



CANTON HARBOR HIGH SCHOOL  
1731 Grace Ave. NE  
Canton, OH 44705  
P-330-452-8414 F-330-452-8452  
www.cantonharbor.org

**OFFICE USE ONLY**

Start Date: \_\_\_\_\_  
Grade: \_\_\_\_\_  
Res. Dist: \_\_\_\_\_  
Econ. Disadv. \_\_\_\_\_  
IEP-Yes or No \_\_\_\_\_  
SSID: \_\_\_\_\_

**APPLICATION FOR ENROLLMENT**

**STUDENT INFORMATION**

Date \_\_\_\_\_

Name of Student \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_ Apt. # \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent/Guardian Phone # \_\_\_\_\_ Student Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Social Security # (optional) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth Date \_\_\_\_\_ Gender: ☐ Male ☐ Female

Native Language: \_\_\_\_\_ U.S. Citizen? ☐ No ☐ Yes If no, list nationality \_\_\_\_\_

Race / Ethnicity: 1. Are you Hispanic or Latino? ☐ Yes ☐ No

2. Check all that apply: ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African-American  
☐ Native Hawaiian or Other Pacific Islander ☐ White

Birth Place \_\_\_\_\_  
City State Country

Does the student presently work? ☐ Yes ☐ No If yes, where \_\_\_\_\_ Hours/week? \_\_\_\_\_

**STUDENT'S FAMILY DATA**

**PLEASE CHECK ALL THAT APPLY IN THE FOLLOWING CATEGORIES:**

**WHO HAS LEGAL CUSTODY OF THE STUDENT?**

☐ Both Parents  
☐ Mother and Stepfather\*  
☐ Foster Care  
☐ Ward of the State  
☐ Independent (Self-supporting)

☐ One Parent (Mother or Father)  
☐ Father and Stepmother\*  
☐ Guardian  
☐ Other: \_\_\_\_\_

**Marital Status of the student's parents?**  
☐ Married  
☐ Separated  
☐ Divorced  
☐ Never Married

**\*Only choose Mother/Stepfather or Father/Stepmother if BOTH the parent and step parent have legal custody of the student and documentation can be provided.**

Type of custody?  
☐ Full Custody  
☐ Shared/Joint Custody

Do you have a court order restricting the non-custodial parent(s)? ☐ Yes ☐ No ☐ N/A  
Do you have complete custody papers? ☐ Yes ☐ No ☐ N/A  
**\*\*\*\*\*A complete set of custody and/or guardianship papers must be on file with the school office.**

Legal Mother/Guardian Name: \_\_\_\_\_  
Last First Maiden

Legal Father/Guardian Name: \_\_\_\_\_  
Last First

Is the student a registered voter? ☐ Yes ☐ No

Does the student have any children? ☐ Yes ☐ No If Yes, how many? \_\_\_\_\_ Will the student need a daycare for their child? ☐ Yes ☐ No

Is the student presently reporting to a probation officer? ☐ Yes ☐ No **\*Please note: responding yes will NOT exclude the student from admission**

\* If yes, will the student need an enrollment letter from the school for his/her probation officer? ☐ Yes ☐ No

Probation Officer/Social Worker's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Does the student have a current or active Individual Education Plan (I.E.P.)? ☐ Yes ☐ No  
**\*\* If yes, please provide a copy of the student's I.E.P. and Evaluation**

Did the student ever have an I.E.P.? ☐ Yes ☐ No If yes, what school year? \_\_\_\_\_

## STUDENT'S PREVIOUS EDUCATION

School District of Residence: \_\_\_\_\_ Previous School's Phone #: \_\_\_\_\_

Name of Last School Attended: \_\_\_\_\_ Withdraw date from previous school: \_\_\_\_\_

Previous School's Address: \_\_\_\_\_ How long did student attend previous school district \_\_\_\_\_

What year did the student start 9<sup>th</sup> Grade: \_\_\_\_\_ Last Grade attended at previous school: \_\_\_\_\_

Has the student officially withdrawn from previous school? ☐ Yes ☐ No Has the student dropped out? ☐ Yes – Officially ☐ Yes – Unofficially ☐ No  
If the student is under the age of 18 and has officially withdrawn from school, please attach a copy of his/her Age and Schooling Certificate.

Please list any additional information that would be helpful to the school: \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

The following information should be completed referring to parent(s), guardian(s), grandparent(s) with whom the student resides:

Parent/Guardian: _____ Last First	Parent/Guardian: _____ Last First
Occupation: _____	Occupation: _____
Place of Employment: _____	Place of Employment: _____
Work or Cell Phone #: _____ Include area code	Work or Cell Phone #: _____ Include area code

## PARENT/STUDENT CONTRACT

I/We have read and understand all of the information contained in the Parent/Student Handbook. By signing below, I/we agree to abide by and support the Canton Harbor High School's rules and regulations, including the Code of Conduct and all other policies, as outlined in the Parent/Student Handbook. Although the Parent/Student Handbook reflects the current policies of Canton Harbor High School, it may be necessary to make changes from time to time to best serve the needs of Canton Harbor High School and its students.

STUDENT SIGNATURE \_\_\_\_\_  
Signature Date

I hereby state that the information provided on this document is true and current. I am the legal guardian or custodian of this student.

PARENT/GUARDIAN SIGNATURE (if student is under 18 years old) \_\_\_\_\_  
Signature Date

### For Office Use Only

<input type="checkbox"/> Provided proof of immunization (4-DPT; 3-Polio; 2-MMR after 1 <sup>st</sup> birthday & during 7 <sup>th</sup> grade; Hepatitis B beginning KDG2000) <i>Note: Immunization requirements must be met or student will be excluded from school on the 15<sup>th</sup> day.</i>	
<input type="checkbox"/> Provided Birth Certificate.	<input type="checkbox"/> Parent signed off: Request for Records, Title 1 Compact, CBI and FES Release
<input type="checkbox"/> Provided Proof of Residency.	<input type="checkbox"/> Emergency Medical Authorization
<input type="checkbox"/> Free and Reduced Lunch and/or Income Verification	
*****	
1. <input type="checkbox"/> The student <b>MAY BE ENROLLED</b> , meets requirements of residency, guardianship, immunizations and age (birth certificate)	
2. <input type="checkbox"/> The student <b>MAY BE ENROLLED</b> , but must provide proof of residency within 90 days and/or provide proof of guardianship within 60 days (circle one or both) or the student may be dropped from our rolls. Deadline Date: _____	
3. <input type="checkbox"/> The student <b>MAY BE ENROLLED</b> , but must provide proof of immunization/birth certificate (circle one or both) within 14 days; the student must not attend school and may be dropped from our rolls (105 hour rule). Deadline Date: _____	
4. <input type="checkbox"/> The student <b>MAY NOT BE ENROLLED</b> , does not meet all requirements, and must do the following prior to admittance:	
<input type="checkbox"/> Provide birth certificate	<input type="checkbox"/> Provide proof of custody/guardianship
<input type="checkbox"/> Provide proof of residency	<input type="checkbox"/> Follow-up call back, within 72 hours. Deadline Date _____
ENROLLMENT OFFICIAL (Please Print First and Last Name): _____	

Canton Harbor High School admits students of any race, creed, color, handicapping condition, or sex. Furthermore, there will be no discrimination in the admission of students to the School on the basis of race, creed, color, handicapping condition, or sex. Admission preference is: returning students first, then siblings of students, and lastly, open admission.

**Student Information: Please print the name of the student for whom the form is being completed.**

Check if child is:            Foster Child            Ward of Court

Total Number of people living in the household: [ \_\_\_\_\_ ]

Total Household Income: [ \_\_\_\_\_ ]

**Do you or any of your household members receive any assistance from?**

Yes No

ODJFS/SOWF

OWC Cash

## Publicly-funded child care

WIC

## Food Stamps

## Medicaid

Free/Reduced Lunch

**Signature:**

Parent/Legal Guardian

(Student if over 18)

Date:



## **CANTON HARBOR HIGH SCHOOL STUDENT INCOME FORM**

**Why should you complete the student income form if you do not eat school meals?**

The amount of federal funds your school building receives is dependent on the return of this completed form. These funds pay for additional educational services for students who are failing or at risk of failing to meet the same high standards as everyone else in the school.

These federal funds for additional educational services are known as Title I. Our district provides additional tutoring in reading and mathematics. The Title I law requires that funds be given to schools based on the number of children from low-income families.

While the amount of money each school received depends on the number of children from low-income families, the tutoring services are based on the academic need of the students regardless of income level.

**What happens if you fill out this form?**

- You may be eligible for job placement services through funding from Stark County Department of Job & Family Services
- Your name will not be given out.
- Your school building may be able to get more money.
- That money may be used to hire teachers and buy materials.
- You may get extra help with reading and mathematics

**So, please fill out the form on the back and return it to the school.**

# Home Language Survey

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

School District: \_\_\_\_\_

Name of Student: \_\_\_\_\_  
Family Name First Name Middle Initial

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month Day Year City State Country

Name of Parent/Guardian: \_\_\_\_\_  
Family Name First Name

Home Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## For Parents/Guardians:

Please answer the following questions.

1. What language did your child speak when they first learned to talk?

\_\_\_\_\_

2. What language does your child use most frequently at home?

\_\_\_\_\_

3. What language do you use most frequently to your child?

\_\_\_\_\_

4. What language do the adults at home most often speak?

\_\_\_\_\_

5. How long has your child attended school in the United States?

\_\_\_\_\_

## For School District Personnel:

If the answer to any of the first four questions above is a language other than English, indicate the student's native/home language in EMIS Student Data Element (GI270), and proceed to assess the student's English language proficiency.





Canton Harbor High School  
1731 Grace Ave NE  
Canton, Ohio 44705

# Emergency Medical Authorization 2024-2025

Section 3313.712, Ohio Revised Code

School Name:	Canton Harbor High School
Student Name:	
Address:	
Home Phone:	
Purpose:	<b>To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under school authority, when parents or guardians cannot be reached.</b>

Residential Parent or Guardian:	Mother:	Daytime Phone:
		Cell Phone:
	Father:	Daytime Phone:
		Cell Phone:

Name of Relative, friend, or childcare provider if unable to reach parent:	Name:	Relationship to Student:
		Cell Phone:
	Address:	Daytime Phone:

**\*\*PART I OR II MUST BE COMPLETED\*\***

## Part I

PART I – TO GRANT CONSENT I hereby give consent for the following medical care providers and local hospital to be called:

Doctor:	Phone:
Dentist:	Phone:
Medical Specialist:	Phone:
Local Hospital:	Emergency Room Phone:

In the event, reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by above-named doctor, or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery. Facts concerning the child's medical history including allergies, medications being taken, and any physical impairments to which a physician should be alerted:

**See Reverse**



Medication, Conditions, Allergies, Physical Impairments:


Signature of Parent/ Guardian \_\_\_\_\_ Date \_\_\_\_\_

## Part II

**PART II – REFUSAL TO CONSENT I DO NOT** give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action:

Signature of Parent/ Guardian \_\_\_\_\_ Date \_\_\_\_\_

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

Revised 10/19/2016



Received Date: \_\_\_\_\_ Mailed Date: \_\_\_\_\_



## CANTON HARBOR HIGH SCHOOL CONSENT FOR RECORD RELEASE

I, the parent/legal guardian/student of legal age, authorize to release the school records of:

Name of Student: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Present Grade: \_\_\_\_\_

Phone #: \_\_\_\_\_ SSN: \_\_\_\_\_

Previous School Name: \_\_\_\_\_

You are authorized to release the records listed below to:

Canton Harbor High School  
Attn: Shellie Jones  
1731 Grace Ave. NE  
Canton, OH 44705  
PH: 330-452-8414 FAX: 330-452-8452  
jones.shellie@cantonharbor.org

Reason for Request: Student has applied for Enrollment.

Specific records/data to be released:

- ☒ Transcript, with seal
- ☒ All Standardized testing results, including ACT/SAT
- ☒ IEP/ETR if applicable
- ☒ Immunization Records
- ☒ SSID
- ☒ Birth Certificate
- ☒ Social Security Card
- ☒ Photo ID

With the understanding that the district cannot assume responsibility for the confidentiality of educational information disclosed, I authorize you to release educational information regarding the above named student in the manner indicated.

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

Check One: \_\_\_\_\_ Parent  
                  \_\_\_\_\_ Legal Guardian  
                  \_\_\_\_\_ Student of Legal Age



**Canton Harbor High School**  
**Student-Parent Contract**  
**2024-2025**

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

Parent/Guardian Name \_\_\_\_\_  
(If student is under 18 years of age)

I/We have read and understand all of the information contained in the Parent/Student Handbook. I/We agree to abide by and support the School's rules and regulations, including the Code of Conduct and all other policies, as outlined in the Parent/Student Handbook.

Although this Student Handbook reflects the current policies of Canton Harbor High School, it may be necessary to make changes from time to time to best serve the needs of the School and its students.

I/We understand that by signing this Student-Parent Contract that I/we can review the Student-Parent Handbook on the School's website and/or by using the QR code below.

Agreed to by:

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

\_\_\_\_\_  
Parent/Guardian Signature Date  
(If student is under 18 years of age)

This agreement will be placed into the student's file.

**Not receiving this signed agreement will be cause for student dismissal.**

**Canton Harbor High School**  
**1731 Grace Ave. NE**  
**Canton, Ohio 44705**  
**(330) 452-8414 Phone**  
**(330) 452-8452 Fax**





# **Canton Harbor High School.**

## **BLANKET CONSENT/CONFIDENTIALITY DISCLAIMER FORM**

I hereby authorize Canton Harbor High School (CHHS) permission to use my name and /or photo, in publicity or promotional or other uses connected with the program that CHHS administers. The permission is given for a period of 6 (six) years from the date of signature.

## **NO USE CONTRACT**

I do hereby voluntarily agree not to use alcohol and or drugs while enrolled in the Canton Harbor High School. I understand that should I violate this agreement, I may be terminated from the program or given the option of being referred to counseling for assessment and treatment. To ensure that I am drug/alcohol free; I give my permission for CHHS to administer random drug and alcohol tests.

## **CONCEALED WEAPONS POLICY**

It is the policy of Canton Harbor High School to prohibit weapons of any kind, concealed or not concealed, on its premises, or in vehicles on it premises. Weapons include firearms, pellet guns, knives and any other device the purpose of which is to inflict bodily injury on another person.

Violation of this policy will result in disciplinary action, which will include dismissal criminal charges filed with local law enforcement.

I have read and understand the blanket consent/confidentiality form, No Use Contract and Concealed Weapons policy. I agree to the terms provided within those policies.

---

Student Signature

---

Date

**CONFIDENTIAL CLIENT INFORMATION** - ANY UNAUTHOURIZED DISCLOSURE IS A FEDERAL OFFENCE (TITLE 42 CRF PART 2) "This information as been disclosed to you from records whose confidentiality is protected by federal law federal regulations (42 CFR Part 2) prohibit you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations. A general authorization for the release of medical or other information is not sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient."



## **Use of Personal/Mobile Electronic Devices**

Personal mobile electronic devices have become a common means of communication and information access in today's society. However, these devices have the potential of disrupting the orderly operation of the district's school. The district has created this policy to govern the possession and use of personal electronic devices on school premises. For the purposes of this policy "Personal Mobile Electronic Device" (PMEDs) means a privately owned device that is used for audio, video, or text communication or any other type of computer-like instrument.

**Personal Electronic Devices (PMEDs) may include but are not limited to:**

- Existing and emerging mobile communication systems and smart technologies (cellular phones, iPhones, Smartphones, Apple watches, etc.)
- Camera/Video Recording Devices are PMEDs and include, but are not limited to, digital cameras, cellular phones with cameras, camcorders, and other imaging devices.
- Personal Digital Assistants (PDA) (Palm organizers, pocket PCs, etc.)
- Handheld entertainment systems (video games, CD players, compact DVD players, MP3 players, iPods, earphones, etc.)
- Portable internet devices (mobile messengers, etc.)
- Current or emerging wireless handheld technologies or portable information technology systems that can be used for word processing, wireless internet access, image capture/recording, sound recording, and information transmitting/receiving/storing, etc. No personal headphones or earbuds.

**A. Policy Defined at Canton Harbor High School:**

Students may possess PMEDs on their person but they must be **stored and locked away in Yondr pouches** which will be provided to students at the beginning of each school day. Students will not have access to their PMEDs at any point during the school day as defined by the head administrator. The main office reserves the right to collect PMEDs upon misuse of this policy. Parents will be informed of these practices. Parents are to call the main office (330-452-8414) to reach students for any reason rather than attempting to contact the student directly on their PEDs. Charging devices at school is prohibited. Large PMEDs that will not fit inside a Yondr pouch are strictly prohibited. Large PMEDs include but are not limited to: tablets, portable laptops, headphones, etc.

In addition to the disciplinary actions described below, a student who violates this policy may have his or her personal electronic device confiscated by a building administrator immediately. The building administrator will hold the PMED until the commencement of that school day.

Any violation of this policy will be referred to the District Administration and violations may subject students to disciplinary action, as set forth in the Code of Conduct as Level I within the tiered disciplinary matrix. Additionally, Camera/Video Recording Devices may not be used to:

- Harass, intimidate or bully another person
- Invade the privacy of another
- Publish, broadcast, transmit to any other person, by any means unauthorized or derogatory photos or video clips to another person.

While confiscated, the School may further inspect the PMED if it reasonably believes the student has violated other policies. If applicable, violations of this policy may be referred to law enforcement.

### **B. Liability for Electronic Devices:**

Students who bring cell phones or other electronic devices to school are solely responsible for the safety and security of those devices.

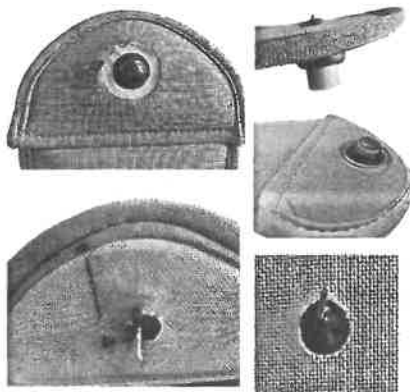
The district is not responsible for lost, stolen, damaged or unauthorized use of personal electronic devices. Further, the district is not liable to any student or his or her parent/guardian for any claims, losses, damages, suits, expenses or costs of any kind arising out of or related to the use or possession of a student's personal electronic device.

### **C. Damaged/Lost Pouch and Replacement Fees:**

The Yondr pouches are to be considered property of Canton Harbor High School, and as such, if a student causes any intentional, permanent damage to a Yondr pouch, or steals a pouch by removing it from Canton Harbor High School property, the student is expected to pay a fee of \$20 in order to replace the damaged Yondr pouch with a new one. Damage to school property will also place students in the second tier of the disciplinary matrix.

Examples of damage:

- Deep scratches on the globe and on the green ring around it
- Intentional pen marks on the inside of the Pouch
- Bent pins
- Pin and button not fully recessing, due to pin damage



### **D. Disciplinary Actions:**

These are the student consequences for violating the electronic devices policy by having their PEDs out of the Yondr pouch at any point throughout the school day:

**Offense #1:** Student will be sent to the main office and ensured that their PEDs are locked away in a Yondr pouch before returning back to class. If a student refuses to put their PEDs in a Yondr pouch, the consequence will be leveled up to a second offense consequence as written below.

**Offense #2:** Student will be sent to the main office and their PEDs will be confiscated by the office staff and placed in a secure locker until the end of the school day when the student will be able to collect their PEDs. If a student refuses to hand over their PEDs



to the office staff, the consequence will be leveled up to a third offense consequence as written below. A call will be made home informing the student's parent/guardian of this practice.

**Offense #3:** Students will be sent to the main office and will be written up, placing them in the first tier of the disciplinary matrix. In addition to the write-up, a call will be made home informing the student's parent/guardian and the student will be sent home for the remainder of the school day.

Following the third offense, the student will work with the office staff to create an intervention plan that will help the student diminish the chance of further violating the electronic devices policy. This plan will vary student-to-student, but could involve various measures including but not limited to: office staff confiscating all PEDs from the student and keeping them locked away in the office until the end of every single school day, etc.

## **DAILY PROCESS**

As students **Arrive to School**, they will:

1. Turn their phone off.
2. Place their phone inside their Pouch and secure it in front of school staff.
3. Store their Pouch on their person for the day.

At the end of the day, students will open their Pouch, remove their phone and put their Pouch in the collection bin..

- \*Students arriving late or leaving early will pouch/unpouch their phones in the Main Office.
- Use and possession is subject to additional rules developed by the School.

### Violating Mobile Electronic Device Policy.

Students that violate the above policy will be subject to disciplinary action and the Student may lose his/her privilege to bring the PMED on school property and/or have his/her device confiscated. If confiscated, the Student shall cooperate in surrendering the PMED, and the device will only be returned to the Student's parent or guardian. While confiscated, the School may further inspect the PMED if it reasonably believes the student has violated other policies.

*Cross Reference:* Policy 4430, Internet & Technology Acceptable Use.

### **Parents/Guardians:**

**Please read and review the expectations regarding electronic devices with your student and return this signature page to the main office of Canton Harbor High School no later than the first day of school on August 20, 2024 or within one week of enrollment date.**

**I have read and discussed the expectations regarding electronic devices with my child. I understand the expectations and agree to encourage my child to follow them consistently.**

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



### **Internet & Technology Acceptable Use**

*Please read carefully before signing. In order to access and use the Technology, the network, and internet, students and staff must read this policy and submit a signed agreement form.*

The School's Governing Authority realizes that the internet and technology can greatly supplement the School's educational mission. With these opportunities come challenges to use technology in a safe and educational manner. This policy has been adopted to ensure students and staff properly use the School's Technology.

All Technology must be used responsibly, ethically, and legally. Users that do not adhere to these rules—and the guidelines elaborating these rules—will have their technology and internet use privileges removed and will be subject to disciplinary action.

This policy extends beyond the School's grounds. This policy also applies when a user's Technology use disrupts or interferes with the School, regardless of where or when the violation takes place. Users may be at home or elsewhere and still be subject to this policy.

The term "Technology" includes, but is not limited to, computers, tablets, mobile electronic devices, printers, routers, other hardware, software, internet, intranet, network, electronic mail, cellular phones, iPOD/MP3/DVD/CD players, video recorders, data devices, video games, beepers, pagers, radios, and all other similar devices.

"Users" is defined to include any student, faculty, or staff member using the School's Technology.

#### **Technology Use Guidelines**

Unacceptable uses include, but are not limited to, the following:

- Violating Ohio and Federal law regarding:
  - students' and employees privacy rights,
  - copyright laws and all licensing agreements,
  - illegal downloading; installing; or accessing internet files; software, shareware; and freeware, and
  - all other applicable laws.
- Engaging in cyber-bullying.
- Using/accessing profane, obscene, pornographic, threatening or otherwise inappropriate language/materials which may be offensive or intended to harass/bully other users.
- Using technology for the following purposes: illegal activity, activity inconsistent with the School's mission, and activity prohibited by the School's policy manual.
- Gaining unauthorized access, "hacking," or attempting to gain unauthorized access.
- Sending or forwarding "spam" to a large group of users.
- Damaging or attempting to damage technology. Damaging includes, but is not limited to, physically damaging hardware, damaging or negatively affecting software, changing the settings without authorization, or disrupting the network.

- Using the School's technology for personal gain or profit.
- Sharing passwords or logging in to any system with credential other than one's own.

Use of Technology should conform to the following:

- Technology use is limited to educational purposes.
- Users shall use technology efficiently and courteously.
- Users shall exercise common sense and good judgment of what is permitted in a school environment.

If a user is unsure if his/her technology use conforms to these guidelines, the user shall ask the instructor before continuing with such use. If the user inadvertently violates the above guidelines, he/she should report it to the instructor immediately.

### **Use of Artificial Intelligence / Natural Language Processing Tools For School Work**

The use of Artificial Intelligence (AI) and Natural Language Processing (NLP) tools (collectively, "AI/NLP tools"), without the permission of an instructor, is strictly prohibited for the completion of school work. If students receive permission from their instructor to use AI/NLP tools in school and for the completion of assignments, such tools shall be used in an ethical manner. Some examples of situations in which instructors have discretion to authorize students to use AI/NLP tools are for research assistance, data analysis, language translation, writing assistance and accessibility.

Accordingly, AI/NLP tools can be effectively used as a supplement to, not a replacement for, traditional learning methods. With prior permission, students can use said resources. If a student has any questions about whether they are permitted to use AI/NLP tools for a specific class assignment, they should ask their instructor.

Unauthorized use of AI/NLP tools is considered a form of plagiarism and any student found using these tools without permission or in a prohibited manner will be disciplined in accordance with the Student Code of Conduct.

### **Supervision and Monitoring**

To ensure this policy is complied with and to ensure Technology works properly, the School will supervise and maintain Technology. Violations of this policy or the law may be uncovered during these processes. Should a user be found in violation, the user will be disciplined according to the Handbook's policy on Student Discipline.

### **Filtering**

The School recognizes that the internet can be both a source of helpful information and inappropriate materials for users. The school, in accordance with federal law, has taken reasonable steps to create an internet environment that is safe and appropriate for students. The School has filtered internet sites that may contain inappropriate information. As technology continues to evolve and the internet grows, however, the School will be unable to properly filter or detect all use and access.

All users and parents should be aware that because a site is not filtered it may still be inappropriate and not conform to this policy.

Disclaimer of Liability & Warranty

The School makes no warranties of any kind, either express or implied, that the Technology will free of errors, will meet any of the user's specific requirements, or will be uninterrupted. The school is not liable for any direct or indirect, incidental, or consequential damages including, but not limited to, damage to the user's technology, lost data, inability to use or access the system, or loss of any information connected with use. Use of any information obtained via the Internet is at the user's own risk.

Signature

By signing below, I affirm that I have read and agree to abide by the Internet and Technology Acceptable Use Policy.

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Federal:* 47 U.S.C. 254.

*Cross Reference:* Policy No. **4440**, Use of Mobile Electronic Devices; Policy No. **5453**, School Equipment – Use and Return.

**Policy No. 4440**



**Canton Harbor High School**  
1731 Grace Ave. NE  
Canton, OH 44705  
PH: 330-452-8414  
FAX: 330-452-8452

## RE: FAILURE TO MEET PERMANENT GRADUATION REQUIREMENTS

**Steven A. Nichols**  
*Administrator/Principal*

**Joseph DiRuzza**  
*Treasurer*

School Board:

**Shelby Santizo**  
**President**  
*ANR Electric*

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**Vice President**  
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*The Timken Company*

**Patrick Barton**  
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*IT Director*  
*City of Canton*

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**Board Member**  
*Certified Nurse Practitioner*  
*Northeast Ohio OBGN,*  
*University Hospital*

**Kari Keefe**  
**Board Member**  
*Dental Hygienist*  
*Keefe General Dentistry*

Students, Parents, Guardians:

I have received a copy of the permanent graduation requirements as determined by the Ohio Department of Education. By not meeting the minimum permanent graduation requirements, I understand that a consequence is the ineligibility to enroll in most state universities in Ohio without further coursework.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date





STUDENT NAME: \_\_\_\_\_

## CONNECTIVITY QUESTIONNAIRE

PLEASE CHECK ONE OF THE BELOW:

- ☐ 700412 **Internet Via Broadband**. The student has internet connectivity primarily through cable, DSL, or some other non-cellular access method for the student to use to complete schoolwork at their primary residence.
- ☐ 700434 **Internet Via Hotspot**. The student has internet connectivity primarily through cellular hotspot or cell phone for the student to use to complete schoolwork at their primary residence.
- ☐ 700445 **No Regular Access to Internet**. The student does not have regular internet connectivity for the student to use to complete schoolwork at their primary residence.





June 20, 2024

Dear Families and Students,

**Canton Harbor will continue implementing a phone-free space to improve teaching and learning** using a system called Yondr. Yondr has been implemented in over 2,000 schools across 16 countries to facilitate an engaged learning environment.

We believe that phones have great utility. We have also found that learning and social behavior improve drastically when students are fully engaged with their teachers and classmates.

**The Yondr Program utilizes a simple, secure pouch that stores a phone.** Every student will secure their phone in a personally assigned Yondr pouch when they arrive at school. Students will maintain possession of their phones and will not use them until their pouches are opened at the end of the school day. Students are responsible for their pouch and any damage that may occur while in student possession.

Yondr recently surveyed over 900 school partners to measure the effects of creating phone-free educational environments. These schools achieved notable progress in multiple areas:

- **65% of schools saw an improvement in academic performance**
- **74% of schools saw an improvement in student behavior**
- **83% of schools saw an improvement in student engagement in the classroom**

If you have any questions, please do not hesitate to contact the school directly at **330-452-8414**, or attend one of our upcoming enrollment orientations on July 16 and July 17, 2024 from 11a-1p to learn more about Yondr.

During the school year, if there is an emergency and you would like to get in contact with your child, please reach out to **Mr. Shawn Kaufman, Dean of Students** at **330-452-8414**.

In an effort to best serve your child, we appreciate your full support in adoption of the Yondr Program at our school.

Thank you,

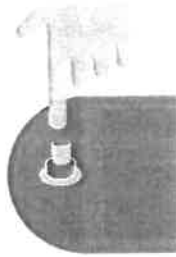
*Steven A. Nichols*

Steven Nichols  
Administrator/Principal

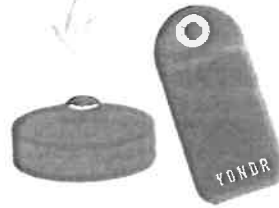
### How Yondr Works



As students enter school, they place their phone in their assigned Yondr Pouch.



Students close and secure their Pouch, keeping it on them throughout the day.



When leaving school, students tap their Pouch on a Base to retrieve their phone.

### Frequently Asked Questions

#### **What if I want to reach my child during the school day?**

We want our students to be engaged in their learning. If you need to contact your child during the school day, contact the main office at **330-452-8414**.

#### **What if there is a school emergency?**

In case of a school emergency, we direct our students to safety first, following our school emergency preparedness protocol.

#### **Will my student's phone be safe?**

Students are in possession of their phone - in their Yondr pouch - for the entire school day. We will advise students to store the pouch on their person where it is completely safe.

#### **What if the Yondr pouch gets damaged or a student is caught on their phone?**

The Yondr pouch is property of Canton Harbor High School. If a student damages their Pouch or is caught on their phone, Administration will collect the phone/Pouch and call home:

- The Parent will come to the school and pick up their child's phone
- AND/OR Consequences may include: In and/or out of -School Suspension
- Damage to a Yondr pouch will also result in a \$20 fee to replace the damaged pouch.

Note: Damage consists of any signs that the physical integrity of the pouch has been compromised, whether intentional or *unintentional*, as determined by the school or Yondr staff.

# Ohio's High School Graduation Requirements

## Classes of 2023 and Beyond

It's Your **Future.** Get **Ready.**

**Before you know it, you'll be receiving your high school diploma. Ohio is giving you new ways to show the world what you can do with it.**

As a student entering ninth grade on or after **July 1, 2019**, Ohio's new high school graduation requirements give you more flexibility to choose a graduation pathway that builds on your strengths and passions – one that ensures you are ready for your next steps and excited about the future.

### First, cover the basics

You must earn a minimum total of 20 credits in specified subjects and take your required tests. Then, decide how you will round out your diploma requirements.

English language arts	4 credits
Health	½ credit
Mathematics	4 credits
Physical education	½ credit
Science	3 credits
Social studies	3 credits
Electives	5 credits

#### Other Requirements

You also must receive instruction in economics and financial literacy and complete at least two semesters of fine arts. Your district may require more than 20 credits to graduate.

### Second, show competency

Earn a passing score on Ohio's high school Algebra I and English II tests. Students who do not pass the test will be offered additional support and must retake the test at least once.

**Is testing not your strength?** After you have taken your tests, there are three additional ways to show competency!

#### Option 1.

##### Demonstrate Two Career-Focused Activities\*:

###### Foundational

Proficient scores on WebXams  
A 12-point industry credential  
A pre-apprenticeship or acceptance into an approved apprenticeship program

###### Supporting

Work-based learning  
Earn the required score on WorkKeys Earn the OhioMeansJobs Readiness Seal

#### Option 2.

##### Enlist in the Military

Show evidence that you have signed a contract to enter a branch of the U.S. armed services upon graduation.

#### Option 3.

##### Complete College Coursework

Earn credit for one college-level math and/or college-level English course through Ohio's free College Credit Plus program.

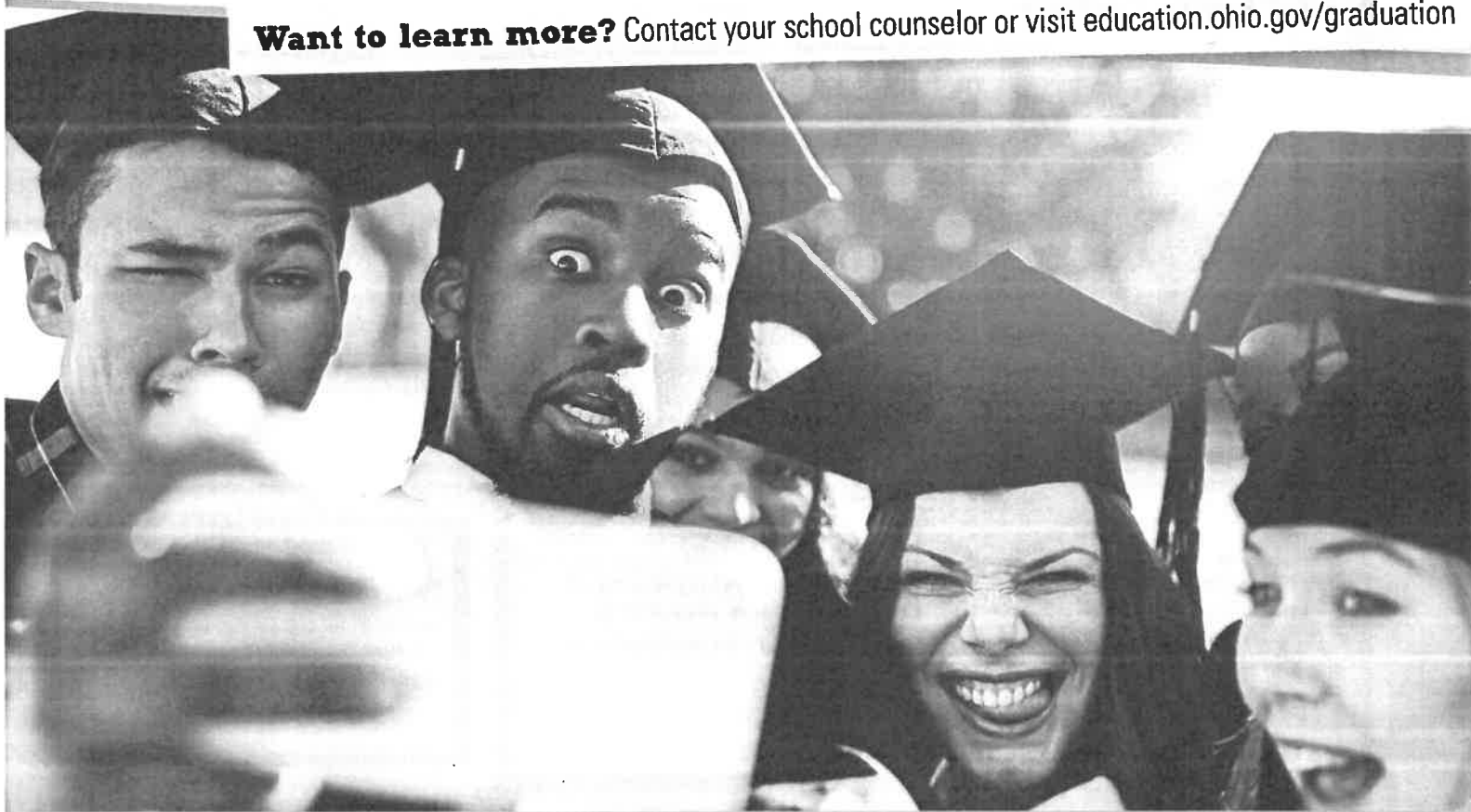
## Third, show readiness

Earn two of the following diploma seals, choosing those that line up with your goals and interests. These seals give you the chance to demonstrate academic, technical and professional skills and knowledge that align to your passions, interests and planned next steps after high school.

**At least one of the two must be Ohio-designed:**

- ☐ OhioMeansJobs Readiness Seal (Ohio)
- ☐ Industry-Recognized Credential Seal (Ohio)
- ☐ College-Ready Seal (Ohio)
- ☐ Military Enlistment Seal (Ohio)
- ☐ Citizenship Seal (Ohio)
- ☐ Science Seal (Ohio)
- ☐ Honors Diploma Seal (Ohio)
- ☐ Seal of Biliteracy (Ohio)
- ☐ Technology Seal (Ohio)
- ☐ Community Service Seal (Local)
- ☐ Fine and Performing Arts Seal (Local)
- ☐ Student Engagement Seal (Local)

**Want to learn more?** Contact your school counselor or visit [education.ohio.gov/graduation](http://education.ohio.gov/graduation)



# Older children and teens need vaccines too!

## 2024 Recommended Immunizations for Children 7–18 Years Old

**Want to learn more?**  
Scan this QR code to find out which vaccines your child might need. Or visit [www.cdc.gov/vaccines/tool/teen.html](http://www.cdc.gov/vaccines/tool/teen.html)



RECOMMENDED VACCINES	7 YEARS	8 YEARS	9 YEARS	10 YEARS	11 YEARS	12 YEARS	13 YEARS	14 YEARS	15 YEARS	16 YEARS	17 YEARS	18 YEARS
HPV												
Tdap <sup>1</sup>												
Meningococcal ACWY												
Meningococcal B												
Influenza/Flu	Every year. Two doses for some children											
COVID-19	At least 1 dose of updated (2023–2024 Formula) COVID-19 vaccine											
RSV	If pregnant during RSV season											
Mpox												
Dengue	ONLY if living in a place where dengue is common AND has laboratory test confirming past dengue infection											

<sup>1</sup> One dose of Tdap is recommended during each pregnancy

### KEY

- ALL children in age group should get the vaccine
- ALL children in age group can get the vaccine
- SOME children in age group should get the vaccine
- Parents/caregivers should talk to their health care provider to decide if this vaccine is right for their child

### Talk to your child's health care provider for more guidance if:

1. Your child has any medical condition that puts them at higher risk for infection or is pregnant.
2. Your child is traveling outside the United States.
3. Your child misses any vaccine recommended for their age or for babies and young children.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

### FOR MORE INFORMATION

Call toll-free: 1-800-CDC-INFO (1-800-232-4636)  
Or visit: [www.cdc.gov/vaccines/parents](http://www.cdc.gov/vaccines/parents)



AMERICAN ACADEMY OF FAMILY PHYSICIANS

American Academy of Pediatrics  
DEDICATED TO THE HEALTH OF ALL CHILDREN™



# What diseases do these vaccines protect against?

VACCINE-PREVENTABLE DISEASE		DISEASE COMPLICATIONS		NUMBER OF VACCINE DOSES	
<b>HPV (Human papillomavirus)</b> Contagious viral infection spread by close skin-to-skin touching, including during sex		Genital warts and many types of cancers later in life, including cancers of the cervix, vagina, penis, anus, and throat		2 or 3 doses	
<b>Tetanus (lockjaw)*</b> Infection caused by bacterial spores found in soil and dust everywhere; spores enter the body through wounds or broken skin		Seizures, broken bones, difficulty breathing, death		1 dose at age 11-12 years Additional doses if missed childhood doses 1 dose for dirty wounds	
<b>Diphtheria*</b> Contagious bacterial infection of the nose, throat, and sometimes lungs; spread through air and direct contact		Swelling of the heart muscle, heart failure, coma, paralysis, death		1 dose at age 11-12 years Additional doses if missed childhood doses	
<b>Pertussis (Whooping Cough)*</b> Contagious bacterial infection of the lungs and airway; spread through air and direct contact		Infection of the lungs (pneumonia), death; especially dangerous for babies		1 dose at age 11-12 years Additional doses if missed childhood doses 1 dose every pregnancy	
<b>Meningococcal**</b> Contagious bacterial infection of the lining of the brain and spinal cord or the bloodstream; spread through air and direct contact		Loss of arm or leg, deafness, seizures, death		2 doses. Additional doses may be needed depending on medical condition or vaccine used.	
<b>Influenza (flu)</b> Contagious viral infection of the nose, throat, and sometimes lungs; spread through air and direct contact		Infection of the lungs (pneumonia), sinus and ear infections, worsening of underlying heart or lung conditions, death		1 dose each year 2 doses in some children aged 6months through 8 years	
<b>COVID-19</b> Contagious viral infection of the nose, throat, or lungs; may feel like a cold or flu. Spread through air and direct contact		Infection of the lungs (pneumonia); blood clots; liver, heart or kidney damage; long COVID; death		1 or more doses of updated 2023-2024 COVID-19 vaccine depending on health status. For more information: <a href="https://www.cdc.gov/covidchedule">www.cdc.gov/covidchedule</a>	
<b>RSV (Respiratory syncytial virus)</b> Contagious viral infection of the nose, throat, and sometimes lungs spread through air and direct contact		Infection of the lungs (pneumonia) and small airways of the lungs; especially dangerous for infants and young children		1 dose at 32 through 36 weeks of pregnancy during September through January in most of the continental United States	
<b>Mpox</b> Contagious viral infection spread through close, often skin-to-skin contact, including sex; causes a painful rash, fever, headache, tiredness, cough, runny nose, sore throat, swollen lymph nodes		Infected sores, brain swelling, infection of the lungs (pneumonia), eye infection, blindness, death		2 doses	
<b>Dengue</b> Viral infection spread by bite from infected mosquito; causes fever, headache, pain behind the eyes, rash, joint pain, body ache, nausea, loss of appetite, feeling tired, abdominal pain		Severe bleeding, seizures, shock, damage to the liver, heart, and lungs, death		3 doses	

\*Tdap protects against tetanus, diphtheria, and pertussis

\*\*Healthy adolescents: Meningococcal ACWY vaccine (2 doses), Meningococcal B vaccine (2 doses if needed).



# Ohio School Report Cards



**Exceeds Standards**  
School Rating

**2022 - 2023 Report Card for**

**Canton Harbor High School**

Schools that receive the dropout prevention and recovery report card receive ratings for up to eight measures and four components.

## Achievement Component

The Achievement component, previously called the High School Test Passage Rate component, represents the number of students who meet applicable criteria on assessments that are required for graduation.



**Meets Standards**  
Rating

## Progress

The Progress component looks closely at the growth all students are making during the school year.



**Meets Standards**  
Rating

## Gap Closing

This component shows how well schools are improving or meeting the performance expectations for all students in English language arts, math, graduation, and English language proficiency.



**Exceeds Standards**  
Rating

## Graduation Rate

The Graduation Rate component looks at the percent of students who are successfully finishing high school with a diploma in four, five, six, seven or eight years.



**Exceeds Standards**  
Rating

### Graduation Rates

A Graduation rate is not calculated if there are not at least 10 students in the graduating class

- 48.5% of students graduated in 4 years
- 53.2% of students graduated in 5 years
- 52.3% of students graduated in 6 years
- 54.3% of students graduated in 7 years
- 58.1% of students graduated in 8 years

53.5% is the weighted average of all graduation rates.



**Exceeds Standards**  
4-Year Rating



**Exceeds Standards**  
5-Year Rating



**Exceeds Standards**  
6-Year Rating



**Exceeds Standards**  
7-Year Rating



**Exceeds Standards**  
8-Year Rating



**Exceeds Standards**  
Combined Rating



# Canton Harbor High School

## 2024 - 2025 School Calendar

August '24						
Su	M	Tu	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September '24						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October '24						
Su	M	Tu	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

November '24						
Su	M	Tu	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

December '24						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

January '25						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

February '25						
Su	M	Tu	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

March '25						
Su	M	Tu	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

April '25						
Su	M	Tu	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

May '25						
Su	M	Tu	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

June '25						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

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

- Teacher In-Service
- Student First/Last Day
- School/Office Closed

- Early Release Fridays (9a-11a)
- Conferences (No School Students)
- Testing (EOC/ACT)

- End of Grading Period

Student Hours: 972

