



Inter-Governmental Agreement for shared Special Education Services

This AGREEMENT is made this 1st day of July 2023 between **Canton Area School District**, and **BLaST, Intermediate Unit #17**, of Williamsport, Pennsylvania, and Canton, Pennsylvania with its principal business office located at 33 Springbrook Drive, Canton, PA 17724.

WHEREAS, the **School District** desires to obtain **Services** through the **Intermediate Unit**; and

WHEREAS, the **Intermediate Unit** is desirous of providing such **Services** to the **School District**;

NOW, THEREFORE, in consideration of the foregoing premises, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and intending to be legally bound hereby, the **Parties** hereto agree as follow:

General Terms and Conditions

Article *Contract Documents.*

§ This **Agreement** consists of only the following: (a) these General Terms and Conditions; (b) the following Exhibits that are attached hereto; and (c) each Student Addendum agreed upon and executed by the **Parties**:

§ Exhibit "A," relating to the **Intermediate Unit's** program and services cost projections;

§ Exhibit "B," relating to the **Intermediate Unit's** supervisor job description;

§ Exhibit "C," relating to the **Intermediate Unit's** inter-district classroom(s) hosted by the school district;

§ The intent of the **Parties** is to include in the contract documents all items necessary for the proper execution and completion of the **Services** by the **Intermediate Unit**. The contract documents are complementary, and what is required by one shall be as binding as if required by all. Performance by the **Parties** shall be required only to the extent consistent with the contract documents and reasonably inferable from them.

§ **Employee** " means any person performing **Services** under this **Agreement** on behalf of the **Intermediate Unit** and includes: (a) **Employees**, agents or officials of the **Intermediate**

Unit, (b) a subcontractor(s) of the Intermediate Unit, or (c) Employees, agents or officials of a subcontractor of the Intermediate Unit.

§ “**Services**” means the **Services**, work and deliverables described in Exhibit “A” attached hereto, the **Intermediate Unit’s** duties as described in this **Agreement** and the **Services** or deliverables to be provided by the **Intermediate Unit**. The **Intermediate Unit** may substitute virtual services in the event that in-person services can not be performed, with prior notification to the district.

RESPONSIBILITIES OF THE IU

During the **2023-2024** school year, the IU shall provide and operate the programs and services enumerated in **“Exhibit A”** attached hereto. For purposes of this agreement, the phrase “programs and services” shall mean the following:

- a. Professional or paraprofessional staff in such numbers and with such certification, licenser, or training as is required to implement this agreement in accordance with all applicable provisions of state and federal law in effect on the above date.
- b. Supervision, administration, classroom management, and evaluation of all professional and paraprofessional staff used to implement this agreement and other duties as described in the supervisor job description attached to this contract **(Exhibit B)**.
- c. Administrative and clerical support services from departments or programs within the IU other than the Special Education Department, when required in the judgment of the IU for the effective and efficient implementation of this agreement.
- d. Provision of criminal background information on all individuals for whom such information is required by Section III of the Public School Code of 1949, 24 P.S. s 1-111.

The IU shall ensure that the programs and services provided in accordance with paragraph 1 comply with all requirements of state and federal law in effect on the above date, to the extent that such compliance does not depend on the performance or actions of the District, the Commonwealth or federal governments, or any other individual or entity beyond the control of the IU. When compliance with the requirements of state or federal law, including the provision of a free appropriate public education, depends upon the performance, actions, or cooperation of the District, the IU shall make every effort to advise the District accordingly.

On or before May 1, for each ensuing year that the parties renew this agreement, the IU shall establish and shall notify the District in writing of the unit cost of each program or service enumerated in or added to **Exhibit A** for the ensuing year. The IU shall base the unit cost for a program or service on the actual cost that the IU estimates it will incur to provide the program or

service in accordance with Paragraph 1 during the term of this agreement, or any renewal year. These estimated unit costs shall be incorporated into **Exhibit A** and shall thereby be incorporated into this Agreement.

Reconciliations – Immediately upon the cost of the term of this Agreement and upon the conclusion of any renewal year thereafter, the IU shall calculate the total, actual costs that it incurred in the implementation of this Agreement. The cost calculations shall be made by taking the total costs incurred in providing a particular program or service and dividing it by the total number of days or hours of service provided, then multiplying the resultant daily or hourly cost times the number of days or hours of use by the District. On or before November 1, the IU shall issue a statement containing the total thus calculated and the total payments received from the District in accordance with this Agreement during the preceding year. If the amount expended is greater than the amounts received from the District, the statement shall include a bill for the difference. If the amount is less than the amounts received from the District, the statement shall so indicate, and the IU shall reimburse the difference to the District according to the process described in Section D.

For those programs or services provided to local school districts, the IU shall follow the school calendar and schedule adopted by the District in which the service(s) is/are provided.

In the event the **Intermediate Unit** is unable to provide the **Services** as specified in this **Agreement** because of any act: (a) of God, (b) civil disturbance, (c) fire, (d) riot, (e) war, (f) terrorism, (g) pandemic, (h) epidemic, (i) governmental action, (j) resignation, (k) retirement, (l) termination of an **Employee**, or (m) any other condition or cause beyond the **Intermediate Unit's** reasonable control (each a “**Force Majeur Event**”), shall excuse **Intermediate Unit** from performance under this **Agreement**.

RESPONSIBILITY OF THE DISTRICT

On or before April 1, the District shall identify those programs and services that the District wishes the IU to provide in accordance with this agreement.

The District shall pay the IU according to the schedule contained in Section D.

The District shall assure the following for programs or services included in this contract:

- a. Furnished classrooms and other space comparable in size and consideration to classrooms with the District to which non-exceptional students are typically assigned and which are located in reasonable proximity to the regular ebb and flow of building activities, unless the identified needs of the students assigned to the program or service require otherwise (**Exhibit C**).

Allocation of classrooms and other instructional space is the responsibility of the various school districts participating in this Agreement. Fair-share of space and/or compensation for their equal share is the responsibility of the participating

school districts. Fair share allocations shall be determined no later than August 1, and not changed thereafter without written consent of all districts participating in this Agreement **(Exhibit C)**.

- b. Compliance with all applicable provisions of the Asbestos Hazard Emergency Response Act of 1986 and its implementing regulations, including preparation and maintenance of a management plan covering the building.
- c. Compliance with accessibility and other applicable building standards under any state or federal law in effect on the above date, including but not limited to Section 504 of the Rehabilitation Act of 1973 and its implementing regulations, the Americans with Disabilities Act and its implementing regulations, the Pennsylvania Human Relations Act and its implementing regulations, and Act 166 of 1998.
- d. Assistance, cooperation, and participation of District staff in the development and implementation of adaptations and support services necessary to enable students assigned to the program or service to participate to the maximum extent possible in mainstream or integrated educational or extracurricular activities.
- e. The same regular education support and ancillary services as provided to non-exceptional students.
- f. Application of building or district discipline and student conduct policies in a manner consistent with state and federal laws applicable to exceptional students in effect on the above date.
- g. Curriculum development and provision of such in-service programs, training, and mentor programs to IU staff necessary to implement this agreement in accordance with state and federal law and the terms of any applicable labor agreements to which the IU is party.

COORDINATED RESPONSIBILITIES

The District shall remain responsible for the multidisciplinary evaluation and reevaluation (MDE) and IEP development and revision processes for all exceptional or thought-to-be exceptional students who reside within the District. The IU shall make appropriate members of its staff available at reasonable times and locations for participation as needed in MDE's and IEP planning conferences. Nothing in this paragraph, however, shall require the IU to make available any staff member not directly involved in the provision of programs or services in accordance with this agreement. The IU shall adhere to all recommendations of the IEP team to the extent that implementation of those recommendations is within the scope of the programs and services enumerated in this agreement. The District shall adhere to all recommendations of the IEP team that require the provision of programs, services, accommodations, or support not within the scope of the programs and services enumerated in this agreement.

PAYMENT SCHEDULE

The District agrees to pay the IU a total of **\$105,590.58** for the programs and services provided pursuant to this agreement in five (5) scheduled payments on or before the dates listed below.

1.	August 31, 2023	20%	\$21,118.12
2.	October 31, 2023	20%	\$21,118.12
3.	December 30, 2023	20%	\$21,118.12
4.	February 28, 2024	20%	\$21,118.12
5.	April 28, 2024	20%	\$21,118.12

Final reconciliation of actual costs shall be made on or before November 1 of the following year and subsequent billing if necessary.

LIABILITY

The IU agrees to indemnify, defend, and hold harmless both the District and any director, officer, agent or employee of the District against all claims, damages, losses, or penalties that result either from the acts or omissions of the administrative, professional, paraprofessional, or support staff provided by the IU under the terms of this Agreement or from the maintenance or operation of any equipment or vehicles provided or used by the IU under the terms of this Agreement. The IU shall maintain sufficient liability insurance for this purpose.

The District agrees to indemnify, defend, and hold harmless both the IU and any director, officer, agent, or employees of the IU against all claims, damages, losses, or penalties that result either from the acts or omissions of the administrative, professional, paraprofessional or support staff of the District or from the maintenance, use, or operation of any real property, equipment, or vehicles. The District shall maintain sufficient liability insurance for this purpose.

None of the administrative, professional, paraprofessional, or support staff provided by the IU under the terms of this Agreement shall be considered employees or agents of the District for any purpose, and none of the administrative, professional, paraprofessional, or support staff of the District shall be considered employees or agents of the IU for any purpose. The IU agrees to indemnify, defend, and hold harmless the district against all claims, damages, losses, or penalties resulting from any determination, whether judicial, administrative or otherwise, that any of the foregoing staff members provided by the IU under the terms of this Agreement is an employee or agent of the District. The District agrees to indemnify, defend, and hold harmless the IU against all claims, damages, losses, or penalties resulting from the determination, whether judicial, administrative or otherwise, that any of the foregoing staff members provided by the District under the terms of this agreement is an employee or agent of the IU.

This Agreement is intended to and shall be construed as consistent with all applicable state and federal laws in effect on the above date. To the extent that the law is construed as inconsistent with the language of this Agreement, the law shall supersede the language as the contractual

expression of the parties' intent and may be enforced as such.

This Agreement constitutes the entire Agreement and understanding between the IU and the District concerning the programs and services to which it applies. It supersedes and repeals all prior or contemporaneous Agreements and understanding, written or oral on this subject. Any modification to this Agreement shall be in writing executed by the legal representatives of the parties.

While it is the intent of both parties to honor the provision of this Agreement, both reserve the right to terminate the Agreement due to any unforeseen actions by non-contract parties such as the Pennsylvania Department of Education. Such termination shall be effected in a manner that maintains the rights of students, parents and IU employees.

BLaST Intermediate Unit #17

BY: Sara Mallett ATTEST: Aimee Rypow

Canton Area School District

BY: _____ ATTEST: _____

Exhibit B

BLaST Intermediate Unit #17

Position Description

Position Title: Supervisor, Special Education

Department: Student Services

Reports To: Assistant Executive Director of Student Services

Prepared By: WRM Date: 6/03

Revised By: WRM Date: 4/2010

SUMMARY: To use leadership, supervisory and administrative skills to provide sound educational programs for students who require special education services.

ESSENTIAL DUTIES AND RESPONSIBILITIES *Other duties may be assigned.*

Develops program recommendations and serves as a liaison between the IU and its constituent Charter Schools

Ongoing evaluation of the Special Education curriculum, procedures, and individual students' needs and progress.

- Supervises and coordinates special education classroom programs.

Responsible for compiling and maintaining all reports, records, IEP's etc. that are legally required and useful to program management.

Interprets the objectives and programs of the Spec. Ed. services to the Board, staff and the public.

Assist in the referral evaluation, placement, assignment, and re-evaluation of students with regard to Special Education programs.

- Consults with parents of students enrolled in the program.

- Implements procedures for purchasing special education equipment and supplies.

Supervises preparation of attendance reports and similar data necessary for reimbursement of funds, collecting of tuition for out-of-district students, and similar fiscal matters.

Periodically observes teachers under their supervision. Evaluates both professional and paraprofessional staff under their supervision.

- Keeps informed of all legal requirements governing Special Education.

- Assists with the professional development of teachers.

Assists in the adaptation of school procedures to assist special education students' needs.

Attends special events held to recognize student achievement, and school sponsored activities.

- Schedules staff assignments.
- Supervises and coordinates home instruction for special students.
 - Establishes and maintains standards of student conduct and assist in student discipline as necessary.
 - Cooperates with college and university officials regarding teacher training and preparation
 - Attends interagency meetings when appropriate.

SUPERVISORY RESPONSIBILITIES:

Supervise assigned staff in the Department of Student Services. Is responsible for the overall direction, coordination, and evaluation of professionals in their charge. Also directly supervises paraprofessional employees. Carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

QUALIFICATION REQUIREMENTS: To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

EDUCATION and/or EXPERIENCE:

Master's degree or equivalent. Full approval in at least one area of special education. Three years of successful experience in special education and one year of successful experience as a supervisor.

CERTIFICATES, LICENSES, REGISTRATIONS:

Valid Teaching Certificate and certification as a Special Education supervisor.

LANGUAGE SKILLS:

Ability to read, analyze, and interpret general business periodicals, professional journals, technical procedures, or governmental regulations. Ability to write reports, business correspondence, and procedure manuals. Ability to effectively present information and respond to questions from groups of managers, clients, customers, and the general public.

MATHEMATICAL SKILLS:

Ability to calculate figures and amounts such as discounts, interest, commissions, proportions, percentages, area, circumference, and volume. Ability to apply concepts of basic algebra and geometry.

REASONING ABILITY:

Ability to define problems, collect data, establish facts, and draw valid conclusions. Ability to interpret an extensive variety of technical instructions in mathematical or diagram form and deal with several abstract and concrete variables.

OTHER SKILLS and ABILITIES:

Must be able to transport between school buildings, Charter Schools and IU offices. Ability to apply knowledge of current research and theory in specific field. Ability to establish and maintain effective working relationships with students, staff and the community. Ability to communicate clearly and concisely both in oral and written form. Ability to perform duties with awareness of Department of Education, Bureau of Special Education policies.

PHYSICAL DEMANDS: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to sit and talk or hear. The employee is occasionally required to stand and walk. Specific vision abilities required by this job include close vision, and the ability to adjust focus. The position requires meeting deadlines with severe time constraints, interacting with the public and staff, irregular or extended work hours. The employee is responsible for safety, well-being, and work output of others. The supervisor must be able to develop and maintain excellent working relationships with staff, administration, parent's teachers and others. They must be able to effectively meet demands from several people.

WORK ENVIRONMENT: The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The noise level in the work environment is usually quiet. The noise level in this position varies. When visiting a building the noise level will be loud, in the office, quiet and at meetings, moderate.

Appendix C

Canton Area School District
Inter-District Classroom Host 2023-2024

The **School District** has agreed to host the following inter-district classroom programs operated by the **Intermediate Unit** for the 2023-2024 school year:

Building Location	Classroom/Service Type
N/A	N/A

If the district wishes to repurpose this classroom space and/or terminate the agreement to host the **Intermediate Unit** classroom programs in the subsequent school year, notice must be given to the **Intermediate Unit** on or before March 31st of the current agreement year.

April 2023

Dear Superintendents and Administrators:

On behalf of the Commonwealth of Pennsylvania, we are pleased to announce that the 2023 Pennsylvania Youth Survey (PAYS) will be administered as scheduled this fall! PAYS is a survey of youth in 6th, 8th, 10th, and 12th grades that helps you to assess students' perspective of their school environment, their mental health, as well as their behaviors and attitudes related to alcohol/tobacco/other drugs, violence, and other problem behaviors. PAYS focuses on a multi-domain risk and protective factor framework, helping stakeholders understand the underlying reasons why youth do or do not engage in problem behaviors. The survey is voluntary, and individual student responses remain anonymous and confidential.

The 2023 PAYS will be provided to all Pennsylvania schools who wish to participate AT NO COST through the combined partnership of the Pennsylvania Department of Education, Pennsylvania Department of Drug and Alcohol Programs, and the Pennsylvania Commission on Crime and Delinquency (PCCD). This includes the cost of surveying all students in the eligible grades (either online or paper/pencil) and the cost of the Local Summary Reports provided at both the school district and county level. PAYS can be offered at your convenience between September 4th and December 22nd, 2023.

Further, we are recruiting participants in an **optional** 2023 4th Grade Survey pilot. The 4th Grade Survey was first piloted in our 2021 administration, and 19 schools participated in Pennsylvania. This survey covered topics such as social-emotional learning skills, mental health, sleep, food insecurity, commitment to school, school climate, bullying, etc. The results of this survey pilot revealed the need for greater engagement with school staff and others working with 4th-grade youth moving forward, and we are piloting the survey again for the 2023 school year. Participation in the 2023 4th Grade Survey pilot will be limited to 15,000 4th-grade students across Pennsylvania. Your online Agreement Form will provide you with an opportunity to sign up for that optional survey component.

We look forward to a successful administration of the 2023 PAYS and are committed to the timely delivery of the local PAYS results no later than April 30, 2024. Greater details will follow later this spring, but we invite you to visit the PAYS website at www.PAYS.pa.gov for more information. The registration process will be online this year, making it easier for you to indicate your LEA's participation. You can find the weblink to register in the email sent with this letter.

In partnership,

The Pennsylvania Youth Survey Team

The Pennsylvania Youth Survey: 2023 Timeline and Fact Sheet

Date	Action
March/April 2023	<p>Survey questions available by request (please visit https://epis.psu.edu/paysquestion)</p> <p>Superintendents receive notice of Fall 2023 PAYS administration</p> <p>Please see the email from Bach Harrison for your unique online registration/agreement form link!</p>
May/July 2023	Bach Harrison outreach to district-named Survey Coordinators to connect and outline next steps.
Summer 2023	Recruitment outreach to districts from community, prevention, & education supporters of PAYS
September 4 to December 22, 2023	PAYS administered in participating districts and schools
December 23, 2023	Survey Return Deadline
April 30, 2024	PAYS Reports released to schools and counties
July 31, 2024	District-level PAYS Web Tool access released for authorized individuals

Facts about the PAYS

- A biennial survey of youth in the 6th, 8th, 10th, and 12th grades administered in the fall of odd-numbered years since 1989.
- No cost for any Pennsylvania school district or private/charter/parochial/cyber school that wishes to participate!
- Collects information on school environment, mental health, and youth behaviors and attitudes related to alcohol/tobacco/other drugs, violence, and other problem behaviors mental health and youth attitudes and behaviors towards Alcohol, Tobacco, and Other Drug (ATOD) use and other problem behaviors.
 - What our youth think and believe about anti-social behaviors.
 - What our youth think about their school environment.
- Data from the survey is an essential component of successful grant writing and can be used to leverage resources to help meet identified needs.
 - Provides prevention partnership opportunities to produce healthy youth development.
- Questions are asked in four domains—Community, School, Family, and Peer/Individual
 - Allows schools and communities to see what is happening in all aspects of their youths' lives.
 - Provides a holistic view of the students' environment including their communities, schools, families, and peers.
 - Helps to identify factors that can prevent a child from being ready to learn when they arrive to school each day.
- Surveys are anonymous and confidential—no individual student information can be obtained from the data set.
- In 2021, over 240,000 students across 1,072 schools in school districts and non-traditional schools took part in the PAYS. County reports are available for 57 counties (includes only counties that had a minimum of two participating districts). District reports (a profile report and an all-questions-by-grade report) are provided directly to school district superintendents or points of contact. District Superintendents are also provided with password-protected access to their data in the PAYS Web Tool.

For more information, visit www.pays.pa.gov, or contact Alise Barr, PAYS Support & Development Specialist

Evidence-based Prevention and Intervention Support (EPIS), arh184@psu.edu.

Elmira + Sayre Combined

MILEAGE VERIFICATION FORM

DATE:

5/9/23

BUS # V25

DRIVER

Melissa Jennings

CONTRACTOR

Doud

AM/PM

AM

OD. READING WHEN YOU START THE BUS/VEHICLE AT GARAGE AREA:

143936

OD. READING WHEN YOU PICK UP THE FIRST STUDENT:

143980

OD. READING WHEN YOU DROP OFF THE LAST STUDENT:

144036

OD. READING WHEN YOU STOP THE BUS/VEHICLE AT GARAGE AREA:

144039

MILEAGE VERIFICATION FORM

DATE:

5/9/23

BUS # V25

DRIVER

Melissa Jennings

CONTRACTOR

Doud

AM/PM

PM

OD. READING WHEN YOU START THE BUS/VEHICLE AT GARAGE AREA:

144039

OD. READING WHEN YOU PICK UP THE FIRST STUDENT:

144041

OD. READING WHEN YOU DROP OFF THE LAST STUDENT:

144097

OD. READING WHEN YOU STOP THE BUS/VEHICLE AT GARAGE AREA:

144142

J. Norton only

MILEAGE VERIFICATION FORM

DATE:

5/10/23

BUS #

V25

DRIVER

Melissa Jennings

CONTRACTOR

Doud

AM/PM

Am

OD. READING WHEN YOU START THE BUS/VEHICLE AT GARAGE AREA:

144127

OD. READING WHEN YOU PICK UP THE FIRST STUDENT:

144171

OD. READING WHEN YOU DROP OFF THE LAST STUDENT:

144213

OD. READING WHEN YOU STOP THE BUS/VEHICLE AT GARAGE AREA:

144215

MILEAGE VERIFICATION FORM

DATE:

5/9/23

BUS #

V25

DRIVER

Melissa Jennings

CONTRACTOR

Doud

AM/PM

PM

OD. READING WHEN YOU START THE BUS/VEHICLE AT GARAGE AREA:

144039

OD. READING WHEN YOU PICK UP THE FIRST STUDENT:

144041

OD. READING WHEN YOU DROP OFF THE LAST STUDENT:

144083

OD. READING WHEN YOU STOP THE BUS/VEHICLE AT GARAGE AREA:

144127

Pennsylvania 4th Grade Survey (2023 Pilot): Question Dictionary

2023 Question	2023 Response Options
How old are you?	8 9 10 11 12
What grade are you in?	3rd 4th 5th
Are you (male or female)?	Female Male
Think of where you live most of the time. Which of the following people live there with you? (Mark all choices that apply.)	Mother, Father, Stepparent, Foster Parent, Grandparent, Other Adult, Sibling, Other Children
What is the language you use most often at home?	English, Spanish, Another language
What race or ethnicity do you identify with? (Mark all choices that apply).	American Indian or Alaska Native; Black or African American; East or Southeast Asian; Hispanic or Latinx; Middle Eastern, North African or Arab; Native Hawaiian or Pacific Islander; South Asian; White; Other
I am a hard worker.	Never or almost never Sometimes Often Always or almost always
When I get stuck on something I'm working on, I keep trying until I figure it out.	Never or almost never Sometimes Often Always or almost always
Who do you count on to help you when you have a problem? (Mark all choices that apply.)	Friend, family member, teacher/adult at school, other adults, I don't have anyone
It is hard to wait my turn.	Never or almost never Sometimes Often Always or almost always
I can calm down when I get upset	Never or almost never Sometimes Often Always or almost always
I listen to other student's ideas.	Never or almost never Sometimes Often Always or almost always
I feel bad when someone else gets their feelings hurt.	Never or almost never Sometimes Often Always or almost always
On an average school night, how many hours of sleep do you get? For example, if you go to sleep at 9:00 pm and wake at 6:00 am, you would have been asleep for 9 hours.	4 hours or less 5 hours 6 hours 7 hours 8 hours 9 hours 10 or more hours
In the last two weeks, how often have you felt tired or sleepy during the day?	Everyday Several times Twice Once Never

2023 Question	2023 Response Options
In the past month did you feel happy?	Never or almost never Sometimes Often Always or almost always
In the past month did you feel sad?	Never or almost never Sometimes Often Always or almost always
In the past month did you feel lonely?	Never or almost never Sometimes Often Always or almost always
In the past month did you feel worried, nervous or stressed?	Never or almost never Sometimes Often Always or almost always
If you have felt sad, lonely or worried in the past month who did you talk to? (Mark all choices that apply.)	Select from (Mark all choices that apply.) No one Parent/Caregiver Other Family Member Friend Teacher or another adult at school (e.g. coach, counselor, nurse) Doctor or Therapist Religious or Spiritual Leader (e.g. Rabbi, Pastor, Imam, Priest or Nun, Bishop) Other adult in the community I have not felt this way in the past 30 days
In the past year, have you done anything to harm yourself (such as cutting, scraping, burning) when you were sad, stressed, lonely or depressed.	Yes No
If you were hurt or abused by another person in the past year, how were you hurt or abused? (Mark all choices that apply.)	Physical injury, punching, hitting Threats Emotional abuse, insults, name-calling Inappropriate touching Other injury or abuse I was not hurt or abused
In the past year have you or your family lived in a shelter, hotel, motel, car, campground, or someone else's home?	a. Yes b. No
In the past year have you worried that food at home would run out before your family got money to buy more?	Yes No
In the past year have you skipped a meal because your family didn't have enough money to buy food?	Yes No
My parents/caregivers ask me what I think before making family decisions involving me.	Never or almost never Sometimes Often Always or almost always
My parents/caregivers give me chances to do fun things with them.	Never or almost never Sometimes Often Always or almost always
My parents/caregivers notice when I am doing a good job and let me know about it.	Never or almost never Sometimes Often Always or almost always

2023 Question	2023 Response Options
My parents/caregivers tell me they're proud of me for something I've done.	Never or almost never Sometimes Often Always or almost always
I feel very close to at least one of my parents/caregivers.	Never or almost never Sometimes Often Always or almost always
I share my thoughts and feelings with at least one of my parents/caregivers.	Never or almost never Sometimes Often Always or almost always
I enjoy spending time with my parents/caregivers.	Never or almost never Sometimes Often Always or almost always
When I am not at home, one of my parents/caregivers knows where I am and who I am with.	Never or almost never Sometimes Often Always or almost always
My parents/caregivers ask me about my schoolwork.	Never or almost never; Sometimes; Often; Always or almost always
My parents/caregivers tell me what they expect of me and hold me responsible.	Never or almost never Sometimes Often Always or almost always
My family insults or yells at each other.	Never or almost never Sometimes Often Always or almost always
My family argues about the same things over and over	Never or almost never Sometimes Often Always or almost always
My family has clear rules about alcohol and drug use.	Yes No
Have you ever worried about the health and safety of anyone you live with because of their alcohol or drug use?	Yes No
If you wanted to get a gun, how easy would it be for you to get one?	Very hard Sort of hard Sort of easy Very easy
In the past month, how often did you miss an entire day of school for any reason?	I did not miss any days 1 day 2 days 3 or more days
Are you interested in the schoolwork you do at school?	Never or almost never Sometimes Often Always or almost always
Now, thinking back over the past year in school, did you: Enjoy being in school?	Never or almost never Sometimes Often Always or almost always

2023 Question	2023 Response Options
Now, thinking back over the past year in school, did you: Hate being in school?	Never or almost never Sometimes Often Always or almost always
My teachers notice when I am doing a good job and let me know about it.	Never or almost never Sometimes Often Always or almost always
I feel safe at my school.	Never or almost never Sometimes Often Always or almost always
I feel safe on my way to and from school.	Never or almost never Sometimes Often Always or almost always
The school lets my parents/caregivers know when I have done something well.	Never or almost never Sometimes Often Always or almost always
My teachers praise me when I work hard in school.	Never or almost never Sometimes Often Always or almost always
Teachers and other grown-ups at school care about me.	Never or almost never Sometimes Often Always or almost always
Teachers and other grown-ups at school treat me with respect.	Never or almost never Sometimes Often Always or almost always
Teachers and other grown-ups at school treat students fairly.	Never or almost never Sometimes Often Always or almost always
When students break school rules, the punishment they receive is fair.	Never or almost never Sometimes Often Always or almost always
I feel close to people at school.	Never or almost never Sometimes Often Always or almost always
I feel like I belong at my school.	Never or almost never Sometimes Often Always or almost always
In my school, students have chances to help decide things like class activities and rules.	Never or almost never Sometimes Often Always or almost always
I have chances to be part of class discussions or activities.	Never or almost never Sometimes Often Always or almost always

2023 Question	2023 Response Options
Teachers or adults at my school help students resolve conflicts with one another.	Never or almost never Sometimes Often Always or almost always
The next questions ask about bullying. Bullying is when a student or students make fun of, exclude, threaten, spread rumors about, hit, shove, or hurt another student on purpose repeatedly. It is not bullying when two students argue or fight with each other. When friends tease each other it is not bullying. Have you stayed home from school this year because you were worried about being bullied?	Yes No
Do adults at your school stop bullying when they know about it?	Never or almost never Sometimes Often Always or almost always
Have you been bullied in the past year?	Yes No
If you have been bullied in the past year, which answer best describes where you were bullied?	I was not bullied On school property At a school-event While going to or from school In the community Online, social media, phone
In the past year, in which of the following activities did you participate? (Mark all choices that apply.)	Organized community activities (such as scouting, 4H, sports, YMCA, etc) Family supported activities or hobbies (such as dance, gymnastics, hiking, biking, skating, etc.) School sponsored activities (such as music, clubs, after school programs, etc.) Faith-based activities (such as choir, youth group, mission, classes, etc) Other activities I did not participate in any activities
How often do you attend religious services or activities?	Never Rarely 1-2 times a month Once a week or more
Adults in my life other than my parents/caregivers and teachers notice when I am doing a good job and let me know.	Never or almost never Sometimes Often Always or almost always
There are adults in my life other than my parents/caregivers who are proud of me when I do something well.	Yes No
There are adults in my life other than my parents/caregivers who encourage me to do my best.	Yes No
I like the area where I live.	Yes No
If I had to move I'd miss the area where I live.	Yes No

2023 Pennsylvania Youth Survey: Question Dictionary



2023 Q. #	Question	Response Options
Demographics questions		
X1	How old are you?	a. 10, b. 11, c. 12, d. 13, e. 14, f. 15, g. 16, h. 17, i. 18, j. 19 or older
X2	What grade are you in?	a. 6th, b. 7th, c. 8th, d. 9th, e. 10th, f. 11th, g. 12th
X3	Are you of Hispanic, Latino, or Spanish origin?	No, not of Hispanic, Latino, or Spanish origin; Yes, Mexican, Mexican Am., Chicano; Yes, Puerto Rican; Yes, Cuban; Yes, another Hispanic, Latino, or Spanish origin (for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.)
X4	What is your race? (Mark all that apply)	White Caucasian; Black, African American; American Indian or Alaska Native; Asian Indian, Japanese, Native Hawaiian, Chinese, Korean, Guamanian or Chamorro, Filipino, Vietnamese, Samoan, Other Asian, Other Pacific Islander
X5	Are you?	a. Female, b. Male, c. Other
X6	Think of where you live most of the time. Which of the following people live there with you? (Mark all that apply)	(Mother(s), Father(s), Stepparent(s), Foster Parent(s), Grandparent(s), Other Adult(s), Sibling(s), Other children
X7	What is the language you use most often at home?	a. English, b. Spanish, c. Another language
Alcohol, Tobacco, and Other Drug (ATOD) use questions		
X8a	Have you ever: Had beer, wine, or hard liquor?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8b	Have you ever: Used marijuana (pot, hash, cannabis, weed, THC)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8c	Have you ever: Sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8d	Have you ever: Used cocaine or crack?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8e	Have you ever: Used heroin?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8f	Have you ever: Used hallucinogens (acid, LSD, shrooms)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8g	Have you ever: Used methamphetamine (meth, crystal meth, speed)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8h	Have you ever: Used Ecstasy or Molly?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8i	Have you ever: Used metaclozoles (such as Magenta Zip, Czoles)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8j	Have you ever: Taken performance enhancing drugs (such as steroids, human growth hormone) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8k	Have you ever: Used prescription pain relievers (such as Vicodin, OxyContin, Percocet, or Codeine) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8l	Have you ever: Used prescription tranquilizers (such as Ambien, Lunesta, Valium, or Xanax) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8m	Have you ever: Used prescription stimulants (such as Ritalin or Adderall) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8n	Have you ever: Used synthetic drugs (man-made drugs such as K2, Spice, Fake Weed, Bath Salts)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8o	Have you ever: Used over-the-counter medicine (cough syrup, cold medicine, etc.) in order to get high?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8p	Have you ever: Smoked cigarettes?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8q	Have you ever: Used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X8r	Have you ever: Used an electronic vapor product as such as e-cigarettes, vapes, mods, e-cigs, e-hookahs, or vape pens?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X9a	How often have you, in the past 30 days: Had beer, wine, or hard liquor?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X9b	How often have you, in the past 30 days: Used marijuana (pot, hash, cannabis, weed, THC)?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
X9c	How often have you, in the past 30 days: Sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9d	How often have you, in the past 30 days: Used cocaine or crack?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9e	How often have you, in the past 30 days: Used heroin?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9f	How often have you, in the past 30 days: Used hallucinogens (acid, LSD, shrooms)?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9g	How often have you, in the past 30 days: Used methamphetamine (meth, crystal meth, speed)?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day

2023 Q #	Question	Response Options
X9h	How often have you, in the past 30 days: Used Ecstasy or Molly?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9i	How often have you, in the past 30 days: Used metacrazoles (such as Magenta Zip, Czoles)?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9j	How often have you, in the past 30 days: Taken performance enhancing drugs (such as steroids, human growth hormone) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9k	How often have you, in the past 30 days: Used prescription pain relievers (such as Vicodin, OxyContin, Percocet, or Codeine) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9l	How often have you, in the past 30 days: Used prescription tranquilizers (such as Ambien, Lunesta, Valium, or Xanax) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9m	How often have you, in the past 30 days: Used prescription stimulants (such as Ritalin or Adderall) without a doctor telling you to take them?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9n	How often have you, in the past 30 days: Used synthetic drugs (man-made drugs such as K2, Spice, Fake Weed, Bath Salts)?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9o	How often have you, in the past 30 days: Used over-the-counter medicine (cough syrup, cold medicine, etc.) in order to get high?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9p	How often have you, in the past 30 days: Smoked cigarettes?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9q	How often have you, in the past 30 days: Used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X9r	How often have you, in the past 30 days: Used an electronic vapor product as such as e-cigarettes, vapes, mods, e-cigs, e-hookahs, or vape pens?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
X10	If you used an electronic vapor product such as e-cigarettes, vapes, mods, e-cigs, e-hookahs, or vape pens during the past 12 months, with which substances did you use it? (Mark all that apply.)	a. I did not vape, b. Just flavoring, c. Nicotine, d. Marijuana or THC, e. Other substance, f. I don't know
X11	If you used an electronic vapor product such as vape or e-cigarette in the past year, how did you usually get it? (Mark all that apply.)	Did not use electronic vapor product; A friend gave it to me for free; A family member gave it to me for free; I bought it from someone under 21; I bought it from someone over 21; I bought it from a store; I bought it on the Internet; I gave someone money to buy it for me; I took it from someone; I took it from a store; Other source not listed here
X12	Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?	a. None, b. Once, c. Twice, d. 3-5, e. 6-9, f. 10 or more times
X13a	How do you feel about someone your age: Having one or two drinks of an alcoholic beverage (beer, wine, hard liquor) nearly every day?	a. Strongly disapprove, b. Somewhat disapprove, c. Neither approve or disapprove, d. Approve, e. Don't know/ Can't say
X13 b	How do you feel about someone your age: Using marijuana once a month or more?	a. Strongly disapprove, b. Somewhat disapprove, c. Neither approve or disapprove, d. Approve, e. Don't know/ Can't say
X14a	How willing are you to try the drugs listed below before you are 21? These are not questions about current or past use of these drugs. ALCOHOL (beer, wine, coolers, hard liquor such as vodka, whiskey, gin, or rum) How willing are you to try the drugs listed below before you are 21? These are not questions about current or past use of these drugs. MARIJUANA (pot, hash, cannabis, weed, THC)	I would never try it; I probably wouldn't try it; I'm not sure whether or not I would try it; I would like to try it; I would try it any chance I got
X14b	How willing are you to try the drugs listed below before you are 21? These are not questions about current or past use of these drugs. MARIJUANA (pot, hash, cannabis, weed, THC)	I would never try it; I probably wouldn't try it; I'm not sure whether or not I would try it; I would like to try it; I would try it any chance I got
These questions ask about the school, neighborhood, and community where you live.		
A1	During the last four weeks, how many whole days of school have you missed because you skipped or "cut"?	a. None, b. 1 day, c. 2 days, d. 3 days, e. 4-5 days, f. 6-10 days, g. 11 or more days
A2	How important do you think the things you are learning in school are going to be for your later life?	a. Very important, b. Quite important, c. Fairly important, d. Slightly important, e. Not at all important
A3	How interesting are most of your courses to you?	a. Very interesting and stimulating, b. Quite interesting, c. Fairly interesting, d. Slightly dull, e. Very dull
A4	Putting them all together, what were your grades like last year?	a. Mostly As, b. Mostly Bs, c. Mostly Cs, d. Mostly Ds, e. Mostly Es or Fs
A5	How often do you feel that the schoolwork you are assigned is meaningful and important?	a. Never, b. Seldom, c. Sometimes, d. Often, e. Almost always
A6a	Now, thinking back over the past year in school, how often did you: Enjoy being in school?	a. Never, b. Seldom, c. Sometimes, d. Often, e. Almost always
A6b	Now, thinking back over the past year in school, how often did you: Hate being in school?	a. Never, b. Seldom, c. Sometimes, d. Often, e. Almost always
A6c	Now, thinking back over the past year in school, how often did you: Try to do your best work in school?	a. Never, b. Seldom, c. Sometimes, d. Often, e. Almost always
A7	Are your school grades better than the grades of most students in your class?	a. NO! b. no, c. yes, d. YES!
A8	Teachers ask me to work on special classroom projects.	a. NO! b. no, c. yes, d. YES!

2023 Q #	Question	Response Options
A9	There are lots of chances for students in my school to talk one-on-one with a teacher.	a. NO! b. no, c. yes, d. YES!
A10	I have lots of chances to be part of class discussions or activities.	a. NO! b. no, c. yes, d. YES!
A11	In my school, students have lots of chances to help decide things like class activities and rules.	a. NO! b. no, c. yes, d. YES!
A12	There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.	a. NO! b. no, c. yes, d. YES!
A13	My teacher(s) notices when I am doing a good job and lets me know about it.	a. NO! b. no, c. yes, d. YES!
A14	I feel safe at my school.	a. NO! b. no, c. yes, d. YES!
A15	The school lets my parents/caregivers know when I have done something well.	a. NO! b. no, c. yes, d. YES!
A16	My teachers praise me when I work hard in school.	a. NO! b. no, c. yes, d. YES!
A17	My neighbors notice when I am doing a good job and let me know.	a. NO! b. no, c. yes, d. YES!
A18	There are people in my neighborhood who are proud of me when I do something well.	a. NO! b. no, c. yes, d. YES!
A19	There are people in my neighborhood who encourage me to do my best.	a. NO! b. no, c. yes, d. YES!
A20	I like my neighborhood.	a. NO! b. no, c. yes, d. YES!
A21	I'd like to get out of my neighborhood.	a. NO! b. no, c. yes, d. YES!
A22	If I had to move, I would miss the neighborhood I now live in.	a. NO! b. no, c. yes, d. YES!
A23a	How wrong do your friends feel it would be for you to have one or two drinks of an alcoholic beverage nearly every day?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A23b	How wrong do your friends feel it would be for you to use tobacco?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A23c	How wrong do your friends feel it would be for you to use marijuana?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A23d	How wrong do your friends feel it would be for you to use prescription drugs not prescribed to you?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A23e	How wrong do your friends feel it would be for you to use an electronic vapor product such as vape or e-cigarette?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A24a	How easy would it be for you to get any, if you wanted to get any of the following: Beer, wine, or hard liquor (for example, vodka, whiskey, gin, or rum)?	a. Very hard, b. Sort of hard, c. Sort of easy, d. Very easy
A24b	How easy would it be for you to get any, if you wanted to get any of the following: Cigarettes?	a. Very hard, b. Sort of hard, c. Sort of easy, d. Very easy
A24c	How easy would it be for you to get any, if you wanted to get any of the following: A handgun?	a. Very hard, b. Sort of hard, c. Sort of easy, d. Very easy
A24d	How easy would it be for you to get any, if you wanted to get any of the following: A drug like cocaine, LSD, heroin, or amphetamines?	a. Very hard, b. Sort of hard, c. Sort of easy, d. Very easy
A24e	How easy would it be for you to get any, if you wanted to get any of the following: Marijuana?	a. Very hard, b. Sort of hard, c. Sort of easy, d. Very easy
A24f	How easy would it be for you to get any, if you wanted to get any of the following: Prescription drugs not prescribed to you?	a. Very hard, b. Sort of hard, c. Sort of easy, d. Very easy
A25	If a kid drank any beer, wine, or hard liquor (for example: vodka, whiskey, gin, or rum) in your neighborhood would he or she be caught by the police?	a. NO! b. no, c. yes, d. YES!
A26	If a kid smoked marijuana in your neighborhood would he or she be caught by the police?	a. NO! b. no, c. yes, d. YES!
A27a	How wrong would most adults (over 21) in your neighborhood think it was for kids your age: To drink alcohol?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A27b	How wrong would most adults (over 21) in your neighborhood think it was for kids your age: To smoke cigarettes?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
A27c	How wrong would most adults (over 21) in your neighborhood think it was for kids your age: To use marijuana?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
These questions ask about your family. When answering these questions, please think about the people you consider to be your family, for example, parents, grandparents, aunts, uncles, etc.		
B1	My parents/caregivers ask me what I think before most family decisions affecting me are made.	a. NO! b. no, c. yes, d. YES!
B2	If I had a personal problem, I could ask my parents/caregivers for help.	a. NO! b. no, c. yes, d. YES!
B3	My parents/caregivers give me lots of chances to do fun things with them.	a. NO! b. no, c. yes, d. YES!
B4	My parents/caregivers notice when I am doing a good job and let me know about it.	a. Never or almost never, b. Sometimes, c. Often, d. All of the time
B5	How often do your parents/caregivers tell you they're proud of you for something you've done?	a. Never or almost never, b. Sometimes, c. Often, d. All of the time
B6	Do you feel very close to your parents/caregivers?	a. NO! b. no, c. yes, d. YES!

2023 Q #	Question	Response Options
B7	Do you share your thoughts and feelings with your parents/caregivers?	a. NO! b. no. c. yes. d. YES!
B8	Do you enjoy spending time with your parents/caregivers?	a. NO! b. no. c. yes. d. YES!
B9	When I am not at home, one of my parents/caregivers knows where I am and who I am with.	a. NO! b. no. c. yes. d. YES!
B10	If you shipped school, would you be caught by your parents/caregivers?	a. NO! b. no. c. yes. d. YES!
B11	My parents/caregivers ask if I've gotten my homework done.	a. NO! b. no. c. yes. d. YES!
B12	Would your parents/caregivers know if you did not come home on time?	a. NO! b. no. c. yes. d. YES!
B13	The rules in my family are clear.	a. NO! b. no. c. yes. d. YES!
B14	If you carried a handgun without your parent's/caregiver's permission, would you be caught by them?	a. NO! b. no. c. yes. d. YES!
B15	People in my family often insult or yell at each other.	a. NO! b. no. c. yes. d. YES!
B16	We argue about the same things in my family over and over.	a. NO! b. no. c. yes. d. YES!
B17	People in my family have serious arguments.	a. NO! b. no. c. yes. d. YES!
B18	If you drank some beer, wine, or liquor (for example vodka, whiskey, gin, or rum) without your parent's permission, would you be caught by them?	a. NO! b. no. c. yes. d. YES!
B19a	About how many adults (over 21) have you known personally who in the past year have: Gotten drunk or high?	a. None. b. 1. c. 2. d. 3 or 4. e. 5 or more
B19b	About how many adults (over 21) have you known personally who in the past year have: Used marijuana, crack, cocaine, or other drugs?	a. None. b. 1. c. 2. d. 3 or 4. e. 5 or more
B19c	About how many adults (over 21) have you known personally who in the past year have: Sold or dealt drugs?	a. None. b. 1. c. 2. d. 3 or 4. e. 5 or more
B19d	About how many adults (over 21) have you known personally who in the past year have: Done other things that could get them in trouble with the police, like stealing, selling stolen goods, mugging or assaulting others, etc.?	a. None. b. 1. c. 2. d. 3 or 4. e. 5 or more
B20a	How many of your brothers or sisters ever: Drink beer, wine, or hard liquor (for example, vodka, whiskey, gin, or rum) regularly?	a. I don't have any. b. None. c. 1. d. 2. e. 3 or 4. f. 5 or more
B20b	How many of your brothers or sisters ever: Smoked cigarettes?	a. I don't have any. b. None. c. 1. d. 2. e. 3 or 4. f. 5 or more
B20c	How many of your brothers or sisters ever: Used marijuana?	a. I don't have any. b. None. c. 1. d. 2. e. 3 or 4. f. 5 or more
B20d	How many of your brothers or sisters ever: Took a handgun to school?	a. I don't have any. b. None. c. 1. d. 2. e. 3 or 4. f. 5 or more
B20e	How many of your brothers or sisters ever: Been suspended or expelled from school?	a. I don't have any. b. None. c. 1. d. 2. e. 3 or 4. f. 5 or more
B21	Has anyone in your family ever had a severe alcohol or drug problem?	a. Yes. b. No
B22	My family has clear rules about alcohol and drug use.	a. NO! b. no. c. yes. d. YES!
B23a	How wrong do your parents/caregivers feel it would be for you to: Pick a fight with someone?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23b	How wrong do your parents/caregivers feel it would be for you to: Steal anything worth more than \$5?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23c	How wrong do your parents/caregivers feel it would be for you to: Draw graffiti, or write things or draw pictures on buildings or other property (without the owner's permission)?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23d	How wrong do your parents/caregivers feel it would be for you to: Drink beer, wine or hard liquor (for example, vodka, whiskey, gin, or rum) regularly?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23e	How wrong do your parents/caregivers feel it would be for you to: Have one or two drinks of alcoholic beverage such as beer, wine, or hard liquor (vodka, whiskey, gin, or rum) nearly every day?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23f	How wrong do your parents/caregivers feel it would be for you to: Smoke cigarettes?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23g	How wrong do your parents/caregivers feel it would be for you to: Use marijuana?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B23h	How wrong do your parents/caregivers feel it would be for you to: Use prescription drugs not prescribed to you?	a. Not at all wrong. b. A little bit wrong. c. Wrong. d. Very wrong
B24a	How often in the past year have you: Worried that food at home would run out before your family got money to buy more?	a. Never. b. A few times. c. Sometimes. d. Often
B24b	How often in the past year have you: Skipped a meal because your family didn't have enough money to buy food?	a. Never. b. A few times. c. Sometimes. d. Often
These questions ask about you and your friends.		
C1	I like to see how much I can get away with.	a. Very false. b. Somewhat false. c. Somewhat true. d. Very true
C2	I ignore the rules that get in my way.	a. Very false. b. Somewhat false. c. Somewhat true. d. Very true

2023 Q #	Question	Response Options
C3	I do the opposite of what people tell me, just to get them mad.	a. Very false, b. Somewhat false, c. Somewhat true, d. Very true
C4	My overall mental health in the past month has been good.	a. NO!, b. no, c. yes, d. YES!
C5	In the past 12 months have you felt depressed or sad MOST days, even if you feel OK sometimes?	a. NO!, b. no, c. yes, d. YES!
C6	Sometimes I think that life is not worth it.	a. NO!, b. no, c. yes, d. YES!
C7	At times I think I am no good at all.	a. NO!, b. no, c. yes, d. YES!
C8	All in all, I am inclined to think that I am a failure.	a. NO!, b. no, c. yes, d. YES!
C9	If you have felt sad, lonely or worried in the past month who did you talk to? (Mark all that apply)	No one; Parent/caregiver; Other family member; Friend; Teacher or another adult at school (e.g. coach, counselor, nurse); Doctor or therapist; Religious or spiritual leader (e.g. Rabbi, Pastor, Imam, Priest or Nun, Bishop); Other adult in the community; I have not felt this way in the past 30 days
C10	How often do you attend religious services or activities?	a. Never, b. Rarely, c. 1-2 times a month, d. Once a week or more
C11a	How many times have you: Done what feels good no matter what.	a. Never, b. I've done it but not in the past year, c. Less than once a month, d. About once a month, e. 2-3 times a month, f. Once or more a week
C11b	How many times have you: Done something dangerous because someone dared you to do it.	a. Never, b. I've done it but not in the past year, c. Less than once a month, d. About once a month, e. 2-3 times a month, f. Once or more a week
C11c	How many times have you: Done crazy things even if they are a little dangerous.	a. Never, b. I've done it but not in the past year, c. Less than once a month, d. About once a month, e. 2-3 times a month, f. Once or more a week
C12a	How wrong do you think it is for someone your age to: Stay away from school all day when their parents/caregivers think they are at school?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12b	How wrong do you think it is for someone your age to: Take a handgun to school?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12c	How wrong do you think it is for someone your age to: Steal anything worth more than \$5?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12d	How wrong do you think it is for someone your age to: Pick a fight with someone?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12e	How wrong do you think it is for someone your age to: Attack someone with the idea of seriously hurting them?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12f	How wrong do you think it is for someone your age to: Drink beer, wine, or hard liquor (for example, vodka, whiskey, gin, or rum) regularly?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12g	How wrong do you think it is for someone your age to: Smoke cigarettes?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12h	How wrong do you think it is for someone your age to: Use LSD, cocaine, amphetamines or another illegal drug?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12i	How wrong do you think it is for someone your age to: Use marijuana?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C12j	How wrong do you think it is for someone your age to: Use prescription drugs not prescribed to them?	a. Not at all wrong, b. A little bit wrong, c. Wrong, d. Very wrong
C13a	How much do you think people risk harming themselves (physically or in other ways) if they: Take one or two drinks of an alcoholic beverage (beer, wine, hard liquor) nearly every day?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13b	How much do you think people risk harming themselves (physically or in other ways) if they: Take five or more drinks of an alcoholic beverage (beer, wine, hard liquor) once or twice a week?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13c	How much do you think people risk harming themselves (physically or in other ways) if they: Smoke one or more packs of cigarettes per day?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13d	How much do you think people risk harming themselves (physically or in other ways) if they: Try marijuana once or twice?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13e	How much do you think people risk harming themselves (physically or in other ways) if they: Use marijuana once or twice a week?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13f	How much do you think people risk harming themselves (physically or in other ways) if they: Use marijuana regularly?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13g	How much do you think people risk harming themselves (physically or in other ways) if they: Use prescription drugs that are not prescribed to them?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C13h	How much do you think people risk harming themselves (physically or in other ways) if they: Use an electronic vapor product such as vape or e-cigarette once or twice a day?	a. No risk, b. Slight risk, c. Moderate Risk, d. Great Risk
C14a	What are the chances you would be seen as cool if you: Carried a handgun?	a. No or very little chance, b. Little chance, c. Some chance, d. Pretty good chance, e. Very good chance
C14b	What are the chances you would be seen as cool if you: Began drinking alcoholic beverages regularly, that is, at least once or twice a month?	a. No or very little chance, b. Little chance, c. Some chance, d. Pretty good chance, e. Very good chance
C14c	What are the chances you would be seen as cool if you: Smoked cigarettes?	a. No or very little chance, b. Little chance, c. Some chance, d. Pretty good chance, e. Very good chance
C14d	What are the chances you would be seen as cool if you: Used marijuana?	a. No or very little chance, b. Little chance, c. Some chance, d. Pretty good chance, e. Very good chance

2023 Q #	Question	Response Options
C15	I think it is okay to take something without asking as long as you get away with it.	a. NO!, b. no, c. yes, d. YES!
C16	It is all right to beat up people if they start the fight.	a. NO!, b. no, c. yes, d. YES!
C17	I think sometimes it's okay to cheat at school.	a. NO!, b. no, c. yes, d. YES!
C18	It is important to be honest with your parents/caregivers, even if they become upset or you get punished.	a. NO!, b. no, c. yes, d. YES!
C19a	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Been arrested?	a. None, b. 1, c. 2, d. 3, e. 4
C19b	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Dropped out of school?	a. None, b. 1, c. 2, d. 3, e. 4
C19c	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Stolen or tried to steal a motor vehicle such as a car or motorcycle?	a. None, b. 1, c. 2, d. 3, e. 4
C19d	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Been suspended from school?	a. None, b. 1, c. 2, d. 3, e. 4
C19e	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Carried a handgun?	a. None, b. 1, c. 2, d. 3, e. 4
C19f	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Tried beer, wine, or hard liquor (for example, vodka, whiskey, gin, or rum) when their parents/caregivers didn't know about it?	a. None, b. 1, c. 2, d. 3, e. 4
C19g	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Smoked cigarettes?	a. None, b. 1, c. 2, d. 3, e. 4
C19h	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Sold illegal drugs?	a. None, b. 1, c. 2, d. 3, e. 4
C19i	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Used LSD, cocaine, amphetamines or another illegal drug?	a. None, b. 1, c. 2, d. 3, e. 4
C19j	Think of up to four of your best friends (the friends you feel closest to). In the past 12 months, how many of your best friends have: Used marijuana?	a. None, b. 1, c. 2, d. 3, e. 4
These questions ask about gambling, actions related to alcohol and drug use, and sleep.		
D1a	During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways: Games such as poker, card games, dice, pool, darts	a. Not at all, b. Less than once a month, c. 1 to 3 times a month, d. More than three times a month
D1b	During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways: Lottery (scratch cards, numbers, etc.)	a. Not at all, b. Less than once a month, c. 1 to 3 times a month, d. More than three times a month
D1c	During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways: Sporting events, sports pools, or fantasy sports	a. Not at all, b. Less than once a month, c. 1 to 3 times a month, d. More than three times a month
D1d	During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways: Online (internet) gambling	a. Not at all, b. Less than once a month, c. 1 to 3 times a month, d. More than three times a month
D1e	During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways: Video games or online gaming	a. Not at all, b. Less than once a month, c. 1 to 3 times a month, d. More than three times a month
D1f	During the past 12 months, how often have you bet/gambled, even casually, for money or valuables in the following ways: Bet/gambled in some other way	a. Not at all, b. Less than once a month, c. 1 to 3 times a month, d. More than three times a month
D2	Have you ever bet/gambled for money or anything of value?	a. Never, b. Once or twice, c. Once in awhile but not regularly, d. Regularly in the past, e. Regularly now
D3	How often have you bet/gambled for money or anything of value during the past 30 days?	a. Never, b. Once or twice, c. Once or twice per week, d. About once a day, e. More than once a day
D4a	Have you ever felt the need to: Bet more and more money?	a. Yes, b. No
D4b	Have you ever felt the need to: Lie to important people (e.g. family/friends) about how much you gamble?	a. Yes, b. No
D5	If you drank alcohol during the past 12 months, how did you usually get it? (Mark all that apply.)	Did not drink any alcohol; Bought it in a store; Bought it at a restaurant, bar or club; Bought it at a public event such as a concert or sporting event; Gave someone money to buy it for me; parents/caregivers provided it to me; Friends' parents/caregivers provided it to me; Friends, brothers, or sisters over 21 provided it to me; Other relatives (uncles, aunts, cousins, grandparents, etc.) provided it to me; Other source provided it to me; Took without permission stole, or found it (my home, friend's home,

2023 Q #	Question	Response Options
D6	If you used any prescription drugs without a prescription from a doctor during the last 12 months, how did you get them? (Mark all that apply)	I did not take any prescription drugs without a doctor's prescription; Took them from a family member living in my home; Took them from other relatives not living in my home; Took them from someone not related to me; A friend or family member gave them to me; Bought them from someone; Ordered them over the internet.
D7a	How often have you: Driven a motor vehicle while or shortly after drinking alcohol?	a. I don't drive, b. Never, c. Before, but not in the past year, d. About Once or twice a year, e. About Once or twice a month, f. About Once or twice a week, g. Almost every day
D7b	How often have you: Driven a motor vehicle while or shortly after using marijuana (pot, hash, cannabis, weed, THC)?	a. I don't drive, b. Never, c. Before, but not in the past year, d. About Once or twice a year, e. About Once or twice a month, f. About Once or twice a week, g. Almost every day
D8	On an average school night, how many hours of sleep do you get?	a. 4 hours or less, b. 5 hours, c. 6 hours, d. 7 hours, e. 8 hours, f. 9 hours, g. 10 or more hours
D9	In the last two weeks, how often have you felt tired or sleepy during the day?	a. Everyday, b. Several times, c. Twice, d. Once, e. Never
These questions ask about your experiences at school, in your home, or in your community.		
E1a	In the past 12 months, how often have you: Been threatened to be hit or beaten up on school property?	a. Never, b. Once or twice, c. Several times, d. Often
E1b	In the past 12 months, how often have you: Been attacked and hit by someone or beaten up on school property?	a. Never, b. Once or twice, c. Several times, d. Often
E1c	In the past 12 months, how often have you: Been offered, given or sold alcohol, tobacco product or other drug on school property?	a. Never, b. Once or twice, c. Several times, d. Often
E2	In the past 12 months, in which of the following activities did you participate? (Mark all that apply.)	Organized community activities (such as scouting, 4-H, service clubs, YMCA, etc.); family supported activities or hobbies (such as dance, gymnastics, hiking, biking, skating, etc.); School sponsored activities (such as sports, music, clubs, after school programs, etc.); Faith-based activities (such as choir, youth group, missions, church leagues, etc.); Job, employment; Volunteer; Other activities; I do not participate.
E3	During the past 12 months, have you or your family lived in a shelter, hotel, motel, car, campground, or someone else's home, etc. due to loss of housing, lack of money, or did not have another place to stay?	a. No; b. Yes, but for less than a month, c. Yes, but for more than a month, d. Yes, for most of the year
E4	In the past 12 months, did you ever live away from your parents or guardians because you were kicked out, ran away, or were abandoned?	a. Yes, b. No
E5a	How many times have you changed homes: In the last year in the past 12 months?	a. Never; b. 1, c. 2, d. 3 or more
E5b	How many times have you changed homes: Including the past 12 months, in the last 3 years?	a. Never; b. 1, c. 2, d. 3 or more
E6a	How many times in the past 12 months have you: Attacked someone with the idea of seriously hurting them?	a. Never; b. Once or twice; c. Several times; d. Often
E6b	How many times in the past 12 months have you: Been arrested?	a. Never; b. Once or twice; c. Several times; d. Often
E6c	How many times in the past 12 months have you: Been drunk or high at school?	a. Never; b. Once or twice; c. Several times; d. Often
E6d	How many times in the past 12 months have you: Been suspended from school?	a. Never; b. Once or twice; c. Several times; d. Often
E6e	How many times in the past 12 months have you: Sold substances such as vapes, alcohol, drugs, or medications?	a. Never; b. Once or twice; c. Several times; d. Often
E6f	How many times in the past 12 months have you: Done anything to harm yourself (such as cutting, scraping, burning) as a way to relieve difficult feelings, or to communicate emotions that may be difficult to express verbally?	a. Never; b. Once or twice; c. Several times; d. Often
E6g	How many times in the past 12 months have you: Brought a weapon (such as a handgun, knife, etc.) to school?	a. Never; b. Once or twice; c. Several times; d. Often
These questions ask about bullying and abuse.		
F1a	Have you stayed home from school this year because you were worried about being bullied?	a. NO!, b. no, c. yes, d. YES!
F1b	Do adults at your school stop bullying when they see/hear it or when a student tells them about it?	a. NO!, b. no, c. yes, d. YES!
F1c	Have you have been bullied during the past 12 months.	No; Yes, very rarely; Yes, now and then; Yes, several times per month; Yes, several times per week; Yes, almost daily
F1d	If you have been bullied in any way in the past 12 months, where were you bullied? (Mark all that apply.)	I was not bullied; On school property; At a school-sponsored event; While going to or from school; In the community; At home; Online, social media, phone
F1e	If you have been bullied in the past 12 months by other students, why were you bullied? (Mark all that apply.)	I have not been made fun of by other students; I don't know why; The color of my skin; My religion; My size (height, weight, etc.); My accent; The country I was born in; The country my family (parents, grandparents) was born in; The way I look (clothing, hairstyle, etc.); How much money my family has or does not have; My gender; My grades or school achievement; My social standing; Social conflict; My sexual-orientation; I have a disability (learning or physical disability); Some other reason
F2	If you were hurt or abused by another person in the past 12 months, how were you hurt or abused? (Mark all that apply.)	Physical injury; Threats; Emotional abuse, insults, name-calling; Isolation from friends and family; Control of what you were wearing; Control of who you socialized with; Other injury or abuse

2023 Q #	Question	Response Options
F3	In the past 12 months, did anyone when using technology ever try to get you to talk online about sex, look at sexual pictures, or do something else sexual?	a. Yes, b. No
These questions ask about sad feelings and attempted suicide.		
F4a	During the past 12 months: Did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?	a. Yes, b. No
F4b	During the past 12 months: Did you ever seriously consider attempting suicide?	a. Yes, b. No
F4c	During the past 12 months: Did you make a plan about how you would attempt suicide?	a. Yes, b. No
F4d	During the past 12 months: Did you actually attempt suicide?	a. Yes, b. No
F4e	During the past 12 months: If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?	a. I did not attempt suicide during the past 12 months, b. Yes, c. No
F5	In the past 12 months, have any of your friends or family members close to you died?	a. Yes, b. No

NORTHERN TIER COUNSELING, INC.
24727 Route 6, Towanda, PA 18848
(570) 265-0100, Toll free 1-888-322-1682

WW 5/26/23
Bd App 6/8/23

REFERRAL AGREEMENT
July 1, 2023

Northern Tier Counseling, Inc. agrees to the timely acceptance of clients from CANTON AREA SCHOOLS when such clients require the services of Northern Tier Counseling; that is, Children/Adolescent Partial Hospitalization Program, Family Based Program, Behavioral Health Rehabilitation Services, Community & School Based Behavioral Health Team (Towanda Area School District), Outpatient services, Psychiatric Rehabilitation Program, Drug and Alcohol Outpatient services or Certified Peer Specialist services. CANTON AREA SCHOOLS will contact our toll free number 1-888-322-1682 when services may be required during regular business hours. Likewise, CANTON AREA SCHOOLS agrees to the timely acceptance of clients from Northern Tier Counseling, Inc. when it is deemed medically necessary to require the services of CANTON AREA SCHOOLS. Nothing in this agreement should be construed as limiting either organization's exclusive control of their separate identity and integrity, such as management, assets, debts and other obligations.

Neither organization shall be responsible or assume responsibility for the moral or legal obligations of the other.

The name of neither organization shall be used for any form of advertising by the other organization without written consent of the organization whose name is to be used.

Each organization shall have the right to enter into referral agreements with other institutions.

Client records kept at each organization shall remain the property of the organization. This referral agreement assures that each client has the freedom to select placement in available organizations.

Both organizations agree to abide by Federal, State, HIPAA, including the Health Information Technology for Economic and Clinical Health Act (HITECH) entitled as Title XIII of the American Recovery and Reinvestment Act of 2009 (ARRA), and JCAHO standards concerning confidentiality of client information.

In the performance of this agreement there shall be no discrimination against any client on the basis of race, color, sex, religious creed, ancestry, age or national origin. Both organizations agree to comply with the requirements of Title VI of the Civil Rights Act of 1964.

Clients referred to and from the above identified programs will be responsible for all fees related to referrals unless otherwise determined by other parties.

This agreement can be terminated by either organization, by notifying the other organization in writing 30 days prior to the termination date.

This agreement will remain in effect for perpetuity from this date: July 1st, 2023 – July 1st 2028, unless terminated by either facility upon thirty (30) days written notice or superseded by a newly signed agreement. It may be modified or amended from time to time by mutual agreement of the parties and any such modification or amendments shall be attached to and become part of this agreement.

Authorizing Signature

Date

 6.1.23
Paul DeNault, CEO

Date

ww 5/26/23
Bd App 6/8/23

Brandie Frye

From: Danielle Greer
Sent: Wednesday, May 24, 2023 9:57 AM
To: Brandie Frye
Cc: Mark Jannone; Pam Engel
Subject: Accounts

I have 2 accounts that need to be created and approved for central treasury.

Class of 2030

Class of 2031

Thank you,

Danielle Greer

Secretary to the Principal
Canton Jr./Sr. High School
509 East Main Street
Canton, PA 17724
Phone: 570-673-5134
Fax: 570-673-5566
Email: dgreer@canton.k12.pa.us

CANTON AREA SCHOOL DISTRICT | 2022-2023 CALENDAR

www 5/26/23

Board Approved: January 13, 2022 June 9, 2022 December 1, 2022 June 8, 2023

JULY 2022						
S	M	T	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

4 Independence Day

JANUARY 2023						
S	M	T	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

1/4 – 1/18 Wave 2 Keystone Exams

2 New Year's Day Observed
13 Early Dismiss/In Service PM
16 In-Service Day #4
18 End of 2nd Marking pd (day 90)
19 2 hr delay (weather)
23 cancelled (weather) make-up 4/11
25 cancelled (weather) make-up 4/6
31 2 hr delay (weather)

S- 18/T-19

AUGUST 2022						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

22 LFS Training for new teachers
23 New Teacher Induction
24 In Service Day #1
25 In-Service Day #2
26 Act 80 Day
29 Students' First Day

S-4 /T-6

FEBRUARY 2023						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

9 2 hr delay
13 Possible Snow Make-Up Day #2
13 Make Up from 12/15/22
22 Early Dismissal 11:30 (weather)
24 Early Dismiss/In-Service PM
28 2 hr delay (weather)

S 20/T 20

SEPTEMBER 2022						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

5 Labor Day
15 Open House
23 Early Dismiss/PM Act 80

S-21/T-21

MARCH 2023						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

6 2 hr delay (weather)
10 Possible snow make-up #3
10 Make Up from 12/16/22; Early Dismissal / PM Act 80
14 2 hr delay (weather)
15 2 hr delay (weather)
24 Early Dismiss/In-Service-PM
24 AM In-Service Act 80 /2 hr delay
24 End of 3rd Marking Period (day 135)

S-23/T-23

OCTOBER 2022						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

10 In-Service Day #3
28 Early Dismiss/PM Act 80
31 End of 1st Marking Period (day 45)

S-20/T-21

APRIL 2023						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

4/24 – 4/28 PSSA ELA grades 3-8

6 Possible Snow Make-Up Day #5
6 Make Up from 01/25/23
7 Good Friday
10 Possible Snow Make-Up Day #6
11 Possible Snow Make-Up Day #4
11 Make Up from 01/23/23

S 18/T-18

NOVEMBER 2022						
S	M	T	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

10 Early Dismiss/PM Act 80 Conf/3 hrs extended day (3:30-6:30 trade-off on 5/26/23)
11 Conf/Act 80
16 2 hr delay (weather)
23 Early Dismissal
24 Thanksgiving Day
25 Fri after Thanksgiving Day
28 Monday after Thanksgiving
29 Possible Snow Make-Up day =1

S 18/T-18

MAY 2023						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

5/1 – 5/12 PSSA Math, Science & make ups grades 3-8
5/15 – 5/26 Keystone Exams

26 Early Dismiss/In-Service PM – (trade-off for 11/10/22 - 3 hours)
28 Baccalaureate
29 Memorial Day
31 6th Grade Graduation

S-22/T-22

DECEMBER 2022						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

12/5 12/16 Wave 1 Keystone Exams
15 cancelled (weather) make-up 2/13
16 cancelled (weather) make-up 3/10
16 Early Dismiss/Act 80-PM
22 Early Dismissal
23 Christmas Eve Day observed
26 Christmas Day observed
27-30 Holiday Break

S 14/T-14

JUNE 2023						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

2 Students' Last Day (180) 10:30 Dismissal
2 Commencement

S-2/T-2

WW 5/26/23
Bd App 6/8/23

Occupational Therapy Services Agreement

LISA INMAN
Canton, Pennsylvania
linman@frontiernet.net
(570) 971-0062

This agreement is made between *Lisa Inman*, private provider of registered occupational therapy services, herein referred to as Lisa Inman, and *Canton Area School District*, herein referred to as the District.

It is mutually agreed as follows:

1. Contract is effective July 1st, 2023 through June 30th, 2024.
2. Occupational therapy (O.T.) will be provided to students referred by the District for screenings, programming, assessment, consultation, meetings, and intervention.
3. \$68 per hour for O.T. Billable services consist of direct intervention, evaluations and assessments, screenings approved by the support director, and billable collateral services. Billable collateral services consist of minimal preparation/set-up, programming, documentation (session notes, progress monitoring/charting, quarterly progress reports, initial and re-evaluations reports, IEP and 504 paperwork, IEP and 504 meetings in person and over phone, and consultation with the educational team and/or aides (for carryover and programming).
4. Lisa Inman will sign into Canton Area Elementary and High School upon entering.
5. Payment to Lisa Inman for O.T. services rendered is dependent upon submission of the required billing invoices. Payment to Lisa Inman from the district will be received within 30 days upon receipt of documentation.
6. The Support Services will coordinate paperwork needed for Lisa Inman. The district will send parents/guardians the required paperwork needed to pursue an evaluation or re-evaluation and follow up with the parent/guardians if paperwork is not received.
7. Occupational therapy direct services will be limited to the typically scheduled days mutually agreed upon at the beginning of the school year between Lisa Inman and the District during the school calendar when the District is in session. Special circumstances for alternate days or as necessitated for rescheduling missed visits will be arranged based upon Lisa Inman's availability.

8. Lisa Inman will maintain professional liability coverage, up to date licensure and certification, child abuse, criminal records and FBI clearances available upon request.
9. Occupational therapy sessions will take place at Canton Elementary or High School in a designated room. At the District's request, Lisa Inman will be available for alternative service delivery (ie: home instruction or teletherapy instruction) as her schedule allows.
10. Lisa Inman will be provided with a key fob at the start of the school year for entering the district each day to allow for safe and readily accessible readmittance to the building th supplies as well as for circumstances involving working with students outside (ie: playground, fire drills).

5/23/23

Date



Lisa Inman, M.S., OTR/L

Date

School District Designee

C.A.S.D. O.T. contract 2023-24