



PORTSMOUTH SCHOOL DEPARTMENT

CAREER/TECHNICAL EDUCATION

DIANE CANADA, DIRECTOR
CAREER/TECHNICAL EDUCATION

July 1, 2016

Dear Parent/Guardian:

I am taking this opportunity to welcome you and your child to the Career Technical Education Center for school year 2016 - 2017. The programs and courses offered in the CTE Center will assist your student in pursuing college-level training or entering the work force directly after high school.

"THE PURPOSE OF THE PORTSMOUTH SCHOOLS IS TO EDUCATE ALL STUDENTS BY CHALLENGING THEM TO BECOME THINKING, RESPONSIBLE, CONTRIBUTING CITIZENS WHO CONTINUE TO LEARN THROUGHOUT THEIR LIVES."

Safety is of utmost importance in CTE classes. Each teacher provides intense safety training and all students must completely follow the safety rules and procedures specific to their CTE area. Discipline and other school rules are also highly enforced for safety and other reasons. **Kindly sign the SAFETY FORM on the back so that your child can begin to train on the equipment and pass the safety test as soon as possible in order to participate fully in his/her program.**

The CTE Center offers a variety of other services that are supplemental to classroom training. The Career Guidance Counselor in the Career Center, located close to the labs, will work with students in job and college searches, resume and interview development, assessments, work study, as well as with studying for tests and completing projects and homework assignments. The students will be introduced to these services during the month of September. It is our hope that they will take advantage of them.

If you have any questions or comments about your child's program, kindly contact either the teacher or myself at 436-7100, extension 2903 or 2904. Thanks so much for your time and attention.

Sincerely,

Diane Canada, Director

PLEASE SEE REVERSE SIDE: Safety Form to be signed by parent/guardian

AN EQUAL OPPORTUNITY EMPLOYER

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CAREER TECHNICAL EDUCATION DEPARTMENT

Portsmouth Senior High School

SAFETY CONSENT FORM

(Name of Student)

(Career Technical Course Name)

Has my permission to:

PLEASE **INITIAL ALL ITEMS**, AS LISTED BELOW, THAT YOU **WILL** ALLOW YOUR CHILD TO BE INVOLVED WITH DURING HIS/HER TENURE AS A CAREER TECHNICAL STUDENT.

_____ Operate machines and tools related to his/her Career Technical Course. If applicable, students are required to pass a course-specific safety exam.

_____ Participate in the off-school grounds portions of his/her Career Technical Course.

_____ Operate a motor vehicle on errands (off school property) related to his/her Career Technical projects being experienced. A copy of insurance coverage **must be on file** in the Career Technical Office. Must have a minimum coverage of 100,000/300,000/100,000.

I understand that safe practices must be addressed and that my child will be removed from Career Technical Education if he/she violates the established procedures and rules of safety.

Signature of Parent/Guardian

Date

****THIS FORM MUST BE RETURNED TO THE CLASSROOM TO BE CHECKED OFF AND THEN TO THE DIRECTOR OF CAREER TECHNICAL EDUCATION AT PORTSMOUTH SENIOR HIGH SCHOOL****