

Book	Ogdensburg City Schoo	District
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Section 4000

Title TIMEOUT AND PHYSICAL RESTRAINT (ALL STUDENTS) EXHIBIT

Code 4321.12-E

Status First Reading

NOTE: This form is based on one developed by the Massachusetts Department of Elementary and Secondary Education, modified to reflect the NY state regulations (changes shown below). Please note that a follow-up letter such as this one is not required by the law, though it does demonstrate the district's efforts to comply with the law and provide an additional avenue for notification.

(Date)

(Name of Parent/Person in Parental Relation) (Address of Parent/Person in Parental Relation)

Dear (Parent/Person in Parental Relation Name):

As we notified you on (date) via (method of communication), (student's name) engaged in the following behavior: (description of behavior precipitating use of timeout or physical/mechanical restraint) on (date).

We attempted the following behavior support strategies: (positive, proactive strategies, less restrictive and intrusive interventions, and de-escalation techniques used prior to timeout or restraint use).

When these attempts did not succeed, we select one: (A) sent (student's name) to the space used for timeout (B) physically restrained (student's name) for a period of (number) minutes.

We invite you to meet with us to discuss this incident. Please contact the building principal at your child's school to schedule a time. We have also included a copy of the documentation of the incident, as well as the district's policy and regulation on timeout and restraint.

Please contact your child's building principal if you have any questions or need any additional information.

Sincerely,

(Name, Title)

Adoption date: