



Welcome
to
Pre-K

Mrs. Cellon's
2019-2020 Class Handbook

Hank Jones
Early Childhood Center
at Troy Elementary School

Welcome to Mrs. Cellon's 2019-2020 Pre-K Class!

I am so excited to begin my 2nd year teaching Pre-K and having your child in my class!! I believe we are going to have a great year together!

My name is Lindsay Cellon. My husband, Jonathan and I have been married for 15 years. We have three children who all attend Troy Elementary School; Alice, Ada and Will. I grew up in DeFuniak Springs, FL and graduated from Walton High School in 2000. My Bachelor of Arts degree is from the University of Florida with a major in Linguistics and minors in Spanish and Teaching English as a Second Language. I am currently working toward a Masters degree in Early Childhood Education from Troy University.

We enjoy traveling to big cities with the kids, building forts in the woods with neighbors, swimming, running and watching Gator sports.

I am looking forward to a wonderful year in PRE-K!

Parent/Teacher Relationship

I feel that a good parent/teacher relationship is necessary for maximum school success. Throughout the year I will communicate with you through notes, telephone calls, a weekly newsletter (which will be sent home every Friday in your child's folder), daily behavior charts and parent/teacher conferences. Through the world of technology I have a class web page that you may check for important dates and news at <http://www.tes.troyschools.net>. Also, I will be sending out school and classroom reminders through Remind. Remind is a one-way text messaging system that keeps everyone's numbers private. I encourage you to contact me if you have any questions or concerns at any time. You can reach me at school 566-8823 ext.3916, send me a note or e-mail me at cellonL@troyschoos.net. I will be available for conferences concerning your child's progress **by appointment only!**

Parent Participation

Throughout the school year there will be a variety of special classroom activities and occasions. I encourage you to support your child by sending needed supplies and treats. Your support of school activities makes your child feel important and sends the message that you value school.

School Attendance

Your child's regular and prompt attendance is important to his/her success. Pre-School learning activities are interactive and many times involve group interaction with classmates. Please view pre-school as a priority, and see that your child attends, except in cases of illness or emergency.

School Hours

Pre - K students attend school from 7:50 a.m. to 2:45 p.m. Please do not bring your child to school any earlier than 7:15 a.m. They will stay in the "Early Bird Room" until 7:40 a.m. At this time your child's teacher will take them to their classroom to begin the day. If your child is going to be attending our After School program, he or she will need to be picked up by 5:30 p.m. Should you need to pick up your child during the school day, you must sign him/her out in the office when you arrive. When you arrive, the secretary will call your child to come to the office via the phone in our classroom.

Changes in Transportation

If you plan for your child to travel home differently than the mode that you have filled out in writing on the Personal Information Form, then I **must** be notified of the change by a **hand written note, phone call from the parent/guardian or school secretary**. Do not rely on your child to tell me this information because children often become confused and relay messages incorrectly. **If no note or call is received, your child will be sent home by his/her usual mode of transportation.** If you will be picking your child up at car riders in the afternoon, **please** use the name card that I have provided to you for your child. The large printed sign must be in the front windshield. If you lose or need an extra please inform me and I will provide you with another. Your help in this matter will drastically improve the movement of traffic in the afternoon, as well as the overall safety of your child! Our faculty and administration would greatly appreciate your help!

Breakfast

The cost of breakfast is included in your tuition. Our class will eat breakfast together in the cafeteria each morning at 8:00 am. If you plan on bringing your child in after that time, you may want to be sure they have had a little something to eat! If your child doesn't drink milk, you are more than welcome to send him/her something else to drink for breakfast.

Lunch

The cost of lunch is also included in your tuition. The lunch and breakfast menu are on the Troy City School's website. If you don't think your child will eat the school lunches you are more than welcome to send their lunch from home. However, I am not allowed to warm up anything for them in the microwave. If your child doesn't drink milk, please send him/her something else to drink for lunch.

Snack

The children will have an afternoon snack time. Snack is provided for your child each day. You are also welcome to send your child their own snack. Your child will have a choice of: Rice Krispie Treat, Ranch Doritos, Nacho Doritos, Cheetos, CoCoa Puff cereal bar, and Animal crackers. Drink choices are: Water and Juicy Juice.

Water Bottle

Please send a spill proof water bottle daily in your child's backpack or lunchbox. We play outside if the weather is nice and want to make sure children are drinking enough water especially on warmer days.

Nap

Your child will need some type of rest mat for nap time. If you do not have a rest mat, a small pillow with a blanket or sleeping bag is fine. I will try to send these home every week for washing on Fridays. Please remember to return to school the following Monday. Students are not required to go to sleep during nap time, but they must lie still and quiet as not to disturb those that want to sleep. We only nap for 1 hour each day.

Money

Throughout the year your child will bring money to school for various reasons. Always send money in a sealed envelope with the following information written on it:

Child's name

Amount of money enclosed

Purpose of the money (book fair, Christmas Store, t shirts, fundraiser, etc.)

Teacher's name

With a large group of children to keep track of and several reasons to collect money, this helps me out. Also, if the envelope is lost it can be returned to our classroom. You would be surprised how many times the lost money has been returned to the owner, due to the fact that the correct information was provided on the outside of the sealed envelope.

Birthdays

Birthdays are special occasions for children. If you wish to send treats for the class in honor of your child's birthday, please send a note a couple of days in advance, so I can set aside time for the party. I ask that you not send birthday invitations to be passed out at school unless each student in the class will be receiving an invitation. I know this may be more convenient. However, it can result in hurt feelings for those not receiving an invitation.

Discipline

Establishing good classroom discipline is critical for each child's success and well-being. I want every child to feel that our classroom is safe and secure. It is also equally important that each child learns to develop self-discipline and good work habits, to resolve conflicts peacefully, and to think independently.

Units of Study

Our curriculum, Scott Foresman's: O.W.L. (Opening the World of Learning), provides 8 units of study. These 8 units incorporate the academic areas of Language Arts, Mathematics, Social Studies, Science and various social skills that will prepare your child for success in Kindergarten. The weekly newsletter will notify you what our unit of study is for the week.

Unit 1: Welcome, New Friends

Unit 2: My Family

Unit 3: Our Community

Unit 4: Life on a Farm

Unit 5: From Jungle to Desert

Unit 6: Earth and Sky

Unit 7: Shadows and Reflections

Unit 8: Make It Move

Closing

In closing, I would like to add that due to the fact that a portion of our work will be completed through centers and hands on activities, please do not expect a great deal of daily papers. Please feel free to contact me at school if you have any questions or concerns.

Sign up for important updates from Mrs. Reeves.

Get information for Troy Elementary School right on your phone—not on handouts.

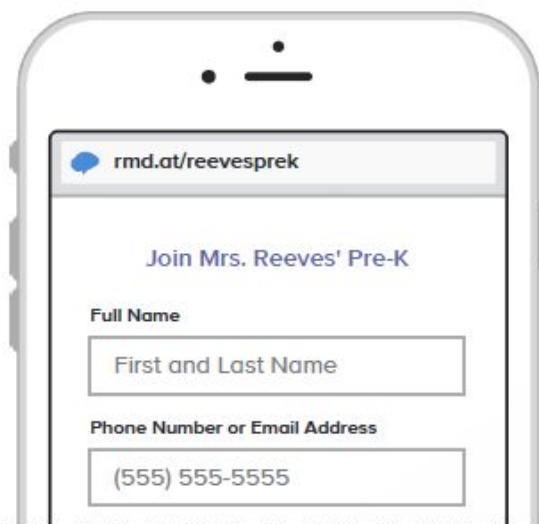
Pick a way to receive messages for **Mrs. Reeves' Pre-K**:

- A** If you have a smartphone, get push notifications.

On your iPhone or Android phone, open your web browser and go to the following link:

rmd.at/reevesprek

Follow the instructions to sign up for Remind. You'll be prompted to download the mobile app.



- B** If you don't have a smartphone, get text notifications.

Text the message @reevesprek to the number 81010.

If you're having trouble with 81010, try texting @reevesprek to (334) 610-3586.



Don't have a mobile phone? Go to rmd.at/reevesprek on a desktop computer to sign up for email notifications.



Dear Parents,

On Monday, August 22nd we will begin our Color Unit. Each day we will learn a new color and do activities with that color.

Please let your child wear a shirt of the designated color for the day.

Thank you so much for your support.

Monday, 8/22- **Brown**

Tuesday, 8/23- **Red**

Wednesday, 8/24- **Yellow**

Thursday, 8/25- **Blue**

Friday, 8/26- **Green**

Monday, 8/29- **Purple**

Tuesday, 8/30- **White**

Wednesday, 8/31 - **Black**

Thursday, 9/1- **Orange**

Friday, 9/2- **Favorite Color**



Mrs. Cellon's Pre-K Schedule

Early Bird Room :	7:15	-	7:40
Unpack/ Morning Routines :	7:40	-	8:00
Breakfast/ Restroom :	8:00	-	8:30
Large Group/Calendar/ Literacy Circle :	8:30	-	8:50
Center Time :	8:50	-	9:50
Restroom Break :	9:50	-	10:00
Outside Time {P.E. w/ Troy Univ. M, W, F}:	10:00	-	10:50
Clean-Up/ Restroom :	10:50	-	11:00
Lunch :	11:00	-	11:30
Clean-up/ Restroom :	11:30	-	11:40
P.E. :	11:40	-	12:10
Math Circle :	12:10	-	12:30
Restroom :	12:30	-	12:40
Unit/ Story Time :	12:40	-	1:05
Rest/ Nap Time :	1:05	-	2:05
Wake-up/ Restroom/ Snack:	2:05	-	2:30
Pack-up/ Dismissal :	2:30	-	2:45

TROY ELEMENTARY SCHOOL

2015-2016



STUDENT HANDBOOK

Available at
www.tes.troyschools.net

or

Scan Here



Please sign and return
the attached
"School-Parent
Compact"
from the
TES
STUDENT
HANDBOOK

Please also sign and
return the following
forms from the Troy
City Schools
Code of Conduct:

- Internet Usage Contract
- Parent Permission for Publication of Student Photo/Video
- Acknowledgment

Stay Connected with TES!



Troy Elementary School "School – Parent Compact"

School Responsibilities:

Troy Elementary School will:

- Provide student focused and data-driven instruction through the assistance of research based programs and best practices by highly qualified teachers and staff. All activities are focused on raising achievement, where a variety of resources and support systems will be provided to ensure student success.
- School-wide parent conferences are scheduled in the fall and spring of the school year. Individual teacher/parent conferences will be conducted as requested by the teacher or parent. The school will also provide open house opportunities at the beginning of the school year for parents to learn of classroom and school routines and procedures. Workshops will also be conducted to help parents learn of curriculum programs and how they may assist their students at home. Special events such as Parent Teacher Organization meetings, Parent Meals, King for a Day, musical programs, awards programs, etc. will be held to encourage parental involvement and to provide recognition to parents and students.
- Student progress reports are provided to parents during the midpoint of each grading period and online access to grades are provided online via I-now on the website.
- Parents have formal access to their child's teacher through an appointment during the teacher's planning time, or before or after school hours. Parents are encouraged to communicate with the teacher and administration by letter/note, email, or phone call.

Parent Responsibilities:

We, as parents, will support our child's learning in the following ways:

- Ensure that my child is punctual and attends school regularly.
- Establish a time for homework and review it regularly.
- Support the school in the effort to maintain proper discipline.
- Encourage my child's efforts and be available for assistance at home and at school.
- Monitor the amount of television and video game engagement of my child.
- Read with and/or read to my child and let my child see me read.
- Support classroom and school-wide events and activities such as PTO meetings, fundraisers, field trips, volunteer opportunities, special programs, etc.

Student Responsibilities:

I, as a student, will share the responsibility to improve my academic achievement to meet or exceed the State's high standards. Specifically, I will:

- Display a daily attitude that will help me learn and be successful.
- Attend school regularly and on time.
- Come to school with the required materials and tools required for learning.
- Complete and return homework assignments.
- Observe regular study hours.
- Obey the Code of Student Conduct.

SIGNATURES:

School/Date

Parent(s)/Date

Student/Date

TROY CITY SCHOOL INTERNET USAGE CONTRACT

User Agreement (to be signed by all adult users and student users 2nd grade and above):

I, _____ (please print full name), hereby certify that I have received a copy of the Troy City Schools' Internet and IT Resources Acceptable Use Policy and that receipt of said Policy serves as a notice to me and my parents and/or legal guardian of the policy and its provisions. I understand and agree that it is my responsibility to fully inform myself of the provisions of this Policy, and I understand and agree that I will fully comply with and abide by all provisions of this Policy. I understand and agree that any violation of this Policy may result in disciplinary action against me which can include, but shall not be limited to, any disciplinary action authorized under the entire range of discipline provided for in the Student Code of Conduct up to and including expulsion, and, in addition, prohibition of use of the Internet. I hereby release and agree to hold harmless the Troy City Schools, the Troy City Board of Education and all other organizations and persons from any liability, loss, expense, claims, or damages, whether to person or property, arising from my use of the Internet. In addition, I hereby agree to accept full responsibility and liability for the consequences of my use of the Internet.

User Signature & Date

Witness Signature & Date

Parent Agreement (to be signed by parents of all students):

I, _____ (please print full name), the parent/guardian of the above student, hereby certify that I have read the Troy City Schools' Internet and Instructional Technology Use Policy. I agree and acknowledge that it is the responsibility of the above student to fully inform him/herself of the provisions of this Policy, and I agree with the requirement that the above student must fully comply with and abide by all provisions of this Policy. I understand and agree that any violation of this Policy by the above student may result in disciplinary action against him/her which can include, but shall not be limited to, any disciplinary action authorized under the entire range of discipline provided for in the Student Code of Conduct up to and including expulsion, and, on addition, prohibition of use of the Internet by that student. I hereby covenant and agree that I accept full responsibility for the use of the Internet by the above student, and I hereby agree to be responsible for all financial and legal liabilities and consequences which may result from the above student's use of the Internet and other technology services provided by the Troy City Schools. I hereby release and agree to indemnify and hold harmless the Troy City Board of Education, and all other organizations and persons from any liability, expense, loss, claims or damages, whether to person or property arising from the use of the Internet by the above student.

For my student in grades 2 – 12, I understand the Troy City School System will issue him/her an email account provided by Gaggle.net. I understand that the Troy City School System has determined what features my child has access to, which may include email, homework drop boxes, message boards, chat rooms, blogs, and digital storage lockers. I understand that all email messages and postings will be automatically filtered for inappropriate words and images, and that any messages determined to be questionable will be diverted to my student's email administrator for review. Consequences for misuse of email will be determined by the district, and may include restrictions, loss of privileges, or other disciplinary action. I further understand that my student's administrator or teacher can view my student's email account and digital locker at any time.

Parent Signature & Date

Check this box if you do NOT want your child to have an email address.

SCHOOL MEDICATION PRESCRIBER/PARENT AUTHORIZATION

STUDENT INFORMATION

Student's Name _____ Date of Birth _____
School _____ Grade _____ Teacher _____ School Year _____
List any known drug allergies/reactions _____ Height (inches) _____ Weight (lbs) _____

PRESCRIBER AUTHORIZATION

Name of Medication _____ Reason for Taking _____
Dosage _____ Route _____ Frequency/Time(s) to be given _____
Begin Medication _____ Stop Medication _____
Date Date

Special Instructions:

- Does medication require refrigeration? Yes No
- Is the medication a controlled substance? Yes No
- Is self-medication permitted and recommended for this student? Yes No
- If yes, do you recommend this medication be kept "on person" by the student? Yes No

Potential Side Effects/Contradictions/Adverse Reactions _____

Treatment Order in the event of an adverse reaction: _____
(Attach additional sheet or use the back of this form if necessary)

I hereby affirm that this student has been instructed in the proper self-administration of the prescribed medication (s).

Signature of Prescriber (please print) _____ Date _____ Phone _____ Fax _____

PARENT AUTHORIZATION

I authorize the School Nurse, the registered nurse (RN) or licensed practical nurse (LPN) to delegate to unlicensed school personnel the task of assisting my child in taking the above medication. I understand that additional parent/prescriber signed statements will be necessary if the dosage of medication is changed. I also authorize the School Nurse to talk with the prescriber or pharmacist should a question come up about the medication.

Medication must be registered with the principal, his/her designee, or the school nurse. It must be in the original, unopened, sealed container and be properly labeled with the student's name, prescriber's name, date of prescription, name of medication, dosage, strength, time interval, route of administration and the date of drug expiration when appropriate.

Signature of Parent _____ Date _____ Phone _____ Cell _____

SELF-ADMINISTRATION AUTHORIZATION

I authorize and recommend self-medication by my child for the above medication. I also affirm that he/she has been instructed in the proper self-administration of the prescribed medication by his/her attending physician. I shall indemnify and hold harmless the school, the agents of the school, and the local board of education against any claims that may arise relating to my child's self-administration of prescribed medication(s).

Signature of Parent _____ Date _____ Phone _____ Cell _____

Troy City Schools

Parent Permission for Publication of Student Photo/Video

Dear Parent/ Guardian,

Troy City School District is including photographs and/or video recordings of students and teachers in school and classroom settings on our website. Also, these photographs/recordings will be utilized for professional development activities and for publications related to Troy City Schools. It is our practice to seek parent permission before including a student's photograph or video clip. We must have your signed permission in order to include your student in the media publications. Please review, sign, and return the consent form below.

Troy City School District has my permission to take photographs and/or video recordings of my child, _____.

Print Student's Name

These photographs and/or video recordings may be used on the district website and in district publications for the 2015-2016 school term.

School _____

Student's Grade _____

Student's Homeroom Teacher _____

Parent/ Guardian Signature _____

Print Parent/ Guardian's Name _____

Date _____

Please cut along dotted line and return to homeroom teacher.

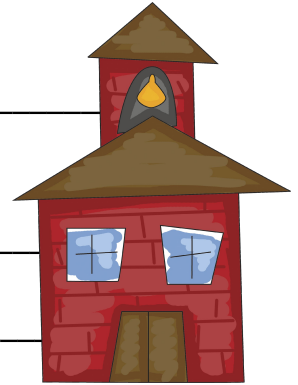
Student Information Sheet

Child's Name:

First Middle Last

Child's Address:

Date of Birth: _____ Age Today: _____ Boy _____ Girl _____



Parent Information

Mother's Name		Father's Name	
Street Address		Street Address	
City, State, Zip		City, State, Zip	
Home Phone		Home Phone	
Work Phone		Work Phone	
Cell Phone		Cell Phone	
Email		Email	
The best way to be reached for a non-emergency.		The best way to be reached for a non-emergency.	
The best time to be reached.		The best time to be reached.	

After School Information

After School Program	M	T	W	Th	F	
ECC Car Rider	M	T	W	Th	F	My child will be picked up by: _____
Other people allowed to pick up your child:						

Other important after school information:

Medical Concerns

Child's Doctor		Office Number	
Allergies	Y N	Wears Glasses	Y N
If yes, please list			

Other important medical information:

Dear Parents,

I would like to know more about your child so that I can better meet his/her individual needs. Please take a moment to complete this "Get-To-Know-You" letter and return it to me on Monday, August 12, 2019. Thank you for your time and support.

Sincerely,
Mrs. Cellon

Child's Name: _____

My child likes to be called _____

What motivates my child? (i.e. positive reinforcement, prizes, etc.) _____

What kinds of things upset my child? _____

My child likes to _____

One thing I really enjoy about my child is _____

My child's academic/social strengths are: _____

Brothers and Sisters at TES

Name	Teacher	Grade