



August 6, 2021

This institution is an equal opportunity provider

A Prayer for Protection During the Coronavirus

Lord, we admit that we are afraid. The spread of the Corona virus is happening rapidly and throughout the world.

We pray for healing for those who are sick. We pray for those who have lost loved ones into death. We pray for protection. We come to your throne of grace asking for you to stop the spread of this virus. We ask that our family, loved ones, and communities be protected and not become sick.

We pray for medical providers. We pray for leaders, government officials, and those in authority that they would have the knowledge and desire to make decisions in the best interests of the people they serve. We pray for those in the media, that they would give us the information we need without creating needless fear or panic.

Lord God, you are in control of all things and we place our lives into Your hands.

In the name of the Father, Son, and Holy Spirit we pray,
Amen.

COVID Reminders

Contact tracing, daily temperatures and observation of student well-being will continue to be part of our prevention against the spread of COVID. **Unvaccinated** children and adults who have been in contact with a COVID positive person or who have been diagnosed with COVID will not be able to return to school until such time, 10 – 14 days, that is deemed appropriate by the Board of Health. Students who are quarantined will be allowed to join classes using eLearning.

It greatly saddens me that COVID cases are on the rise again. I truly hoped that with the vaccine we would be on the healthy side of the pandemic. As schools have returned to in session many school districts are already seeing an increase of COVID cases and have found it necessary to quarantine classes.

During the 2021-2022 school year we will continue our strict adherence to our sick policy. If a student is sick and the symptoms could be considered COVID-like (see side panel) we must ask for the following for a child to return to school:

- **Doctor's note (stating alternate diagnosis from COVID) or**
- **Negative COVID Test or**
- **10 Days out**

Reminder: Each student should have three masks available at school in the event it is needed for health safety reasons.

Upcoming Events

August 9 – August 20 – NWEA Testing

August 10 – Vision Screening

Prek, KN, 1, 3, 5, 8

August 11 – Picture Day

August 12 – Back to School Night 6:30 – 8 PM

August 12 – Ladies Club Meeting

August 23 – September 7 – Mumkin Sale

September 1 – Progress Report Check

September 6 – Labor Day No school

Daily Health Checklist

- ✓ Temperature greater than 99.5
- ✓ New or worsening cough
- ✓ Shortness of breath or difficulty breathing
- ✓ Repeated shaking with chills
- ✓ Muscle pain
- ✓ Headache
- ✓ Sore throat
- ✓ New loss of taste or smell
- ✓ Congestion or runny nose
- ✓ Fatigue
- ✓ Nausea//Vomiting/Diarrhea
- ✓ Had contact with anyone who has been diagnosed with or who may have symptoms associated with COVID 19

Mission Statement

Led by the Holy Spirit, St. Michael Catholic School encourages our students to grow in their Catholic faith, achieve academic excellence and become responsible citizens.

Mass, Adoration and Benediction

Every Friday the students and staff of St. Michael join with Fr. Aaron Jenkins in the celebration of the Mass. Mass begins at 8:30 AM. We welcome family and friends to participate in the Mass with us.

This Friday in place of Mass the school will participate in Liturgy of the Hours. This service will begin at 8:30AM. Our eighth-grade students led us in the Liturgy of the Hours. The leader for this week was Ruthie Dodds. Our reader was Annabell Feeney.

The Mass on August 13th will be led by the 7th grade. Our servers for the Mass will be Aaron Lake, Hadley Hill, and Shepherd Dodds.

Adoration and Benediction are part of our very busy Friday. Classes schedule time on Fridays for silent prayer and reflection in the church as part of Adoration. We end our school week with Benediction. Benediction begins at 2:30 PM in the church.

Picture DAY!!

One of our students' favorite days is picture day is next Wednesday, August 11th. We will begin promptly at 8:30AM. Students who are absent or arrive after 10AM will have the opportunity to have pictures taken on our picture retake day. Reminders are as follows:

- ✓ No high heels
- ✓ No sleeveless shirts
- ✓ No shirts with advertisements
- ✓ Shorts and skirts must be uniform length (no more than 2 inches above the knee)
- ✓ Shoes and/or sandals must have straps that fit around the back of the ankle. No open toes
- ✓ Students cannot change, what they wear for pictures is to be worn all day

Our new picture company Pettit Photography has a variety of different photo packages available to help with your picture needs. Your child received the order forms this week.

Physical Education Uniforms & Retro T-Shirts

Just a reminder that the yellow retro t-shirts sold as part of the Developing Leaders Spirit Wear Sale are not part of the PE uniforms. The wonderful shirts with a rainbow on the front/retro shirt can be worn any Wednesday. These shirts are not to be worn to PE. Here is our Physical Education dress code:

Physical Education Uniform Shirts: St. Michael "yellow" or dry-fit gray PE uniform shirt is required for ALL grades.

Shorts: PE uniform shorts must be worn by all students. Shorts may be worn in the winter since the gym gets very warm. Sweats may be worn over top, but must be loose fitting and navy, black or gray in color. No leggings or running tights are allowed.

Shoes: Tennis shoes must be worn and must be in decent condition. (laces that can be tied, some degree of tread, and no loose soles.)

Socks: Socks must be worn with tennis shoes.

Hygiene: Middle school students must have appropriate deodorant and have a small towel.



Vision Screening – Tuesday, August 10

On Tuesday, August 10th the Lions Club will conduct vision screenings on our children in Prek, KN, 1, 3, 5, 8. Vision screening will begin promptly at 8:30AM. Students in Prek – 1 will need the Operation KidsSight permission form to be tested. If you did not receive a copy of the permission form, you will find a copy at the end of the newsletter. As soon as the results are available we will send them home with your child. Students in grades 3, 5, 8 do not need this additional permission.

Lunch Program

Fresh and nutritious lunches are available to the children each day. Children will order their lunch each day. Another option for children is to bring a lunch to school. Under the current federal guidelines all school lunches are free. If a child chooses to bring his/her lunch and needs to purchase a milk, there is a .40 charge. ***It is still a requirement that families who feel they qualify for free lunches fill out a free and reduced lunch form and return it to the school office. You will find the free lunch application in your family packet.***

**Daily menu options include:

Entrée Choice (Protein + Whole Grain Rich item) 1 Fruit, 1 Vegetable, 1 Low-Fat Milk Daily, Water Daily

Lunch Menu August 10 – August 13

Monday 8/9 – Popcorn Chicken, Bag of Chips, Steamed Broccoli, Diced Peaches, Milk

Tuesday 8/10 – Chicken & Noodles, Dinner Roll, Green Beans, Mandarin Oranges, Milk

Wednesday 8/11 – Pizza Bar from Papa John's, Steamed Corn, Apple Slices, Milk

Thursday 8/12 – Beef Tacos or Walking Tacos, Tortilla/Chips, Refried Beans, Diced Pears, Milk

Friday 8/13 – Mini Pancakes w/Syrup, Sausage Links (2), Baby Carrots, Banana, Milk

This institution is an equal opportunity provider. Menus are subject to change at any time.



Birthday August 7 - 13

8/7 – Levi Dellacca

8/13 - Lucie Goodwin

Birthday Snacks: If you would like to send birthday snacks on your child's birthday, please contact the homeroom teacher for permission. When snacks are provided the snacks must come prepackaged by manufacturer. Snacks should be portable and not require extra assistance when opening. Balloons, flowers, party favors, birthday banners etc. are too distracting for school. Please save these wonderful birthday items for at home use.

Birthday Parties at home: What an exciting way to celebrate a special day. Please remember we are not able to supply email addresses, home addresses or phone numbers for our children or parents. Students may pass out birthday invitations in class if all classmates are included in the invitations.

Prekindergarten to First only



Consent Form Please Print All Information
Do not complete form if child is currently under treatment for vision

**The volunteer will attach
 your child's vision
 screening
 printout here**

Child's Name: _____
 First **Middle Initial** **Last**

Child's Date of Birth: _____ Age _____

Address: _____

City and Zip: _____

Phone () 2nd phone () _____

E-mail: _____

Dear Parent/Guardian:

The local Indiana Lions Clubs in your community will offer free eye screening to your child. The screening may pick up the presence of eye disorders including farsightedness and nearsightedness, astigmatism, strabismus (misaligned eyes), anisometropia (unequal prescriptions) and media opacities (i.e. cataracts). No physical contact is made with your child and no eye drops or medications are used.

I, the undersigned, hereby give permission for my child to participate in the eye screening event. I understand the following regarding this program:

1. **The information obtained from this vision screening is preliminary only, and does not constitute a formal eye exam. Not all vision problems will be detected by the vision screening process.**
2. There is no charge to participate in the vision screening process.
3. I will not hold the Indiana Lions Eye Bank, Inc., the Indiana Lions Eye & Tissue Transplant Bank, the Lions Club organizations, their sponsors or Operation KidSight accountable for any errors of commission, omission or other inaccuracies of the reported screening results.
4. A copy of this form and your child's screening results will be forward to: Operation KidSight and Dr. Daniel E. Neely, Operation KidSight Medical Director.
5. If my child fails the eye screening, they will be referred to an eye care specialist and I will receive a sealed "Parent-To-Do Packet" along with the results of the screening. I understand that I am responsible for arranging a full eye exam if my child has been referred as a result of the vision screening.
6. If my child's reading is unreadable, the Lion volunteers who conducted the original screening may schedule re-takes at the screening site.
7. You are giving consent for the employees and volunteers of Operation KidSight to: (1) Record and store the results of your child's eye screening in a computer database; (2) Contact you with the results of the eye screening; (3) Contact your eye care doctor with the results of the eye screening; (4) If your child is a participant in a county Head Start or Community Action Program, to release the results of the screening to the manager of the Head Start/Community Action Program to assist in follow-up; and (5) If your child is being screened as part of a school program, to release the results to the school contact of the participating school to assist in follow-up. If your child fails the eye screening, you are also giving consent for your eye care doctor to share the results of your follow-up comprehensive eye examination with Dr. Neely and the staff of Operation KidSight who will enter that information into the computer database. All information you or your eye care doctor give to Operation KidSight will be kept confidential. Any information that could identify your child or family will not be used without your permission.

**X Parent/
 Guardian Signature:**

Date:

Do not write below this line – for office use only

The result of your child's vision screening is as follows:

____ **Pass** We are unable to detect a vision problem at this time. The screening is not a substitute for a complete eye exam. Consult your eye care professional if you suspect a vision problem.

____ **Refer** Your child should be examined because he or she may have the following condition that has the potential to cause poor vision in one or both eyes. Please take your child to see an ophthalmologist or optometrist in your area. **If you have any questions about your results please call Operation KidSight at (317) 220-8486.**

____ Strabismus (Crossed or misaligned eyes)

____ Anisometropia (Difference in need for glasses between eyes; can cause poor vision in one eye)

____ Astigmatism (Results from unequal focusing of light rays as they enter the eye, causing a blurring of objects)

____ High Farsightedness (Can contribute to eye crossing)

____ High Myopia (Severe near vision)

____ Anisocoria (Inequality in size of pupils)

____ Other