

USD 445
7th-12th Grade

ACTIVITIES
HANDBOOK

TABLE OF CONTENTS

	<u>PAGE</u>
HANDBOOK PURPOSE	3
ACTIVITIES OBJECTIVE.....	3
STUDENT PARTICIPATION.....	3
STUDENT SUSPENSION.....	3
ATTENDANCE.....	3, 4
TRAVEL.....	4
LETTER AWARDS	4
EQUIPMENT	5
HAZING	5
ELIGIBILITY	5, 6, 7, 8
INJURIES.....	8
ASSUMPTION OF RISK	9
INSURANCE.....	9, 10
PHYSICAL EXAMINATION.....	10
GENERAL STATEMENT OF CONDUCT	10
ALCOHOL, DRUG, AND TOBACCO POLICY.....	11, 12
NCAA GUIDELINES	13
MEDICAL PROCEDURES FROM THE TRAINER	13
TRAINING ROOM PROCEDURES	13,14
LIABILITY	14
TRAVEL REQUIREMENTS	14
TRAVEL CONSENT FORM.....	15

COACHES & SPONSORS 16, 17

CITIZENSHIP FOR K.S.H.S.A.A.....18

CODE OF ETHICS18

STUDENT DRUG TESTING POLICY.....19, 20, 21

CONSENT TO PERFORM ANALYSIS.....21

CONSENT AGREEMENT.....22

PLAYER CODE OF CONDUCT.....23

ACTIVITIES CONTRACT/PARENTAL CONSENT & INSURANCE WAIVER, etc.24

KSHSAA RECOMMENDED CONCUSSION/HEAD INJURY INFORMATION.....25

CONCUSSION RELEASE FORM.....26

EMERGENCY INFORMATION FORM (BLUE SHEET).27

ACTIVITY POLICY HANDBOOK

HANDBOOK PURPOSE

The handbook was developed by a committee of staff members to inform students and their parents of the rules and regulations that will govern our activities at USD 445.

ACTIVITIES OBJECTIVES

The Coffeyville School District subscribes to a comprehensive program and strives to provide an activities program that will accomplish the following objectives:

1. To encourage students to become active participants as well as spectators.
2. To encourage students to develop the highest level of skills possible.
3. To enable the participants to develop more fully their potential for leadership and responsibility.
4. To enable the participants to develop an appreciation of the elements of competition and fair play.
5. To demonstrate to the participants the value of self-discipline.
6. To enable the participants to function as an integral part of a larger group.

STUDENT PARTICIPATION

Coaches/directors shall encourage participation and shall attempt to play each member of their squad in each contest except at the high school varsity level. The size of squad may be restricted by facilities and staffing. The head coach/director shall have the final authority for varsity level participation.

OUT-OF-SCHOOL SUSPENSION

The student cannot practice or participate in any contest/performance while serving out-of-school suspension and must return to school before participating.

ATTENDANCE AT PRACTICE

1. All students are expected to be at all regularly scheduled practices. The head coach/director must be notified by the student or his/her parents or guardian before the student misses a practice, or the absence will be unexcused.
2. Membership on a team is not official until the athlete attends practice.
3. Any athlete that attends practice is considered a member of that sport until officially dismissed by the coach.

ATTENDANCE AT SCHOOL

Any student who does not attend half the school day of a contest/performance shall not be allowed to participate in that contest/performance, unless there are unusual circumstances. Example – Dr. Appointment, funerals, or some type of emergency.

A student must attend half the school day to be allowed to practice that day.

EXCEPTIONS: Any exception to the above rule will be handled at the discretion of the Director of Activities or Administrator.

TRAVEL (See Travel Information on page 14 & 15).

All school sponsored trips must be approved by administration. Students on school sponsored trips must leave and return in transportation designated by the Director of Activities. NO alternative transportation TO an event will be permitted. If a parent or guardian wants the student to return from an event with them (parents or guardian only), they should do the following:

1. Contact the coach/director with their request in writing prior to departure.
2. Parent/guardians may sign their student out in person; the student will only be released to their parent or guardian.

LETTER AWARD REQUIREMENTS (FKHS Only)

1. The student shall participate in the activity in which he/she is a candidate for a letter for the entire season. The "season" is defined as league and state competition or until the group is eliminated from state competition. The student shall participate in the contests/performances at the discretion of the coach/director.
2. The student shall attend practices promptly and regularly and must not quit the activity, or he/she will forfeit his/her right to earn a letter.
3. The original equipment issued must be returned or paid for by the parent or guardian at the close of the season.
4. The recommendation of the coach/director for those who have not fulfilled requirements for lettering.

EQUIPMENT

1. One of the values of activities is to teach responsibility, and this should apply to the care of equipment as well as school property. Every student is expected to take pride in the equipment and facilities the taxpayers of U.S.D. 445 have provided.
2. The school district attempts to provide the best and safest equipment. Each student is expected to take proper care of all his/her equipment. This includes laundering of appropriate practice equipment.

3. The original equipment issued must be returned by the student at the close of the season. If lost or stolen, the equipment must be paid for by the parent or guardian.

Failure to turn in or reimburse for equipment and or uniforms will result in an athlete being withheld from any future interscholastic competition.

HAZING OR RITES OF INITIATION

Hazing Prohibited

Kansas law prohibits “hazing.” Since this issue could be related to gang activity, the following handbook language is included:

Incidents involving initiations, hazing, intimidations, and/or related activities which are likely to cause bodily danger, physical harm, personal degradation or disgrace resulting in physical or mental harm, or which affect the attendance of another student, are prohibited. FKHS has a zero tolerance policy on hazing. Please report any suspected incidents to an administrator.

K.S.H.S.A.A. ELIGIBILITY

All students participating in activities within the U.S.D. 445 school district must comply with the following rules as outlined by the Kansas State High School Activities Association.

1. They are a bona fide, undergraduate student in good standing, with regular attendance.
 - A. Good Standing - Is determined by the administration of the school the student is attending.
 1. Students who are not in good standing as determined by the administration may be excluded from attending or participating in any or all school-sponsored activities. A student in “good standing” must:
 - ✓ **Follow all rules and procedures as set forth by the coach/sponsor.**
 - ✓ **Be clear of any suspension from school (not currently suspended).**
 - ✓ **Be clear of any Truancy—30 consecutive days of acceptable attendance.**
 - ✓ **Be clear of any detentions or other school disciplinary actions (detention/ISS have all been served).**
 - ✓ **To be eligible for KSHSAA activities—must have passed 5 classes during the previous semester.**
 - ✓ **Attend an appropriate number of practices, meetings, events, etc..., as determined by the coach/sponsor.**
 2. Good standing may be removed only by the principal for:
 - ✓ Any single act deemed by the school administration to be severe enough to remove “good standing” status from a student, including:
 - ✓ Behaviors inside or outside of school that reflect poorly upon the school.
 - ✓ Behaviors inside or outside of the school that reflect poorly on the team.
 - ✓ Excessive absences (10 in any one class per semester for FKHS, 5 in 9 weeks for

RMS), reaching school truancy, or chronic tardiness (9 in any one class per semester for FKHS, 5 in any one class per 9 weeks for RMS).

- B. Any student who has committed an inappropriate act in the community, or is placed under arrest or otherwise placed under a “Notice to Appear” will be immediately referred to the school Principal. The principal will place the student on a “not in good standing” position. Because every situation is unique, the principal will have some discretion on each case. The principal will research and examine all facts and evidence and only the principal will make any determination as to whether to allow the student to return to good standing.

Those students who have been determined to be “not in good standing” will be allowed to practice but will not be allowed on the sideline during games or wear any part of the team uniform at any time. The student can request the principal review their status at any time. The principal may determine that due to the severity of a behavior, the “not in good standing” status may remain in effect for the remainder of the school year.

2. Their conduct and standards of sportsmanship are satisfactory and do not bring discredit to themselves or their school.
3. They are not 19 years of age on or before September 1 of the high school year in which they compete, unless approved by the State. They are not 14 years of age as a 7th grader on or before September 1 of the school year in which they compete, or competing on a mixed grade sport unless approved by the State. They are not 15 years of age as a 8th grader on or before September 1 of the school year in which they compete, or competing on a mixed grade sport unless approved by the State.
4. They have not completed 8 semesters of high school attendance (includes total attendance, beginning with the 9th grade). Their last 2 semesters of possible eligibility must be consecutive.
5. They have not had 8 semesters of competition nor more than 4 seasons in 1 sport includes grades 9 thru 12).
6. They are enrolled in and attending 5 subjects of unit weight or the equivalent that the student has not passed before.
7. They have passed 5 subjects of unit weight or the equivalent their last semester in attendance.
8. They do not engage in outside competition in the same sport during a season in which they are representing their school. Parents should consult the coach, or principal before allowing them to participate individually or on a team in any game, training session, contest, or tryout conducted by an outside organization.
9. They have not participated in training sessions or tryouts held by colleges or other outside agencies or organizations in the same sport while a member of a school athletic team.
10. They have passed an adequate physical examination given by a physician and have written consent of their parents or legal guardian.
11. They have met the requirements of the Transfer Rule if they are transfer students. Parents should contact

the principal concerning this regulation.

12. They are not a member of any fraternity or other organization prohibited by law or by the rules of the Kansas High School Activities Association (K.S.H.S.A.A.)
13. They have not competed under a false name, or for money or merchandise of intrinsic value, and have observed all other provisions of the Amateur Rule.
14. They are regularly enrolled and in attendance, no later than Monday of the fourth week of the semester in which they participate.

NOTE: Failure to comply with any regulations listed above can cause the student to be declared ineligible for the semester/school year.

USD 445 ELIGIBILITY REQUIREMENTS

1. Meets age, physical examination, academic and attendance requirements of USD 445 and K.S.H.S.A.A.
2. Pass at least five subjects of unit weight in the preceding semester.
3. Any student not passing at least five classes at the end of either the 1st or 2nd semester will forfeit their eligibility for the next semester according to K.S.H.S.A.A. Rules and Regulations (13-1-3-a).
4. A bona fide student is defined as the following: A student who is enrolled in five or more subjects in the ninth grade or above, even though carrying subjects of a lower grade.
5. Students must receive a grade point average of 2.0 or higher for the semester prior to participation in extracurricular activities.
 - a. Grade Point Average will be calculated based upon grades listed on USD 445 grade cards (some college classes are not listed on grade cards).
 - b. Students that transfer to USD 445 schools must have met the 2.0 GPA requirements for their previous school for participation at FKHS or RMS.
 - c. GPA requirement may be modified to KSHSAA requirement only in Individual Education Plans, Student Improvement Team plans or by school administration.

In other words when the individual enrolls they become a student of the USD 445. This coverage applies throughout the entire completion of the student's high school eligibility. Coverage does not lapse during the summer months or weekends. It is continuous.

For questions about eligibility you may contact the Activities Director or the Kansas High School Activities Association at 785-273-5329.

INJURIES

1. All injuries will be reported to the parent or guardian as soon as possible by the coach/director.
2. If an individual has any special medical problem, the parent or guardian must be sure the coach/director is informed prior to the start of the first practice for that activity.
3. It is the responsibility of the parent or guardian to report any injury that they feel the coach/director is unaware of to the coach/director.
4. The Coffeyville School District and K.S.H.S.A.A. assume no responsibility in case of accident.
6. An athlete which has been knocked unconscious must be released by a physician before he/she participates again.
6. An athlete which has respiratory problems must have a signed permission slip from a physician and this must be attached to the physical. If inhalers are used the coaches must have them during all games and as well as all practices.
7. Coaches should be advised of all injuries but it is the responsibility of the athlete to seek proper medical attention.
8. For medical insurance purposes athletes must see a physician as soon as possible following the injury.
9. An injured athlete may be allowed to participate again provided they meet eligibility requirements and a signed release from a physician.

USD 445 ATHLETIC PARTICIPATION ASSUMPTION OF RISK

There are many special benefits being afforded student-athletes by the athletic programs. It must be understood that participating in athletic activities may lead to injury to student-athletes. Therefore, the purpose of this section is to make all student-athletes and their parent or guardian aware that dangers do exist and that participation is voluntary with the understanding that risks are involved. It is to be further understood that student-athletes must share in the responsibility for their own safety and safety of others as each participates in the district athletic program.

The student-athlete participating in the athletic program could mildly, moderately or severely injure the anatomy in one or several of the following: muscles, tendons, ligaments, bone, skin, teeth, spinal column, and any of the vital organs. Catastrophic injuries of death and permanent paralysis may also occur during sports participation. There is no absolute prevention against any of the mentioned potential injuries.

WE DO NOT CARRY PRIMARY COVERAGE FOR THE ATHLETES!!!

USD 445 provides a medical assistance insurance policy for a student injured while involved in a Kansas State High School Activities Association Activity. Basically, it will provide the following:

1. If the parent or guardian of the injured student has a medical insurance policy, the USD 445 policy MAY help cover what the parent's or guardian's policy does not cover, in a limited manner.
2. If the parent or guardian of the injured student does not have a primary insurance policy, USD 445 encourages parents to purchase the insurance policy that is offered at enrollment.

USD 445 SCHOOL INSURANCE

Unified School District 445 does NOT carry insurance to pay medical treatment for students' accidents. The only insurance the Board of Education carries is catastrophic coverage through the Kansas State High School Activities Association, as stated on page 10. Parents may choose from the options below to purchase insurance:

OPTION 1: HEALTH WAVE

Health Wave is a student insurance coverage provided through the state. It is based on the family's income and can be purchased by the parents. Health Wave's phone # is 1-800-792-4884.

OPTION 2: SUPPLEMENTAL SPORTS COVERAGE

Parents may opt to purchase supplemental coverage in addition to their existing insurance.

K.S.H.S.A.A. CATASTROPHIC INJURY INSURANCE

All students involved in K.S.H.S.A.A. activities are covered by the catastrophic injury policy. This policy provides benefits for the student while the student is:

1. A representative of the member school and under the direct supervision of a designated school employee, practicing for, or competing in, an interschool activity conducted under the regulations and jurisdiction of the Kansas State High School Activities Association.
2. Traveling to or from practices or competition in a school bus operated by a properly licensed driver, or in a private vehicle which has been designated by and is under the supervision of the school. Said vehicle must be operated by a driver designated by school authorities.

All inquiries and requests for forms regarding KSHSAA insurance may be obtained through the Activities Director's office..

PHYSICAL EXAMS AND PHYSICIANS

1. According to K.S.H.S.A.A. regulations that require physical examination for participants, no students will be permitted to practice or compete on a USD 445 team without a physical form signed by both a physician and a parent or guardian and is on file in the Activities Office verifying that a physical examination has been taken prior to the first practice. The physical examination may not be taken prior to May 1, or later than the first practice that a student participates. The results of the physical examination should specifically authorize the participation in athletics. Coaches will take special care to insure that no athlete is practicing without the required physical examination and parental consent forms for participation are on file in the Activities Office. Cheerleaders and Dance team members are also required to have completed a physical examination by a physician and have a signed consent form on file before being allowed to participate.

2. All student athletes will complete a medical release form. This will be on file with the student athletes' physical in the activities office.

GENERAL STATEMENT OF CONDUCT

Actions or behaviors, occurring either during school or after school hours, that are deemed detrimental to the activity, athletic event or to the educational process, or are deemed inconsistent with proper conduct for a student participating in a UD 445 activity, and are not already covered by specific policy, may result in the student being removed from participation in the activity. The head coach or sponsor, consulting with the athletic director and the principal, will be responsible for making the determination of a student's eligibility.

ALCOHOL, DRUG, AND TOBACCO POLICY

RULE: DURING ANY SEASON OF PRACTICE AND COMPETITIVE PLAY, REGARDLESS OF THE QUANTITY CONSUMED, A STUDENT SHALL NOT:

1. USE A BEVERAGE CONTAINING ALCOHOL.
2. USE, CONSUME, HAVE IN POSSESSION, BUY, SELL, OR GIVE AWAY ANY MARIJUANA OR CONTROLLED SUBSTANCE.
3. USE TOBACCO IN ANY FORM

Definition: Season of Practice - First official day of practice as established by the K.S.H.S.A.A.

Competitive Play - Concludes with the completion of post-season play by team, group, or student.

If any student involved in activities violates this rule, and a law enforcement official, faculty member, or school administrator substantiates the violation verbally and in writing, the following will occur in addition to the school's policy.

FIRST VIOLATION:

The student will lose eligibility for the next inter-scholastic competition or performances. The penalty is explained at a meeting which includes the student, parent or guardian, principal, activity director, counselor, and head coach/director. The student will continue to practice but not participate in contests or performances.

SECOND VIOLATION:

The student will lose eligibility for the next three (3) interscholastic competition or performances. The student must receive counseling and evaluation in substance abuse. The counseling will be determined by the principal, parents, activities director, counselor, and head coach/director. The counseling will be at the expense of the student and/or parent or guardian. The student must continue to practice to remain a participant in the activity.

THIRD VIOLATION:

The student may lose eligibility in all interscholastic activities/performances for the remainder of the school year. To become eligible for activities the following school year at USD 445, the student must go through some type of chemical dependency program at the expense of the student and/or parents. Upon the successful completion of this program, the student will be allowed to return to all activities at the beginning of the next

school year with no violations against his/her record. The completion will be determined by a professional substance abuse counselor.

Violations of the substance abuse policy shall be cumulative throughout the school year.

The student will not be allowed to return to the activity until all stipulations necessary to correct the violation have been completed.

If a source other than those previously listed sign a written statement about a student's violation of the policy, validity of the allegation will be screened; and if the information is substantiated, the appropriate action will be taken.

ADDITIONAL NOTES:

A coach MAY remove a player from the team for violating the substance abuse policy if this is established in the team rules.

OUT OF SEASON USE OR POSSESSION

The student, parent or guardian, head coach/director, and activity director will have a conference. The activities director will record the violation. No penalty will be assessed, but the violation will count toward the student's school year total.

REPEATED OFFENSES:

Repeated offenses indicate a student-at-risk. The record of infractions will be maintained throughout the student's six years career. Record keeping begins at the time the student signs his/her first activities contract.

MEDICAL REASON:

It is not a violation of this policy for a student to be in possession of a controlled substance prescribed for that student's own use by his/her physician.

SCHOOL POLICY:

If the violation occurs on school property or at a school sponsored event elsewhere, the student will be ineligible for all interscholastic activities for the remainder of the school year.

DUE PROCESS:

A student who has been accused of violating the drug, alcohol, and tobacco policy has the opportunity for due process. This may be afforded to the student at the conference with said student, parent or guardian, principal, activity director, counselor, and head coach/director.

PROCEDURE OF ENFORCEMENT:

1. Filing of behavior observation document with the activity director.
2. Notification of parent or guardian and student of the violation.
3. Conference with student, parent or guardian, head coach/director, counselor and activities

director.

- A. Explain consequences of action.
- B. Opportunity for due process by student and/or parent or guardian.
- C. Recommend appropriate counseling.
- D. Explain consequences of subsequent violations.

4. Record of violation, conference, and penalty filed in activity director's office.

FINAL NOTE: NCAA Guidelines for College Bound Student Athletes

Student Athletes and their parent or guardian are encouraged to contact the high school guidance office, coach, AD or NCAA at 913-339-1906 if they have questions regarding participation in collegiate level athletics.

USD 445 MEDICAL PROCEDURES

INJURY OR ILLNESS:

The student/athlete is responsible to report all injuries and illnesses to the training room for treatment or referral on the day of occurrence. The Head Athletic Trainer will make all necessary medical referrals.

1. It is the responsibility of the athlete to report all injuries/illnesses to the training room on the day of occurrence.
2. When an athlete is injured the athletic trainer will proceed to his/her aid as quickly as possible, evaluate the case and proceed with immediate care. The coach will be informed as quickly as possible regarding the athlete's availability in that particular practice.
3. All therapeutic treatment will be administered by the athletic training staff.
4. In case of an emergency, the training staff will administer necessary first aid until medical help (ambulance or doctor) can arrive.

DO NOT, IN ANY CASE, ATTEMPT TO MOVE AN INJURED ATHLETE WHEN YOU ARE IN DOUBT OF HIS/HER CONDITION, ESPECIALLY WHEN THE INJURY HAS OCCURRED TO THE HEAD, NECK OR BACK.

5. When handling an athletic injury, the Athletic Training Staff is to act as a TEAM; meaning one captain (spokesperson), with everyone else present to assist.

TRAINING ROOM PROCEDURES AT FKHS:

The athletes will assist in the operation of the training room by abiding by the following guidelines:

1. Athletes will not receive treatment for an injury unless under the direct application and/or supervision of a member of the training staff.
2. Athletes should follow the instructions of the trainer to aid in the prevention and care of injuries.

3. The training room is for the treatment and rehabilitation of injuries. If you have no business in the training room, stay out.
4. Everyone must wear gym shorts in the training room for treatment. No dressing or undressing in the training room. We have co-educational facilities.
5. Everyone must shower before treatment of an injury. Exceptions are made in regard to serious injury.
6. Take nothing without permission, including towels.
7. No football, spiked, or cleated shoes are to be worn in the training room. All shoes should be free of mud and grass.
8. Athletes should be on time for all treatment and taping appointments, before and after practice/competition.
9. Athletes will show respect to all members of the training staff.

TREATMENT:

The training room policy is first come first serve for all athletes. It is impossible to get an athlete on the field or court if they come in ten minutes before practice/competition. The athlete is expected to arrive early enough to complete his/her entire treatment program and/or taping and wrapping before practice starts. DO NOT use treatment as an excuse for being late.

LIABILITY:

All injuries should be reported to the trainer as soon as possible either during practice or games. Student trainers will be expected to report all injuries to the head trainer, but they are students so coaches help may be needed especially those practices or games that the head trainer does not attend.

Once an athlete has seen a Doctor about an injury that can be affected by athletic activity, that athlete will not be allowed to participate in his/her activity until a written release has been given to the head trainer. DO NOT have your athletes give these to student trainers --- they must come to the head trainer. There will be NO exceptions! This is done as a protection from liability for the school, the coaches, and the trainer.

TRAVEL REQUIREMENTS:

All school sponsored trips must be approved by the principal's office. Students on school sponsored trips should leave and return in transportation designated by the Activity Director. A student may return from an event with a parent or guardian. The parent or guardian must personally inform the coach/director. If extraordinary circumstances require a student to return home with someone other than a parent or guardian or the transportation provided by the school, the student's parents or guardian must pre-arrange the transportation in writing, through the Activities Office and get permission from an Administrator.

All of the bus rules set forth by First Student Transportation must be followed.

Failure to follow the above rules will result in a one game suspension.

TRAVEL CONSENT FORM

_____, a student enrolled at USD 445 and a participant in school sponsored activities has the permission of his/her parent or guardian to travel from _____, on _____, NAME OF ACTIVITY with _____.

_____ PARENT/GUARDIAN SIGNATURE

_____ SPONSORS SIGNATURE

_____ ADMINISTRATORS SIGNATURE

THIS ARRANGEMENT MUST BE MADE PRIOR TO THE STUDENT LEAVING FOR THE ACTIVITY. THE PARENTS OR GUARDIANS SIGNATURE RELIEVES FIELD KINDLEY HIGH SCHOOL OR ROOSEVELT MIDDLE SCHOOL AND ITS ADMINISTRATORS/COACHES FROM ANY RESPONSIBILITY OR LIABILITY IN THE TRANSPORTATION OF THE ABOVE NAMED STUDENT.

COACHES AND SPONSORS

ATHLETIC DIRECTOR (FKHS)	- Frank Sills	sillsf@cilleschools.com	Office 252-6423
ATHLETIC SECRETARY (FKHS)	- Shanna Brown	brownsh@cilleschools.com	Office 252-6422
ATHLETIC DIRECTOR (RMS)	-Melanie Sortore	sortorem@cilleschools.com	
FKHS Baseball	- Ray Rutherford	rutherfordr@cilleschools.com	
FKHS Basketball (Boys)	- Tyler Thompson	thompsont@cilleschools.com	
Basketball (Girls)	- Eric Flaton	flatonf@cilleschools.com	
RMS Basketball (Boys)	- Ray Rutherford	rutherfordr@cilleschools.com	
Basketball (Girls)	- Ed Rutherford	rutherforde@cilleschools.com	
FKHS Cheerleading	- Kristen Horner		
RMS Cheerleading	- Brandi Wegner	wegnerb@cilleschools.com	
FKHS Dance Team	- Halie O'Connor		
FKHS Debate & Forensics	- Megan Henson	hensonm@cilleschools.com	
FKHS Football	- Murray Zogg	zoggm@cilleschools.com	
RMS Football	-Ray Rutherford	rutherfordr@cilleschools.com	
French Club	- Mary McCloud	mccloudm@cilleschools.com	
FKHS Golf (Boys)	- Mike Peck		
Golf (Girls)	-Kevin Pool		
RMS Golf	- David Raines		
Instrumental Music	- Brian Nagle	nagleb@cilleschools.com	
National Honor Society	- Delia Northup	northupdelia@cilleschools.com	
FKHS Native American Club	- Kris Crane	cranek@cilleschools.com	
RMS Native American Club	- Sherry Ellis	elliss@cilleschools.com	
FKHS Newspaper	- Beth Conrad	conradb@cilleschools.com	
RMS Journalism	- Samantha Hintz	hintzs@cilleschools.com	

PROM Sponsor	- Kimber Kiersey	kierseyk@cilleschools.com
FKHS Soccer	-	
FKHS Softball	- Megan Shook	shookm@cilleschools.com
Spanish Club	- Sarah Coltrane	coltranes@cilleschools.com
FKHS STUCO	- Megan Abbott	abbotta@cilleschools.com
RMS STUCO	- Alisha Gravel	gravela@cilleschools.com
FKHS Swimming	- Tracey Childress	childresst@cilleschools.com
FKHS Tennis	- Aaron Clark	clarka@cilleschools.com
FKHS Theater	- Mark Gard	gardm@cilleschools.com
FKHS Athletic Trainer	- Treager Tvedten	
FKHS Track	- Murray Zogg	zoggm@cilleschools.com
RMS Track	- Jared Kirkpatrick	kirkpatrickj@cilleschools.com
Vocal Music	- Mark Gard	gardm@cilleschools.com
FKHS Volleyball	- Megan Abbott	abbottm@cilleschools.com
RMS Volleyball	-Elizabeth Thompson	thompstone@cilleschools.com
Wrestling	- Spencer Mcglothlin	mcglothlins@cilleschools.com
Yearbook	- Beth Conrad	conradb@cilleschools.com

CITIZENSHIP FOR ALL KSHSAA SPONSORED SCHOOL ACTIVITIES

Participation in *student activities* is a privilege and not a right; therefore, USD 445 requires students to adhere to standards of behavior which will bring credit to students, the particular activity, the school, and the community. Students who represent USD 445 must demonstrate good citizenship and conduct at all times.

The school requires student behavior be in compliance with school board policy, with the Student Handbook Regulations, and public laws. Behavior not in compliance with these policies will result in student's suspension from extra-curricular activities. Verification required to impose the following consequences would include student admission, parent of student admission, USD 445 staff eyewitness, police report, and/or newspaper report.

Code of Ethics--Coaches – Players – Officials – Spectators

- Public criticism of administrators, coaches, players, officials, and fans is unethical and will not be tolerated.
- Playing time is non-negotiable.
- Coaches will play their best athletes as a team, not necessarily their best athletes.
- Do not use smoking or tobacco products of any kind.
- Learn the rules of the game in order to be a more intelligent spectator.
- Treating other persons, as you know they should be treated.
- Treating officials and opponents with respect.
- Accepting absolutely and without quarrel the final decision of any official.
- Honoring visiting teams and spectators as your own guests and behaving as honored guests when visiting another school.
- Being humble in victory and gracious in defeat.
- Being as cooperative as you are competitive.
- Recognizing that actions on and off the field reflect on the athlete and the School.
- Watch your language. Obscenity and profanity have no place on the bench, in the dressing room, or, in fact, in your speaking vocabulary.

Remember that an athletic contest is only a game – not a matter of life or death for player, coach, school, officials, fan, community, state or nation.

Coffeyville Unified School District #445
Field Kindley High School

Student Drug Testing Policy

Rationale:

In an effort to protect the health, safety, and welfare of its students involved in activities through preventative measures from abuse and misuse of drugs, the USD 445 Board of Education and administration has adopted the following “Student Drug Testing Policy” for students participating in any and all extracurricular activities outside of the normal school day. Extracurricular activities are relevant experiences to the education of each student; however, it is still a privilege to participate. Students participating in activities should set an example for all other USD 445 students to follow.

Definitions:

“Extracurricular activity” means any school-sponsored activities outside the regular course of study including:

- A. Activities involving competition, judging, or comparison of individuals or groups. Activities included are, but not limited to, all athletic programs, cheerleading, dance, band, choir, orchestra, debate, forensics, Skills USA, and HOSA.
- B. Activities considered noncompetitive but school-sponsored are National Honor Society, Key Club, Math Club, SADD, STUCO, Year Book, Student Ambassadors, school dances, NFL, and weight lifting. This is not an all-inclusive list.

“Drug test” refers to a scientifically substantiated method to test for the presence of illegal drugs.

“Illegal drugs” by this policy’s definition means any substance which an individual student may not sell, possess, use, distribute or purchase under either federal or state law. Illegal drugs include, but are not limited to, all scheduled drugs as defined by law, all prescription drugs obtained without proper authorization, all prescribed or over-the-counter drugs being used in an abusive way, and alcohol.

“Positive” when referring to a drug test administered under this policy means a toxicological test result which is considered to demonstrate the presence of an illegal drug thereof using the standards customarily established by the testing laboratory administering the drug use test.

“Adulterant” or “Adulteration” refers to an attempt to alter the outcome of a urine drug test by adding a substance to the sample, attempting to switch the sample, or otherwise interfere with the detection of an illegal drug in the urine sample, or purposefully over hydrating oneself in an attempt to dilute the urine to decrease the possible detection of the illegal drug.

“Urine Drug Screen Collector” refers to the certified person collecting urine samples at the school site.

“Medical Review Officer” refers to the certified medical doctor testing the urine sample.

Procedure:

Informed Consent for Testing

At the beginning of each semester, students choosing to participate in any extracurricular activities and their

parent/guardian/custodians will complete and sign the Informed Consent Agreement and Release of Information Form for the Medical Review Officer. All students wishing to participate in extracurricular activities as defined must have the forms completed, signed, and on file with the Field Kindley High School administration before participating including practices no later than 10 days after the start of the semester. Student forms from 1st semester will be carried over to 2nd semester. Transfer students will have 10 days from their date of enrollment to complete and return paperwork.

***Failure to turn in properly completed and signed forms by the appropriate date will render the student ineligible for extracurricular activities during the current school year. Those students enrolled in classes which result in graded performances or competitions will be given alternate but equivalent assignments in place of performances or competitions when necessary.**

***Any student participating in extracurricular activities with the proper paperwork on file will be included in the pool of students who are subject to random drug testing.**

Selection Process

Upon receipt of all Informed Consent paperwork, students will be assigned a number. On the day of sample collection, numbers will be randomly drawn and then corresponded to a previously numbered student. 8 student samples will be collected each month. In situations where a student is absent, an alternate student will be randomly selected and the absent student will be placed on the next available test date.

Sample Collection

Random samples will be collected by the Urine Drug Screen Collector, as determined by Field Kindley High School administration and the USD 445 approved collection agency's administration, each month school is in session beginning in September and lasting through May. Students will be discretely removed from class, will have a sample collected, and be returned to class in order to maintain confidentiality. The specific dates of sample collection will remain confidential between Field Kindley High School and the collection agency. Samples will be tested by the Medical Review Officer. Positive test samples will require test confirmation.

Violations: *Sanctions will be imposed 72 hours after notification from principal to parent.*

1st Offense

For the first positive test, the student shall be suspended from participation in all activities including meetings, practices, performances, or competitions either as a spectator or participant for four (4) weeks. It is recommended, not required, that the student and parent/guardian obtain a substance abuse evaluation and education counseling for the student during this time. Upon completing an administratively approved and certified drug evaluation and assessment education program at the student or parent/guardian/custodian expense, then the ineligibility may be reduced to two (2) weeks. Upon return to activities, the student is subject to 2 follow up tests within the current school year as determined by the administration.

2nd Offense

Upon a student's second positive test, an 18-week suspension of all extracurricular activities will be imposed. Upon completing an administratively approved and certified drug evaluation and assessment education program at the student or parent/guardian/custodian expense, then the ineligibility may be reduced to nine (9) weeks. Upon return to activities, the student is subject to 2 additional follow up tests within the current school year as determined by the administration.

3rd Offense

For the 3rd positive test, the student shall be suspended from participation in all extracurricular activities for 1 calendar year. In order to continue in extracurricular activities after the 1-year suspension, the student must complete an administratively approved and certified drug evaluation and assessment education program at the

student or parent/guardian/custodian expense. Upon return to activities, the student is subject to 2 additional follow up tests as determined by the administration.

Any further offenses after the 3rd positive will result in suspension from all extracurricular activities while the student is enrolled at Field Kindley High School.

*Suspensions under this policy may carry over into the following school year.

*Written documentation with dates and facilitator signatures on office letterhead is required to acknowledge completion of an evaluation / education program.

****A student refusing to submit a sample upon being randomly selected will be considered in violation. The refusal will be treated as a positive test.***

*A student who self-refers concerning this program will be treated as having tested positive.

*The building administrator will notify the parent/guardian first then the student upon confirmation from the Medical Review Officer of a confirmed positive test.

*Any determination may be appealed to the testing agency's lab technician within 72 hours of notification. Contact information is provided upon parent notification by principal.

Non-punitive Nature of Policy:

No student will be penalized academically for testing positive for illegal drugs. Those students enrolled in classes which result in graded performances or competitions will be given alternate but equivalent assignments in place of performances or competitions when necessary. The results of a random urine drug test will not be documented in any student's academic records. Information regarding the results of drug tests may be disclosed to criminal or juvenile authorities through court order or subpoena. In the event of such communication, the student's custodial parent, legal guardian, or custodian will be notified prior to the release of information.

CONSENT TO PERFORM URINALYSIS FOR DRUG TESTING

- I hereby consent to allow the student named on the front of this form to undergo urinalysis testing for the presence of illegal drugs in accordance with the **Policy for Student Drug Testing of Field Kindley High School Students** as approved by the Coffeyville Unified School District Board of Education.
- I understand that a qualified vendor will oversee the collection process.
- I understand that any urine samples will be sent only to a certified medical laboratory for actual testing, and that the samples will be coded to provide confidentiality.
- I hereby give my consent to the medical vendor selected by Coffeyville USD 445 Board of Education, their laboratory, doctors, employees, or agents, together with any clinic, hospital, or laboratory designated by the selected medical vendor to perform urinalysis testing for the detection of illegal drugs as described in the Student Drug Testing Policy.
- I further give permission to release results of these tests to the Building Principal. I understand a positive test result or refusal to submit a sample will result in consequences including suspension from activities as per policy for my student.
- I understand that consent pursuant to this **Informed Consent Agreement** for random student drug testing will be effective for all activities as defined by board policy in which this student might participate during the current school year and any sanctions that may follow per positive test result as stated in the approved policy.

FIELD KINDLEY HIGH SCHOOL INFORMED CONSENT AGREEMENT

THIS FORM MUST BE ON FILE WITHIN 10 SCHOOL DAYS OF THE SEMESTER OR WITHIN 10 SCHOOL DAYS OF TRANSFER

Student Name _____ Grade _____

(Please print)

AS A STUDENT:

I understand and agree that participation in extracurricular activities is a privilege that may be withdrawn for violations of the **Policy for Student Drug Testing of Field Kindley High School Students**. I have read the **Policy for Student Drug Testing of Field Kindley High School Students** and understand the consequences that I will face if I am selected for a random drug test and have a positive test result.

I understand that when I participate in any extracurricular activity as defined in Board Policy, I will be subject to random urine drug testing, and if I refuse or test positive, I will not be allowed to practice, or participate in any athletic program or extracurricular activity. I have read the consent on the reverse of this form.

I understand this is binding while a student at Field Kindley High School during the current school year.

I hereby give consent for testing.

I refuse / do not give consent for testing.

Date _____

(Student signature)

AS A PARENT/GUARDIAN/CUSTODIAN:

I have read the **Policy for Student Drug Testing of Field Kindley High School Students** and understand the responsibilities of my son/daughter/ward as a participant in extracurricular activities through Field Kindley High School. I understand a positive test result or refusal to submit a sample will result in consequences including suspension from activities as per policy for my student.

I understand that my son/daughter/ward, when participating in extracurricular activities as defined in Board Policy, may be subjected to random urine drug testing, and if they refuse or test positive, will not be allowed to practice or participate in any extracurricular activities. I have read the consent on the reverse of this form.

I understand this is binding while my son/daughter/ward is a student at Field Kindley High School during the 2015-2016 school year.

I hereby give consent for testing.

I refuse / do not give consent for testing.

Date _____

Parent/Guardian/Custodian Signature

Parent/Guardian/Custodian Name (Please print)

Home Phone

Work Phone

Cell Phone

USD 445
CODE OF CONDUCT

I accept responsibility for my behavior on and off the playing field. I understand that what I do and say affects my

teammates, the Nado Family, the community, and many other people, not just myself. This not only includes maintaining my grades, avoiding alcohol and drug use, but also involves how I treat other students in the hallways and all other social interactions.

I will act with empathy. I will not be involved in behavior that hurts others, targets the weak, bully others, or “kicks someone when they are down.”

I will be on time for all practices, games, meetings, and especially the classroom, without being asked, because I respect the valuable time of my coaches, teammates, and teachers.

I will make sure to serve any detentions or other school disciplinary actions in a timely manner.

I will follow all rules and procedures that are set forth by my coach and my school. In order to gain respect I acknowledge that I must first give it, and that my actions speak louder than my words. In addition, I will meet all academic standards set forth by my school and my team.

I have read and understand the drug testing policy and agree to it fully, knowing that illegal substances are harmful and detrimental to my team, my family, and my school.

I will take coaching in a positive way, and understand that constructive criticism can help me become a better athlete and person.

I will lead courageously and live with integrity by speaking up against injustice acting on behalf of others, even when it is hard or unpopular.

I will serve as a role model at all times by talking politely and acting courteously towards teammates, coaches, opponents, officials, teachers, etc. I will represent my team with pride.

I will display honor and good sportsmanship in competition – acknowledging and applauding the effort of others, encouraging my teammates with positive statements, refraining from boasting or “trash-talking,” acknowledge there is only one head coach and that is not I, and accept victory or defeat graciously.

Because I represent my family, USD 445, and my team at all times, I pledge to live by the above Player Code of Conduct through my actions, words, and thoughts every day. Any violation may result in my Coach and/or Administration taking action.

Player Signature

____/____/_____
Date

Activities Contract/ Parental Consent & Insurance Waiver

I have read and understand the rules and regulations as stated in the Activities Handbook and have read the Code of Ethics, Drug Testing Policy and Code of Conduct.

As a member of an activity representing USD 445, I agree to conduct myself at all times in accordance with the provisions set forth therein.

SIGNED: _____ DATE: _____
(Student)

PARENT/GUARDIAN

As a parent or guardian of a member of USD 445 activity, I have read and understand the contents of the Activities Handbook, including but not limited to the Drug Policy, Code of Conduct, and Ethics Code.

USD #445 SCHOOL INSURANCE WAIVER

Unified School District 445 does not offer insurance to pay medical treatment for student's accidents. I hereby acknowledge that this information has been presented to me by USD # 445.

I also acknowledge that USD 445 has presented me with information regarding my optional purchase of student insurance through Health Wave and Supplemental Sports Coverage.

Parent/Guardian Signature _____ Date _____

**KSHSAA RECOMMENDED CONCUSSION & HEAD INJURY INFORMATION RELEASE FORM
2015-2016**

This form must be signed by all student athletes and parent/guardians before the student participates in any athletic or spirit practice or contest each school year.

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away. **Symptoms may include one or more of the following:**

- | | |
|---|--|
| <input type="checkbox"/> Headaches | <input type="checkbox"/> Amnesia |
| <input type="checkbox"/> “Pressure in head” | <input type="checkbox"/> “Don’t feel right” |
| <input type="checkbox"/> Nausea or vomiting | <input type="checkbox"/> Fatigue or low energy |
| <input type="checkbox"/> Neck pain | <input type="checkbox"/> Sadness |
| <input type="checkbox"/> Balance problems or dizziness | <input type="checkbox"/> Nervousness or anxiety |
| <input type="checkbox"/> Blurred, double, or fuzzy vision | <input type="checkbox"/> Irritability |
| <input type="checkbox"/> Sensitivity to light or noise | <input type="checkbox"/> More emotional |
| <input type="checkbox"/> Feeling sluggish or slowed down | <input type="checkbox"/> Confusion |
| <input type="checkbox"/> Feeling foggy or groggy | <input type="checkbox"/> Concentration or memory problems
(forgetting game plays) |
| <input type="checkbox"/> Drowsiness | <input type="checkbox"/> Repeating the same question/comment |
| <input type="checkbox"/> Change in sleep patterns | |

Signs observed by teammates, parents, and coaches include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays incoordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can’t recall events prior to hit
- Can’t recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before

completely recovering from the first one (second impact syndrome). This can lead to prolonged recovery, or even to severe brain swelling with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without written medical clearance from a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO). Close observation of the athlete should continue for several hours. You should also inform your child's coach if you think that your child may have a concussion Remember it is better to miss one game than miss the whole season. **When in doubt, the athlete sits out!**

Return to Practice and Competition

The Kansas School Sports Head Injury Prevention Act provides that if an athlete suffers, or is suspected of having suffered, a concussion or head injury during a competition or practice, the athlete must be immediately removed from the competition or practice and cannot return to practice or competition until a Health Care Professional has evaluated the athlete and provided a written authorization to return to practice and competition. The KSHSAA recommends that an athlete not return to practice or competition the same day the athlete suffers or is suspected of suffering a concussion. The KSHSAA also recommends that an athlete's return to practice and competition should follow a graduated protocol under the supervision of the health care provider (MD or DO).

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/concussion/HeadsUp/youth.html>

For concussion information and educational resources collected by the KSHSAA, go to:

<http://www.kshsaa.org/Public/General/ConcussionGuidelines.cfm>

Student-athlete Name Printed

Student-athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date

USD Athletic Medicine
Emergency Information

Please Print:

Name _____ B-Day _____ Age _____ Grade _____

Parents/Guardians Name: _____

Address: _____ Home Phone: _____

Father's Work: _____ Work Phone: _____

Mother's Work: _____ Work Phone: _____

Insurance Company: _____ ID# _____

In An Emergency, If Parents Cannot Be Contacted:

Notify: _____ Phone: _____

I/We the undersigned guardian of the minor, do hereby authorize any x-rays, anesthetic, dental, medical, or surgical diagnosis or treatment deemed advisable by: (1) a licensed physician, or (2) coach, trainer, and/or high school official who is in temporary custody of the minor listed above.

Parents Signature: _____ Date: _____

Family Doctor: _____ Phone: _____

Health History

	Yes	No
Kidney Injuries	___	___
Heart Condition or Disease	___	___
Diabetes	___	___
Asthma	___	___
While Competing, Do you wear:		
Glasses	___	___
Contacts	___	___
Allergy to any Medications	___	___

Please State What: _____

Any Medications you are taking now: _____

Date of last Tetanus Shot: _____