



LONG MEMORIAL ELEMENTARY SCHOOL

SADDLE BROOK SCHOOL DISTRICT

260 FLORAL LANE
SADDLE BROOK, NEW JERSEY 07663

Telephone 201-796-6250
Fax 201-796-1671

JAYNELLEN BEHRE JENKINS
PRINCIPAL

September 6, 2017

Please check off that you read each of the following forms located on our school webpage. These forms can be found under September forms.

_____ I have reviewed, agree to and understand the 2017-2018 Parent/Student/Teacher Handbook which can be found on the school website.

_____ I have reviewed a copy of the Integrated Pest Management memo.

_____ I have reviewed a copy of the Asbestos Hazardous Emergency Response Act Information (AHERA).

_____ I have reviewed the Free/Reduced lunch meal application.

_____ I have reviewed the Food Service information. (Pomptonian)

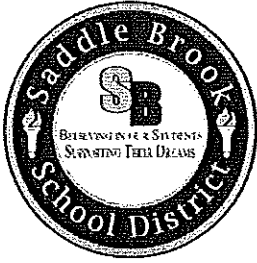
_____ I have reviewed the Student Accident Insurance information from Bollinger Insurance.

Child's Name

Grade

Parent's Signature

Date



SADDLE BROOK SCHOOL DISTRICT

355 MAYHILL STREET
SADDLE BROOK, NEW JERSEY 07663

Telephone 201-843-1142
Fax 201-843-0216

ANTHONY RISCICA
INTERIM SUPERINTENDENT OF SCHOOLS

RAYMOND G. KARATY, CPA, PSA
BUSINESS ADMINISTRATOR/BOARD SECRETARY

September 2017

Annual Integrated Pest Management Notice

Dear Parent, Guardian, or Staff Member:

This notice is being distributed to comply with the New Jersey School Integrated Pest Management Act. **Saddle Brook Board of Education** has adopted an Integrated Pest Management (IPM) Policy and has implemented an IPM Plan to comply with this law. IPM is a holistic, preventive approach to managing pests that is explained further in the schools IPM Policy that can be found on the district Web-site.

All schools in New Jersey are required to have an Integrated Pest Management Coordinator (IPM Coordinator) to oversee all activities related to IPM and pesticide use at the school.

The IPM Coordinator for the Saddle Brook Public Schools is:

Name of IPM Coordinator: Keith Siroky

Business Phone number: 201-843-1142 ext. 2311

Business Address: 355 Mayhill Street, Saddle Brook, NJ 07663

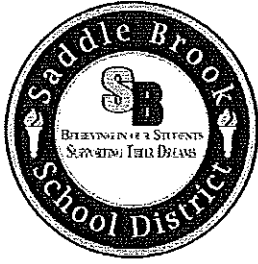
The IPM Coordinator maintains the pesticide product label, and the Material Safety Data Sheet (MSDS) (when one is available), of each pesticide product that may be used on school property. The label and the MSDS are available for review by a parent, guardian, staff member, or student attending the school. Also, the IPM Coordinator is available to parents, guardians, and staff members for information and to discuss comments about IPM activities and pesticide use at the school.

As part of a school pest management plan the Saddle Brook Public Schools may use pesticides to control pests. The United States Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection (DEP) register pesticides to determine that the use of a pesticide in accordance with instructions printed on the label does not pose an unreasonable risk to human health and the environment. Nevertheless, the EPA and the DEP cannot guarantee that registered pesticides do not pose any risk to human health, thus unnecessary exposure to pesticides should be avoided. The EPA has issued the statement that where possible, persons who are potentially sensitive, such as pregnant women, infants and children, should avoid unnecessary pesticide exposure.

Sincerely,

Raymond G. Karaty
Business Administrator/Board Secretary

RGK/ci



SADDLE BROOK SCHOOL DISTRICT

355 MAYHILL STREET
SADDLE BROOK, NEW JERSEY 07663

Telephone 201-843-1142
Fax 201-843-0216

ANTHONY RISCICA
INTERIM SUPERINTENDENT OF SCHOOLS

RAYMOND G. KARATY, CPA, PSA
BUSINESS ADMINISTRATOR/BOARD SECRETARY

September 2017

Annual Asbestos Hazardous Emergency Response Act (AHERA)

Dear Parent, Guardian, or Staff Member:

This memorandum is being provided to you as part of the requirements for the Federal Asbestos Hazardous Emergency Response Act (AHERA) legislation.

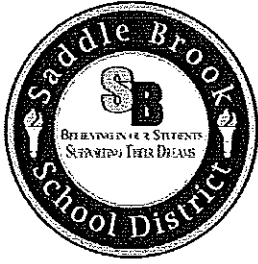
The Saddle Brook School District has conducted six month inspections in all schools and a management plan for asbestos containing materials per AHERA requirements. The inspection reports and plan are available for review at the district central office, 355 Mayhill Street, Saddle Brook, NJ 07663.

Please be assured that the Saddle Brook Board of Education and the Administration take all environmental issues seriously and will continue to take every reasonable effort to provide all of the building occupants with a healthy educational and working environment.

Sincerely,

Raymond G. Karaty
Business Administrator/Board Secretary

RGK/ci



SADDLE BROOK SCHOOL DISTRICT

355 MAYHILL STREET
SADDLE BROOK, NEW JERSEY 07663

Telephone 201-843-1142
Fax 201-843-0216

ANTHONY RISCICA
INTERIM SUPERINTENDENT OF SCHOOLS

RAYMOND G. KARATY, CPA, PSA
BUSINESS ADMINISTRATOR/BOARD SECRETARY

September 2017

FREE/REDUCED PRICED MEAL APPLICATION INFORMATION

Dear Parents/Guardians:

The letter to parent, "Free/Reduced Priced Meal Application", and instructions can be found on the district's website at www.saddlebrookschoools.org under Departments/Food Service.

If your child was approved for the 2016-2017 school year that eligibility will carry over into the 2017-2018 school year for up to thirty (30) food service operating days (October 19, 2017) or until a new eligibility determination is made. **In order to continue eligibility a new application MUST BE SUBMITTED!**

The new eligibility determination supersedes the carry over eligibility.

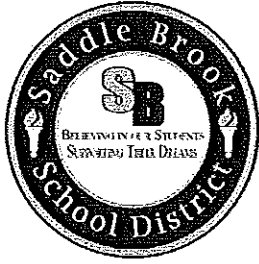
Only one (1) application per household is required to be submitted. Please make sure all of your children are listed. Incomplete applications will be returned.

If you are unable to access the application form from the website or are unable to print, copies will be available in the school office that your child attends.

Sincerely,

Raymond G. Karaty
Business Administrator/Board Secretary

RGK/ci



SADDLE BROOK SCHOOL DISTRICT

355 MAYHILL STREET
SADDLE BROOK, NEW JERSEY 07663

Telephone 201-843-1142
Fax 201-843-0216

ANTHONY RISCICA
INTERIM SUPERINTENDENT OF SCHOOLS

RAYMOND G. KARATY, CPA, PSA
BUSINESS ADMINISTRATOR/BOARD SECRETARY

September 2017

FOOD SERVICE DEPARTMENT

Dear Parents/Guardians:

The Saddle Brook School District contracts with Pomptonian Food Services to offer lunch (all schools) and breakfast (at Franklin School and Middle/High School). You can find important information (menus, policies and free/reduced meal application) on the district's website: www.saddlebrookschoools.org under Departments/Food Service.

The district offers an on-line payment/meal transaction system called "*My School Bucks*". You will find a link to this system on the district's website. Cash payments will not be accepted at the serving lines in the elementary schools.

You can also set up restrictions on your child's account. Please email the food service manager of foodservices@saddlebrookschoools.org and let them know your child's restrictions:

Here are some examples of restrictions that can be added to your child's account:

- Food Allergies
- No snacks can be purchased or only one snack per day
- No second lunch can be purchased
- Only one slice of pizza

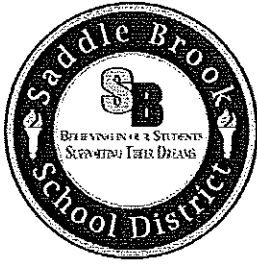
The food service department will work with you so your child has a positive lunch experience.

Sincerely,

Raymond G. Karaty
Business Administrator/Board Secretary

RGK/ci

cc: Anthony Riscica, Interim Superintendent of Schools
Pomptonian Food Services



SADDLE BROOK SCHOOL DISTRICT

355 MAYHILL STREET
SADDLE BROOK, NEW JERSEY 07663

Telephone 201-843-1142
Fax 201-843-0216

ANTHONY RISCICA
INTERIM SUPERINTENDENT OF SCHOOLS

RAYMOND G. KARATY, CPA, PSA
BUSINESS ADMINISTRATOR/BOARD SECRETARY

September 2017

STUDENT ACCIDENT INSURANCE

Dear Parents/Guardians:

The school **DOES NOT** insure your child from any accidents that occur on school property except for athletic programs.

Your own family insurance is **PRIMARY** for any injury your child may incur. If you choose this additional coverage through Bollinger this policy would be **secondary** for any injury your child may incur.

Included is a flyer from Bollinger Specialty Group.

Sincerely,

Raymond G. Karaty
Business Administrator/Board Secretary

RGK/ci
enclosure

cc: Anthony Riscica, Interim Superintendent of Schools
All Principals
All Secretaries
All Nurses



Bollinger Specialty Group

BOLLINGER, INC., A SUBSIDIARY OF
ARTHUR J. GALLAGHER & CO.



K-12 Voluntary Student Accident Insurance

Available Coverage Options

Depending on which program your school provides, some or all of the following voluntary insurance products are available for purchase on a voluntary basis:

- \$500,000 School Time Only Student Accident Insurance
- \$500,000 Round The Clock - 24 Hour Accident Coverage
- \$10,000 Student Life Insurance
- \$5,000 Student Dental Accident Insurance

Kids will be Kids!

1. Make sure your child is properly covered against unforeseen accidents.
2. Purchase coverage at your convenience from any computer.
3. Follow the easy, step by step instructions and you're done in minutes!

These Voluntary Participation Student Accident Insurance Plans offered through your school can be purchased easily online at:

www.BollingerSchools.com



Bollinger Specialty Group

BOLLINGER, INC., A SUBSIDIARY OF
ARTHUR J. GALLAGHER & CO.

© 2011 GBS 07243310

Bollinger Specialty Group
116 S. Jefferson Rd, Bldg 200
Whippany, NJ 07981

1-800-350-8005
1-973-932-2876
www.BollingerSchools.com



Saddle Brook School District

Pre K-6 Student Photo Parent Consent Form

The media provide a valuable link between the schools, home, and community. Throughout the school year photographs and/or videos may be used to highlight our school events and share with the community. These may be submitted to the newspaper as well, or posted on the school/district's website or social media pages. Many times teachers wish to share photos of class events with parents via their classroom webpages. We may also wish to share an award or special activity involving your child on our website and/or social media page. Your permission is needed to celebrate the work that is being completed at our schools.

Your consent for your child to be photographed or recorded while participating in school activities is requested. Please note this consent applies only to those which will be used for publication. Please return the form to your child's teacher by September 15, 2017.

Student's Name: _____ Teacher: _____ Grade: _____

Yes, I grant permission for my child to be photographed and/or recorded while participating in school activities. I understand that these items may appear on the school/district website, the school's social media site, and/or printed material.

No, I do not grant permission for a photograph and/or video of my child to be published on the website, social media, and/or printed materials.

Parent/Guardian Signature

Print Name

Date



Saddle Brook School District

Pre K-6 Student Dismissal Request

School staff members or program administrators are expected to know and supervise the implementation of parents'/guardians' plans for dismissal. It is the responsibility of parents/ guardians to notify the school as to the preferred plan for the dismissal of their children, as well as be familiar with the school calendar and dismissal times.

Please read the choices below in order to let school officials know how your child should be released at dismissal time and indicate your preference. Please return the form to your child's teacher by September 15, 2017.

Student's Name: _____ Teacher: _____ Grade: _____

My child is aware of our family plan for leaving school grounds each day. The supervising staff member or program administrator will dismiss my child from the assigned door at the designated time. My child knows to return to the teacher or main office if there is an unexpected change in our plans. ****Please note: This option should be selected if the child walks home, alone or with a group, or if a parent (or other adult/group) meets the child at a designated location other than the dismissal door on a regular basis.**

My child may be released by the supervising staff member or program administrator to the following **ONLY**. ****Please note: If this option is selected, make sure to include all caregivers, siblings, as well as leaders of any organization in which your child is participating immediately following dismissal from school, i.e., Aftercare, Scouts, CCD, Hebrew School, etc. Names may be added to the back of this form, if necessary.**

Name

Contact Number(s)

_____	_____
_____	_____
_____	_____

I understand that school personnel or program administrators will follow the plan indicated above every day. Changes to this plan may be made only in writing and given to the teacher or principal in advance of the anticipated change. I have received the school calendar and Stormy Weather/Emergency Regulations, and I am aware of all types of changes to the school day (i.e., early dismissal, delayed openings) and will plan accordingly.

Parent/Guardian Signature

Print Name

Date