

**MENDOTA
TOWNSHIP
HIGH SCHOOL
District #280**



**PARENT-STUDENT
ATHLETIC
HANDBOOK**

2025-2026

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Mendota High School Sport Programs

Core Covenant – A binding agreement between team members where you can see it in action

Mendota High School Sport programs are focused on being a program that will do the right thing no matter the circumstances or the outcome. We understand that sometimes we must make difficult decisions, and it is not always easy to do. However, we know that to build great teams and to be great teammates, team members must choose the **“hard right”** instead of the **“easy wrong.”** As we make decisions each day, we must always filter those decisions and do what is right for our teams. We must ask ourselves, “How will this decision affect my team, and how will it affect my commitment and my standing on this team?” As true athletes and teammates, we always choose the path that will not let our team(s) and our teammates down. This is a key to becoming a player who demonstrates leadership skills and who is committed to our **Core Covenants**.

Team-First Attitude

Practice – Get teammates involved; Encourage and support others; Pay attention; Be coachable; Help with tasks; Committed to helping ALL teammates; Enthusiasm- Best effort!

Games – Focus on the game; Great talk on the court; Encourage each other, no matter the sport, through difficult times; Don’t draw attention to Yourself-Stay focused on the team; Accountability for actions & effort; Players on the bench are “into” the game

School – Work to the best of your abilities; No goofing off in class/halls; Treat **ALL** teammates and programs properly; Respect for teachers; Good decisions; Help teammates w/ schoolwork; Behave properly; Hold self and teammates accountable; Praise positives.

Public – Protect & Defend **ALL** teammates and programs; Eat together; Sit with team @ games; Manners-polite (“Please” & “Thank You”) Clean up after ourselves & others; No Blaming/Pointing Fingers; Don’t exclude; Positive comments

Discipline

Practice – Don’t talk when others have the floor; Focused attention and effort on the task at hand; Do what needs to be done, the way it needs to be done, when it needs to be done; No bad body language; No Complaining; No Excuses. Quality repetition.

Games – Run plays precisely; Encourage teammates to help them get over mistakes; Focus during timeouts/halftime/post-game; Move with a purpose

School – Turn in all work done to the best of your ability; Show up and participate; LISTEN; Proper behavior everywhere; Respect teachers, staff members, other programs classmates; Represent your team(s) in a positive manner.

Public – Smart choices; Clean up after self and others; Be mature; Responsible for our actions/behavior. Do what is right when nobody is watching.

Compete – Relentless Perseverance

Practice – Push self & teammates to be the best; Challenge each other every day; Pick up teammates when they fall; Hustle; Positive work Ethic; Put in extra work; Try new things; **Fearless Competitors do not fear failure - They embrace it!**

Games – Recover from mistakes quickly; Do the little things well; Never give up; Be aggressive; Deal with adversity by doing what you’ve been taught; Best Effort/Best Attitude all game long;

School – Do your work to the best of abilities; Quality Studying; Come prepared for class; Be organized; Get help when needed; Show teachers you care about your work and your grades; School matters

Public – Handle criticism from those outside the program with dignity; No bragging; Do all work to the best of your ability.

Trust/Respect

Practice – Trust coaches’ instruction; No “blame game”; Know your plays/Know your role; Encourage each other to get through mistakes; Trust your training; **Build trust in others by your competence, your caring, and your character!**

Games – Trust in your abilities and limitations; Trust coaches’ decisions; Trust your teammates; Respect officials and their calls; Respect opponents.

School – Trust your teachers; Respect the facility, staff, classmates; Ask for help when you need it. **Public** – Respect communities; Respect property; Respect the people you come in contact with; Proper respect during National Anthem (not just before your own game); Be a Role Model by showing/displaying respect and trust. Address teachers and coaches in the proper manner

HANDBOOK RATIONALE

This handbook was written for the student-athletes and their parents at Mendota Township High School in order that athletes and their parents may be better informed of the athletic rules, policies, and procedures of Mendota Township High School.

Regardless of how complete a handbook may be; it cannot anticipate all of the different situations that may occur. It is meant rather as a guide to point out the direction of the Mendota Township High School Athletic Department; therefore, changes can be made at the discretion of the administration.

Participating as a student-athlete at Mendota Township High School distinguishes you as an individual with exceptional opportunities. Athletics will offer to you many worthwhile experiences and associations which non-participants will not have. We offer this program as a privilege and strongly encourage your 100% cooperation in any sport with which you wish to participate.

MENDOTA TOWNSHIP HIGH SCHOOL ATHLETIC MISSION STATEMENT

At Mendota Township High School, athletics are an important aspect of the school and curriculum. The MTHS athletic department achieves its mission by providing the best opportunity, inspiration, and resources for student-athletes to strive to reach their fullest academic and athletic potential. A successful sports program generates a sense of school pride for the entire community. Student athletes from MTHS will be prepared for any occupation or walk of life having acquired the values of integrity, sportsmanship, and leadership in athletics. Student athletes will enjoy a competitive spirit, self-control, and camaraderie with teammates and a sense of personal self-worth. Leadership skills, loyalty, self-discipline are character traits gained through participation. Athletics must **NEVER** overshadow the main purpose of an education. Athletes are encouraged to participate in a wide variety of school-sponsored activities.

ILLINOIS HIGH SCHOOL ASSOCIATION (IHSA)

Mendota Township High School District 280 is a member of the Illinois High School Association (IHSA) based in Bloomington, Illinois. Therefore, we must adhere to all by-laws and regulation set down by the IHSA. The by-laws and regulations of the IHSA can be viewed at www.ihsa.org.

SPORTSMANSHIP MISSION STATEMENT

Good sportsmanship is the attitude and behavior that exemplifies positive support for the interscholastic programs of the IHSA member schools, as well as for the individuals who participate in such programs. People involved in all facets of the interscholastic program are expected to demonstrate respect for others and display good sportsmanship.

SPORTSMANSHIP IS EVERYBODY'S RESPONSIBILITY

Sportsmanship starts on the court or athletic field and extends into the bleachers and beyond. In today's increasingly competitive environment, the thrill of victory and the agony of defeat seem to be more intensified than ever before. It is important to raise the public awareness of sportsmanship and interscholastic activities.

It is everyone's responsibility to practice good sportsmanship. Recognizing the efforts by athletes, coaches, administrators, spirit groups and fans is a valuable part of the interscholastic experience.

SPORT A WINNING ATTITUDE (The Sporting Creed)

The Participant...

1. Respects officials and accepts their decisions without question.
2. Lives clean and plays hard. Plays for the love of the game.
3. Wins without boasting, lose without excuses, and NEVER quits.
4. Never forgets that he/she represents his/her school.

The Spectator...

1. Respects officials, players, and coaches of all teams and treats them courteously.
2. Acknowledges the efforts of participant involved in interscholastic activities.
3. Always demonstrates behavior which is conducive to good sportsmanship.
4. Never forgets that he/she also represents the school.

EXPECTATIONS OF ATHLETES

1. Athletes must meet all academic and behavior guidelines and strive for excellence.
2. Athletes are representatives of their school and community. They are to conduct themselves in a sportsmanlike and ethical manner and play by the rules at all times; be humble in victory and gracious in defeat. Good sportsmanship is a prime objective in Mendota Township High School District 280 and is expected of its participants.
3. Athletes must abide by the decisions of, and show respect toward, the game officials who are charged with administering the contest.
4. Athletes are to respect the talent and efforts of opposing players and coaches. Any disrespect shown to opposing players, coaches and fans will not be tolerated.
5. Athletes will not participate in any activities involving harassment, hazing, and bullying, as defined by school policy.
6. Racial, ethnic or other prejudice has no place in competitive athletics. Respect must be given to fellow athletes for themselves and not according to race, creed or religious, or other beliefs.
7. Athletes must comply with the requirements of this Handbook.
8. Athletes must be on time to, and regularly attend, all team practices and contests and comply with all team rules and accept constructive criticism from the coach.
9. In the event an interscholastic athlete elects to quit a sport prior to the completion of the season; or in the event where an athlete is removed from a team for disciplinary reasons, that athlete will be restricted from participating

in pre-season open gym sessions for the upcoming season. It will be the coach's discretion if that athlete will be allowed to play on the team the following year.

10. Athletes must meet all IHSA requirements.

11. Athletes must not use, be in possession of, or be involved with tobacco, marijuana, controlled substances or drugs not properly prescribed to the athlete, or any other intoxicating substance. An athlete will not attend or host a party, and the participant's parent(s) (guardian) or family members will not host a party, of high school students or minors at which alcohol, tobacco or any controlled or other improper substances are provided or at which the use of any such substances is permitted.

12. Athletes must exhibit good sportsmanship both as an athlete in competition and as a spectator at a contest. An athlete who is ejected from a game will be subject to consequences at the discretion of the Administration.

EXPECTATIONS OF PARENTS

SPORTSMANSHIP

Parents will demonstrate good sportsmanship by displaying the following behaviors:

- Providing support for coaches and officials in order to provide a positive, enjoyable experience for all student athletes, other parents, and fans.
- Understanding the game is for the students and not for the adults.
- Recognizing that student participation in athletics is a privilege.
- Using good sportsmanship as a spectator and conduct themselves in a manner that reflects well on both the team and the school.
- Promoting the team by being supportive and helpful of the school program.
- Refraining from coaching their student from the stands or the sidelines.
- Expecting consistent student attendance at practices and games.

The parents will create a positive and supportive environment to promote their student/athlete's well-being by:

- Supporting good conditioning and healthy lifestyle habits.
- Placing the emotional and physical well-being of their student ahead of any personal desire to win. ● Supporting their student in planning how to meet their academic responsibilities given the demands of training and practice.
- Being a role model for other parents by remaining positive at sporting events.
- Supporting the student athlete code of conduct and all team/training rules.
- Avoid sitting directly behind the team bench.
- Avoid standing near player sidelines, entering "team areas" during an event, talking to players during an event, or interfering with what the coaches are trying to accomplish during a game.

UNSPORTSMANLIKE CONDUCT POLICY

When a spectator at a Mendota High School District #280 athletic or extracurricular event is ejected or asked to leave from the event for exhibiting unsportsmanlike, disruptive, or disrespectful behavior, the following requirements must be satisfied:

1. An administrator and/or law enforcement officer will escort the spectator from the contest.
2. If the administration deems it necessary the spectator may receive, through certified mail, notice of a meeting with that building administrator or designee to discuss the facts of the incident.
3. Within 48 hours of that meeting, the spectator will be informed of the administrative disposition.
4. If the spectator's removal from attending Mendota High School District #280 athletic and extracurricular events extend beyond a single event; a hearing will be scheduled with the Athletic

Committee and/or Board of Education. A notice to appear at the hearing will be sent through certified mail. This hearing will be scheduled by the building administration through the Superintendent or his/her designee.

COMMUNICATION CHAIN OF COMMAND

The parents will communicate fairly and openly with coaches by:

- Communicating openly, honestly, and with respect
- Communicating issues and concerns in an appropriate and timely manner including those of physical and emotional well-being on behalf of their student.
- Following an appropriate chain of communication:
 1. Player meets with head coach and/or assistant coach
 2. A meeting of the parent, athlete, Coach/Assistant Coach, and the Athletic Director.
 3. A meeting of the parent, athlete, Coach/Assistant Coach, Athletic Director, and Principal.
 4. A meeting of the parent, athlete, Coach/Assistant Coach, Athletic Director, Principal, and Superintendent.
 5. A meeting of the parent, athlete, Coach/Assistant Coach, Athletic Director, Principal, Superintendent, and Athletic Committee.
 6. A meeting of the parent, athlete, Coach/Assistant Coach, Athletic Director, Principal, Superintendent, Athletic Committee Representative, and the Board of Education.
- Attending parent meetings and reading information disseminated by the athletic department and coaches.

PARENT COMMUNICATION WITH COACHES

It is sometimes difficult to accept our child's limited playing time. Coaches are professionals. They make judgment decisions based on what they believe to be best for ALL students-athletes involved.

Examples of issues appropriate to be discussed with coaches;

1. Ways for your child to improve.
2. Your child's behavior.
3. The treatment of your child mentally and physically.

Examples of issues NOT appropriate to discuss with coaches;

1. Playing time.
2. Team strategies.
3. Play calling.
4. Other student-athletes.

BOOSTER CLUB

The Mendota Booster Club is a group of friends and parents who are interested in the support and encouragement of interscholastic athletics at Mendota Township High School. They provide financial support to all athletic activities. They have been responsible for generating funds and improving athletic equipment and facilities. Meetings are held in the Media the first Wednesday of every month during the school year. Membership is free. If interested in the learning more about becoming a member of the Booster Club, please contact your head coach or the Athletic Director.

PARENT/ATHLETE PARTICIPATION CHECKLIST

To be eligible to participate in the interscholastic athletic program at Mendota Township High School District 280, each interested athlete must clear the eligibility clearance procedure. To do so, the interested athlete must:

1. Meet the academic requirements per MHS policy.
2. Parents must attend the annual parent meeting hosted by the Athletic Director.
3. Athletic Physical Form -each interested athlete must show proof of an examination by a physician.
Freshmen athletes may count their freshmen entrance physical toward this requirement. An athletic physical will NOT count towards a freshman entrance physical. Sophomore, junior, and senior athletes must have an "IHSA Physician's Certificate" on file for each school year. (A copy of which is found in the back of this handbook)
4. Take the mandatory IMPACT concussion test (Freshmen year and Junior year for the following sports/activities; Football, Volleyball, Soccer, Cheer, Basketball, Wrestling)
5. Obtain and read the "Student & Parent Athletic Handbook"
6. Sign the signature page at the end of the handbook (page 41). Both Parent/Guardian and Athlete must sign this form. The signature page indicates that you have received, read, understand, and agree to abide by the MHS Parent-Athlete Handbook. The signature also indicates consent to enter and be randomly drug tested by Mendota Township High School and the IHSA. Online consent will also be accepted.
7. Finally, submit participation fee of \$55 per sport prior to the student-athlete's first contest of the season. No athlete will be able to compete for his/her team without this fee being submitted.
Participation fees are NOT refundable. Any student who qualifies for free/reduced lunches will have their participation fee waived. There is a \$165.00 cap per student. (Fees are waived for 2024-2025)

NO ATHLETE WILL BE ABLE TO BEGIN PRACTICE OR GAMES WITHOUT COMPLETING STEPS 1-8 FROM ABOVE!

STUDENT DRUG AND ALCOHOL TESTING POLICY

The Board of Education believes that the use of alcohol or drugs by students who participate in extracurricular activities presents a particular hazard to the health, safety, and welfare of the students. The Board encourages students to participate in extracurricular activities, but the opportunity to participate in any of these elective activities is not an absolute right. Rather, it is a privilege offered to eligible students on an equal opportunity basis. To be eligible to try out for, or to participate in, any school sponsored extracurricular activity; students must agree to submit to testing for the use of drugs and alcohol, if selected in accordance with this policy. This policy shall apply to all school sponsored extracurricular activities for which no academic credit is awarded.

A). It is the intention of the Board of Education that this policy protect the health, welfare, and safety of students engaged in extracurricular activities and to establish minimal standards of eligibility for such activities. Its purpose is to better assure a student's health, and physical and mental fitness to participate in extracurricular activities and not to provide a means by which the district may punish a student rather than barring such student from participation in extracurricular activities. Therefore, the positive results of any drug or alcohol test administered pursuant to this policy will be used for determining eligibility to try out for and participate in extracurricular activities and for no other disciplinary purpose.

B). Students who wish to try out for and/or participate in school sponsored extracurricular activities shall be randomly tested for drugs and/or alcohol in accordance with this policy. The student identification number of such students shall be sent to the independent testing laboratory. Students involved in extracurricular activities will be subject to testing for the entire school year. The school district shall at least annually direct the testing lab to

randomly select by student identification number up to certain percentage of the students participating in extracurricular activities. The testing lab shall then notify the school district of which identification numbers have been selected. Those selected shall be notified by the school district and tested that same day, if possible. The student to be tested shall complete a specimen control form which shall bear an assigned number without the knowledge of the school district. On that form, the student must identify prescription medications which he/she is currently taking pursuant to a doctor's authorization. This testing shall be monitored by an adult monitor from the testing lab and/or OSF St. Paul Medical Center. The student shall produce the sample in a bathroom that has had its faucets temporarily disabled to prevent tampering and the water therein shall be treated with dye. The monitor shall remain directly outside the bathroom and shall note any unusual circumstances, behavior, or appearance of the student or specimen. After the sample is produced, the monitor shall check it for temperature and tampering and then transfer it to a vial. If a student refuses to be tested, that student shall be deemed to have tested positive, and shall be subject to the disciplinary measures mandated by this policy.

C). The samples shall be sent to an independent laboratory which shall test for alcohol and/or drugs. The identity of a particular student shall not determine which drugs shall be tested for. The tests conducted shall look only for drugs and/or alcohol and not for whether a student is, for example, epileptic, pregnant, or diabetic.

D). If a sample tests positive, a second confirming test of the same sample shall be administered as soon as possible to confirm the result. If the second test is negative, no further action shall be taken. If the second test is positive, the medical review officer shall attempt to talk with the student as soon as possible. The district reserves the right to consult the medical review officers with questionable results. If a student refuses to take the drug test, it will result in a violation and deemed as a positive screen. If this is the student's first violation, the student's parents shall be notified and the school administrator shall convene a meeting with the student and his or her parents at which the student shall be suspended for the appropriate 1st offense consequence and shall be required to participate in an assistance counseling program. A student who is notified of a positive test will be released to parents/guardians after the meeting. A second violation, or refusal by the student to complete the extra-curricular suspension and counseling described for the first violation, shall result in the appropriate 2nd offense violation consequence. A third violation shall result in the appropriate 3rd offense violation consequence.

Mendota High School
Code of Conduct Consequences

Offenses

<i>Category A: 2 Points per Offense</i>	<i>Category B: 1 Point per Offense</i>
Possession/Consumption of Drugs or Alcohol	Possession/Consumption of Tobacco including e-cigarettes

Consequences

<i>Point Total</i>	<i>Consequence</i>	<i>Offense</i>
1 point	1 game or event suspension	Tobacco offense
2 points	21 day suspension	2 tobacco offenses or possession/consumption/in the presence of alcohol/drugs
3 points	28 day suspension	1 tobacco and 1 2pt offense or 3 tobacco offenses

4 points	Calendar Year	2 nd alcohol/drug offense, 1 alcohol/drug offense and 2 tobacco offenses, or 4 tobacco offenses
5 or 6 pts	Lifetime Ban	Any combination of 5 or 6 points

For purposes of this policy, a "season" shall generally be considered to include the time from the tryouts (if none, then the first practice, rehearsal, etc.) through the last event, competition, or performance. Any student suspended from extracurricular pursuant to this policy (including those who were deemed to test positive by reason of their refusal to be tested) shall not be allowed to participate in any extracurricular activity during the period of the suspension.

****Code of Conduct violations can be reported to the sponsor of the extracurricular activity or MHS Administration. All reported conduct violations will be investigated by and acted upon by the MHS Administration. Investigations will determine whether a Code of Conduct violation occurred.****

Prior to trying out for and/or participating in school sponsored extracurricular activities, students and parents/guardians must sign/electronically submit a form consenting to the testing. A consent form will be distributed to all students and shall read as follows:

Mendota Township High School
Random Drug Testing Consent Form

I wish to try out for and /or participate in a school sponsored extracurricular activity _____ (identify activity). I have read the Board of Education's extracurricular drug and alcohol testing policy for students, and I understand that Board of Education's policy and procedures and consent to follow said policy and procedures, including being subjected to drug and alcohol testing, as a condition of participation in extracurricular activities. I understand that if I disobey the rules I will be excluded from the opportunity to participate in extracurricular activities as provided in the Board's policies and procedures. Further, I also authorize the release of the results of such a test to the School District and my parents and/or guardian.

I, _____, parent of _____, acknowledge my son's/daughter's wish to try out for and/or participate in school sponsored extracurricular activities. I have read the Board of Education's drug and alcohol testing policy for students and I consent to my son/daughter being subject to the drug and alcohol testing as a condition of participation in extracurricular activities. I also authorize the information concerning the results of such test to be released to the School District.

Student Signature _____

Parent/Guardian Signature _____

Date _____

Drug and Alcohol Testing General Information

Random Selection of Participants for Testing: At the beginning of each school year, each participant will be assigned a number by the administration. Students will be eligible for random drug testing throughout the school year. The student numbers will be randomly selected from the testing lab, and the students tested in the order of selection.

Carry Over: If the season for an extracurricular activity does not allow the participant to successfully complete the suspension, the suspension will carry over to the next season in which participation occurs. No award for such participant will be given until the suspension is completed. The participant may be required to practice with his/her team during this period of suspension.

Noncompliance: If the extra-curricular participant or his/her guardians refused to sign the consent form for substance abuse testing, the student will not be permitted to be a member of the activity until the consent form is signed. Also, if the extra-curricular participant refuses to be tested or does not complete the test as instructed, the participant will be considered in violation of this policy and automatically ineligible as a participant.

Self-Reporting/Admission: Student self-reporting is a process designed to allow a student to recognize a prohibited substance problem and bring it to the attention of staff and/or an administrator. Under this policy a student receives no consequence for self-reporting, but must undergo a substance abuse assessment and counseling. This is a non-punitive referral. However, once a student is randomly selected, the self-reporting process is no longer an option. Second and subsequent self-reports will be reviewed individually in regard to the basis for the self-report, this policy and the extracurricular code.

Under this policy, a student receives no consequence for self-reporting, but must undergo a substance abuse assessment and counseling. This is a non-punitive referral. However, once a student is randomly selected, the self-reporting process is no longer an option. Second and subsequent self-reports will be reviewed individually.

ATTENDANCE POLICY

A student must be in attendance by the beginning of his/her fourth period class (10:38 am on a regular school day and 9:35 am on early dismissals), unless approved by the principal, on the day of competition to be eligible to participate in athletic events or practices. Administrative approval for prearranged absences or emergency situations will supersede this requirement. Emergency situations will be dealt with as they arise. In season vacations are to be discouraged but consequences are at the discretion of the head coach.

PHYSICAL EDUCATION EXEMPTION

An eleventh or twelfth grade student-athlete may request exemption from physical education if he/she is participating in interscholastic athletics. A decision to exempt a student from physical education shall be made on an individual basis and shall not be automatically renewed. A decision to exempt a student from physical education shall be based upon a submitted "Permanent Pass" (available from the P.E. teacher) by the student and turned in to the Principal's office. A request for exemption from physical education may be approved for one season only, based upon continued participation in that sport. Any student athlete who decides to quit a sport must report to his/her P.E. class the next day. At the conclusion of a season, the student-athlete must report to his/her PE class by the following Monday.

- Please note that all athletes in a Physical Education and Fitness for life class must dress and participate in order to practice or play in an event that day. Athletes may not "sit out" of P.E. due to an injury and still participate in athletic events that evening unless they have a doctor's/school nurse note.

ACADEMIC ELIGIBILITY

In order to maintain eligibility in season, each athlete must meet IHSA weekly academic standards as well as semester academic standards (see IHSA scholastic standing at end of this book).

The IHSA requires weekly eligibility checks cumulative to the beginning of the semester. The grades as entered and calculated in TeacherEase will be used to determine eligibility. The grades will be reviewed at 12:00 noon on Thursdays. Periods of ineligibility resulting from this weekly check will run from Sunday through Sunday, inclusive. The entire week of ineligibility must be served—regardless of whether a particular grade is brought up during the week. Grades are checked only once per week for eligibility purposes. Passing work shall be defined as work of such a grade that if on any given date a student would transfer to another school; passing grades for the course would immediately be certified on the student's transcript to the school to which they transfer.

- The most current applicable policies & procedures in regard to P.E. waivers and academic eligibility are reflected in the Student Handbook for the current school year.
- The Activity Sponsor/Coach will inform ineligible students of their status on the Friday the sponsor receives the report.
- However, during periods of ineligibility, the student is required to attend practice and may attend meetings. The third week a student is ineligible; the student will be removed from the team/activity. In the case of an activity, the student will be removed for the semester. Weeks of ineligibility need not be consecutive. A student may not carry more than one failing academic class (PE and driver's education do count towards the second or more failing class) and still remain academically eligible. Any student who is academically ineligible (previous semester) on the first day of practice may not try out for that sport or activity.
- The Athletic Director and Principal will review the student's grades the third week a student is ineligible prior to removal from the team/activity. Prior to removal for academic ineligibility, a student will have a grade opportunity to raise a score. There is no guarantee; however, that this grade opportunity will cumulatively raise the grade to passing.
- Once a student-athlete is deemed ineligible, he/she will not be allowed to leave school early for an away event.
- During extended holidays such as Spring Break and Winter Break, a student-athlete may be ineligible for more than a week. Example: If a student-athlete is ineligible the week prior to spring break, he/she will be ineligible for two weeks. These two consecutive weeks of being ineligible over break will only count as 1 week towards the 3-strike policy.

GENERAL INFORMATION

Equipment/Uniforms

Students participating in athletics are responsible for the care of the equipment and the safe return of all equipment and uniforms issued to them. The athlete will be charged the replacement value of any equipment not returned or damaged beyond normal wear and tear. Athletes will not be allowed to receive awards or participate further in the athletic program until all equipment and uniforms are returned or paid for. The student-athlete will not be permitted to participate in any athletic event until all equipment from the previous season is turned in. Any athlete not in a sport may be denied entry into all events (including dances) until all equipment from previous season is turned in. All uniforms are to be washed in cold water unless otherwise stated. Injuries

All injuries, no matter how minor in nature, should be reported to the team's coach or trainer immediately. This will help to prevent minor injuries from getting worse. If an athlete must see a physician for an injury, the athlete will not be allowed to resume practicing or competing without the physician's or trainer's consent.

Appearance

Students who represent the school in interscholastic athletic competitions are expected to dress in a neat, respectable manner. Their actions and conduct are a direct reflection upon the overall quality of our athletic program and school. The coach or sponsor may establish rules regarding a particular dress style for their own squad.

Playing Multiple Sports During A Season

Student-athletes are not allowed to play two school sports in the same season.

Transportation

Mendota Township High School District 280 provides transportation to and from all contests. It is required that all athletes use the transportation provided by the school district to participate in an event. Special circumstances that would require a student athlete to not ride the bus to an event has to be pre-arranged with the coach, preferably at least 24 hours prior to the departure time. The transportation home is at the discretion of the coach. A parent signature is required for all athletes who ride home with a parent. Athletes that ride home with another parent, grandparent, or an aunt/uncle will be required to give the coach a written note. Please note that an athlete may not ride home with an individual under the age of 21 (twenty-one). Coaches may require athletes to ride home on the bus as part of their team rules.

Team Gear

Any extra items that an athlete would purchase to wear during an event/to an event/to represent their team, as a team, will be the decision of the Athletic Director and Head Coach. No athlete or parent is allowed to organize any such purchases. These items include, but not limited to, the following;

1. Team shoes
2. Warm-ups
3. Uniforms
4. Team shirts
5. Shooting shirts
6. Miscellaneous

****More information regarding the following can be found in the STUDENT PLANNER**

1. IHSA Rules
2. NCAA Rules
3. MTHS Training Rules
4. MTHS Drug Policy
5. Student-Athlete Expectations
6. General Rules

ATHLETIC AWARDS

The coach of each team recommends to the Athletic Director team members for end-of-the-season awards. These awards are based on criteria established by the respective coach/program before the start of the season. The following procedures will govern the athletic award policy:

- Each coach will devote time at the beginning of the season to clearly define the minimum requirements for the award given at that level.
- To be eligible to receive an award, an athlete must finish the season in good standing. Finishing the season in good standing means that the athlete has continued as a part of the team in all team requirements (practices, contests, meetings, etc.) through the last IHSA contest in which the team is involved. The season does not end until the student has returned to the departed campus after the last IHSA contest. If there are any questions about awards, athletes should check with their coach.

FRESHMAN NUMERALS

Freshman awards will be a certificate and numerals indicating participation. Once an athlete has earned his/her numerals, he/she will be given a certificate of participation for another sport at the same level.

SOPHOMORE LETTER

Sophomore awards will be a certificate and a sophomore letter. Once an athlete has earned his/her sophomore letter, he/she will be given a certificate of participation for another sport at the same level.

VARSIITY LETTER

Varsity awards will be a certificate and ONE Varsity Letter. A second year varsity athlete, who has already received a varsity letter, will receive a gold bar and a certificate for each varsity sport in which he/she participates. Those on a varsity team but not earning a letter will be awarded a certificate of participation.

GOLD BAR

A second through fourth year varsity athlete, who has already received a varsity letter, will receive a gold bar and a certificate for each varsity sport in which he/she participates.

CAPTAIN'S PIN

Issued to the chosen Varsity captains of a particular sport.

MANAGER'S PIN

Students who volunteer their time to aid the team and successfully complete the season may receive the appropriate award for that particular sport and level.

AWARDS IN CASE OF AN INJURY

Any athlete injured while playing a particular sport during the season, who stays with the team throughout the season, may receive an appropriate award for their loyalty.

The Athletic Departments may present the following awards:

TRAC ALL-CONFERENCE ATHLETES

The conference shall award all-conference certificates to all students who earn the award. Each sport in the TRAC has different selection criteria for this award.

TRAC CONFERENCE ALL-ACADEMIC ATHLETES

This honor is bestowed on a junior or senior varsity athlete who has a cumulative Grade Point Average of at least 3.0. A certificate will be presented each May for the current school year for all athletes that qualify for this honor.

KILMARTIN AWARD – FOUR (4) YEARS – THREE (3) SPORT ATHLETES

A plaque is awarded to an athlete who participates in a MHS sport each of the three seasons throughout their four years at the high school. This award is presented each May at the MHS Awards Ceremony.

GERALD WOOD MEMORIAL AWARD

Is presented to the student-athlete that meets the following criteria: at least a 2.4 GPA and was never ineligible, no training code violations, must have participated in at least 3 total seasons during his/her freshmen and sophomore years, and played all 3 sports seasons each of their junior and senior years

Medical Conditions, Medication Reminder

Please make sure your student informs their coach of any medical condition. Example: Asthma, Allergies requiring the use of an Epi-pen, Seizures or Diabetes. Please make sure students have medication with him/her at all times to manage medical condition. Also, please have students inform the coach where medication is when they are in play in case of an emergency. In the case where an athlete does not have the proper medication with him/her, the athlete will not play or practice.

PROSPECTIVE COLLEGE ATHLETES

Some student athletes have a goal to participate in athletics at the collegiate level. District 280's Athletics and Guidance staffs are available to assist student athletes in pursuit of this goal. Here are some things that you should keep in mind.

- Communication with your coach is imperative. Student athletes who have a strong desire to compete at the collegiate level should schedule an appointment with their coach to discuss this decision. The most important thing to consider in the college selection process is academic fit. Athletics are important, but they are secondary to Academic opportunities.
- Coaches and student athletes should work with guidance counselors to develop a realistic list of college choices. • The student athlete should create a resume that reflects their overall high school experience and that highlights athletic accomplishments. This should be reviewed by the coach and guidance counselor. • The student athlete should create a letter of interest to be sent, along with the resume, to the coaches at the colleges that you wish to attend. This letter should also be reviewed by coaches and counselors prior to mailing. • The student athlete should meet with their counselor to discuss the process of registering with the NCAA Clearinghouse.

The NCAA home page is www.ncaa.org.

Making Sure You Are Eligible to Participate in College Sports

**For High School Students Who Plan to Enroll as College Freshman
Some Points to Consider...**

- The requirements for eligibility to participate at Division I are different from those required at Division II.
 - If you have been "homeschooled" during all of grades 9 through 12, you will have to register with the Clearinghouse. Your certification status will be determined through an initial eligibility process. Please contact the college/university that you plan to attend, or the NCAA Clearinghouse for more information.

- NCAA academic committees have the authority to grant waivers of the initial eligibility requirements based on objective evidence that demonstrates circumstances in which a student's overall academic record warrants the waiver of the normal application of the legislation.
 - An initial eligibility waiver must be filed by an NCAA institution on behalf of the student. ●
- Correspondence and independent study courses may be used to meet the core course requirements provided the following conditions are met:
- The course meets all of the requirements for a core course as defined in this guide; ● The instructor and student have access to one another during the duration of the course for purposes of teaching, evaluating, and providing assistance to the student;
 - Evaluation of the student's work is conducted by the appropriate academic authorities in accordance with the high school's established policies;
 - The course is acceptable for any student and is placed on the high school transcript. ● Courses taken in the eighth (8) grade may not be used to satisfy the core-curriculum requirements, regardless of the course content or level.
 - Generally, students enrolling in a Division I Institution may not use courses taken after high-school graduation to meet core-curriculum requirements. (Note: Students with NCAA approved diagnosed disabilities may use courses taken after graduation but before full-time college enrollment.) ● Please view the following information



■ PREPARTICIPATION PHYSICAL EVALUATION

MEDICAL ELIGIBILITY FORM

Name: _____ Date of birth: _____ ☐

Medically eligible for all sports without restriction

☐ Medically eligible for all sports without restriction with recommendations for further evaluation or treatment of

☐ Medically eligible
for certain sports

☐ Not medically eligible pending further evaluation

☐ Not medically eligible for any sports

Recommendations: _____

I have examined the student named on this form and completed the preparticipation physical evaluation. The athlete does not have apparent clinical contraindications to practice and can participate in the sport(s) as outlined on this form. A copy of the physical examination findings are on record in my office and can be made available to the school at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the medical eligibility until the problem is resolved and the potential consequences are completely explained to the athlete (and parents or guardians).

Name of health care professional (print or type): _____ Date: _____

Address: _____ Phone: _____

Signature of health care professional: _____, MD, DO, NP, or PA

SHARED EMERGENCY INFORMATION

Allergies: _____

Medications: _____

Other information: _____

Emergency contacts: _____

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■ PREPARTICIPATION PHYSICAL EVALUATION

HISTORY FORM

Note: Complete and sign this form (with your parents if younger than 18) before your appointment.

Name: _____ Date of birth: _____ Date
of examination: _____ Sport(s): _____ Sex
assigned at birth (F, M, or intersex): _____ How do you identify your gender? (F, M, or other): _____

List past and current medical conditions.

Have you ever had surgery? If yes, list all past surgical procedures.

Medicines and supplements: List all current prescriptions, over-the-counter medicines, and supplements (herbal and nutritional).

Do you have any allergies? If yes, please list all your allergies (ie, medicines, pollens, food, stinging insects).

Patient Health Questionnaire Version 4 (PHQ-4)

*Over the last 2 weeks, how often have you been bothered by any of the following problems?
(Circle response.)*

Not at all Several days Over half the days Nearly every day

Feeling nervous, anxious, or on edge 0 1 2 3

Not being able to stop or control worrying 0 1 2 3

Little interest or pleasure in doing things 0 1 2 3

Feeling down, depressed, or hopeless 0 1 2 3

(A sum of ≥ 3 is considered positive on either subscale [questions 1 and 2, or questions 3 and 4] for screening purposes.)

			9. Do you get light-headed or feel shorter of breath than your friends during exercise?		
1. Do you have any concerns that you would like to discuss with your provider?					
2. Has a provider ever denied or restricted your participation in sports for any reason?			10. Have you ever had a seizure?		
3. Do you have any ongoing medical issues or recent illness?					
HEART HEALTH QUESTIONS ABOUT YOU Yes			11. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 35 years (including drowning or unexplained car crash)?		
4. Have you ever passed out or nearly passed out during or after exercise?					

5. Have you ever had discomfort, pain, tightness, or

pressure in your chest during exercise?

6. Does your heart ever race, flutter in your chest, or skip beats (irregular beats) during exercise? 7. Has a doctor ever told you that you have any heart problems?

8. Has a doctor ever requested a test for your heart? For example, electrocardiography (ECG) or

12. Does anyone in your family have a genetic heart problem such as hypertrophic cardiomyopathy (HCM), Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy (ARVC), long QT syndrome (LQTS), short QT syndrome (SQTS), Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia (CPVT)?

echocardiography.
14. Have you ever had a stress fracture or an injury to a bone, muscle, ligament, joint, or tendon that caused you to miss a practice or game?
15. Do you have a bone, muscle, ligament, or joint injury that bothers you?
16. Do you cough, wheeze, or have difficulty breathing during or after exercise?
17. Are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?
18. Do you have groin or testicle pain or a painful bulge or hernia in the groin area?
19. Do you have any recurring skin rashes or rashes that come and go, including herpes or methicillin-resistant <i>Staphylococcus aureus</i> (MRSA)?
20. Have you had a concussion or head injury that caused confusion, a prolonged headache, or memory problems?

21. Have you ever had numbness, had tingling, had weakness in your arms or legs, or been unable to move your arms or legs after being hit or falling?	
22. Have you ever become ill while exercising in the heat?	
23. Do you or does someone in your family have sickle cell trait or disease?	
24. Have you ever had or do you have any problems with your eyes or vision?	
25. Do you worry about your weight?	
26. Are you trying to or has anyone recommended that you gain or lose weight?	
27. Are you on a special diet or do you avoid certain types of foods or food groups?	
28. Have you ever had an eating disorder?	
29. Have you ever had a menstrual period?	
30. How old were you when you had your first menstrual period?	
31. When was your most recent menstrual period?	

13. Has anyone in your family had a pacemaker or an implanted defibrillator before age 35?		
--	--	--

32. How many periods have you had in the past 12 months?
--

Explain “Yes” answers here.

I hereby state that, to the best of my knowledge, my answers to the questions on this form are complete and correct.

Signature of athlete:

guardian Date

Signature of parent or

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■ PREPARTICIPATION PHYSICAL EVALUATION

PHYSICAL EXAMINATION FORM

Name: _____ Date of Birth: _____

PHYSICIAN REMINDERS

1. Consider additional questions on more-sensitive issues.
 - Do you feel stressed out or under a lot of pressure?
 - Do you ever feel sad, hopeless, depressed, or anxious?
 - Do you feel safe at your home or residence?
 - - During the past 30 days, did you use chewing tobacco, snuff, or dip?
 - Do you drink alcohol or use any other drugs?
 - Have you ever taken anabolic steroids or used any other performance-enhancing supplement?
 - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
 - Do you wear a seat belt, use a helmet, and use condoms?
2. Consider reviewing questions on cardiovascular symptoms (Q4–Q13 of History Form).

Height: Weight:		
BP: / (/) Pulse: Vision: R 20/ L 20/ Corrected: <input type="checkbox"/> Y <input type="checkbox"/> N		
Appearance <ul style="list-style-type: none">• Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, hyperlaxity, myopia, mitral valve prolapse [MVP], and aortic insufficiency)		
• Eyes, ears, nose, and throat, Pupils equal, Hearing		
Lymph nodes		
Heart*• Murmurs (auscultation standing, auscultation supine, and ± Valsalva maneuver)		
Lungs		
Abdomen		
Skin <ul style="list-style-type: none">• Herpes simplex virus (HSV), lesions suggestive of methicillin-resistant <i>Staphylococcus aureus</i> (MRSA), or tinea corporis		
Neurological		

Neck		
Back		

Shoulder and arm		
Elbow and forearm		
Wrist, hand, and fingers		
Hip and thigh		
Knee		
Leg and ankle		
Foot and toes		
Functional • Double-leg squat test, single-leg squat test, and box drop or step drop test		

Consider electrocardiography (ECG), echocardiography, referral to a cardiologist for abnormal cardiac history or examination findings, or a combination of those.

Name of health care professional (print or type): _____ Date: _____

Address: _____ Phone: _____ Signature of
health care professional: _____, MD, DO, NP, or PA

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**MENDOTA TOWNSHIP HIGH
SCHOOL
BOOSTER CLUB**



The purpose of the Mendota Boosters is to support MHS athletics through positive parent and community involvement, volunteer service and financial support.

How do we raise money?

- *Annual Draw Down
- *Other fundraisers
- *Pork Chop sales at Football games
- *Selling merchandise at home games

Where do we invest the profits?

- *Purchase items needed for individual sports
- *Student scholarships
- *Senior nights, sub sandwiches for teams
- *Projects (e.g., weight room, electricity to ball field)

Ways to get involved

- *Grilling/Selling Pork Chops at Football games
- *Volunteering to make baked goods
- *Working the merchandise table
- *Attending monthly meetings
- *Make posters for athletics' lockers

Funds raised this year is awarded during next school year, funds are invested in Mendota High School sports and scholarships.

Every sport can apply for Booster support, but we need your help to make it work!

The Boosters normally meets on the second Wednesday of the month at 6:30 pm in the school media center. Everyone is welcome and everyone is encouraged to attend.

Communications

1. Emails - To be added to the email list please email Amanda Stamberger (amandahansen2163@yahoo.com), Erin Strouss (erinstrouss@gmail.com), Shelly Stamberger (sstam10@gmail.com)
2. Social Media- Facebook: Like the "Mendota High School Booster Club" page

Name: _____ Cell _____

Email: _____

Name(s) of child(ren) attending MHS:

Freshmen _____ Sophomore _____ Junior _____

_____ Senior _____

Send to: Mendota Booster Club
c/o Mendota High School
2300 West Main Street
Mendota, IL 61342 25

RESOURCES

Address:

Mendota High School
2300 West Main St.
Mendota, IL. 61342

Phone:

1-815-539-7446

Fax

1-815-538-2026

Internet:

www.mendotahs.org

- Click on 'Athletics; Team Schedules' for any cancellations
- Click on 'Athletics' for a copy of the Parent-Athlete Handbook and ALL team schedules

<https://www.mendotatownshipathletics.com/>

www.maxpreps.com

The Athletic Director will post cancellations, rescheduled events, weekly reminders, etc. on the Mendota Booster Club Facebook page. Please go and "LIKE" the MENDOTA HIGH SCHOOL BOOSTER CLUB and the MENDOTA TROJAN ATHLETICS Facebook page.

Please note that the student planner may not be 100% accurate as events are subject to change.

MHS CARES 24/7 STUDENT CRISIS / WELLNESS RESOURCES

- Police/Fire/Medical/Personal Emergency? CALL 911 24/7
- **Suicide/Crisis Hotline: Call 1-800-273-TALK (8255) or text "ANSWER" to 839863** ● Personal Crisis / Safety Issue / Need Help? Text "START" to 741741 (The text is free, and the text to that number will not appear on a phone bill's list of calls.)
- **Poisoning or drug/alcohol overdose? 911 & 1-800-222-1222**
- Sexual assault/rape? 1-800-892-3375 or 1-800-656-4673 or 911
- **Need a Safe Place? Call 815-433-3953 / text "SAFE" & location to 69866 Abused/neglected, or subjected to violence? Call 1-800-25-ABUSE (252-2873), 1-800-799-SAFE (7233), 911**
- Dating abuse/date rape? 1-866-331-9474 or text "LOVEIS" to 22522
- **Drug/alcohol problem? Want help? 815-391-1000**
- Email mhscares@mendotahs.org to confidentially report non-emergency concerns, such as a student in need of help (including yourself), bullying, a school safety issue, conflict or possible fight, etc. Call 815-883-3302 to anonymously report drug dealing, teen drug/alcohol use, or parents/adults providing alcohol/drugs to minors.

Bullying and Harassment Policies

HB 1443 Hazing Reporting

720 ILCS 5/12C-50.1 (Effective Date August 16, 2013)

This act creates a new crime in the Criminal Code for “Failure to Report Hazing”. If a school official fails to report hazing it is a Class B Misdemeanor (if the act caused great bodily harm or death, it is a Class A Misdemeanor). “School Official” is a paid administrator, teacher, counselor, education support personnel, or a paid or volunteer coach.

Mandated Reporters:

- School Personnel: includes administrators and certified and non-certified staff such as the superintendent, teacher, principal, school counselor, school nurse, school social worker, assistant principal, teacher’s aide, truant officer, school psychologist, and secretary, including personnel of institutions of higher education
- Child Care Personnel: includes all staff at overnight, day care, pre-school or nursery school facilities, recreational or athletic program or facility personnel, early intervention providers as defined in the Early Intervention Services System Act, and foster parents
- Mandated reporters are required to report suspected child maltreatment immediately when they have “reasonable cause to believe” that a child known to them in their professional or official capacity may be an abused or neglected child”. (325 ILCS 5/4) This is done by calling the DCFS Hotline at 1-800-252-2873 or 1-800-25ABUSE.

Prevention of and Response to Bullying, Intimidation, and Harassment

Bullying, intimidation, and harassment diminish a student’s ability to learn and a school’s ability to educate. Preventing students from engaging in these disruptive behaviors and providing all students equal access to a safe, non-hostile learning environment are important school goals.

Bullying on the basis of actual or perceived race, color, national origin, immigration status, military status, unfavorable discharge status from the military service, sex, sexual orientation, gender identity, gender-related identity or expression, ancestry, age, religion, physical or mental disability, order of protection status, status of being homeless, or actual or potential marital or parental status, including pregnancy, association with a person or group with one or more of the aforementioned actual or perceived characteristics, or any other distinguishing characteristic is prohibited in each of the following situations:

1. During any school-sponsored education program or activity.
2. While in school, on school property, on school buses or other school vehicles, at designated school bus stops waiting for the school bus, or at school-sponsored or school-sanctioned events or activities.
3. Through the transmission of information from a school computer, a school computer network, or other similar electronic school equipment.
4. Through the transmission of information from a computer that is accessed at a non-school-related location, activity, function, or program or from the use of technology or an electronic device that is not owned, leased, or used by the school district or school if the bullying causes a substantial disruption to the educational process or orderly operation of a school.

Bullying includes cyber-bullying (bullying through the use of technology or any electronic communication) and means any severe or pervasive physical or verbal act or conduct, including communications made in writing or electronically, directed toward a student or students that has or can be reasonably predicted to have the effect of one or more of the following:

1. Placing the student or students in reasonable fear of harm to the student’s or students’ person or property; 2.

Causing a substantially detrimental effect on the student’s or students’ physical or mental health; 3. Substantially interfering with the student’s or students’ academic performance; or School 4. Substantially interfering with the student’s or students’ ability to participate in or benefit from the services, activities, or privileges provided by a school.

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Examples of prohibited conduct include name-calling, using derogatory slurs, stalking, sexual violence, causing psychological harm, threatening or causing physical harm, threatened or actual destruction of property, or wearing or possessing items depicting or implying hatred or prejudice of one of the characteristics stated above.

Students are encouraged to immediately report bullying. A report may be made orally or in writing to the district complaint manager or any staff member with whom the student is comfortable speaking. Anyone, including staff members and parents/guardians, who has information about actual or threatened bullying is encouraged to report it to the district complaint manager or any staff member. Anonymous reports are also accepted by phone call or in writing.

Complaint Managers:¹

_____	_____	Name
_____	_____	Address
_____	_____	Phone Number
Phone Number	_____	
_____	_____	Email Address
Address	_____	

A reprisal or retaliation against any person who reports an act of bullying is prohibited. A student’s act of reprisal or retaliation will be treated as bullying for purposes of determining any consequences or other appropriate remedial actions.

A student will not be punished for reporting bullying or supplying information, even if the school’s investigation concludes that no bullying occurred. However, knowingly making a false accusation or providing knowingly false information will be treated as bullying for purposes of determining any consequences or other appropriate remedial actions.

¹ One complaint manager should be male and one complaint manager should be female.

§6.40 Page 3 of 3 © 2015 IPA School Handbook Subscription Service To be used in conjunction with the Illinois Association of School Board’s PRESS Service Please review this material with your school board attorney before use. Students and parents/guardians are also encouraged to read the following school district policies: 7:20, Harassment of Students Prohibited and 7:180, Prevention of and Response to Bullying, Intimidation and Harassment. 2 Cross-references: PRESS 7:20, Harassment of Students Prohibited PRESS 7:180, Prevention of and Response to Bullying, Intimidation and Harassment PRESS 7:190, Student Discipline PRESS 2:260, Uniform Grievance Procedure

- Resources:**
- www.stopbullying.gov
 - www.stophazing.org

Mendota Township High School, #280
Concussion Management Plan
Return-to-Play Protocol
Return-to-Learn Protocol
Post-Concussion Consent Form

In accordance with concussion requirements in P.A. 99-245, Sec. 22-80, Mendota Township High School District #280 will implement its return-to-play and return-to-learn protocols. A student may not participate in an interscholastic athletic activity for the school year until the student and the student's parent/guardian sign a form acknowledging that they received and read written information explaining concussion prevention, symptoms, treatment, and oversight and that includes guidelines for safely resuming participation in activities following a concussion. (Sec. 22-80(e)). The approved form is provided by the Illinois High School Association (IHSA).

District #280 Concussion Oversight Team has established protocols based on peer-reviewed scientific evidence consistent with guidelines from the Centers for Disease Control and Prevention. The return-to-play protocol governs a student's return to interscholastic athletic practice or competition following a force of impact believed to have caused a concussion. The return-to-learn protocol governs a student's return to the classroom after the student is believed to have experienced a concussion, whether or not the concussion took place while the student was participating in an interscholastic athletic activity.

CONCUSSION: A concussion is a mild traumatic brain injury that results from a bump, blow, or jolt to the head. A concussion may also occur from an indirect force. This sudden movement can cause the brain to bounce around or twist in the skull, stretching and damaging the brain cells and creating chemical changes in the brain. Most students will have symptoms that last for a few days or week. Some more serious concussions can last for weeks, months, or longer.

SYMPTOMS: (can include but are not limited to)

Physical: Headache, nausea, vomiting, dizziness, visual dysfunction (blurred, double, fuzzy), pressure in the head, sensitivity to light or noise, balance difficulties, fatigue, neck pain, lightheadedness, numbness or tingling

Cognitive: difficulty concentrating, difficulty remembering,

Emotional: anxious, nervous, sadness, feeling more emotional, feeling slowed down, feeling in a fog, irritability

Sleep: difficulty falling asleep, sleeping more than usual, sleeping less than usual

ROLE: Along with the student's physicians, any school certified athletic trainers, which are contracted through OSF for the current school year, act as the "point persons" for dealing with athletic injuries. This includes the care and management of concussions. The Athletic Trainer or student's physician will provide initial evaluation of the injury, and see to it that the student is properly managed and attended to during the extent of the injury.

ImPACT TESTING: Management of a concussion begins with a baseline ImPACT Test (Immediate Post Concussion Assessment and Cognitive Testing), a computerized neurocognitive base-line test conducted by the OSF Athletic Trainer prior to the season. Students are required to take the baseline test every 2 years and takes approximately 45 minutes. Post injury impact testing is also utilized at the discretion of the certified athletic trainer or licensed healthcare professional. Baseline testing will aid the licensed health care professional in determining the extent of injury, progress of recovery, and when the student has cognitively recovered from a concussion.

Mendota High School's expectation is to have an ImPACT baseline test for all of our students, especially in the sports that have a higher incidence of concussions in a designated MHS classroom with on a Chromebook.

EVALUATION: Once it has been determined that a student has sustained a concussion, they must be removed from athletic participation immediately. If an athletic trainer is not available for immediate evaluation, the athlete is to be removed from participation for the remainder of the day. In the event symptoms last greater than 24 hours, the student

must see a physician for clearance. A parent's consent is not a sufficient means for a student to return to play.

Students who have not been cleared to participate cannot be in uniform for any games. Practice and game attendance may be modified by the recommendation of the treating licensed healthcare professional. MHS has the right to exclude any student who is under care for a concussion from any school sponsored activity that is not cleared through the licensed health care professional.

RETURN TO PLAY: Upon being symptom free at rest, with cognitive exertion, and post-concussion ImPACT testing back to or better than baseline, the student may begin a progression back to extracurricular activity participation. Under no circumstances will this protocol be accelerated. Progression is individualized and will be determined on a case by case basis. Factors that may affect the rate of progression include: previous history of concussion, duration and type of symptoms, age of the student, amount and severity of red flags on post-injury ImPACT, and sport/activity in which the student participates. If symptoms return during any level of graded exercises, a 24-hour period of rest is required before repeating that level. If symptoms persist with exercise the student will be required to be re-evaluated by a licensed healthcare professional.

The student's physician and/or OSF Center for Physical Rehabilitation and Aquatics/Athletic Trainer will provide detailed return-to-play protocol. Mendota High School Requests **Return to Play** levels of progression are filed with the nurse, Athletic Director, and principal's office.

Return to play after concussion – ASYMPTOMATIC WITHIN 24 hours post-injury

- a. The student must be asymptomatic at rest within 24 hours of injury.
- b. The student must be asymptomatic with cognitive exertion.
- c. Graded exercises will begin if the student is asymptomatic 24 hours post-injury. If symptoms return during any step of graded exercises, exercises will be discontinued and student will be referred to a licensed healthcare professional other than a Certified Athletic Trainer.
- d. The following must be completed prior to final clearance:
 1. Written clearance from a licensed healthcare professional along with having completed RTP concussion protocol which includes graded exercises without return of symptoms.
 2. Parent/guardian and student must sign post-concussion consent form.

Return to play after concussion – SYMPTOMATIC 24 hours post-injury

- a. The student must meet all of the following criteria in order to progress to activity:
 1. If the student is symptomatic 24 hours post injury they will be required to see a licensed healthcare professional other than a Certified Athletic Trainer.
 2. If student has taken the ImPACT baseline, a post-injury ImPACT test will be administered 24-72 hours' post injury.
 3. Once student is symptom free at rest they must remain asymptomatic at rest for 24 hours.
 4. Once asymptomatic for 24 hours they may begin exertional activities.
 5. Each level of graded exercises will take place approximately 24 hours following the previous level.
6. If symptoms return during any level of graded exercises, a 24-hour period of rest is required before repeating that level. If the level is repeated 24 hours later and symptoms again return, the student is required to be re-evaluated by a licensed healthcare professional other than a Certified Athletic Trainer. b. The following must be completed prior to final clearance:
 1. Follow up test within normal range of baseline on post-concussion ImPACT testing.
 2. Have written clearance from a licensed healthcare professional along with having completed RTP graded exercise concussion protocol.
 3. Parent/guardian and student must sign post-concussion consent form.

Graded Exercises (Supervised by ATC): will follow a 5 step/level process, each being approximately 24 hours following the previous level.

Graduated/Rehabilitation Levels (1-5)	Functional Exercise Examples
1. Light exertion/no contact.	Light aerobic exercises (approx. 20 minutes), walking, stationary bike, elliptical, balance training.
2. Moderate exertion/no contact.	Sport-specific training (approx. 30 min.) jogging/running, light to moderate weight lifting and resistance training.
3. High exertion, mild contact.	Non-contact practice and conditioning drills once neurocognitive post-test composite scores are returned to baseline. (approx. 45 min.)
4. High exertion, full contact.	Student is able to participate in unrestricted, live scrimmage drills after medical clearance. (approx. 60 minutes of activity and must include contact activities).
5. Return to full practice/game participation	

RETURN TO LEARN: Academic accommodations may be made to help in reducing the cognitive (thinking) load, thereby minimizing post-concussion symptoms and allowing the student to better participate in the academic process during recovery. The academic accommodations will be recommended as part of medical care and treatment for a concussion as recommended by a licensed health care professional. These accommodations will be made on an individual basis. The student and parent are encouraged to discuss and establish accommodations with the school on a class-by-class basis. Mendota High School requests **Return to Learn and Academic Accommodations** are updated at least weekly with visits to the physician, and a copy of updated Return to Learn and Academic Accommodations are filed with the nurse and principal's of ice.

Current Symptoms: Symptoms can wax and wane through the day and include, and are not limited to the following: headaches, sensitivity to light, fatigue, sleep difficulties, sensitivity to noise, cognitive difficulties, visual dysfunction, vestibular dysfunction, environmental sensitivity, nausea, dizziness, foggy.

Suggested Four Phase Progression through Return – to – Learn Protocols

In some circumstances, the following recommendations may be indicated by a licensed health care professional treating the student who is diagnosed with a concussion. Documentation must be provided to the school from the treating licensed healthcare professional in order to begin the return-to-learn protocol and to specify what phase to begin at. A phase is 31 determined by the lowest level of function based on observation and evaluation.

Phase 1: No school attendance, cognitive and physical rest at home

Symptom severity:

- Abnormal ImPACT results.
- Student demonstrates the inability to tolerate being in the school environment due to symptoms such as but not limited to: intense and continuous headaches, dizziness, or sensitivity to light and/or noise.
- Student is unable to read for more than 10 minutes without an increase in symptoms.

Suggested Accommodations/Modifications:

- No school.
- Emphasize cognitive and physical rest to allow the brain and body to heal.
- No physical activity – this includes any activity that may increase the heart rate
- No homework, tests, quizzes, or computer use.
- Discourage testing/cell phone use, video games, watching tv, listening to music using headphones or loud music
- Cognitive “shut-down”
- Use darkened, quiet rooms when symptoms are severe.
- Provide student with copies of class notes/materials (teacher or student generated).

Progress to Phase 2 when:

- Significant decrease of symptoms at rest such as: decreased intensity and frequency of headaches, decreased sensitivity to light and/or noise.
- Ability to perform light reading for 10 minutes without increased symptoms.

Phase 2: Limited School Attendance (half days/part-time) with Accommodations:

Symptom Severity:

- Symptoms have decreased to manageable levels.
- Mild symptoms at rest, increasing with physical and mental activity.
- Unable to perform cognitive activities for long periods of time <30 minutes.
- Abnormal ImPACT scores.

Suggested Accommodations/Modifications:

- Continue to emphasize cognitive and physical rest.
- Limit/partial classes: Attendance should be alternated between morning and afternoon classes to ensure the same classes are not missed multiple days in a row. Length of time at school should be determined on ability to tolerate cognitive activity.
- “Clear desk” and Listen: Allow student to listen to class material without the focus of actively taking notes and catching up on make-up work. Provide student with copies of class notes.
- Report daily to Athletic Trainer or School Nurse in order to monitor symptoms as well as determine progression to next phase.
- Allow student to lay head down at their desk as needed.
- No PE/FFL class or sports/extracurricular activities.
- Modified homework assignments.
- Allow extra time for assignments.
- No tests/quizzes.
- Limit or eliminate “screen time”. (computers, phones, tablets, television, smart boards, reading, or other visual stimuli)
- Avoid noisy/busy hallways, lunch rooms, or school assemblies
- Allow student to wear sunglasses or hat, or dim the computer screen

Progress to Phase 3 when:

- Each student’s class has been attended at least once.
- School activity does not increase symptoms.
- Overall symptoms have decreased.

Phase 3: Full School Day Attendance with Accommodations

Symptom Severity:

- Minimal or no symptoms at rest.
- Able to tolerate up to 45 minutes of mental exertion.
- No more than 1 ImPACT Summary Composite Score exceeding RCI (Red Flag)

Suggested Accommodations/Modifications:

- Gradually increase demands on the brain by increasing the amount, length of time, and difficulty of academic requirements, as long as this does not worsen symptoms.

- Report daily to Athletic trainer or School Nurse in order to monitor symptoms as well as determine progression to next phase.
- No PE/FFL class or sports/extracurricular activities.
- Continue to prioritize assignments, tests, and projects. Gradually increase amount of homework.
- No major/standardized testing; modified testing.
- Provide student with copies of class notes as needed.
- Rest periods in classroom as needed.
- No physical activity unless prescribed by a licensed healthcare provider. For example, if student has been symptom free for 24 hours they may begin graded exercises under the supervision of an Athletic Trainer per Return-To-Play protocol. If a student has not resolved their symptoms after 4-6 weeks, some licensed healthcare professionals will suggest light aerobic activity at a pace and duration below what triggers symptoms. Activities would include tasks such as walking or riding a stationary bike. No contact sports allowed until completion of graded exercises, student is completing a full day of school without accommodations, and has received written clearance from a licensed healthcare professional.

Progress to Phase 4 when:

- Symptom free with mental exertion.
- ImPACT scores have normalized and/or symptoms have resolved completely.
- Completion of clinical exam conducted by a licensed healthcare professional allowing student to return to full academic load without accommodation.

Phase 4: Full Day School Attendance WITHOUT accommodations:

Symptom Severity:

- Symptom free.

Plan:

- Resume current academic responsibilities once ImPACT scores have normalized and /or symptoms have resolved completely as determined by a licensed healthcare provider. Documentation from the licensed healthcare provider must be provided to the school indicating the student no longer needs academic modifications and Return-to-Learn protocol has been completed.
- The student is responsible for communication between teachers and school counselor to establish a plan to gradually complete missed tests, quizzes, projects, and homework. An extended period of time is recommended in order to minimize stress.
- Gradual resumption of physical activity.
- Students with return to PE/FFL class once they have completed the Return-to-Play graded exercises.

Return-to-Play protocol will be conducted under the direction of the Athletic Trainer.

- Student reports daily to the Athletic Trainer and/or nurse until having completed both Return-to-Learn and Return-to-Play.

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:

<ul style="list-style-type: none">• Headaches• “Pressure in head”• Nausea or vomiting• Neck pain• Balance problems or dizziness• Blurred, double, or fuzzy vision• Sensitivity to light or noise• Feeling sluggish or slowed down• Feeling foggy or groggy• Drowsiness• Change in sleep patterns	<ul style="list-style-type: none">Amnesia“Don’t feel right”Fatigue or low energySadnessNervousness or anxietyIrritabilityMore emotionalConfusionConcentration or memory problems (forgetting game plays)Repeating the same question/comment
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Signs observed by teammates, parents and coaches include:

<ul style="list-style-type: none">• 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?

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

If you think your child has suffered a concussion

Any student even suspected of suffering a concussion should be removed from the game or practice immediately. No student may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the student should continue for several hours. IHSA Policy requires students to provide their school with written clearance from either a physician licensed to practice medicine in all its branches or a certified athletic trainer working in conjunction with a physician licensed to practice

medicine in all its branches prior to returning to play or practice following a concussion or after being removed from an interscholastic contest due to a possible head injury or concussion and not cleared to return to that same contest. In accordance with state law, all IHSA member schools are required to follow this policy.

You should also inform your child’s coach if you think that your child may have a concussion. Remember it’s better to miss one game than miss the whole season. And when in doubt, the student sits out.

For current and up-to-date information on concussions you can go to: <http://www.cdc.gov/ConcussionInYouthSports/>

What is a concussion?

A concussion is a mild traumatic brain injury. Concussions occur from a bump, blow, or jolt to the head, or 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. Most concussions occur without the loss of consciousness.

Recognizing a concussion -

Signs and symptoms of a concussion may show up immediately or can take hours or days to fully appear. If your child reports any symptoms of a concussion, or if you notice the symptoms or signs yourself, seek medical attention right away.

Monitoring your child -

Your child needs to be monitored closely over time, and checked for any of the signs and symptoms listed on the front side of this form. A good guideline is to note signs/symptoms that worsen, and behaviors that seem to represent a change in your child.

Please be especially observant for signs and symptoms listed below. The following indicate the need to report immediately to the nearest ER for medical care or in an emergency, to activate EMS by dialing 911: 1.

Headaches that increase in severity

2. Vomiting
3. Decreased or Irregular Pulse/Respiration
4. Unequal, Dilated, or Unreactive Pupils
5. Slurred Speech
6. Seizure Activity
7. Changes in level of consciousness, very drowsy, difficult awaking, or losing consciousness
8. Cannot recognize people, places, or becomes increasingly confused

If you have any questions or concerns about the signs and symptoms you are observing, contact your family physician for instructions, or seek medical attention at the closest emergency department. Otherwise you can follow the instructions outlined below.

<p>It is okay to:</p> <ul style="list-style-type: none"> ● Go to sleep ● Rest; periodic naps when tired/fatigued ● Use ice pack on head & neck for comfort ● Eat a light diet, carbohydrates ● Drink fluids, stay hydrated ● After 24 hours, use Tylenol for headaches <p>There is no need to:</p>	<p>Do NOT:</p> <ul style="list-style-type: none"> ● DO NOT take ibuprofen, aspirin, naproxen, or other non-steroidal anti-inflammatory medications (NSAIDS) ● DO NOT exercise or lift weights ● DO NOT do strenuous activity including PE, work, sports, video games, texting, or use the computer ● DO NOT drive a vehicle ● DO NOT drink alcohol
<ul style="list-style-type: none"> ● Check eyes with flashlight ● Wake up every hour, unless directed by physician ● Test reflexes ● Stay in bed 	

<p>SIGNS – Observed by Athletic Trainer, Coach, Others</p> <ul style="list-style-type: none"> <input type="checkbox"/> Loss of Consciousness <input type="checkbox"/> Seizure Activity <input type="checkbox"/> Cannot Recall Events Prior to Injury <input type="checkbox"/> Cannot Recall Events After Injury <input type="checkbox"/> Disoriented (Person, Place, Time) <input type="checkbox"/> Confusion <input type="checkbox"/> Moves Clumsily, Unsteady <input type="checkbox"/> Appears Dazed, Stunned <input type="checkbox"/> Memory Problems <input type="checkbox"/> Answers Questions Slowly <input type="checkbox"/> Asks Same Questions Repeatedly <input type="checkbox"/> Vacant Stare, Glassy Eyed <input type="checkbox"/> Easily Distracted <input type="checkbox"/> More Emotional <input type="checkbox"/> Behavior/Personality Changes <input type="checkbox"/> Unusually Irritable 	<p>SYMPTOMS – Reported by the student</p> <ul style="list-style-type: none"> <input type="checkbox"/> Headache <input type="checkbox"/> Nausea, Vomiting <input type="checkbox"/> Dizziness or Balance Problems <input type="checkbox"/> Difficulty Concentrating <input type="checkbox"/> Feeling Sluggish or “Slowed Down” <input type="checkbox"/> Feeling “in a fog” or “foggy” <input type="checkbox"/> Difficulty Remembering Things <input type="checkbox"/> Double or Blurred Vision <input type="checkbox"/> Sensitivity to Light or Noise <input type="checkbox"/> Drowsiness <input type="checkbox"/> Fatigue <input type="checkbox"/> Difficulty Falling Asleep <input type="checkbox"/> Sleeping Less than Usual <input type="checkbox"/> Sleeping More than Usual <input type="checkbox"/> Nervous/Anxious <input type="checkbox"/> Sadness/Emotional
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The following steps were taken for your son/daughter by athletic trainers, coaches, or school personnel:

- ☐ Removed from participation
- ☐ Checked for a neck/spinal injury
- ☐ Checked if immediate emergency care was needed
- ☐ Assessed orientation, memory, concentration, and balance
- ☐ Restricted from any further participation and exertional activities
- ☐ Continued to be observed and monitored by athletic trainers/coaches/school personnel
- ☐ Informed them if the need to be evaluated by appropriate licensed healthcare professional such as athletic trainer, physician, neuropsychologist

2. The school/organization directs your son/daughter to be evaluated by an appropriate licensed healthcare professional i.e. MD, DO, Athletic Trainer, or Neuropsychologist. **Your son/daughter needs written clearance from the licensed health care provider and written clearance from you – the parent/guardian before your son/daughter can be allowed to return to activity or athletic participation.**

Recommendations provided to: _____ Date: _____
Recommendations provided by: _____ Phone: _____

Please see Reverse Side for Additional Concussion Care Information

IHSA Sports Medicine Acknowledgement & Consent Form Concussion

Information Sheet

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:

- Headaches ➡ Amnesia
- “Pressure in head” ➡ “Don’t feel right”
- Nausea or vomiting ➡ Fatigue or low energy
- Neck pain ➡ Sadness

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- Balance problems or dizziness ➡ Nervousness or anxiety • Blurred, double, or fuzzy vision ➡ Irritability
- Sensitivity to light or noise ➡ More emotional
- Feeling sluggish or slowed down ➡ Confusion
 - Feeling foggy or groggy ➡ Concentration or memory problems • Drowsiness (forgetting game plays) ➡ Repeating the same question/comment
- 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

IHSA Sports Medicine Acknowledgement & Consent Form Concussion

Information Sheet (Cont.)

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. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often fail to report symptoms of injuries. Concussions are no different. As a result, education of administrators, coaches, parents and students is the key to 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 medical clearance. Close observation of the athlete should continue for several hours. 38 The Youth Sports Concussion Safety Act requires athletes to complete the Return to Play (RTP) protocols for their school prior to returning to play or practice following a concussion or after being removed from an interscholastic contest due to a possible head injury or concussion and not cleared to return to that same contest.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to: <http://www.cdc.gov/ConcussionInYouthSports/>

Adapted from the CDC and the 3rd International Conference on Concussion in Sport
Document created 7/1/2011 Reviewed 4/24/2013, 7/16/2015, July 2017

IHSA Performance-Enhancing Substance Policy

In 2008, the IHSA Board of Directors established the association's Performance-Enhancing Substance (PES) Policy. A full copy of the policy and other related resources can be accessed on the IHSA Sports Medicine website. Additionally, links to the PES Policy and the association's Banned Drug classes are listed below. School administrators are able to access the necessary resources used for policy implementation in the IHSA Schools Center.

As a prerequisite to participation in IHSA athletic activities, we have reviewed the policy agree that I/our student will not use performance-enhancing substances as defined by the policy. We understand that failure to follow the policy could result in penalties being assigned to me/our student either by the my/our student's school or the IHSA.

IHSA PES Policy

<http://www.ihsa.org/documents/sportsMedicine/2017-18/2017-18 PES policy.pdf>

IHSA Banned Drug Classes

<http://www.ihsa.org/documents/sportsMedicine/current/IHSA Banned Drugs.pdf>

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Acknowledgement and Consent

Student/Parent Consent and Acknowledgements

By signing this form, we acknowledge we have been provided information regarding concussions and the IHSA Performance-Enhancing Substance Policy.

STUDENT

Student Name (Print): Grade (9-12)

Student Signature: Date:

PARENT or LEGAL GUARDIAN

Name (Print):

Signature: Date: _____ Relationship to student: _____

Consent to Self Administer Asthma Medication

Illinois Public Act 098 -0795 provides new directions for schools concerning the self-carry and self-administration of asthma medication by students. In order for students to carry and self-administer asthma medication, parents or guardians must provide schools with the following:

- Written authorization from a student's parents or guardians to allow the student to self-carry and self-administer the medication.
- The prescription label, which must contain the name of the asthma medication, the prescribed dosage, and the time at which or circumstances under which the asthma medication is to be administered.

A full copy of the law can be found at <http://www.ilga.gov/legislation/publicacts/98/PDF/098-0795.pdf>.

Each year IHSA member schools are required to keep a signed Acknowledgement and Consent form and a current Pre-participation Physical Examination on file for all student athletes.

Overview and Features of ImPACT Testing

ImPACT testing is used by NFL teams, U.S. Soccer, NHL, and countless colleges and high schools across the country. ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) is fast becoming the “Standard” in recognizing and managing head injuries. The program involves an online computerized exam that each student-athlete takes every two years prior to the athletic season.

Mendota High School’s expectation is to have an ImPACT baseline test for all of our athletes especially in the sports that have a higher incident of concussions (Football, Soccer, Basketball, and Wrestling) in a designated MHS computer lab. Participating in the baseline testing may help the athlete return to play faster and is a key factor in diagnosing concussions.

If the student-athlete is believed to have suffered a concussion during competition, the exam is taken again and the data is compared to the baseline. This information is then used as a tool to assist the athletic trainer and treating physicians in determining the extent of the injury, monitoring recovery, and in making a safe “Return to Play” decisions. If an injury of this nature occurs, we will contact you.

The exam takes about 25-30 minutes and is non-invasive. The program is basically set-up as a video game type program. It tracks neurocognitive information such as memory, reaction time, brain processing, speed, and concentration.

One of the reasons concussions are so dangerous is a condition called Second Impact Syndrome. If an athlete sustains a second concussion before completely recovering from the first, the results can be deadly. At Mendota High School we understand the competitive nature of sports but we always hold the athlete’s health and safety as our top priority.

Any questions or concerns regarding this ImPACT program and/or the Concussion Policy, please contact one of the following:

- Mendota Township High School (1-815-539-7446)
 - Kayla Olson, Athletic Trainer, kolson@mendotahs.org
 - Brock Zinke, Athletic Director, binke@mendotahs.org
 - Sheri McConville, School Nurse, smcconville@mendotahs.org
- Websites
 - ImPACT Testing - www.impacttest.com
 - IHSA (Illinois High School Association) – www.ihsa.org or PSPH@ihsa.org
 - CDC - www.cdc.gov/ConcussionInYouthSports/

INSURANCE INFORMATION

- Mendota Township High School’s accident insurance policy covers your child for injuries he or she might receive while playing athletics or cheerleading secondary to your personal insurance. Additional 24 hour insurance is available for a fee, if interested please contact the Principal’s Office.

SAFETY CONCERNS

- Please understand the responsibility for your own safety. By signing this handbook, you are acknowledging that you understand the requirements of the activities. That includes but is not limited to being properly conditioned, checking equipment, and reporting all injuries. Each sport has specific injuries to be aware of. Your signature acknowledges that you do understand that these activities can be hazardous. The signatures insure you (played, parent, etc) will not hold the school including coach, administration, Board of

Education, etc. responsible for any injuries that occur, and the signers assume full responsibility for their actions. You therefore agree to hold harmless or release the coaches, administration, custodians, and the Board or Education from fault and guilt.

○ Some sport specific concerns:

- Basketball: diving or tripping into obstruction (wall, bleachers)
- Football: blocking, tackling, or carrying ball with head down/helmet fit
- Track & Field: throwing events, shot/discus, hitting someone, or pole vault
- Baseball/Softball: thrown ball or bat
- Soccer: improper use of goal/slide tackling
- Volleyball: head and eye injuries caused by ball, people, floor contact
- Cross Country: overtraining/foot injuries/course hazards
- Tennis: balls on court during play
- Wrestling: losing weight at accelerated pace, and/or maintain unhealthy weight/dehydration/ concussions and spinal cord injuries
- Golf: thrown clubs/ flying golf balls
- Cheerleading and/or Trojanettes: mounts, jumps, props

Mendota Fight Song

On Mendota, On Mendota,
March right down that line.
Show your spirit to the school,
Victory every time, O'rah, 'rah
On Mendota, On Mendota
We must keep our fame
So fight, Trojans, FIGHT, FIGHT, FIGHT! To win
this game.

PARENT-STUDENT ATHLETIC HANDBOOK
SIGNATURE PAGE

We have received, read, understand, and agree to abide by the Mendota Township High School Parent-Athlete Handbook, the Code of Conduct, and Training Rules. The signature below by the parent(s)/guardian(s) and athlete indicates they received the following forms and information.

- MTHS Parent-Athlete Handbook
- MTHS and IHSA Concussion Policies and information
- MTHS Student Drug and Alcohol Testing Policy and MTHS Random Drug Testing Consent Form

This signature also indicates the parent(s)/guardian(s) consent for their athlete(s) to enter and be randomly drug tested by Mendota Township High School and the IHSA.

I have read and agree to abide by the Expectations of Parents, the MTHS Handbook, and consent to all other forms.

SIGNATURE OF **PARENT/GUARDIAN**: _____

EMERGENCY TELEPHONE NUMBER: _____

I have read and agree to abide by the Expectations of the Athlete, the MTHS Handbook, and consent to all other forms.

SIGNATURE OF **ATHLETE**: _____

PRINT NAME OF ATHLETE: _____

DATE OF BIRTH (Month/Day/Year): ____/____/____

YEAR IN SCHOOL (FR/SO/JR/SR): _____

I wish to try out for and/or participate in a school sponsored extracurricular activity. (Please identify **ALL** activities. Even the activities that you **THINK** you will be participating in.)

Fall Sport: _____

Winter Sport: _____

Spring Sport: _____

Date: _____

Mendota High School Senior Banner Guidelines

- Student-athletes are to wear their team-issued uniform
- No props are to be used outside of something directly related to their sport (Ex. Football, Soccer Ball, Pom Pom, Etc.)
- Items not normally worn in games, such as jewelry should also not be worn. Exceptions can be made with prior approval from the Athletic Director.
- Offensive gestures are also prohibited
- When in doubt, don't do it

Thank You,

Mendota High School Athletic Department

