



JOINT OPERATING COMMITTEE MEETING

February 5, 2025

6:30 P.M.

DIRECTOR'S REPORT

- ITEM # 1: Recommend approval of Building Trades students to attend Work Based Learning events at Elmwood Park Zoo to install key components to animal habitats on an ongoing basis. Trip is at no cost to CMTHS or students. (Attachment # 1)
- ITEM # 2: Recommend approval for Automotive Technology program to attend field trip to PA Convention Center on January 14, 2025, to attend the Auto Dealers Association of Greater Philadelphia "Tech Tuesday" to learn more about the automotive industry and meet a variety of esteemed organizations within the profession. Trip is at no cost to CMTHS or students. (Attachment # 2)
- ITEM # 3: Recommend approval for Dreaming Forward student group to attend field trip to University of Pennsylvania, Graduate School of Education on January 15 and 16, 2025. Trip is at no cost to CMTHS or students. (Attachment # 3)
- ITEM # 4: Recommend approval of SkillsUSA trip to State Officer Training on January 30 and January 31, 2025, in Greater Altoona, PA. Cost not to exceed \$500. (Attachment # 4)
- ITEM # 5: Recommend approval of Building Trades, Culinary Arts, and Networking Dual Enrollment students to attend field trip to Pennsylvania College of Technology to tour campus on February 21, 2025. Cost not to exceed \$1,500. (Attachment # 5)
- ITEM # 6: Recommend approval of Culinary Arts, and Baking and Pastry students to attend field trip to Montgomery County Community College for Hospitality Institute Industry Day on February 21, 2025. Trip is at no cost to CMTHS or students. (Attachment # 6)
- ITEM # 7: Recommend approval for Healthcare Science program to attend field trip to Jefferson Einstein Montgomery Hospital on April 28, 2025, to learn to tour the hospital. Trip is at no cost to CMTHS or students and is financed by the Main Line Chamber of Commerce. (Attachment # 7)

- ITEM # 8: Recommend the approval of ten staff members to attend Student Assistant Program (SAP) training at MCIU. SAP Training is designed to assist school personnel in identifying issues including alcohol, tobacco, other drugs, and/or mental health issues which pose a barrier to a student's success. Training is financed through Pennsylvania Commission on Crime and Delinquency (PCCD) Grant and at no cost to CMTHS.
- ITEM # 9: Recommend the approval of James Brunken, Assistant Director, to attend PACTESP Winter Conference in Harrisburg, PA. The conference focuses on collaboration, professional development, and practical strategies to meet the evolving needs of special populations in CTE. Cost not to exceed \$150.00. (Attachment # 8)
- ITEM # 10: Recommend approval for Dr. King, Executive Director and David Ayres, Building Trades Instructor, to attend PACTA's Western CTC Study Tour, March 3 - 5, 2025. Participants will view other CTC programs will tour facilities, discuss practices and network with administration, faculty, and students in Western part of the state. Cost not to exceed \$1,000.00 (Attachment # 9)
- ITEM # 11: Recommend approval for two staff members, Debora Broderick, SEA Instructor, and Kendall Wilson, Coordinator of Behavioral Supports, to attend International Institute for Restorative Practices training in Bethlehem, PA, May 7 - 9, 2025. Cost not to exceed \$4,400. (Attachment # 10)
- ITEM # 12: Recommend the first reading of the following policies: (Attachment # 11)
- | | |
|----------------|--|
| Policy # 103.1 | Nondiscrimination - Qualified Students with Disabilities |
| Policy # 126.1 | Evaluation of Instructional Programs |
- ITEM # 13: Recommend approval of supplemental contract for the second semester of the 2024 – 2025 school year:
- | <u>Name</u> | <u>Supplemental</u> | <u>Amount</u> |
|-------------------|---------------------|---------------|
| Jerrold Mackereth | Dual Enrollment | \$1,000.00 |
- ITEM # 14: Recommend approval of resignation of Jonathan Angelilli, Automotive Technology instructor, as of January 17, 2025, and to repost this position. (Attachment # 12)

DR. ANGELA KING
EXECUTIVE DIRECTOR

Field Trip Request Form

Sent 01/16/2025 At 1:05 PM By William Barber

Workflow Step 1 | Form Entry | William Barber

Submitted by William Barber on 01/16/2025 at 1:13 PM

Legal Name

Staff Submitting Form

First Name
William

Last Name
Barber

Purpose of trip*

Field Trip - One time

Work-based Learning - Multiple times

Student Organization

Select Program/CTSO*

Building Trades

Other Group Name

Which session(s) attending field trip?*

AM Session

PM Session

BOTH

Multi-Group

Name of the Location
Elmwood Zoo

Address

Trip Location

Address 1
1661 harding DBlvd

City
Norristown

State
Pennsylvania

Zip Code
19401

Are there Multiple Trips to Same Location?

Yes

No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*
02/03/2025

Departure Time from CMTHS*
8:30 am

Pick up Time from Trip Location*
9:45

Return Time back to CMTHS*
10:00

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account

Van - Reserve in Skedda
Large Van

Approximate # Students*
8

Approximate # of Chaperones*
1

Head Chaperone's First & Last Name*
William Barber

Head Chaperone's Cell Phone #*
2158283977

Approximate Cost of Trip*
0

File Upload(s)

Upload Information
No files uploaded

 Link will display here

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 01/28/2025 at 8:42 AM

James Brunken 

Signed: _____
James Brunken
Time: _____
Tue at 8:41 AM
IP Address:
216.162.87.1, 107.154.68.22

User:
James Brunken
Email:
jbrunken@cmths.org

Comments

Please RSVP the large van as soon as possible.

Workflow Step 3 | Review Form | Tamara Washington

Submitted by Tamara Washington on 01/28/2025 at 8:52 AM

Field Trip Request Form

Sent 12/16/2024 At 8:03 AM By Michael Hoult

Workflow Step 1 | Form Entry | Michael Hoult

Submitted by Michael Hoult on 12/16/2024 at 8:18 AM

Legal Name

Staff Submitting Form

First Name
Michael

Last Name
Hoult

Purpose of trip*

- Field Trip - One time Work-based Learning - Multiple times Student Organization

Select Program/CTSO *

Auto Tech

Other Group Name

Which session(s) attending field trip?*

- AM Session
 PM Session
 BOTH
 Multi-Group

Name of the Location

PA Convention Center - ADAGP Top Tech Challenge

Address

Trip Location

Address 1
149 N Broad St

City
Philadelphia

State
Pennsylvania

Zip Code
19102

Are there Multiple Trips to Same Location?

- Yes No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*
01/14/2025

Departure Time from CMTHS*
8:15am

Pick up Time from Trip Location*
1:15

Return Time back to CMTHS*
2:15

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account

Van
Small Van

Approximate # Students*
5

Approximate # of Chaperones*
1

Head Chaperone's First & Last Name*
Michael Hoult


Head Chaperone's Cell Phone #*
267-432-7033

Approximate Cost of Trip*
0

File Upload(s)

Upload Information

 [Tech Tuesday One Sheet \(Schools\).pdf](#)

 Link will display here

Comments

I would like to take all 5 Senior Co-op students to the Top Tech challenge in Philly at the convention center (Philly Auto Show venue). Please see uploaded file for more information. Would the small van hold 5 students and myself? Thank you.

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 12/16/2024 at 11:52 AM

James Brunken 

Signed:

User:

James Brunken
Time:
12/16/2024 at 11:51 AM
IP Address:
216.162.93.11, 107.154.68.28

James Brunken
Email:
jbrunken@cmths.org

Comments

Yes the small van should hold 5 students and yourself. PLease make sure that it is available in Skedda.

Workflow Step 3 | Review Form | Tamara Darden-Washington

Submitted by Tamara Darden-Washington on 12/16/2024 at 12:18 PM



TECH TUESDAY DETAILS

Date: Tuesday, January 14th

Time: 9:30am – 12pm

**Students and chaperones may visit the Philadelphia Auto Show at no charge post the Tech Tuesday event.*

Location: Philadelphia Auto Show – Pennsylvania Convention Center (Hall G)

For the first time, the Auto Dealers Association of Greater Philadelphia is inviting high school automotive students across the region to meet & greet with a variety of esteemed organizations within our industry.

Dealers, manufacturers, educators, and sponsoring vendors will be encouraging the next generation to consider automotive as their future.

In addition, specifically registered students will be taking the written exam to qualify for the 2025 Tech Competition which will take place in March.

Details of the Day

- 9:30am - Students expected to begin arriving
- 9:45am to 10am – Greetings & Orientation
- 10am to 12pm – Students taking exam in room 126-B
- 10am to 10:25am – Networking students off to assigned activity 1
- 10:30am to 10:55am – Networking students off to assigned activity 2
- 11am to 11:25am - Networking students off to assigned activity 3
- 11:30am to 11:55am - Networking students off to assigned activity 4
- 11:55am to 12pm – Closing Remarks & Departure to the Philly Auto Show

Welcome & Orientation

Brief remarks & thank you to participants. Instructions for the day.

Networking A & B

All participants in the networking area will be separated into two sections (A & B). All students will spend 50 minutes in this area and both areas back-to-back.

Dealer Panel: Automotive Career Guidance

Students will have the opportunity to hear from several of the region's dealership leaders. The dealer panel will represent a variety of backgrounds, brands, and organizational scale.

Sample Topics of conversation will include:

- Skills are most needed for an entry level dealership employee/technician
- Recommendations on skills/classes students should focus on now to be prepared for the dealership.
- Discussion on the advantages of working at a dealership
- Creating clear direction on how to discover what type of organization and culture a student would like to experience.

Educational Presentation: What You Really Need in Your Toolbox

Milwaukee Tools and a chosen dealer representative will educate the students on the essential tools as a starter technician.

Sample Topics of conversation will include:

- The essential starter kits
- Elements a student/starter tech should look for in their tools

Transportation Directions and Check-In

Each school will be provided an assigned envelope with the following:

- Instructions for the day
- Assigned color lanyards with school name and bar code to enter the auto show at 12pm *code will be good for Tuesday only
- Passports for stamping to enter raffle
- One returning ticket to the Philly Auto Show for each student

Instructor will be responsible for passing out a lanyard and passport to each student.

Transportation should be directed to the following address:

149 N. Broad St. Philadelphia, PA 19102

To avoid confusion, please do **NOT** direct them to the Pennsylvania Convention Center. Provide the address as listed above. Onsite map and specific directions to follow in early January.

If you have any questions, please do not hesitate to reach out to the Auto Dealers of Greater Philadelphia:

Hector Guzman
hector@adagp.com
Cell: 610-547-7699

Jenn Jackson
jenn@adagp.com
Cell: 704-907-9288

Field Trip Request Form

Sent 01/13/2025 At 11:31 AM By Debora Broderick

Workflow Step 1 | Form Entry | Debora Broderick

Submitted by Debora Broderick on 01/13/2025 at 11:35 AM

Legal Name

Staff Submitting Form

First Name
Debora

Last Name
Broderick

Purpose of trip*

Field Trip - One time

Work-based Learning - Multiple times

Student Organization

Select Program/CTSO *

Other

Other Group Name

Dreaming Forward

Which session(s) attending field trip?*

AM Session

PM Session

BOTH

Multi-Group

Name of the Location

University of Pennsylvania, School of Education

Address:

Trip Location

Address 1:
3440 Market St

City
Philadelphia

State
Pennsylvania

Zip Code
19122

Are there Multiple Trips to Same Location?

Yes

No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*

01/15/2025

Departure Time from CMTHS*

7AM from Norristown Transit Center

Pick up Time from Trip Location*

3:45 from Norristown Transit Center

Return Time back to CMTHS*

n/a we are taking public transportation

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account

n/a Free trip

Van - Reserve in Skedda

Other

Approximate # Students*

9

Approximate # of Chaperones*

1

Head Chaperone's First & Last Name*

Deb Broderick

Head Chaperone's Cell Phone #*

6108361536


Approximate Cost of Trip*

free

File Upload(s)

Upload Information

No files uploaded

 Link will display here

Comments

We are taking public transportation. We will meet at 7AM on the train platform at the Norristown Transit Center. We will return to the same train station at 3:45PM. All students have arranged their transportation to and from the train station.

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 01/14/2025 at 8:20 AM

James Brunken 

Signed:

User:

James Brunken
Time:
01/14/2025 at 8:20 AM
IP Address:
216.162.93.11, 107.154.68.28

James Brunken
Email:
jbrunken@cmths.org

Workflow Step 3 | Review Form | Tamara Washington

Submitted by Tamara Washington on 01/14/2025 at 8:24 AM

Field Trip Request Form

Sent 01/13/2025 At 11:09 AM By Colleen Kriebel

Workflow Step 1 | Form Entry | Colleen Kriebel
Submitted by Colleen Kriebel on 01/13/2025 at 11:15 AM

Legal Name

Staff Submitting Form

First Name: Colleen
Last Name: Kriebel

Purpose of trip*

- Field Trip - One time
- Work-based Learning - Multiple times
- Student Organization

Select Program/CTSO *

Baking

Other Group Name
SkillsUSA

Which session(s) attending field trip?*

- AM Session
- PM Session
- BOTH
- Multi-Group

Name of the Location
Greater Altoona CTC 1500 4th Avenue Altoona, PA 16602

Address:

Trip Location

Address 1
1500 4th Avenue

City
Altoona

State
Pennsylvania

Zip Code
16602

Are there Multiple Trips to Same Location?

- Yes
- No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*
01/30/2025

Departure Time from CMTHS*
2:30pm

Pick up Time from Trip Location*
2:30pm

Return Time back to CMTHS*
7pm

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account

Van - Reserve in Skedda
Small Van

Approximate # Students*
2

Approximate # of Chaperones*
1


Head Chaperone's First & Last Name*
Colleen Kriebel

Head Chaperone's Cell Phone #*
6105135146

Approximate Cost of Trip*
\$400

File Upload(s)

Upload Information
No files uploaded

 Link will display here

Comments

SkillsUSA State Officer Training Cost TBD based on food receipts. Rooms are \$150 each Need 2 rooms

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 01/14/2025 at 8:22 AM

James Brunken 

Signed:
James Brunken

User:
James Brunken

Time:
01/14/2025 at 8:22 AM
IP Address:
216.162.93.11, 107.154.68.28

Email:
jbrunken@cmths.org

Workflow Step 3 | Review Form | Tamara Washington
Submitted by Tamara Washington on 01/14/2025 at 8:23 AM

Field Trip Request Form

Sent Thu At 7:50 AM By David Ayres

Workflow Step 1 | Form Entry | David Ayres

Submitted by David Ayres on 01/16/2025 at 8:00 AM

Legal Name

Staff Submitting Form

First Name
David

Last Name
Ayres

Purpose of trip*

Field Trip - One time

Work-based Learning - Multiple times

Student Organization

Select Program/CTSO *

Other

Other Group Name

Dual Enrollment

Which session(s) attending field trip?*

AM Session

PM Session

BOTH

Multi-Group

Name of the Location

Pennsylvania College of Technology

Address:

Trip Location

Address 1
1 College Ave

City
Williamsport

State
Pennsylvania

Zip Code
17701

Are there Multiple Trips to Same Location?

Yes

No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*
02/21/2025

Departure Time from CMTHS*
7:00am

Pick up Time from Trip Location*
3:00pm

Return Time back to CMTHS*
6:00pm

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account
1/2 the amount from Penn Tech

Van - Reserve in Skedda

Approximate # Students*
36

Approximate # of Chaperones*
2


Head Chaperone's First & Last Name*
David Ayres

Head Chaperone's Cell Phone #*
2157913733

Approximate Cost of Trip*
1,600

File Upload(s)

Upload Information
No files uploaded

 Link will display here

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 01/16/2025 at 8:32 AM

James Brunken 

Signed:
James Brunken
Time:
Thu at 8:31 AM
IP Address:
216.162.93.11, 107.154.68.28

User:
James Brunken
Email:
jbrunken@cmths.org

Workflow Step 3 | Review Form | Tamara Washington

Submitted by Tamara Washington on 01/21/2025 at 10:02 AM

Field Trip Request Form

Sent Fri At 10:05 AM By Ernest Hadrick

Workflow Step 1 | Form Entry | Ernest Hadrick

Submitted by Ernest Hadrick on 01/27/2025 at 1:51 PM

Legal Name

Staff Submitting Form

First Name
Ernest

Last Name
Hadrick

Purpose of trip*

Field Trip - One time

Work-based Learning - Multiple times

Student Organization

Select Program/CTSO *

Baking

Other Group Name

Culinary

Which session(s) attending field trip?*

AM Session

PM Session

BOTH

Multi-Group

Name of the Location

Montgomery County Community College

Address

Trip Location

Address 1

340 DeKalb Pike

City

Blue Bell

State

Pennsylvania

Zip Code

19422

Are there Multiple Trips to Same Location?

Yes

No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*
02/21/2025

Departure Time from CMTHS*
9:10am

Pick up Time from Trip Location*
1:00pm

Return Time back to CMTHS*
1:30pm

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account
MC3 will cover the cost of the bus

Van - Reserve in Skedda
Other

Approximate # Students*
98

Approximate # of Chaperones*
5

Head Chaperone's First & Last Name*
Ernest C Hadrick III

Head Chaperone's Cell Phone #**
2158330400

Approximate Cost of Trip*
0

File Upload(s)

Upload Information

No files uploaded

 Link will display here

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 01/28/2025 at 8:43 AM

James Brunken 

Signed:

James Brunken

Time:

Tue at 8:43 AM

IP Address:

216.162.87.1, 107.154.68.22

User:

James Brunken

Email:

jbrunken@cmths.org

Comments

Please get me a list of chaperones as soon as possible.

Workflow Step 3 | Review Form | Tamara Washington

Submitted by Tamara Washington on 01/28/2025 at 8:52 AM

Field Trip Request Form

Sent 12/05/2024 At 10:36 AM By Melissa Zimmerman

Workflow Step 1 | Form Entry | Melissa Zimmerman

Submitted by Melissa Zimmerman on 12/05/2024 at 10:39 AM

Legal Name

Staff Submitting Form

First Name

Melissa

Last Name

Zimmerman

Purpose of trip*

Field Trip - One time

Work-based Learning - Multiple times

Student Organization

Select Program/CTSO *

Healthcare

Other Group Name

Level 1 Students

Which session(s) attending field trip?*

AM Session

PM Session

BOTH

Multi-Group

Name of the Location

Jefferson Einstein Montgomery

Address

Trip Location

Address 1

559 W Germantown

City

East Norriton

State

Pennsylvania

Zip Code

Are there Multiple Trips to Same Location?

Yes

No

Please enter the date of the first of multiple trips or one-time trip. Please notify Ms. Mason of the additionally scheduled trips.

Date of First or Only Trip*
04/28/2025

Departure Time from CMTHS*
9:45 AM

Pick up Time from Trip Location*
1:00 PM

Return Time back to CMTHS*
1:15 PM

Bus Transportation Cost

Program Fan Pledge Fund

Other Fund

Other Fund Account
Paid for by Main Line Chamber of Commerce

Van

Approximate # Students*
45


Approximate # of Chaperones*
2

Head Chaperone's First & Last Name*
Noelle Pumo

Head Chaperone's Cell Phone #*
484-886-1464

Approximate Cost of Trip*
0

File Upload(s)
Upload Information
No files uploaded

 Link will display here

Comments

Students will be attending a tour of Jefferson Einstein Hospital with two chaperones with all fees covered by the main line chamber of commerce

Workflow Step 2 | Review & Approve (Or Deny) | James Brunken

Submitted by James Brunken on 12/05/2024 at 1:32 PM

James Brunken 

Signed:
James Brunken

User:
James Brunken

Time:
12/05/2024 at 1:32 PM
IP Address:
216.162.93.11, 107.154.68.28

Email:
jbrunken@cmths.org

Workflow Step 3 | Review Form | Tamara Darden-Washington
Submitted by Tamara Darden-Washington on 12/05/2024 at 1:35 PM

Professional Improvement Conference/Workshop Request Form**General Info**

User **James Brunken**
 Building Central Montco Technical High School
 Employee ID 261325
 Submitted 1/14/2025 9:07 am
 Dates 3/10/2025 to 3/11/2025
 Reference ID D22963-A0-S-L132313423

File Attachment

Please check off supporting documentation: J.BrunkenPATCESPConferenceRegistration.pdf - J.BrunkenPATCESPConferenceRegistration.pdf (282k)

Activity Information

Name of Conference or Workshop: PACTESP Winter Conference
 Brief Description of Conference/Workshop: This conference focuses on collaboration, professional development, and practical strategies to meet the evolving needs of special populations in CTE. Sessions cover a range of topics, including: Learning Support in CTE Programs, Trauma and Effects on Education, Perkins V Special Populations Categories, Burnout Prevention and Strategies, Mental Health and Social Emotional Learning, Utilizing Technology for Individual Success, Support for New Special Education Hires, and Transition Services for IEP Students
 Purpose or reason for attending this conference/workshop: Professional development in the area of special education, Perkins, Trauma and its effects, and mental health and social emotional learning.
 Other attendees: (they will fill out THEIR OWN FORMS to gain permission to attend): None
 Conference/Workshop URL: <https://pactesp.org/>

Dates, Times, Location, Sub needed?

of Meetings = # of Days for the Conference/Workshop

of Meetings 2

#	Date	Time	Location
1.	Mon Mar 10, 2025	7:00 am to 5:00 pm	Location: The Central Hotel and Conference Center 800 East Park Drive Harrisburg PA 17111
2.	Tue Mar 11, 2025	7:00 am to 3:00 pm	Location: The Central Hotel and Conference Center 800 East Park Drive Harrisburg PA 17111

Provider of Training

Provider:
 Other Provider PACTESP

Estimated Expenses:(to be completed when submitting application for approval)

Registration Fee: 150.00
 Transportation : 0.00
 Lodging (include all taxes): 0.00
 Meals: 0.00

Mileage (Multiply the amount of miles to the activity minus the amount of miles from home to work by .67 and put the dollar amount here)) 0.00
 Total Estimated Cost for Conference/Workshop: 150.00
 Enter the Total # of Miles 0

Number of Act 48 hours you are seeking

Total Act 48 Hours: 10.00

Purpose(s)

Purpose: Act 48

Source of Funding

Budgeted General Funds:
 Check #:
 Amount:

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
King, Angela	PRIOR	APPROVED	1/16/2025 3:20 pm
MacInnes, Carol	PRIOR	PENDING	
MacInnes, Carol	PRIOR	PENDING	
Popov, Valerie	PRIOR		
King, Angela	FINAL		

Comments

From James Brunken (Form originally submitted on 1/14/2025 9:07 am)
 0

Expenses

Description	Requested	Approved	Final
Registration	\$150.00	-----	-----
Transportation	\$0.00	-----	-----
Meals	\$0.00	-----	-----
Lodging	\$0.00	-----	-----
Other Expenses	\$0.00	-----	-----
Totals	\$150.00		

Evaluation(s)

Received

Professional Improvement Conference/Workshop Request Form**General Info**

User **Angela King**
 Building **Central Montco Technical High School**
 Employee ID **197597**
 Certificate ID **7454604**
 Submitted **1/24/2025 10:13 am**
 Dates **3/3/2025 to 3/5/2025**
 Reference ID **D22963-A0-S-L132551905**

File Attachment

Please check off supporting documentation:

Activity Information

Name of Conference or Workshop: **Western CTC Tour**
 Brief Description of Conference/Workshop: **PACTA is hosting a Western CTC tour to learn about the CTC's in the the Western part of the State.**
 Purpose or reason for attending this conference/workshop: **Learn more about CTC best practices in the Western part of the state.**
 Other attendees: (they will fill out THEIR OWN FORMS to gain permission to attend): **David Ayres**

Dates, Times, Location, Sub needed?

of Meetings = # of Days for the Conference/Workshop

of Meetings **3**

#	Date	Time	Location
1.	Mon Mar 3, 2025	8:00 am to 4:00 pm	Location: Pittsburgh
2.	Tue Mar 4, 2025	8:00 am to 4:00 pm	Location: Pittsburgh
3.	Wed Mar 5, 2025	8:00 am to 4:00 pm	Location: Pittsburgh

Provider of Training

Provider:
 Other Provider **PACTA**

Estimated Expenses:(to be completed when submitting application for approval)

Registration Fee: **0.00**
 Transportation : **15.00**
 Lodging (include all taxes): **0.00**
 Meals: **0.00**

Mileage (Multiply the amount of miles to the activity minus the amount of miles from home to work by .67 and put the dollar amount here)) 0.00
 Total Estimated Cost for Conference/Workshop: 0

Number of Act 48 hours you are seeking

Total Act 48 Hours: 0.00

Purpose(s)

Purpose:

Source of Funding

Budgeted General Funds:
 Check #:
 Amount:

Finish

Administrator's Section

Expenses

Description	Requested	Approved	Final
Registration	\$0.00	-----	-----
Transportation	\$15.00	-----	-----
Meals	\$0.00	-----	-----
Lodging	\$0.00	-----	-----
Other Expenses	\$0.00	-----	-----
Totals	\$15.00		

Professional Improvement Conference/Workshop Request Form

General Info

User: **David Ayres**
Building: Central Montco Technical High School
Employee ID: 467381
Certificate ID: 7301781
Submitted: 1/23/2025 1:27 pm
Dates: 3/3/2025 to 3/5/2025
Reference ID: D22963-A0-S-L132520197

File Attachment

Please check off supporting documentation: Event_Confirmation_Itinerary_PACTA.pdf - Event_Confirmation_Itinerary_PACTA.pdf (101k)

Activity Information

Name of Conference or Workshop: CTE Western Study Tour
Brief Description of Conference/Workshop: Join us for an exciting and informative Career and Technical Education Study Tour as we explore four career and technical centers in Western Pennsylvania. This immersive three-day event offers a unique opportunity to observe best practices in action and network with fellow administrators. Participants will enjoy guided, half-day visits through each career and technical center, where they will tour facilities, interact with instructors and students, and gain valuable insights. Don't miss this chance to be inspired and bring fresh ideas back to your own school!
Purpose or reason for attending this conference/workshop: Invited to go by Dr.King,to participate in the Western Study tour of four different CTC'S
Other attendees: (they will fill out THEIR OWN FORMS to gain permission to attend): Dr. King
Conference/Workshop URL: chrome-extension://efaidnbmnnnibocainpcolclefindmkai/https://files.constantcontact.com/9ca16a0d701/d7928d

Dates, Times, Location, Sub needed?

of Meetings = # of Days for the Conference/Workshop

of Meetings: 3

#	Date	Time	Location
1.	Mon Mar 3, 2025	11:00 am to 5:00 pm	Location: AW Beattie Career Center
2.	Tue Mar 4, 2025	8:00 am to 5:00 pm	Location: Crawford County CTC, Mercer County Career Center
3.	Wed Mar 5, 2025	8:00 am to 12:00 pm	Location: Parkway West CTC

Provider of Training

Provider: PACTA
Other Provider:

Estimated Expenses:(to be completed when submitting application for approval)

Registration Fee: 0.00
Transportation : 64.40
Lodging (include all taxes): 228.00
Meals: 0.00

Mileage (Multiply the amount of 567.29 miles to the activity minus the amount of miles from home to work by .67 and put the dollar amount here))

Total Estimated Cost for Conference/Workshop: 0
 Enter the Total # of Miles 787

Number of Act 48 hours you are seeking

Total Act 48 Hours: 0.00

Purpose(s)

Purpose: Not for Act 48

Source of Funding

Budgeted General Funds:
 Check #:
 Amount:

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
King, Angela	PRIOR	APPROVED	1/24/2025 12:15 pm
MacInnes, Carol	PRIOR	PENDING	
Popov, Valerie	PRIOR	APPROVED	1/27/2025 7:20 am
King, Angela	FINAL		

Comments

From David Ayres (Form originally submitted on 1/23/2025 1:27 pm)
 787

Expenses

Description	Requested	Approved	Final
Registration	\$0.00	-----	-----
Transportation	\$64.40	-----	-----
Meals	\$0.00	-----	-----
Lodging	\$228.00	-----	-----
Other Expenses	\$0.00	-----	-----
Totals	\$859.69		

Evaluation(s)

Received

Not Completed - 2024-2025 Workshop Evaluation Form

Professional Improvement Conference/Workshop Request Form**General Info**

User **Debora Broderick**
 Building **Central Montco Technical High School**
 Employee ID **237865**
 Certificate ID **9397416**
 Submitted **1/17/2025 10:19 am**
 Dates **5/7/2025 to 5/9/2025**
 Reference ID **D22963-A0-S-L132333631**

File Attachment

Please check off supporting documentation: DBroderickIIRPTraintheTrainer.pdf - DBroderickIIRPTraintheTrainer.pdf (355k)

Activity Information

Name of Conference or Workshop: **Training of Trainers: Fundamentals of Restorative Practices**

Brief Description of Conference/Workshop: **Prepare your team to teach others the key concepts of restorative practices designed for their professional development by completing our Fundamentals of Restorative Practices training and/or our Restorative Conferencing training. Learn how to assist in the sustainable implementation of restorative practices in your school or organization. This interactive event teaches experienced restorative practitioners how to deliver the training modules to their own colleagues, using our materials to provide training either in person or online.**

Purpose or reason for attending this conference/workshop: **To prepare to train CMTHS in Restorative Practice Strategies**

Other attendees: (they will fill out THEIR OWN FORMS to gain permission to attend): **Kendall Wilson**

Conference/Workshop URL: **<https://www.iirp.edu/continuing-education/become-a-restorative-practices-trainer>**

Dates, Times, Location, Sub needed?

of Meetings = # of Days for the Conference/Workshop

of Meetings **3**

#	Date	Time	Location
1.	Wed May 7, 2025	8:30 am to 4:30 pm	Location: 544 Main St. 1A Bethlehem, PA 18018
2.	Thu May 8, 2025	8:30 am to 4:30 pm	Location: 544 Main St. 1A Bethlehem, PA 18018
3.	Fri May 9, 2025	8:30 am to 4:30 pm	Location: 544 Main St. 1A Bethlehem, PA 18018

Provider of Training

Provider:
 Other Provider **International Institute for Restorative Practices**

Estimated Expenses:(to be completed when submitting application for approval)

Registration Fee: **1,995.00**
 Transportation : **0.00**
 Lodging (include all taxes): **547.00**
 Meals: **180.00**

Mileage (Multiply the amount of miles to the activity minus the amount of miles from home to work by .67 and put the dollar amount here)) 18.76
 Total Estimated Cost for Conference/Workshop: 2740.76
 Enter the Total # of Miles 42

Number of Act 48 hours you are seeking

Total Act 48 Hours: 24.00

Purpose(s)

Purpose: Act 48

Source of Funding

Budgeted General Funds:
 Check #:
 Amount:

Finish

Administrator's Section

Approval Summary

Administrator	Approval Type	Status	Date
King, Angela	PRIOR	APPROVED	1/24/2025 10:04 am
MacInnes, Carol	PRIOR	PENDING	
Popov, Valerie	PRIOR		
King, Angela	FINAL		

Comments

From Debora Broderick (Form originally submitted on 1/17/2025 10:19 am)
 42

Expenses

Description	Requested	Approved	Final
Registration	\$1,995.00	-----	-----
Transportation	\$0.00	-----	-----
Meals	\$180.00	-----	-----
Lodging	\$547.00	-----	-----
Other Expenses	\$0.00	-----	-----
Totals	\$2,740.76		

Evaluation(s)

Received

Professional Improvement Conference/Workshop Request Form

General Info

User **Kendall Wilson**
Building Central Montco Technical High School
Employee ID 428299
Submitted 1/13/2025 12:52 pm
Dates 5/7/2025 to 5/9/2025
Reference ID D22963-A0-S-L132288500

File Attachment

Please check off supporting documentation: KWilson_IIRP_2025.pdf - KWilson_IIRP_2025.pdf (353k)

Activity Information

Name of Conference or Workshop: International Institute for Restorative Practices
Brief Description of Conference/Workshop: Restorative Practices Graduate School aims to strengthen relationships, support communities, influence social change, and broaden the field of restorative practices by partnering with practitioners, students, and scholars.
Purpose or reason for attending this conference/workshop: Teach others the key concepts of restorative practices designed for their professional development by completing our Fundamentals of Restorative Practices training and/or our Restorative Conferencing training.
Other attendees: (they will fill out THEIR OWN FORMS to gain permission to attend): Debora Broderick
Conference/Workshop URL: <https://www.iirp.edu/continuing-education/become-a-restorative-practices-trainer>

Dates, Times, Location, Sub needed?

of Meetings = # of Days for the Conference/Workshop

of Meetings 3

#	Date	Time	Location
1.	Wed May 7, 2025	8:30 am to 4:30 pm	Location: 544 Main St., 1A Bethlehem, PA 18018
2.	Thu May 8, 2025	8:30 am to 4:30 pm	Location: 544 Main St., 1A Bethlehem, PA 18018
3.	Fri May 9, 2025	8:30 am to 4:30 pm	Location: 544 Main St., 1A Bethlehem, PA 18018

Provider of Training

Provider:
Other Provider IIRP

Estimated Expenses:(to be completed when submitting application for approval)

Registration Fee: 1,995.00
Transportation : 0.00
Lodging (include all taxes): 0.00
Meals: 180.00

Mileage (Multiply the amount of miles to the activity minus the amount of miles from home to work by .67 and put the dollar amount here)) 0.00
 Total Estimated Cost for Conference/Workshop: 0

Number of Act 48 hours you are seeking

Total Act 48 Hours: 0.00

Purpose(s)

Purpose: Not for Act 48

Source of Funding

Budgeted General Funds:
 Check #:
 Amount:

Finish

Administrator's Section

Expenses

Description	Requested	Approved	Final
Registration	\$1,995.00	-----	-----
Transportation	\$0.00	-----	-----
Meals	\$180.00	-----	-----
Lodging	\$0.00	-----	-----
Other Expenses	\$0.00	-----	-----
Totals	\$2,175.00		



Book	Policy Manual
Section	100 Programs
Title	Nondiscrimination - Qualified Students with Disabilities
Code	103.1 - NEW
Status	First Reading

Authority

The Joint Operating Committee adopts this policy to ensure that all school programs and practices are free from discrimination against all qualified students with disabilities. The Joint Operating Committee recognizes its responsibility to provide academic and nonacademic services and programs equally to students with and without disabilities.[\[1\]](#)[\[2\]](#)[\[3\]](#)[\[4\]](#)[\[5\]](#)[\[6\]](#)[\[7\]](#)[\[8\]](#)[\[9\]](#)[\[10\]](#)[\[11\]](#)[\[12\]](#)

The school shall provide to each qualified student with a disability enrolled in the school, without cost to the student or parent/guardian, a free and appropriate public education (FAPE). This includes provision of education and related aids, services, or accommodations which are needed to afford each qualified student with a disability equal opportunity to participate in and obtain the benefits from educational programs and extracurricular activities without discrimination, to the same extent as each student without a disability, consistent with federal and state laws and regulations.

The Joint Operating Committee encourages students and parents/guardians who believe they have been subjected to discrimination or harassment to promptly report such incidents to designated employees.

The Joint Operating Committee directs that complaints of discrimination or harassment shall be investigated promptly, and corrective or preventative action be taken for substantiated allegations.

Confidentiality

Confidentiality of all parties, witnesses, the allegations, the filing of a complaint and the investigation shall be maintained, consistent with the school's legal and investigative obligations.

Retaliation

The school shall not intimidate, threaten, coerce, discriminate or retaliate against any individual for the purpose of interfering with any right or privilege secured by this policy.

Definitions

Qualified student with a disability - a student who has a physical or mental disability which substantially limits or prohibits participation in or access to an aspect of the school's educational programs, nonacademic services or extracurricular activities.[\[13\]](#)[\[14\]](#)

Section 504 Team - a group of individuals who are knowledgeable about the student, the meaning of the evaluation data and the placement options for the student. This could include, as appropriate, documentation or input from classroom teachers, counselors, psychologists, school nurses, outside care providers and the student's parents/guardians. A representative from the school shall participate as a member of the Section 504 Team.[\[3\]](#)[\[4\]](#)[\[9\]](#)

Section 504 Service Agreement (Service Agreement) - an individualized plan for a qualified student with a disability which sets forth the specific related aids, services, or accommodations needed by the student, which shall be implemented in school, in transit to and from school, and in all programs and procedures, so that the student has equal access to the benefits of the school's educational programs, nonacademic services, and extracurricular activities.[\[15\]](#)

Disability harassment - intimidation or abusive behavior toward a student based on disability that creates a hostile environment by interfering with or denying a student's participation in or receipt of benefits, services, or opportunities in the school's educational programs, nonacademic services, or extracurricular activities.[\[12\]](#)

Delegation of Responsibility

In order to maintain a program of nondiscrimination practices that is in compliance with applicable law and regulations, the Joint Operating Committee designates the school counselor as the school's Section 504 Coordinator.[\[16\]](#)

In addition, each separate building shall have a Section 504 building administrator.

The school shall publish and disseminate this policy and complaint procedure on or before the first day of each school year by posting it on the school's website, if available, and in the student handbook. The school shall notify parents/guardians of the school's responsibilities under applicable law and regulations, and that the school does not discriminate against qualified individuals with disabilities.[\[11\]](#)[\[17\]](#)[\[18\]](#)

Guidelines

If the school has reason to believe that a student should be identified as a qualified student with a disability, should no longer be identified as a qualified student with a disability, or requires a change in or modification of the student's current Service Agreement, the school shall notify the student's school district of residence.[\[19\]](#)

Service Agreement

If a student is determined to be a qualified student with a disability, the school shall coordinate with the student's Section 504 Team to develop, modify or terminate a written Service Agreement. The school shall implement a student's Service Agreement for the delivery of all appropriate aids, services, or accommodations necessary to provide the student with FAPE. The Service Agreement shall address safety education and training in accordance with state regulations, as applicable to each qualified student with a disability enrolled in career and technical programs.[\[4\]](#)[\[15\]](#)[\[21\]](#)

Educational Programs/Nonacademic Services/Extracurricular Activities

The school shall educate a qualified student with a disability with students who are not disabled to the maximum extent appropriate to the needs of the student with a disability. A qualified student with a disability shall be removed from the regular educational environment only when the school determines that educating the student in the regular educational environment with the use of related aids, services, or accommodations cannot be achieved satisfactorily. Placement in a setting other than the regular educational environment shall take into account the proximity of the alternative setting to the student's home.[\[11\]](#)[\[22\]](#)[\[23\]](#)

The school shall not discriminate against any qualified student with a disability in its provision of nonacademic services and extracurricular activities.[11][22][23][24]

Parental Involvement

Parents/Guardians have the right to inspect and review all relevant school records of the student, and meet with the appropriate school officials to discuss any and all issues relevant to accommodations of their child and the provision of services.[15][19][20][25]

Confidentiality of Student Records

All personally identifiable information regarding a qualified student with a disability shall be treated as confidential and disclosed only as permitted by the Family Educational Rights and Privacy Act (FERPA) and its implementing regulations, state regulations, and Joint Operating Committee policy.[26][27][28][29]

Discipline

When necessary, the school shall discipline qualified students with disabilities in accordance with state and federal laws and regulations and Joint Operating Committee policies.[30][31]

Referral to Law Enforcement and Reporting Requirements

For reporting purposes, the term **incident** shall mean an instance involving an act of violence; the possession of a weapon; the possession, use, or sale of a controlled substance or drug paraphernalia as defined in the Pennsylvania Controlled Substance, Drug, Device and Cosmetic Act; the possession, use, or sale of alcohol or tobacco; or conduct that constitutes an offense listed under the Safe Schools Act.[32][33][34]

The Administrative Director or designee shall immediately report required incidents and may report discretionary incidents committed on school property, at any school-sponsored activity or on a conveyance providing transportation to or from school or a school-sponsored activity by a qualified student with a disability, including a student for whom an evaluation is pending, to the local police department that has jurisdiction over the school's property, in accordance with state and federal laws and regulations, the procedures set forth in the memorandum of understanding with local law enforcement and Joint Operating Committee policies. The Administrative Director or designee, in coordination with the student's school district of residence, shall respond in a manner that is consistent with the student's Service Agreement and Behavior Support Plan, if applicable.[13][15][22][26][30][32][35][36][37][38][39][40][41][42][43][44][45]

In making a determination of whether to notify the local police department of a discretionary incident committed by a qualified student with a disability, including a student for whom an evaluation is pending, the Administrative Director or designee shall use the same criteria used for students who do not have a disability.[12][36][45][46]

For a qualified student with a disability who does not have a Behavior Support Plan as part of the student's Service Agreement, subsequent to notification to law enforcement, the school, in consultation with the student's school district of residence and the student's parent/guardian, shall consider whether a Behavior Support Plan should be developed as part of the Service Agreement to address the student's behavior.[15][37]

In accordance with state law, the Administrative Director shall annually, by July 31, report to the Office for Safe Schools on the required form all new incidents committed by qualified students with disabilities, including students for whom an evaluation is pending, which occurred on school property, at any school-sponsored activity or on a conveyance providing transportation to or from the school or a school-sponsored activity.[33][45]

PROCEDURAL SAFEGUARDS

The school shall coordinate with the student's school district of residence to implement a system of procedural safeguards that includes notice of rights to the parent/guardian of a student suspected of being a qualified student with a disability, an opportunity for the parent/guardian to review relevant records, an impartial hearing with an opportunity for participation by the student's parent/guardian, and a review procedure.[25][47]

A student or parent/guardian filing a claim of discrimination need not exhaust these procedures prior to initiating court action under Section 504.[20]

Parental Request for Assistance

Parents/Guardians may file a written request for assistance with the Pennsylvania Department of Education (PDE) if one (1) or both of the following apply:[25]

1. The school is not providing the related aids, services and accommodations specified in the student's Service Agreement.

2. The school has failed to comply with the procedures and state regulations.[25]
PDE shall investigate and respond to requests for assistance and, unless exceptional circumstances exist, shall, within sixty (60) calendar days of receipt of the request, send to the parents/guardians, student's school district of residence and school a written response to the request. The response to the parents'/guardians' request shall be in the parents'/guardians' native language or mode of communication.

Informal Conference

At any time, parents/guardians may file a written request with the school and/or student's school district of residence for an informal conference with respect to the identification or evaluation of a student, or the student's need for related aids, services or accommodations. Within ten (10) school days of receipt of the request, the school and/or student's school district of residence shall convene an informal conference. At the conference, every effort shall be made to reach an amicable agreement.[25]

Formal Due Process Hearing

If the matters raised by the school or parents/guardians are not resolved at the informal conference, the parents/guardians or school, in coordination with the student's school district of residence, may submit a written request for an impartial due process hearing. The hearing shall be held before an impartial hearing officer and shall be conducted in accordance with state regulations.[25][48]

Judicial Appeals

The decision of the impartial hearing officer may be appealed to a court of competent jurisdiction.[25]

COMPLAINT PROCEDURE

This complaint procedure is in addition to and does not prevent parents/guardians from using any option in the procedural safeguards system.[12][25][47]

Step 1 – Reporting

A student or parent/guardian who believes s/he has been subject to conduct by any student, employee or third party that constitutes a violation of this policy is encouraged to immediately report the incident to the Section 504 building administrator. Any person with knowledge of

conduct that may violate this policy, is encouraged to immediately report the matter to the Section 504 building administrator.

A school employee who suspects or is notified that a student has been subject to conduct that constitutes a violation of this policy shall immediately report the incident to the Section 504 building administrator, as well as properly making any mandatory police or child protective services reports required by law.[49]

If the Section 504 building administrator is the subject of a complaint, the student, parent/guardian or employee shall report the incident directly to the Section 504 Coordinator.

The complainant or reporting employee may be encouraged to use the school's report form available from the Section 504 building administrator or Section 504 Coordinator, or to put the complaint in writing; however, oral complaints shall be accepted, documented and the procedures of this policy implemented. The person accepting the verbal or written complaint may provide factual information on the complaint and the investigative process, the impact of choosing to seek confidentiality and the right to file criminal charges. In all other respects, the person accepting the complaint shall handle the report objectively, neutrally and professionally, setting aside personal biases that might favor or disfavor the complainant or those accused of a violation of this policy.

Step 2 – Investigation

The Section 504 Coordinator shall ensure that the individual assigned to investigate the complaint has an appropriate understanding of the relevant laws pertaining to discrimination issues and this policy and how to conduct investigations.

The investigator shall work with the Section 504 Coordinator to assess the anticipated scope of the investigation, who needs to be interviewed and what records may be relevant to the investigation.

The investigator shall conduct an adequate, reliable and impartial investigation. The complainant and the accused may suggest additional witnesses and provide other evidence during the course of the investigation. When the initial complaint involves allegations relating to conduct which took place away from school property, school-sponsored activities or school conveyances, the investigation may include inquiries related to these allegations to determine whether they resulted in continuing effects such as harassment in school settings.

The investigation may consist of individual interviews with the complainant, the accused, and others with knowledge relative to the allegations. The investigator may also evaluate any other information and materials relevant to the investigation. The person making the report, parties, parents/guardians and witnesses shall be informed of the prohibition against retaliation for anyone's participation in the process and that conduct believed to be retaliatory should be reported. All individuals providing statements or other information or participating in the investigation shall be instructed to keep the matter confidential and to report any concerns about confidentiality to the investigator.

If the investigation reveals that the conduct being investigated may involve a violation of criminal law, the investigator shall promptly notify the Section 504 Coordinator, who shall promptly inform law enforcement authorities about the allegations.[12][49][50][51]

The obligation to conduct this investigation shall not be negated by the fact that a criminal or child protective services investigation of the allegations is pending or has been concluded. The investigator should coordinate with any other ongoing investigations of the allegations, including agreeing to requests for a short delay in fulfilling the school's investigative responsibilities during

the fact-finding portion of a criminal or child protective services investigation. Such delays shall not extend beyond the time necessary to prevent interference with or disruption of the criminal or child protective services investigation.

Step 3 – Investigative Report

The investigator shall prepare and submit a written report to the Section 504 Coordinator within twenty (20) days of the initial report of alleged discrimination, unless the nature of the allegations, anticipated extent of the investigation or the availability of witnesses requires the investigator and the Section 504 Coordinator to establish a different due date. The parties shall be notified of the anticipated date the investigative report will be completed and of any changes to the anticipated due date during the course of the investigation.

The report shall include a summary of the investigation, a determination of whether the complaint has been substantiated as factual, the information and evaluation that formed the basis for this determination, whether the conduct violated this policy and of any other violations of law or Joint Operating Committee policy which may warrant further school action, and a recommended disposition of the complaint. An investigation into disability harassment shall consider the record as a whole and the totality of circumstances in determining whether a violation of this policy has occurred, recognizing that persistent and pervasive conduct, when taken together, may be a violation even when the separate incidents are not severe.

The complainant and the accused shall be informed of the outcome of the investigation, for example, whether the investigator believes the allegations to be founded or unfounded, within a reasonable time of the submission of the written report to the extent authorized by the Family Educational Rights and Privacy Act (FERPA) and other applicable laws. The accused shall not be notified of the individual remedies offered or provided to the complainant.[\[26\]](#)[\[27\]](#)[\[28\]](#)[\[29\]](#)

Step 4 – Action of the School

If the investigation results in a finding that some or all of the allegations of the complaint are established and constitute a violation of this policy, the school shall take prompt, corrective action designed to ensure that such conduct ceases and that no retaliation occurs. The school shall promptly take appropriate steps to prevent the recurrence of the prohibited conduct and to address the discriminatory effect the prohibited conduct had on the complainant and the school or program environment. School staff shall document the corrective action taken and, where not prohibited by law, inform the complainant. The Section 504 Coordinator shall follow up by assessing the effectiveness of the corrective action at reasonable intervals.

If the investigation results in a finding that a different policy was violated separately from or in addition to violations of this policy, or that there are circumstances warranting further action, such matters shall be addressed at the conclusion of this investigation or through disciplinary or other appropriate referrals where further evaluation or investigation is necessary.

Disciplinary actions shall be consistent with the Code of Student Conduct, Joint Operating Committee policies and administrative regulations, school procedures, applicable collective bargaining agreements, and state and federal laws.

Appeal Procedure

1. If the complainant or the accused is not satisfied with a finding made pursuant to the policy or with the recommended corrective action, s/he may submit a written appeal to the Section 504 Coordinator within fifteen (15) days.
2. The Section 504 Coordinator shall review the investigation and the investigative report and may also conduct a reasonable supplemental investigation to assess the sufficiency and propriety of the prior investigation.

3. The Section 504 Coordinator shall prepare a written response to the appeal within twenty (20) days. Copies of the response shall be provided to the complainant, the accused and the investigator who conducted the initial investigation.

Legal

- [1. 22 PA Code 12.1](#)
- [2. 22 PA Code 12.4](#)
- [3. 22 PA Code 15.1 et seq](#)
- [4. 22 PA Code 339.21](#)
- [5. 22 PA Code 4.4](#)
- [6. 28 CFR Part 35](#)
- [7. 28 CFR Part 36](#)
- [8. 29 U.S.C. 794](#)
- [9. 34 CFR Part 104](#)
- [10. 42 U.S.C. 12101 et seq](#)
- [11. 45 CFR Part 80 App B](#)
12. Pol. 103
- [13. 22 PA Code 15.2](#)
- [14. 42 U.S.C. 12102](#)
- [15. 22 PA Code 15.7](#)
- [16. 34 CFR 104.7](#)
- [17. 22 PA Code 15.4](#)
- [18. 34 CFR 104.32](#)
- [19. 34 CFR 104.35](#)
- [20. 22 PA Code 15.6](#)
- [21. 22 PA Code 339.23](#)
- [22. 22 PA Code 15.3](#)
- [23. 34 CFR 104.34](#)
- [24. 34 CFR 104.37](#)
- [25. 22 PA Code 15.8](#)
- [26. 22 PA Code 15.9](#)
27. Pol. 216
- [28. 20 U.S.C. 1232g](#)
- [29. 34 CFR Part 99](#)
30. Pol. 218
31. Pol. 233
- [32. 22 PA Code 10.2](#)
- [33. 24 P.S. 1303-A](#)
- [34. 35 P.S. 780-102](#)
- [35. 22 PA Code 10.21](#)
- [36. 22 PA Code 10.22](#)
- [37. 22 PA Code 10.23](#)

[38. 22 PA Code 10.25](#)

[39. 24 P.S. 1302.1-A](#)

40. Pol. 113.2

41. Pol. 218.1

42. Pol. 218.2

43. Pol. 222

44. Pol. 227

45. Pol. 805.1

[46. 22 PA Code 15.1](#)

[47. 34 CFR 104.36](#)

[48. 22 PA Code 14.162](#)

49. Pol. 806

[50. 18 Pa. C.S.A. 2709](#)

51. Pol. 815

Pol. 113

[103_1-Attach 1RprtForm.doc \(28 KB\)](#)

[103_1-Attach 2.doc \(35 KB\)](#)

Book	Policy Manual
Section	126.1 Programs
Title	Evaluation of Instructional Programs
Status	Active
Adopted	

Purpose

It is the obligation of the administration of Central Montco Technical High School to evaluate program viability in all approved programs. Program success should be maintained in all approved programs. To accomplish this evaluation, it is the collective responsibility of the administration, student services staff, and primary teacher(s) to maintain student achievement, and an acceptable level of student enrollment.

Guidelines for Program Enrollment

A key component to a successful and robust CTE program is student enrollment. To measure a program's ideal enrollment and viability, a minimum and maximum program capacity will be based upon the following:

1. Size of the classroom/program space: Square Footage
2. Type of technical program and student safety environment based on program content
3. Education needs of the existing student population, e.g. number of special population students

A low-enrolled program shall be defined as an approved career and technical program enrolling less than sixty percent (60%) of the total program capacity, defined through chapter 339, state board of cosmetology, state board of barbering or as approved by the Joint Operating Committee for the purpose of establishing safe and appropriate delivery of the program curriculum. After reviewing the enrollment data, specific action steps will be implemented to improve program enrollment. Such measures will include interventions for the teacher professional development, recruitment strategies and/or changes to the curriculum.

An over-enrolled program shall be defined as an approved career and technical program enrolling more than one hundred (100%) of the total program capacity, defined through chapter 339 state board of cosmetology, state board of barbering, or as approved by the Joint Operating Committee for the purpose of establishing safe and appropriate delivery of the program curriculum.

Programs which have enrollment projections of more than the student space ratio defined through chapter 339, state board of cosmetology, state board of barbering, or student capacity for safety of instruction approved by the Occupational Advisory Committee for the program, for any given session will be put on a wait list (standby) until the final determination of enrollment is made for the school year. Additional students will only be assigned to the session if the safety and the educational needs of the students can be met.

In May, the Joint Operating Committee will be informed of programs that meet the definition of low enrolled. These programs will be identified as Potential Probation Programs.

At the October JOC meeting, the JOC will be informed of programs that meet criteria of low enrolled.

The Administrative Director will recommend the program(s) be placed on probation. Such recommendations will be made if warranted during the October JOC meeting and will be approved. After the October JOC meeting, all programs on probation will undergo a Root Cause Analysis concluding in June of that school year.

Result

If at the end of the current school year (June), and upon completion of root cause analysis, e.g. Work Instruction #83, enrollment exceeds sixty percent (60%) of the total program capacity, some or all the interventions shall continue for one (1) additional year at the discretion of the Administrative Director. If at the end of the second year following low-enrolled status, the program enrollment continues to exceed sixty percent (60%) of the total program capacity, no further interventions shall be implemented, and the program will be removed from the program probation list.

If at the end of the current school year, enrollment remains less than sixty percent (60%) of the total program capacity, one (1) of the following actions will be recommended by the Administrative Director:

1. The program will remain on a probation list of an additional year due to revision to curriculum, equipment, technology, or facilities.
2. The program will be placed on "half-time status."
3. The program will be downsized (multiple teacher programs) or closed (single teacher program).

NOTE: In the event of emergent reasons, the Administrative Director reserves the right to waive this policy with the recommendation and support of the Joint Operating Committee.

To Whom It May Concern,

I am writing to formally resign from my position as the Automotive Instructor at CMTHS. My last day will be Friday, January 17th. Due to private personal reasons, I can no longer fulfill my duties in this role. I deeply value the experiences I have gained and the relationships I have built during my time here.

Sincerely,

A handwritten signature in cursive script that reads "Jonathan Angelilli". The signature is written in black ink and is positioned above the printed name.

Jonathan Angelilli