Ms. Maline's Health Class Expectations (RLMS) <u>smaline@fairfield.k12.ct.us</u>

Dear Parent(s)/Guardian(s),

I have the pleasure of having your child in my health class this year. We will meet every day for one marking period. During these classes we will focus on developing life skills that will prevent risk behaviors established at a young age and continue to adulthood. In my classroom I stress the importance of a safe environment, physically and emotionally. In order to guarantee your child and all the students in my classroom the excellent educational climate they deserve, I have developed a Classroom Discipline Plan which will be in effect at all times.

When in my classroom, I expect my students to comply with all Ludlowe school rules and the following expectations:

- 1. Respect for self and others: NO teasing, swearing, foul language or put downs.
- 2. Arrive on time and prepared for class, or have a pass.
- 3. One person speaks at a time.
- 4. Keep hands, feet and objects to yourself.

If a student breaks a rule, the following consequences will occur:

First Offense: Warning Second Offense: See me after class Third Offense: Phone call home Fourth Offense: Lunch detention with me or the dean, in addition a note written by the student to be signed by a parent or guardian *SEVERE CLAUSE: In the case of a severe disruption of class (ex: fighting, vandalism, etc.), the Dean's office is notified and the student(s) report(s) to the Dean.

Consequences do not accumulate from one day to the next; each day is a new start.

In order for this plan to have its greatest effect, I will need your support. Please discuss these rules with your child, sign below and remind your child to return the form to me. They are then expected to keep this form in the Health section of their notebook for the duration of the class.

Should you have any questions or suggestions, please feel free to contact me at smallne@fairfield.k12.ct.us

I look forward to working with you and your child this marking period.

Warm Regards,

Ms. Shari Maline

Print Student's Name ______

Student's Signature_____

Parent or Guardian's Signature_____