

APPENDIX A

EXTRACURRICULAR ACTIVITIES COVERED BY POLICY 227.2

Policy 227.2 applies to all students participating in the extracurricular activities listed below:

1. Athletics: Football, Cross Country, Tennis, Golf, Field Hockey, Soccer, Basketball, Wrestling, Softball, Baseball, Track & Field, Volleyball, and Cheerleading. (The list of athletic teams may be added to without formal Board action.)
2. Bands: Marching Band, Jazz Band and Chamber Ensembles, County Band, District Band, Regional Band, State Band, All-East Band, District Jazz Band, State Jazz Band, All-East Jazz Band, County Orchestra, District Orchestra, Regional Orchestra, State Orchestra, All-East Orchestra, National Orchestra.*
3. Choir: Choraliers, County Chorus, District Chorus, Regional Chorus, State Chorus, All-East Chorus.
4. Performing Arts.
5. Student Government/Class Officers.

* Concert Band and Concert Choir are not included because they are cocurricular activities.

APPENDIX B

EXTRACURRICULAR PARTICIPATION CONTRACT

Middletown Area School District provides students the opportunity to participate in extracurricular activities. Participation in such activities is a privilege, not a right, and carries additional responsibilities. The following regulations apply to any student involved in any extracurricular activities.

- I. I, _____, agree to refrain from using, possessing or distributing alcohol, drugs, prescriptive drugs inconsistent with the physician's directive and related paraphernalia on and off school grounds. _____ (Parent/Guardian initials required)
- II. I, _____, agree to make my best efforts to earn passing grades in all my academic courses and electives throughout the school year as outlined in Policy 227.2, Student Code of Conduct for Extracurricular Activities. _____ (Parent/Guardian initials required)
- III. I, _____, agree to accept the responsibility of regularly monitoring my own grades to ensure that I am academically eligible. I will do this by checking in Power School or by calling my school counselor with questions. At the end of the school year, I will check for failures to determine the need for summer school in order to be academically eligible for the next school year. _____ (Student and Parent/Guardian initials required)
- IV. I, _____, understand that a course that has been dropped/failed after the first five (5) weeks of the school year for a full-year course or after the first five (5) weeks of the first or second semester for a semester-long course will be considered a failing grade for the purpose of academic eligibility. A Drop/Fail may not be made up by taking a replacement course (i.e. taking another course does not change the Drop/Fail status). A Drop/Fail shall count as one (1) failure. Two (2) failures will result in academic ineligibility for the current school year as well as the first fifteen (15) school days at the start of the next school year. A Drop/Fail may not be made up during the school year or in summer school nor will partial credit be given. _____ (Student and Parent/Guardian initials required)
- V. I, _____, understand that anytime I am failing two (2) or more courses or I am failing one (1) course and carrying a Drop/Fail that I will be academically ineligible. _____ (Student/ and Parent/Guardian initials required)
- VI. I have read Policy 227.1 entitled Anabolic Steroids, Policy 227.2 entitled Student Code of Conduct for Extracurricular Activities, and Policy 227.3 entitled Drug Testing for Student Participating in Extracurricular Activities, and understand my responsibilities regarding my personal behavior in terms of these policies and the potential sanctions for violating these policies. _____ (Parent/Guardian initials required)
- VII. As the parent(s)/guardian(s) of _____, I do hereby give my permission to allow him/her to participate in the extracurricular activities of Middletown Area School District during the 20__ - 20__ school year. I have read Policy 227.1 entitled Anabolic Steroids, Policy 227.2 entitled Student Code of Conduct for Extracurricular Activities, and Policy 227.3 entitled Drug Testing for Student Participating in Extracurricular Activities, and understand the student will be subject to these terms throughout the entire year and the potential sanctions for violations of these policies. _____ (Parent/Guardian initials required)

VIII CONSENT TO DRUG TESTING

As the parent(s)/guardian(s) of _____, I give permission for the Middletown Area School District and its designated testing facility to have my son/daughter participate in the drug testing program described in Policy 227.3. By signing this document, I also consent, pursuant to the Family Education Rights and Privacy Act, to release information about drug test results to certain individuals identified in Policy 227.3. Random testing shall be conducted without prior student or parent/guardian warning. Prior to the initial specimen being collected or a second specimen being collected, the student will be asked to lift his/her pant legs above the sock line (not above the knee line), lift his/her shirt (not above the belly button), and empty his/her pockets. This procedure will be monitored by two females (district administrator and/or staff person) for a female student and two males (district administrator or staff person) for a male student. _____ (Parent/Guardian initials required)

Student Signature

Student Identification Number

Date

Parent/Guardian Signature

Date