

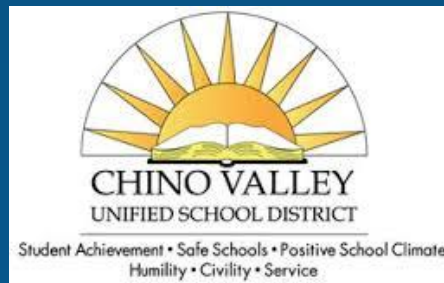
Success in Junior High



Parents ♦ Students ♦ Teachers

ABOUT TOWNSEND

- ▶ **Principal** *Robert Nelson*
- ▶ **Assistant Principal** *Julie Fromdahl*
- ▶ **Assistant Principal** *Joseph Gonzalez*
- ▶ **Counselor** *Joseph Hurtado*
- ▶ **2013 & 2001 California Distinguished School**
- ▶ **40 teachers / 83 staff members**
- ▶ **1100 students (7th and 8th grade)**



PTSA COMMITTEES:

- ▶ Red Ribbon Week (October)
- ▶ Family Fun Run (October)
- ▶ Student Store (weekly)
- ▶ Fundraising
- ▶ Hospitality
(August/October/May)
- ▶ Library Support (August/May)
- ▶ PTSA membership \$10



FIRST DAY OF SCHOOL – AUGUST 12

- ▶ **School starts at 7:45 a.m.**
- ▶ **Dismissal at 1:48 p.m.**
(12:51 p.m. every Monday)
- ▶ **Students will report to the Media Center to find their name and first period room number**
- ▶ **Students will receive their Class Schedule during 1st period**
- ▶ **PE clothes will be sold through their PE class (\$25)**
- ▶ **Lockers will be assigned the 1st week**
 - ▶ **After school (at lunch for bus riders)**

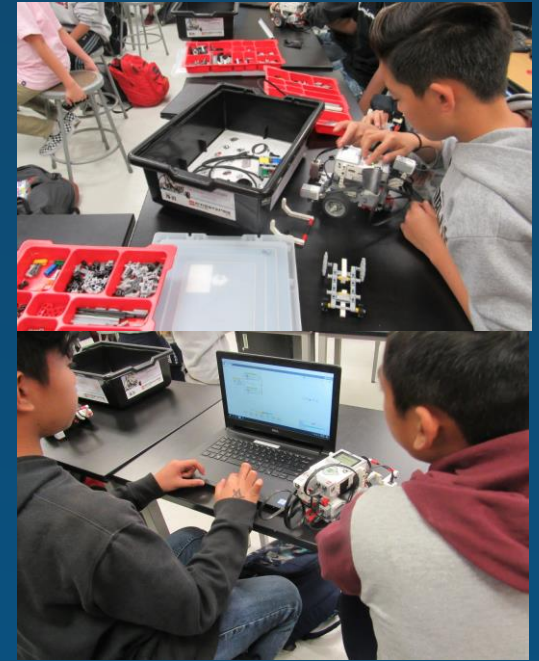
ELECTIVE WHEEL:

- ▶ Art
- ▶ Computers
- ▶ Drama
- ▶ Life Essentials
- ▶ Piano Lab
- ▶ Woodshop



YEAR LONG ELECTIVES:

- ▶ **AVID****
- ▶ **Advanced Band**
- ▶ **Beginning/Intermediate Band**
- ▶ **Percussion**
- ▶ **Advanced Drama (8th grade)**
- ▶ **Medical Detectives (8th grade)**
- ▶ **STEAM (Exploring Tech, Drafting, Robotics)**
- ▶ **Leadership/Yearbook** (applications due May 10)**



GATE/HONORS

- ▶ Approximately 1/2 of classes are comprised of GATE identified students, and the remaining seats are filled with students identified with “Standard Exceeded” scores on the CAASPP Summative Test

- ▶ Language Arts
- ▶ Science
- ▶ History



- ▶ Accelerated Math 7 (separate placement criteria)

GRADING

- ▶ **Not graded on effort**
- ▶ **No extra credit**
- ▶ **Grade based on mastery of grade-level standards**
- ▶ **75% Assessments/Projects, 25% Assignments**
- ▶ **Progress reports at 6 weeks**
- ▶ **Trimester grade (permanent) every 12 weeks**
- ▶ **2.0 GPA required to participate in extracurricular activities**
 - ▶ **School dances, competitions - band/dance/color guard, leadership, drama performances, intramural sports, & fieldtrips**

ACADEMIC RALLIES

CELEBRATION OF ACADEMIC ACHIEVEMENT

- ▶ **Rallies are held every trimester**
 - ▶ **4.0 Gold**
 - ▶ **3.0 to 3.9 Silver**
 - ▶ **2.0 to 2.9 Ranger Pride**
 - ▶ **B.U.G.**
 - ▶ **Reading Lexile growth**
 - ▶ **Community Service**
- ▶ **Honor Roll Certificates**
- ▶ **Through the rallies, we spotlight academic successes**



Student Involvement & Activities

GET INVOLVED & BE RECOGNIZED

- ▶ National Junior Honor Society
- ▶ Green Team
- ▶ Fitness Club
- ▶ Volleyball Club
- ▶ Wrestling Club
- ▶ Basketball
- ▶ Band, jazz band, & drumline
- ▶ Drama
- ▶ Color Guard
- ▶ Dance Team
- ▶ School Dances
- ▶ Spirit Days
- ▶ Lunch Competitions
- ▶ Student of the Month
- ▶ Perfect Attendance




Student Involvement & Activities

GET INVOLVED & BE RECOGNIZED


- ▶ **Be YOU initiative**
 - ▶ **Be YOU Physically, Socially, Emotionally, Intellectually, Spiritually**
- ▶ **Change the World – Everyone can do 5 hours!**
- ▶ **Impact Your Future – Be a 21st Century Learner**
 - ▶ **Regular reading practice at/above your Lexile level**

LEXILE TEXT RANGES TO GUIDE READING	
GRADES	LEXILE TEXT RANGE
11-12	1185L-1385L
9-10	1050L-1335L
6-8	925L-1185L
4-5	740L-1010L
2-3	420L-820L
1	190L-530L

Student Supports on Campus

- ▶ **Counselor – Mr. Hurtado**
 - ▶ **Academic concerns & peer conflict**
 - ▶ **Take-Control Lunch**
 - ▶ **Peer Tutoring & Individual Counseling**
 - ▶ **Intervention period for ELA and Math**
 - ▶ **After-school intervention**
- 

6 WEEK PROGRESS REPORT AT-RISK CONFERENCE

- ▶ **October 8th – 10th**
 - ▶ **Good indication of how your child is adjusting to junior high**
 - ▶ **Meet with teacher, student, and parent**
 - ▶ **Implement interventions offered at school**
 - ▶ **Let's work as a team to create a *positive learning environment***
- 

STAY CONNECTED

▶ Communication

- ▶ **Website** – www.chino.k12.ca.us/townsend
- ▶ **Aeries Parent Portal**
 - ▶ **Demographic info and online grades**
- ▶ **Aeries Communications**
 - ▶ **Receive voice messages, text, email**
- ▶ **Remind app** – Text @TJHS to 81010
- ▶ **Twitter** - @Townsend_JHS
- ▶ **PTSA Facebook Page**




TEACHER COMMUNICATION

- ▶ 165+ students
- ▶ 5 classes
- ▶ 3 don't turn in homework each period=
- ▶ 15 calls at average of 20 minutes each=
- ▶ 5 hours of calls + grading & preparation for next day and family time


Suggestion:

- ▶ Check online – monitor your child's grades
 - ▶ AERIES.net and GradeAlert.com
- ▶ Email teacher or message through Aeries
- ▶ Schedule a parent conference


PARENT ROLE

- ▶ Be an advocate for your child
 - ▶ Talk to teacher first
 - ▶ Do not go to the classroom
 - ▶ Call or Email teacher for concerns or questions
 - ▶ Make an appointment for classroom visit
 - ▶ Monitor student agenda
 - ▶ Keep school informed
 - ▶ Sign in through the office w/photo ID when on campus and pick up visitor badge
 - ▶ Visit AERIES.net to monitor progress
- 


WHAT TO EXPECT FROM YOUR CHILD

- ▶ **Test your rules-----be strong**
 - ▶ **Don't accept everything they tell you as fact**
 - ▶ **Know where they are and who they are with**
 - ▶ **Talk to other parents or to the school**
 - ▶ **Expect them to take responsibility for actions and academics**
 - ▶ **Check in with them on a daily basis**
 - ▶ **Gain insight into his/her view of themselves**
 - ▶ **Determine how much he/she is engaged with others**
- 

STUDENT BEHAVIOR


- ▶ **High Standards & Expectations**
 - ▶ **We will work as a team to help guide your child through the junior high years**
 - ▶ **Know everything about your child**
 - ▶ **Pay attention to your child's friends and cell phone**
 - ▶ **Texts, pictures/video, and Instagram/Facebook/SnapChat/vault**
 - ▶ **Peer pressure - fighting, drugs, alcohol**
 - ▶ **Call us, and we will call you**
- 

SUPPORT PROGRAMS

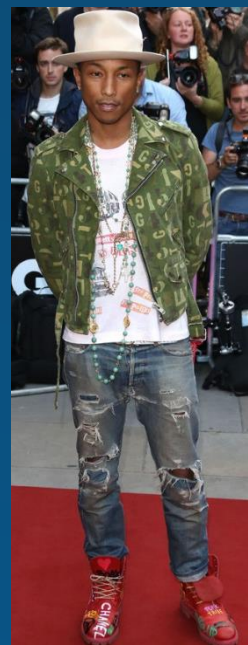
- ▶ **Multi-Tiered Systems of Support for Academics & Behavior**
 - ▶ **Townsend Expectations: Be Safe, Respectful, Responsible**
 - ▶ **Second Step – curriculum for pro-social behavior**
 - ▶ **Safe School Ambassadors**
 - ▶ **Assemblies focusing on character, resilience, anti-bullying**
 - ▶ **“Don’t Start Tobacco” – Fall**
 - ▶ **“Project Alert” – Winter**
 - ▶ **Chino Human Services Counseling**
 - ▶ **Clean Sweep School – supported by Chino Hills Sheriff**
 - ▶ **Drug-sniffing dog program**
- 

TOWNSEND POLICIES

- ▶ **Student/Parent Handbook can be found online and printed in student agenda**
 - ▶ **Dress Code**
 - ▶ **Gum Citations**
 - ▶ **Cell Phone Policy**

 - ▶ **Progressive Discipline:**
 - ▶ **Counseling, Warning, Reflection, Parent Contact, 8th period detention, Saturday Work Study**
- 

DRESS CODE AT TOWNSEND



DOCUMENTATION AND DISCIPLINE

Townsend Junior High School

CITATION

Student: _____ Date: _____

Teacher/Staff: _____ Grade: _____

School-Wide Rules: ✓ Indicates rule was broken.

- _____ 1. Grooming/dress code
- _____ 2. Gum, food, candy, drink
- _____ 3. Cell phone violation
- _____ 4. Needs classroom time-out
- _____ 5. Inappropriate language/profanity
- _____ 6. Horseplay/pushing/play-fighting
- _____ 7. In an unsupervised/restricted area
- _____ 8. Not following adult directions the first time given
- _____ 9. Other/comments: _____

Student's Attitude: Good Argumentative Disrespectful
I have read the citation. If I have any questions, I will contact administration or the teacher/staff member who issued the citation.

Parent Signature: _____

White: Office

Yellow: Guardian

Pink: Teacher

DOCUMENTATION AND DISCIPLINE



Self-Check



Name: _____ Date: _____

Teacher: _____ Period: _____

1. I was observed not upholding the following Townsend Expectation(s): (circle)

BE SAFE

BE RESPECTFUL

BE RESPONSIBLE

2. Describe what happened: _____

3. What is your plan for improvement?

Own it



Fix it



Move on

Townsend Referral Log

Student: _____ Staff: _____ Grade: _____

1st Incident	Date:	Time:
Location	Problem Behavior	Staff Intervention(s) Administered
<input type="checkbox"/> Classroom <input type="checkbox"/> Quad: _____ <input type="checkbox"/> Hallway: _____ <input type="checkbox"/> Restroom <input type="checkbox"/> Lunch Table <input type="checkbox"/> Media Center <input type="checkbox"/> Blacktop <input type="checkbox"/> Locker Room <input type="checkbox"/> Library	<input type="checkbox"/> Not following instructions <input type="checkbox"/> Not staying on task <input type="checkbox"/> Disagreeing inappropriately <input type="checkbox"/> Not working well with others <input type="checkbox"/> Disrupting others <input type="checkbox"/> Property misuse <input type="checkbox"/> Inappropriate language <input type="checkbox"/> Other _____	<input type="checkbox"/> Utilized pre-correction techniques <input type="checkbox"/> Clarified how behavior did not meet expectations <input type="checkbox"/> Provided a structured choice <input type="checkbox"/> Re-taught/practiced skill <input type="checkbox"/> Identified environmental factors <input type="checkbox"/> Established a behavioral cue/prompt <input type="checkbox"/> Teacher detention/8 th period <input type="checkbox"/> Contacted parent __/__/__
2nd Incident	Date:	Time:
Location	Problem Behavior	Staff Intervention(s) Administered
<input type="checkbox"/> Classroom <input type="checkbox"/> Quad: _____ <input type="checkbox"/> Hallway: _____ <input type="checkbox"/> Restroom <input type="checkbox"/> Lunch Table <input type="checkbox"/> Media Center <input type="checkbox"/> Blacktop <input type="checkbox"/> Locker Room <input type="checkbox"/> Library	<input type="checkbox"/> Not following instructions <input type="checkbox"/> Not staying on task <input type="checkbox"/> Disagreeing inappropriately <input type="checkbox"/> Not working well with others <input type="checkbox"/> Disrupting others <input type="checkbox"/> Property misuse <input type="checkbox"/> Inappropriate language <input type="checkbox"/> Other _____	<input type="checkbox"/> Utilized pre-correction techniques <input type="checkbox"/> Clarified how behavior did not meet expectations <input type="checkbox"/> Student Self-Check <input type="checkbox"/> Provided a structured choice <input type="checkbox"/> Re-taught/practiced skill <input type="checkbox"/> Identified environmental factors <input type="checkbox"/> Established a behavioral cue/prompt <input type="checkbox"/> Teacher detention/8 th period <input type="checkbox"/> Contacted parent __/__/__
3rd Incident	Date:	Time:
Location	Problem Behavior	Staff Intervention(s) Administered
<input type="checkbox"/> Classroom <input type="checkbox"/> Quad: _____ <input type="checkbox"/> Hallway: _____ <input type="checkbox"/> Restroom <input type="checkbox"/> Lunch Table <input type="checkbox"/> Media Center <input type="checkbox"/> Blacktop <input type="checkbox"/> Locker Room <input type="checkbox"/> Library	<input type="checkbox"/> Not following instructions <input type="checkbox"/> Not staying on task <input type="checkbox"/> Disagreeing inappropriately <input type="checkbox"/> Not working well with others <input type="checkbox"/> Disrupting others <input type="checkbox"/> Property misuse <input type="checkbox"/> Inappropriate language <input type="checkbox"/> Other _____	<input type="checkbox"/> Provided a structured choice <input type="checkbox"/> Re-taught/practiced skill <input type="checkbox"/> Modified environmental factors <input type="checkbox"/> Identified possible motivation for misbehavior <input type="checkbox"/> Met with team/student to identify supports <input type="checkbox"/> Collaborated with __team__ counselor __admin__ <input type="checkbox"/> Conference with parent __/__/__ <input type="checkbox"/> Other _____
4th Incident	Date:	Time:
Location	Problem Behavior	Staff Intervention(s) Administered
<input type="checkbox"/> Classroom <input type="checkbox"/> Quad: _____ <input type="checkbox"/> Hallway: _____ <input type="checkbox"/> Restroom <input type="checkbox"/> Lunch Table <input type="checkbox"/> Media Center <input type="checkbox"/> Blacktop <input type="checkbox"/> Locker Room <input type="checkbox"/> Library	<input type="checkbox"/> Not following instructions <input type="checkbox"/> Not staying on task <input type="checkbox"/> Disagreeing inappropriately <input type="checkbox"/> Not working well with others <input type="checkbox"/> Disrupting others <input type="checkbox"/> Property misuse <input type="checkbox"/> Inappropriate language <input type="checkbox"/> Other _____	<input type="checkbox"/> Provided a structured choice <input type="checkbox"/> Re-taught/practices skill <input type="checkbox"/> Modified environmental factors <input type="checkbox"/> Identified possible motivation for behavior <input type="checkbox"/> Met with team/student to identify supports <input type="checkbox"/> Collaborated with __team__ counselor __admin__ <input type="checkbox"/> Conference with parent __/__/__ <input type="checkbox"/> STEP Referral <input type="checkbox"/> Other _____
5th Incident (or 3rd Identical) - See Attached Office Referral Form		

Townsend Office Referral Form

BE SAFE! BE RESPECTFUL! BE RESPONSIBLE!

Student: _____ Referring Staff: _____

Time of Incident: _____ Date of Incident: _____ Grade: _____

Location	Problem Behavior	Environmental Factors	Possible Motivation
<small>(Check only 1)</small>	<small>(Check only 1)</small>	<small>(Check only 1)</small>	<small>(Check only 1)</small>
<input type="checkbox"/> Classroom <input type="checkbox"/> Quad: _____ <input type="checkbox"/> Hallway: _____ <input type="checkbox"/> Restroom <input type="checkbox"/> Lunch Table <input type="checkbox"/> Media Center <input type="checkbox"/> Locker Room <input type="checkbox"/> Blacktop <input type="checkbox"/> Library <input type="checkbox"/> Gate <input type="checkbox"/> Bus area <input type="checkbox"/> Other: _____	Major Offense <input type="checkbox"/> Fighting <input type="checkbox"/> Destruction of property <input type="checkbox"/> Profanity toward staff <input type="checkbox"/> Possession of stolen property <input type="checkbox"/> Bullying <input type="checkbox"/> Committed obscene act <input type="checkbox"/> Weapon: <input type="checkbox"/> Other: _____ Chronic Minor Offense <small>(Attach Referral Log)</small> Failure to: <input type="checkbox"/> Follow instructions <input type="checkbox"/> Stay on task <input type="checkbox"/> Accept feedback/correctives appropriately <input type="checkbox"/> Disagree appropriately <input type="checkbox"/> Work well with others <input type="checkbox"/> Properly use materials <input type="checkbox"/> Use appropriate language <input type="checkbox"/> Other: _____	<input type="checkbox"/> Adult request/directive <input type="checkbox"/> Oral instruction <input type="checkbox"/> Individual seat work <input type="checkbox"/> Group work <input type="checkbox"/> Managing materials <input type="checkbox"/> External interruptions <input type="checkbox"/> Classroom transitions <input type="checkbox"/> Passing period <input type="checkbox"/> Teasing from peers <input type="checkbox"/> Changes to routine <input type="checkbox"/> Guest visitor/speaker <input type="checkbox"/> Substitute teacher <input type="checkbox"/> Assembly <input type="checkbox"/> Unstructured time <input type="checkbox"/> Other: _____	<input type="checkbox"/> Gain peer attention <input type="checkbox"/> Gain adult attention <input type="checkbox"/> Gain/obtain item <input type="checkbox"/> Gain/obtain activity <input type="checkbox"/> Avoid peers <input type="checkbox"/> Avoid adults <input type="checkbox"/> Avoid seat work <input type="checkbox"/> Avoid group work <input type="checkbox"/> Avoid scheduled event <input type="checkbox"/> Other: _____

Provide a behaviorally specific description:

Others involved in the incident: _____

Last parent/guardian contact: _____

Referring Staff Signature: _____

Administrator Comments

Skill Development:

- | | |
|--|---|
| <input type="checkbox"/> Identified Academic Deficits | <input type="checkbox"/> Assigned Detention (lunch) |
| <input type="checkbox"/> Identified Environmental Factors/Motivation | <input type="checkbox"/> Assigned Detention (after school) |
| <input type="checkbox"/> Identified Behavior Skill Deficits | <input type="checkbox"/> Assigned On-Campus or Reverse Suspension |
| <input type="checkbox"/> Provided Corrective Teaching | <input type="checkbox"/> Assigned Suspension from school |
| <input type="checkbox"/> Scheduled follow up meeting | <input type="checkbox"/> Referred to counseling |
| <input type="checkbox"/> Assigned Adult mentor | <input type="checkbox"/> Developed Behavior Support Plan |


Administrator's Signature: _____ Date: _____

White: Office


Yellow: Guardian

Pink: Teacher

ATTENDANCE

- ▶ **Every Monday is early release – 12:51 p.m.**
 - ▶ **9 Minimum Days throughout the year – 12:21 p.m.**
 - ▶ **Stress the importance of being in school every day unless sick; we cannot teach them if they are not here**
 - ▶ **Make doctor and dentist appointments after school hours**
 - ▶ **Contact office if student will be absent 5 or more days for independent study**
 - ▶ **Email teachers for assignments if absent less than 3 days**
 - ▶ **Please plan vacations after school is out**
- 

IMPORTANT REMINDERS:

- ▶ **Contact our health office if your child is on medication or has an inhaler**
 - ▶ **Student drop off ---- Hawthorn, Duke, Ilex**
 - ▶ **U-turns on Ilex are dangerous and not permitted during posted hours**
 - ▶ **Students are safe waiting in front of school not on the corner of Glen Ridge**
 - ▶ **School is out at 1:48 p.m. and students should go directly home unless involved in a program**
- 
- A decorative graphic consisting of several parallel white lines of varying lengths, slanted from the bottom right towards the top right, located in the lower right corner of the slide.



Glen Ridge Dr

Fox Dr

Robert O. Townsend
Junior High



Glen Ridge Dr

Robert O. Townsend
Junior High

Student Exit #1

Student Exit #2

Student Exit #3

Tem St

Duke Ave

Altura Ave

Google

IMPORTANT DATES:

- ▶ **August 12 - first day of school - 7:45 a.m.**
 - ▶ **Immunizations must be current**
 - ▶ **TDAP booster (on/after 7th birthday)**
 - ▶ **Varicella (4-6 years old)**
- ▶ **August Registration:**
 - ▶ **Pick up packet: July 24-25**
 - ▶ **9:00 a.m. – 1:00 p.m. (Friend/relative is OK)**
 - ▶ **Drop off packet: July 31, Aug 1, Aug 2**
 - ▶ **8:00 a.m. – 1:00 p.m. (Must be a parent)**
- ▶ **School Portraits: August 23**
- ▶ **Back to School Night: September 4 (6-8pm)**

Looking Forward to Next Year!

Questions?

