

RESPONSE FORM – PRESS PLUS ISSUE 96, October 2017

Return to The Illinois Association of School Boards, Attn: Angie Powell, Policy Consultant

Email: pressplus@iasb.com or Fax: 217-528-2831

District Name: Harvey School District 152 Date of Adoption*: _____

*If date of adoption is different for any of the policies listed below, please note.

Please read carefully and mark one column in each row. Policies not marked in any column will be held for future response.

Policy Code	Policy Title	Adopted as presented by IASB	Adopted with additional district edits (enclosed)	Not Adopted	Held for Future Response
2:260	Uniform Grievance Procedure	<input checked="" type="checkbox"/>			
	Option: Add a Policy statement regarding publication of the contact information of the district's nondiscrimination coordinator and complaint managers? No (default) <input type="checkbox"/> Yes <input checked="" type="checkbox"/>				
4:15	Identity Protection	<input checked="" type="checkbox"/>			
	Option: Add Personal Information Protection Act (PIPA) mandates to this Policy? No (default) <input type="checkbox"/> Yes <input type="checkbox"/>				
4:110	Transportation			<input checked="" type="checkbox"/>	
4:150	Facility Management and Building Programs			<input checked="" type="checkbox"/>	
4:170	Safety	<input checked="" type="checkbox"/>			
5:20	Workplace Harassment Prohibited			<input checked="" type="checkbox"/>	
5:90	Abused and Neglected Child Reporting	<input checked="" type="checkbox"/>			
	Option: Add sentence regarding distribution of informational ANCRA materials in school buildings? No (default) <input type="checkbox"/> Yes <input checked="" type="checkbox"/>				
5:100	Staff Development Program	<input checked="" type="checkbox"/>			
5:200	Terms and Conditions of Employment and Dismissal	<input checked="" type="checkbox"/>			
5:220	Substitute Teachers			<input checked="" type="checkbox"/>	
5:240	Suspension			<input checked="" type="checkbox"/>	
5:290	Employment Termination and Suspensions			<input checked="" type="checkbox"/>	
6:50	School Wellness – <i>REWRITTEN</i>				<input checked="" type="checkbox"/>
	Option: List chosen evidence-based school-based activities? No (default) <input type="checkbox"/> Yes, list is attached <input type="checkbox"/>				
	Option: Identify school official other than Superintendent? No (default) <input type="checkbox"/> Yes: _____				
	Option: Specify that the Wellness Policy is distributed via Student Handbook? No (default) <input type="checkbox"/> Yes <input type="checkbox"/>				
	Option: Does the district apply <i>competitive foods</i> standards listed in Board policy 4:120 to foods available, but not sold, in schools? (Choose <i>one</i> box.) No (default) <input type="checkbox"/> Yes <input type="checkbox"/> The District applies more stringent standards than the competitive foods standards, (the standards are attached) <input type="checkbox"/>				
	Option: Does the district want to appoint or approve a local school wellness committee? No (default) <input type="checkbox"/> Yes <input type="checkbox"/>				
	Option: Does the Board want to include Supplemental Nutrition Assistance Program Education (SNAP-ED) coordinators or educators in the group to provide input about the policy? No (default) <input type="checkbox"/> Yes <input type="checkbox"/>				
	Option: Does the Board want to state in policy what records must be kept? No (default) <input type="checkbox"/> Yes <input type="checkbox"/>				