

Sacred Heart School/Escuela del Sagrado Corazón

1625 Park Rd. N.W. Washington, DC 20010

(202)265-4828 Fax (202)265-0595

Dear Parents,

We are happy to welcome returning and new students and families to Sacred Heart School. In an effort to kick off the new school year in a positive and organized manner, we would like to highlight the following school rules and procedures. We ask that you please take the time to read through the whole document as it does contain very important information.

- **School begins at 7:50 a.m.** Unless your child is enrolled in before care he/she may not be dropped off or arrive at school before 7:30 a.m. If a child arrives before 7:30 a.m. and is not enrolled in before care a fee will be incurred each time.
- Before care begins at 7:00 a.m. no child may be dropped off before that time.
- Any child arriving after 8:15 a.m. is considered late and will need to check in at the office for a tardy pass before going to their classroom.
- **Dismissal for 2013-2014 school year is 3:30 p.m.** Any child picked up before that time is considered an early dismissal and will have to be signed out at the office.
- After care begins at 3:45 p.m. and ends at 6:00 p.m. Any child not picked up by 3:45 p.m. will be transferred to the aftercare program and a fee will be incurred.
- Children will only be released to authorized people listed on the emergency contact form. *For security reasons, parents are not allowed to call or e-mail an authorization for someone not listed on the emergency contact form to pick up their child.* This rule applies to the release of a child to a fellow Sacred Heart parent. If you need to update your form please see Ms. Lobos in the office.
- As a courtesy to all parents and in an effort to continue a smooth car dismissal, we request that parents drive through the parking lot and around the building where your child will be waiting to meet you.
- The school shares the parking lot with the adjacent buildings. Please be mindful of the parking signs and do not block traffic or other vehicles.
- As a prevention and safety measure we are continuing our efforts to be a nut free school. Please supply your child with nut free snacks and lunches. We appreciate your commitment to the safety of every child in our school community.
- All parents are welcome to volunteer for school event and trips. However, in order to do so a volunteer application, Virtus training and background check must be completed. If you are interested please contact Ms.Lobos in the office.

Thank You,

Art Mola  
Principal

Sacred Heart School/Escuela del Sagrado Corazón

1625 Park Rd. N.W. Washington, DC 20010

(202)265-4828 Fax (202)265-0595

Queridos padres de familia,

Nos complace darles la bienvenida a los estudiantes retornantes, como también a los estudiantes nuevos y las familias a la Escuela Sagrado Corazón. En un esfuerzo para dar inicio al nuevo año escolar de una manera positiva y organizada nos gustaría resaltar las siguientes reglas escolares y procedimientos de la escuela. Le pedimos que por favor tome un tiempo para leer este documento, ya que contiene información importante.

- **La escuela comienza a las 7:50 a.m.** a menos que su hijo este inscrito en el programa de cuidado antes de escuela el no podrá llegar o ser dejado en la escuela antes de las 7:30 a.m. Si un niño llega antes de las 7:30 a.m. y no está inscrito en el programa, la escuela le efectuara un cobro.
- Cuidado antes de escuela comienza a las 7:00 a.m. y ningún estudiante podrá ser dejado antes de esa hora.
- Se considera tardanza a cualquier estudiante que llegue después de las 8:15 a.m. Tendrán que registrarse en la oficina y obtener un pase de tardanza antes de ir a su salón.
- **Este año escolar 2013-2014, la salida será a las 3:30 p.m.** Cualquier estudiante que sea recogido antes de esa hora, será considerado despedida temprana y tendrá que ser registrado en la oficina.
- El programa después de escuela empieza a las 3:45 p.m. y termina a las 6:00 p.m. Todos los estudiantes que no sean recogidos a las 3:45 p.m. serán trasladados a este programa y un cobro será efectuado por este servicio.
- Los estudiantes podrán ser recogidos solo por las personas autorizadas en el formulario de contacto en caso de emergencia. ***Por razones de seguridad, no se les permite a los padres llamar o enviar un correo electrónico para autorizar el recojo de su hijo a alguien que no esta registrado en el formulario de contacto de emergencia.*** Esta regla aplica al recojo de algún otro estudiante, compañero de clase de otro estudiante, aun y cuando el padre sea un padre de familia de la Escuela Sagrado Corazón. Si necesita actualizar su formulario, por favor contáctese con la Sra. Lobos en la oficina.
- Como una cortesía a todos los padres y en un esfuerzo por continuar con un buen recojo de su hijo sin problemas, la escuela pide a los padres que manejen alrededor de la escuela donde su hijo estará esperando por usted.
- Como recordatorio, la escuela comparte el estacionamiento con los edificios adyacentes. Por favor, sea consciente de las señales de estacionamiento y no bloquee el tráfico u otros vehículos.
- Como medida de prevención y seguridad continuamos nuestros esfuerzos para ser una escuela sin consumo de maní. Por favor, facilite a su hijo con meriendas y almuerzo libre de maní. Apreciamos su compromiso a la seguridad de todos los niños de nuestra comunidad escolar.
- Todos los padres son bienvenidos a ser voluntarios en los eventos y viajes de la escuela. Sin embargo, para hacerlo, necesita llenar una solicitud de voluntario, recibir una clase de Virtus, obtener una verificación de sus antecedentes. Si usted está interesado, por favor contacte a la Sra. Lobos en la oficina.

Gracias,  
Art Mola, Director



# TECHNOLOGY AND INTERNET USAGE AGREEMENT

ARCHDIOCESE OF WASHINGTON – Catholic Schools

## Student Responsibilities

When using any Technology Equipment, all students:

- Shall use all Technology Equipment, including, but not limited to computers, networking systems, Internet, mobile devices, communication devices, cell phones, email, social networking sites, calculators, DVD players, and cameras (“Technology Equipment”) with care and respect, whether at school, at home, or elsewhere.
- Shall not type, send or otherwise use any inappropriate or offensive words, or display, send, or otherwise use inappropriate or offensive images, sounds or messages from or on Technology Equipment.
- Shall not use Technology Equipment in a manner which violates any local, state or federal laws.
- Shall immediately report to a teacher or supervising staff member any inappropriate material or misuse of Technology Equipment of which the student becomes aware.
- Shall not use Technology Equipment in any way to engage in cyber-bullying behavior.

When using the School’s Technology Equipment, all students:

- Shall not reconfigure any school hardware, software, or network settings.
- Shall print, download, or otherwise transfer only that information approved by the teacher or supervisor.
- Shall obtain the permission of a teacher or supervisor before loading a file or disk onto a school computer.
- Shall not use any school Technology Equipment to create, store, transfer or use software or electronic content in a manner which violates the rights of the holder of copyright in the software or the content; and shall not plagiarize works found on the Internet or elsewhere.
- Shall not load any software onto school computers without first obtaining the teacher’s permission.
- Shall only use the Internet for school-related projects and shall visit only the sites assigned by the teacher.
- Shall not ‘surf’ the Internet or visit ‘Facebook,’ or any other social networking websites while at school.
- Shall not log-on to the Internet without permission from a teacher or supervising staff member.
- Shall not give out, post, or otherwise distribute personal information such as photographs, home addresses, telephone numbers, parents’ work addresses or telephone numbers or the name and location of the school.

All students understand and acknowledge:

- Student use of cell phones and any other electronic mobile devices during school hours is strictly prohibited, except in the case of a medical emergency.
- That any violation of this policy may result in permanent revocation of their technology privileges and other disciplinary action may be taken in the sole discretion of the principal.
- That use of all Technology Equipment may be monitored.
- That the school reserves the right to access a student’s computer files or any other Technology Equipment when required for the maintenance of the school’s technology equipment, in emergencies, in the course of investigation of possible wrongdoing, or at the discretion of the principal.

## Parent/Guardian Acknowledgement

- Parent/guardian shall be responsible for reading and reviewing the terms listed above with their child.
- Parent/guardian shall be responsible for any damages, claims and expenses resulting from their child’s misuse of the school’s Technological Equipment in violation of this agreement.
- Parent/guardian acknowledges that any failure to honor the terms of this agreement may result in disciplinary action determined at the discretion of the Principal, any or all of the student’s technology privileges being revoked, and/or the reporting of such infraction to appropriate authorities.

Parent/Guardian acknowledges that they have read and reviewed the terms of acceptable technology use with the student listed below, and both parent and student understand and agree to abide by those terms.

\_\_\_\_\_  
Student’s Name

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

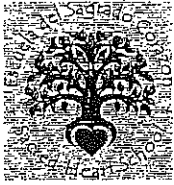
\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



Emergency Information Record		Student Last Name	Student First Name	Birth date
Mother's Full Name	Father's Full Name	Father's Full Name	Home Phone Number	Grade
Home Street Address	City	State	Zip Code	
Mother's Business Phone	Mother's Cell Phone	Father's Business Phone	Father's Cell Phone	
People who live with the child at home	Primary language spoken at home	People who may pick up child	People who may not pick up child	
<i>E-mail:</i>				
In Case of Emergency and Parent is not available contact:				
Name:	Address:	Address:	Phone:	Phone:
Student's Physician	Insurance Name	Insurance Number	Insurance Number	Phone:
Student's Dentist	Insurance Name	Insurance Number	Insurance Number	Phone
Hospital where student should be taken if parent or physician is unavailable				
Allergies and other medical conditions (please explain checked items below)				
<input type="checkbox"/> Allergies <input type="checkbox"/> Asthma <input type="checkbox"/> Diabetes <input type="checkbox"/> Other <input type="checkbox"/> Epilepsy <input type="checkbox"/> Heart Problems <input type="checkbox"/> Recurring illness				
In case of an accident or serious illness, I request the school to contact me. If the school is unable to reach me, I hereby authorize the school to call the physician indicated and to follow his/her instructions. If it is impossible to contact this physician the school may take whatever arrangements seem necessary.				
Parent Signature:				Date

Registro de Emergencia		Apellido del Estudiante	Primer Nombre del Estudiante	Fecha de Nacimiento
Nombre de la Madre		Nombre del Padre	Numero de la Casa	Grado
Dirección de la Casa		Ciudad	Estado	Código Postal
Número de trabajo de la Madre		Numero de Celular de la Madre	Numero de trabajo del Padre	Numero de Celular del Padre
Personas que viven en la casa con el estudiante		Idiomas que hablan en casa	Personas autorizadas a recoger el estudiante	Personas no autorizadas
Correo electrónico:				
En caso de emergencia y si no podemos comunicarnos con usted:				
Nombre:	Dirección:	Numero de Teléfono:		
Nombre:	Dirección:	Numero de Teléfono:		
Nombre del Doctor	Nombre del Seguro	Numero del Seguro	Numero de teléfono	
Nombre del Dentista	Nombre del Seguro	Numero del Seguro	Numero del teléfono	
Hospital donde tenemos que llevar al estudiante si no podemos comunicarnos con el Padre o el Doctor				
Alergias y otras condiciones medicas (por favor indique abajo o explique)				
<input type="checkbox"/> Alergias <input type="checkbox"/> Asma <input type="checkbox"/> Diabetes <input type="checkbox"/> Otro <input type="checkbox"/> Epilepsia <input type="checkbox"/> Problemas del Corazón <input type="checkbox"/> Enfermedades periodicas				
En caso de accidente o de enfermedades serias, Yo requiero que la escuela se comunique conmigo. Si la escuela no me puede contactar, yo autorizo a que la escuela llame al doctor y siga sus indicaciones. Si es imposible de comunicarse con el doctor la escuela puede tomar los arreglos necesarios.				
Firma del Padre:		Fecha:		



## Sacred Heart School

### GENERAL AREA – SHORT FIELD TRIP FORM

I/We, \_\_\_\_\_ Request that my son/daughter, \_\_\_\_\_

Grade \_\_\_\_\_ participate in short walking trips within walking distance of Sacred Heart School.

I/We understand that this request will enable my/our son/daughter to visit the following areas throughout the school year:

- Shrine of the Sacred Heart Church
- Mount Pleasant Library
- Playground next to the Sacred Heart Rectory
- Mount Pleasant/Adams Morgan Area

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Emergency Telephone

Nosotros \_\_\_\_\_ requerimos que mi hijo(a), \_\_\_\_\_

Curso, \_\_\_\_\_ Participe en cortas caminatas en área cercana a la escuela.

Entendemos que esta incluye los siguientes lugares:

- La Iglesia Sagrado Corazón
- Biblioteca de Mt. Pleasant
- Parque cerca de la Rectoría de la Iglesia Sagrado Corazón
- Área de vecindad de Mt. Pleasant/Adams Morgan

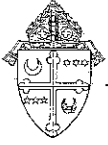
\_\_\_\_\_  
Firma del Padre

\_\_\_\_\_  
Fecha

\_\_\_\_\_  
Teléfono de Emergencia







# Publicity Release Form

ARCHDIOCESE OF WASHINGTON – Catholic Schools

<<Sacred Heart School>> and the Archdiocese of Washington have opportunities throughout the year to promote Catholic education through news stories in radio, TV, print and electronic media.

Permission is hereby granted to <<Sacred Heart School>> and the Archdiocese of Washington

to use the voice/audio recordings, photographs, video and quotations of \_\_\_\_\_

*Print Name of Participant*

to assist in community awareness, educational efforts and related public relations purposes, including media coverage of school events and activities and public relations/advertising that may include brochures, posters, print, radio, internet, TV or any other electronic media.

In exchange for the opportunity to participate in the community awareness programs, educational efforts and related publicity endeavors of <<Sacred Heart School>> and the Archdiocese of Washington, I, hereby, agree to release and hold harmless <<Sacred Heart School>>, the Archdiocese of Washington and their agents, servants and employees from any and all claims, demands, causes of action and/or liability of whatever kind or nature arising out of or connected to the use of said voice/audio recordings, photographs, video and quotations.

I hereby waive any right to compensation, fee or royalty for myself, the participant/student or our successors, heirs or assigns in connection with the production or use of the aforesaid materials.

If Participant is a minor,

Name of  
Participant:

\_\_\_\_\_

*Please Print*

OR

Name of  
Parent/Guardian:

\_\_\_\_\_

*Please Print*

Signature of  
Participant:

\_\_\_\_\_

*Please Sign*

Signature of  
Parent/Guardian:

\_\_\_\_\_

*Please Sign*

Home Address:

\_\_\_\_\_

*Street Address*

\_\_\_\_\_

*Suite #*

\_\_\_\_\_

*City*

\_\_\_\_\_

*State*

\_\_\_\_\_

*ZIP Code*

Dated:

\_\_\_\_\_

*Month/Day/Year*





**Sacred Heart School/Escuela del Sagrado Corazón**

1625 Park Rd. N.W. Washington, DC 20010

(202)265-4828 Fax (202)265-0595

August 17, 2013

Dear Parents,

Our Parent/student handbook for the 2013-2014 school year can be found on our school website: [www.sacredheartschooldc.org](http://www.sacredheartschooldc.org) Please take a moment to visit the site to read the handbook and return the agreement below signed by you and your child no later than Friday, September 13, 2013.

Thank you,

Art Mola, Principal

---

I have read the 2013-2014 Parent/Student Handbook and agree to follow the school policies and procedures as stated.

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

Grade \_\_\_\_\_

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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

*\*Parents and students (Grades 1-8) must both sign.*



**Sacred Heart School/Escuela del Sagrado Corazón**

1625 Park Rd. N.W. Washington, DC 20010

(202)265-4828 Fax (202)265-0595

17 de agosto del 2013

Queridos Padres de familia,

Usted puede encontrar el manual de padres y estudiantes para al año escolar 2013-2014 en nuestra pagina web: [www.sacredheartschooldc.org](http://www.sacredheartschooldc.org) Por favor visite la pagina para leer el manual y devuelva este acuerdo firmado por usted y por su hijo/a al mas tardar el Viernes, 13 de febrero.

Muchas Gracias,

Art Mola, Director

---

He leído el Manual Padres/Estudiante para el año 2013-2014 y estoy de acuerdo en seguir las reglas y procedimientos establecidos.

Nombre del Estudiante \_\_\_\_\_

Grado del Estudiante \_\_\_\_\_

\_\_\_\_\_  
Firma del Estudiante

\_\_\_\_\_  
Nombre completo

\_\_\_\_\_  
Fecha

\_\_\_\_\_  
Firma del Padre de Familia

\_\_\_\_\_  
Nombre completo

\_\_\_\_\_  
Fecha

\*Estudiantes y padres (Grado 1-8) deberán firmar los dos.



# SchoolReach<sup>®</sup>

Instant Parent Contact

Sacred Heart utilizes SchoolReach as a means of communication to all parents. The school sends reminders of important forms needed to be submitted or events and meetings coming up. The system is also used as way to communicate emergency closures or delays to the school. In an effort to make sure that the information is delivered to you we need to confirm the phone number(s) you would like registered. This year we would like for you to choose whether you want to receive all messages or only emergency messages.

Thank you.

---

**\*A form must be submitted for every student**

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

Phone number(s) I would like to have registered:

1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
2. Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Please choose one of the following:

\_\_\_\_\_ I want to receive **ALL** messages sent through the SchoolReach system throughout the school year.

\_\_\_\_\_ I want to **ONLY** receive emergency messages sent through the SchoolReach system throughout the school year.

Parent signature \_\_\_\_\_ Date: \_\_\_\_\_



Sagrado Corazón utiliza SchoolReach como un medio de comunicación a todos los padres. La escuela envía recordatorios de las formas importantes que se necesitan entregar o eventos y reuniones por venir. El sistema también se utiliza como forma de comunicarse cierres de emergencia o retrasos a la escuela. En un esfuerzo por asegurarse de que la información se entregue a usted tenemos que confirmar el número de teléfono (s) que desea registrar. Este año nos gustaría que usted elija si desea recibir todos los mensajes o sólo los mensajes de emergencia.

Gracias.

---

**\*Una formulario debe ser entregado por cada estudiante**

Nombre de estudiante: \_\_\_\_\_ Grado: \_\_\_\_\_

Numero (s) de telefono que le gustaria registrar:

1. Nombre: \_\_\_\_\_ Numero de telefono : \_\_\_\_\_

2. Nombre: \_\_\_\_\_ Numero de telefono: \_\_\_\_\_

Por favor marque una de las siguientes opciones:

\_\_\_\_\_ Quiero recibir **TODOS** los mensajes que la escuela manda durante el año escolar por medio del sistema SchoolReach.

\_\_\_\_\_ **Solamente** quiero recibir mensajes de emergencia durante el año escolar mandado por el sistema de SchoolReach.

Firma del Padre: \_\_\_\_\_ Fecha: \_\_\_\_\_