

36 Bartlet Street  
Andover, MA 01810  
978-623-8530  
[www.andoverma.gov](http://www.andoverma.gov)  
[www.aps1.net](http://www.aps1.net)

## SUBJECT INFORMATION:

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Name                                      Suffix

\_\_\_\_\_  
Maiden Name (or other name(s) by which you have been known)

\_\_\_\_\_  
Date of Birth                                      Place of Birth

Last Six Digits of Your Social Security Number: \_\_\_\_\_ - \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ft. \_\_\_\_\_in.                      Eye Color: \_\_\_\_\_                      Race: \_\_\_\_\_

Driver's License or ID Number: \_\_\_\_\_                      State of Issue: \_\_\_\_\_

\_\_\_\_\_  
Mother's Full Maiden Name                      Father's Full Name

## Current and Former Addresses:

\_\_\_\_\_  
Street Number & Name                      City/Town                      State                      Zip

\_\_\_\_\_  
Street Number & Name                      City/Town                      State                      Zip

\_\_\_\_\_  
The above information was verified by reviewing the following form(s) of government issued identification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## VERIFIED BY:

\_\_\_\_\_  
Name of Verifying Employee (Please Print)

\_\_\_\_\_  
Signature of Verifying Employee