



ALTERNATIVE EDUCATION ACADEMY

2010-2011

420 Washington Ave
Cuyahoga Falls, Ohio 44221
(330) 945-5600
<http://cybersummit.org/AEA>

Alternative Education Academy Guidelines

Mission: *To provide an alternative education setting for students who do not fit into the traditional high school program.*

Purpose: *To work in conjunction with our public school districts to provide the nontraditional student with an opportunity to complete coursework on-line in preparation for graduation.*

How does it work?:

- ✓ *Enrollees are typically non-traditional students: i.e. school phobic, pregnancy, extended medical issue, alternative to suspension or expulsion.*
- ✓ *Students enroll in the program with the recommendation of their district superintendent.*
- ✓ *It's not a school, but a learning option that keeps students, and their funding, on your average daily membership*
- ✓ *Our guidance counselor meets with the district counselor to design the program for the student.*
- ✓ *Our staff works to match the student's needs with on-line courses from the Learning Springs Curriculum provided through Aurora Learning. www.learningsprings.com*
- ✓ *Students must provide their own transportation to the Alternative Education Academy.*
- ✓ *Students meet from 8:15 AM – 12:15, PM five days per week.*
- ✓ *A licensed HQT (Highly Qualified Teacher) is in the lab with the students while they are in attendance.*
- ✓ *Coursework is graded by HQT teachers.*
- ✓ *Students progress at their own pace and receive assistance from staff, if needed.*
- ✓ *Students need to be able to work independently on the rigorous coursework.*
- ✓ *Students are expected to exhibit appropriate behavior and be dressed in acceptable attire while attending the Alternative Education Academy.*
- ✓ *Students have the benefit of counseling and job placement if appropriate.*
- ✓ *The Alternative Education Academy reserves the right to remove a student due to attendance, unruly behavior, or failure to comply with the rules of the AEA.*
- ✓ *The cost for this program for the 2010/2011 school year will be \$65 per day per student. Additional costs associated with the special needs of students are the responsibility of the home district.*



Summit County Educational Service Center

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Phone: 330-945-5600 Fax: 330-945-6222
Linda M. Fuline, Superintendent

Alternative Education Academy REFERRAL FORM 2010-2011

This form should be completed by the home school counselor, principal, or other school administrator.

I am recommending that the following student be enrolled in the Alternative Education Academy at the Summit County Educational Service Center beginning _____ and until _____ or later.

Name of Student: _____ Date of Birth: _____

Name of Parent/Legal Guardian: _____

Address: _____
street city zip

Home Phone: _____ Work Phone: _____ Cell Phone: _____

School district of residence: _____

School last attended: _____ Month/Year: _____

Grade last completed: _____ Month/Year: _____

Check the following that applies:

- High School Drop Out
- Alternative School Student
- Credit Deficient Student (alternative to summer school and correspondence courses)
- Home Schooling Student
- Home Bound Instruction
- Alternative to Expulsion
- Other _____

Referring Counselor or Administrator

Position

Signature

Date



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Alternative Education Academy
AUTHORIZATION FORM
2010-2011

This form authorizes _____ (student's name) to be enrolled into the Summit County Educational Service Center Alternative Education Academy program for the 2010-2011 school year or until _____(date).

This student is currently enrolled in the _____ School District and is in the _____ grade.

AUTHORIZING SIGNATURES:

Principal Signature

Date

Superintendent Signature

Date

Student Signature

Date

Parent Signature

Date



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**Alternative Education Academy
STUDENT CONTRACT
2010-2011**

1. I agree to comply with all of the requirements of the Student Code of Conduct for the _____ school district.

2. I agree to comply with the Student Expectations established for the Alternative Education Academy. (see page 11)

3. I agree to work cooperatively with all Alternative Education Academy staff members and students.

4. I agree to conduct myself in a professional manner consistent with the expectations of employees and staff of the Summit County Educational Service Center.

5. I agree to complete at least 6-8 academic lessons per week.
 I agree to complete at least 6-8 academic lessons per week and 1 work credit per year.

6. I understand that transportation to the Alternative Education Academy and to a job site, if applicable, is the responsibility of me or my parents.

7. I agree to be punctual and to attend all days that class is in session. I understand that I may be required to make-up missed days or lessons at my high school or the Alternative Education Academy.

Student Name

Student Signature

Date



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**Alternative Education Academy
PARENT CONTRACT
2010-2011**

I understand that _____ must:
Student's Name

1. Comply with all of the requirements of the student code of conduct for the _____ school district.
2. Comply with the Student Expectations established for the Alternative Education Academy. (see page 11)
3. Work cooperatively with all Alternative Education Academy staff members and students.
4. Conduct himself/herself in a professional manner consistent with the expectations of employees and staff of the Summit County Educational Service Center.
5. Complete all academic work assigned to them by staff members of the Alternative Education Academy.
6. Be punctual and attend school all days that class is in session understanding that they may be required to make-up missed days.
7. I understand that transportation to the Alternative Education Academy and to a job site, if applicable, is the responsibility of the student or the parent/guardian.

Parent Name

Parent Signature

Date

Summit County Alternative Education Academy Student Information Access

Those listed on this form will be given passwords in order for them to monitor this student's progress on-line. The student's seat-time as well as grades to-date will be available for these individuals to view at any time.

Student: _____ Home School: _____

Home Phone: _____ Grade: _____ Gender: M F (circle)

Student Email address: _____

Parent / Guardian: _____

Home Address _____ City _____ Zip _____

Home Phone: (330) _____ Work Phone: _____ Cell Phone: _____

Email address: _____

Home School Administrator: _____

Title: _____ School Phone: _____

Email address: _____

Home School Guidance Counselor: _____ School Phone: _____

Email address: _____

Other: _____

Title: _____ Phone: _____

Email address: _____



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Alternative Education Academy
Parental Authorization for
ALTERNATIVE DISMISSAL PROCEDURES
2010-2011

Please select and fill in the appropriate option/s:

_____ I, _____, parent/guardian give permission for
_____ (student name) to leave the Summit County Alternative
Education Academy on foot on any day that a parent/guardian is not here to pick him/her up.

_____ I, _____, parent/guardian give permission for
_____ (student name) to be picked up any day after school by
_____, relationship _____ or
_____, relationship _____.

_____ I, _____ agree to call Darci Bible at 330/945-5600 ext 511287 by 11:00
AM
any day that _____ (student name) will be picked up by someone who
is not the legal guardian.

**By signing this form, the parent/guardian, agrees to accept full and complete responsibility for the
above named student after he/she leaves the building of the Alternative Education Academy.**

Parent/Guardian Signature

Summit County ESC Representative

Date

Date



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Alternative Education Academy PERSONALIZED GRADUATION PLAN

	Required for Graduation	Grade 9 Dates:	Grade	Grade	Grade		
		School:					
English English 9 English 10 English 11 English 12 Other	4						
Math Pre-Algebra Algebra Geometry Algebra 2 Other	3						
Science Physical.Sci, Earth Sci, Biology, Chemistry, Physics Other	3						
Social Studies World History American History U.S. Gov't. Economics Psychology Other	3						
Foreign Lang. Latin Spanish French German Other							
Fine Arts Art Music Drama							
Applied Arts Family/Cons. Sci.							
Technology Computer courses							
Business							
Health/PE	1						
Other							
Credits (yr)							
Credits(cum)							



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Alternative Education Academy Enrollment Form Check-Off

Student _____ School Year _____

Grade level _____ Home School _____

Enrollment Date _____ Orientation Date _____

Completed/Signed Enrollment Documentation:

- _____ Pg. 3 District Referral Form
- _____ Pg. 4 Authorization Form
- _____ Pg. 5 Student Contract
- _____ Pg. 6 Parent Contract
- _____ Pg. 7 Student Information Access Form
- _____ Pg. 8 Alternative Dismissal Procedures
- _____ Pg. 9 Personalized Graduation Plan

For Work/Credit Option:

- _____ 1. Student/Parent Contract (2 pages)

Comments:

Alternative Education Academy

Student Expectations

Attendance

- ALWAYS call Mrs. Bible at 330/945-5600 ext 511287 if you will be absent.
- Arrive on time. The working day is 8:15 to 12:15. If you arrive before 8:15, dismissal time is still 12:15.
- Dress appropriately for a working environment (**i.e. no hats, coats, hooded sweatshirts may be worn in the classroom. Belt loops at the waist and sufficient coverage for all students**)
- Seat time will be checked daily. Your attendance will be reported to your home school daily.

Behavior

- Show mutual respect.
- Use appropriate manners and language. (NO swearing)
- **Sleeping, cell phones, MY Space and similar sites are not permitted during class.**
- **NO CD players, iPods, and MP3 music is allowed.**

Daily Productivity

- If you receive an online message from a teacher, read it ASAP.
- You are to work on lessons until it is time to leave. You should complete at least 2 lessons per day. Lack of productivity can result in loss of break time or extended dismissal time.
- On the board, write the lesson number that you are working on. Circle it when it is completed.
- You will work on the courses taught by the teacher in attendance on a given day. That way, assistance is available to you when needed. With permission, you may work on coursework of another subject.
- Complete lessons in order unless a teacher allows you to skip. Do not jump around the lessons.
- Split your screen horizontally or vertically so that you can see the questions and the text.
- If a link does not work, try it again later, try searching in Google, or let a teacher know.
- If you can't find an answer or do not understand a question, ask for help.
- **SAVE AFTER EVERY QUESTION.**
- **Do the exam last. DO NOT open the exam until you have completed ALL lessons and get approval from a teacher.**
- At the end of the day, log out of PLATO, shut down the computer, and clean up your area.

Weekly

- Stat. sheets will be reviewed with you and updates will be sent to your home school counselor on a weekly basis.

Breaks

- Breaks are to be taken together at 9:20, 10:20, and 11:20 for 10 minutes.
- Do not enter the hallways. Do not go outside without the room without permission.
- **Drinks must be purchased in the ESC building at the vending machines during first break only.**
- **Drinks and Snacks are permitted only at the Student Break Table. Clean up after yourself.**
- **No drinks or snacks are permitted on the computer tables!!!!**

Writing

- Follow directions.
- Your answer must make sense.
- Write the amount requested (3 sentences, 2 paragraphs, 500 words, 4 examples). A paragraph is usually at least 5 sentences.
- Use correct spelling, grammar, punctuation, and capitalizations.
- DO NOT type in capital letters.

Reminders

- You have a fresh start here with a great deal of support.
- Keep your goal in mind – **to graduate as soon as possible.**