

U.S. Departme of Justice

Civil Rights Division

Federal Coordination and Compliance Section-NWB 950 Pennsylvania Avenue, NW Washington, DC 20530

Lilian Dorka
Interim Director
Office of Civil Rights
U.S. Environmental Protection Agency
1200 Pennsylvania Avenue, NW
Mail Stop 1201A
Washington, D.C. 20004

Dear Ms. Dorka:

Enclosed for your review is a letter received by the Federal Coordination and Compliance Section of the Civil Rights Division of the U.S. Department of Justice. The matter does not appear to be within the jurisdiction of our office.

However, the issues raised may fall within the jurisdiction of your agency and, therefore, we are referring it to you for appropriate disposition. This letter is also being referred to the U.S. Department of Education, Office of Civil Rights. The writer has been notified of the referral.

Thank you for your assistance in this matter.

Sincerely,

← Tamara Kessler

Chief

Federal Coordination and Compliance Section Civil Rights Division

Enclosure



U.S. Departme. of Justice Civil Rights Division

Federal Coordination and Compliance Section-NWB 950 Pennsylvania Avenue, NW Washington, DC 20530

AUG 0 3 2018

Harrisville, PA 16038

Dear

Your letter was received by the Federal Coordination and Compliance Section of the Civil Rights Division of the U.S. Department of Justice. We have considered carefully the information you have provided, but the matter does not appear to be within the jurisdiction of our office.

However, by the enclosed letter, we have referred the matter to the agency that is most likely to assist you. If you have any questions, please contact the U.S. Environmental Protection Agency at (202) 272-0167.

Sincerely,

Tamara Kessler
Chief
Federal Coordination and Compliance Section
Civil Rights Division

Enclosure

FEDERAL CACRDINATION AND COMPLIANCE SECTION

2018 JUH -5 AM 11: 08

U.S. Department of Justice
Civil Rights Division
Coordination and Review Section



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COMPLAINT FORM

The purpose of this form is to assist you in filing a complaint with the Coordination and Review Section. You are not required to use this form; a letter with the same information is sufficient. However, the information requested in the items marked with a star (*) must be provided, whether or not the form is used.

1.* State VOUS name and address Privacy		
Name:		
Address		
Harrisville PA 16038.	zip 16038)
Telephone No: Home	Work: <u>(</u> 1	
2.* Person(s) discriminated against, if differen	t from above:	j
Name (b) (6) Privacy, (b) (7)	(C) Enforce	ement Privac
Address: Same as above		(b) (6) Privacy, (b) (7)(C) Enforcemen
	Zip	
Telephone No: Home:()		
Please explain your relationship to this person		
3.* Agency and department or program that d	iscriminated: ,	
Name: Monifeau School	District	
Any individual if known: (b) (6) Privacy, (ement Privacy
	West Sunbury	POAD
West Sunbury	PA zin 1606	
Telephone Number:		
4A.* Non-employment: Does your complaint of services or in other discriminatory actions of the you or others? If so, please indicate below the discriminatory actions were taken (e.g., "Race: A	concern discrimination e department or agend base(s) on which you l African American" or ":	in the delivery of cy in its treatment of believe these Sex: Female").
Race/Color:		S
National origin;		
Sex:	National Address of the Control of t	
Religion: Age:	-	
Disability:	The stream control is	OMB No. 1190-0008 Expires: 02/29/04

48.* Employment: Does your complaint concern discrimination in employment by department or agency? If so, please indicate below the base(s) on which you belie these discriminatory actions were taken (e.g., "Race: African American" or "Sex: Fe. Race/Color: National origin: Sex: Religion: Age: Age: Disability:	y the ve mal
5. What is the most convenient time and place for us to contact you about this com (b) (6) Privacy, (b) (7)(C) Enforcement Privacy	ınlai
6. If we will not be able to reach you directly, you may wish to give us the name and phone number of a person who can tell us how to reach you and/or provide informational about your complaint:	d Itior
Name:Tel. No.()	
7. If you have an attorney representing you concerning the matters raised in this	
complaint, please provide the following:	
Name:	
Address:	
Zip	
Telephone Number: ()	
8.* To your best recollection, on what date(s) did the alleged discrimination take plants of the second sec	ce?
Earliest date of discrimination: 8/31/1/	
Most recent date of discrimination: 5/70/2018	
9. Complaints of discrimination must generally be filed within 180 days of the alleged discrimination. If the most recent date of discrimination, listed above, is more than 180 days ago, you may request a waiver of the filing requirement. If you wish to request waiver, please explain why you waited until now to file your complaint. 1	1 80 a
2- The fact that my other children have	
Students has combibuted to my decision	H
-2-	

10.* Please explain as clearly as possible what happened, why you believe it happened and how you were discriminated against. Indicate who was involved. Be sure to includ how other persons were treated differently from you. (Please use additional sheets if necessary and attach a copy of written materials pertaining to your case.)
* Please see altacked.
11. The laws we enforce prohibit recipients of Department of Levis and Levis
11. The laws we enforce prohibit recipients of Department of Justice funds from ntimidating or retaliating against anyone because he or she has either taken action or participated in action to secure rights protected by these laws. If you believe that you be been retaliated against (separate from the discrimination alleged in #10), please explain the circumstances below. Be sure to explain what actions you took which you believe were the basis for the alleged retaliation.

Name	Address	A	rea Cod	de/Teleph	<u>one Num</u>	nbers_
		W:()	(H):(_)	
		W:()	(H):()	
		W:()	(H):()	-
)	(H):()	
		W:(_)	(H):()	
	12	W:()	(H):()	
		W:()	(H):()	ONE CONTRACT OF THE
		111.7	×			
3. Do you have a our allegations?	any other informatio	W:() nink is re	(H):() our inve	stigation of
3. Do you have a our allegations?	any other informatio		nink is re) our inve	stigation of
3. Do you have a pur allegations?	any other informatio		nink is re		our inve	stigation of
3. Do you have a pur allegations?	any other informatio		nink is re		our inve	stigation of
What remedy a	are you seeking for the large property	the alleged d	liscrimir	elevant to		
What remedy a	are you seeking for the least of the least o	the alleged d	liscrimir May	nation?		
What remedy a	are you seeking for the least appropriate monetary	the alleged de compens	liscrimir May	nation?		

If so, do you remember the Complai	nt Number?
Against what agency and departmen	
Address:	
City, State, and Zip Code:	•
Telephone Number: ()	
Date of Filing:D	OJ Agency:
Briefly, what was the complaint about	t?
What was the result?	
 Have you filed or do you intend to raised in this complaint with any of the U.S. Equal Employment Opport 	ofile a charge or complaint concerning the matters efollowing?
Federal or State Court	20 (a)
Your State or local Human Relat	tions/Rights Commission
Grievance or complaint office	e -
Agency: <u>Flnnsylvanie</u> State	or complaint with an agency indicated in #16, formation (attach additional pages if necessary):
ase or Docket Number:	Date of Trial/Hearing:
ocation of Agency/Court:	
lame of Investigator:	
tatus of Case:	
omments:	

18. While it is not necessary for you to know about aid that the agency or institution you are filing against receives from the Federal government, if you know of any Department of Justice funds or assistance received by the program or department in which the alleged discrimination occurred, please provide that information below. **Linknow** **Linknow*
19.* We cannot accept a complaint if it has not been signed. Please sign and date this (b) (6) Privacy, (b) (7)(c) Enforcement Privacy [Date]
Please feel free to add additional sheets to explain the present situation to us.
We will need your consent to disclose your name, if necessary, in the course of any investigation. Therefore, we will need a signed Consent Form from you. (If you are filing this complaint for a person whom you allege has been discriminated against, we will in most instances need a signed Consent Form from that person.) See the "Notice about Investigatory Uses of Personal Information" for information about the Consent Form. Please mail the completed, signed Discrimination Complaint Form and the signed Consent Form (please make one copy of each for your records) to:
Coordination and Review Section - NYA Civil Rights Division United States Department of Justice 950 Pennsylvania Avenue, N.W. Washington, D.C. 20530
Toll-free Voice and TDD: (888) 848-5306 (202) 307-2222 TDD: (202) 307-2678
20. How did you learn that you could file this complaint? I was unaware unformed me three had been and rights wolarms
21. If your complaint has already been assigned a DOJ complaint number, please list it here:
If a currently valid OMB control number is not displayed on the first page, you are not required to fill out this complaint form unless the Department of Justice has begun an administrative investigation into this complaint.

Your Name

Address: Have read the Information below, check the appropriate box, and sign this form.

I have read the Notice of Investigatory Uses of Personal Information by the Department of Justice (DOJ). As a complainant, I understand that in the course of

I have read the Notice of Investigatory Uses of Personal Information by the Department of Justice (DOJ). As a complainant, I understand that in the course of an investigation it may become necessary for DOJ to reveal my identity to persons at the organization or institution under investigation. I am also aware of the obligations of DOJ to honor requests under the Freedom of Information Act. I understand that it may be necessary for DOJ to disclose information, including personally identifying details, which it has gathered as a part of its investigation of my complaint. In addition, I understand that as a complainant I am protected by DOJ's regulations from intimidation or retaliation for having taken action or participated in action to secure rights protected by nondiscrimination statutes enforced by DOJ.

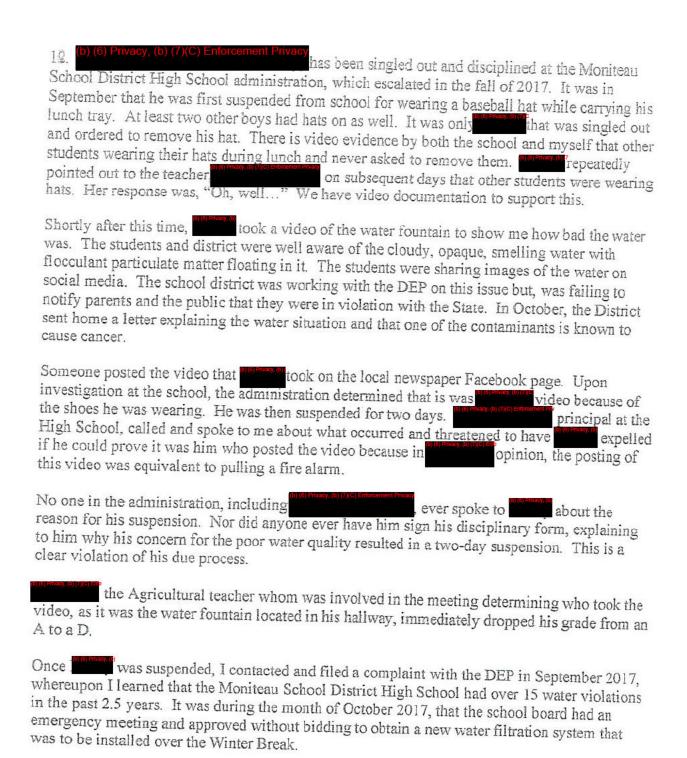
CONSENT/RELEASE

CONSENT - I have read and understand the above information and authorize DOJ to reveal my identity to persons at the organization or institution under investigation. I hereby authorize the Department of Justice (DOJ) to receive material and information about me pertinent to the investigation of my complaint. This release includes, but is not limited to, personal records and medical records. I understand that the material and information will be used for authorized civil rights compliance and enforcement activities. I further understand that I am not required to authorize this release, and do so voluntarily.

CONSENT DENIED - I have read and understand the above information and do not want DOJ to reveal my identity to the organization or institution under investigation, or to review, receive copies of, or discuss material and information about me, pertinent to the investigation of my complaint. I understand this is likely to impede the investigation of my complaint and may result in the closure of the investigation.

(D) (6) Privacy, (b) (7)(C) Enforcement Privacy

DATE



I requested to speak in front of the school board in October 2017 but was denied. I was told that 5 day's notice was not enough time to be placed on the agenda. However, that is in direct contradiction to their policy. Therefore, I requested to be on the November agenda. However, upon attending the meeting, I was not placed on the agenda and I had to speak during the public comments portion. The final result of that action was I was now addressing an issue that was two months old, my comments would not be recorded in the minutes and that members of the board were not required to answer or respond to any of my questions.

The discriminatory treatment of my son, my other children, and myself is because we are not local and did not graduate from this district. The community here is very rural and close knit. Nepotism is rampant within the Moniteau School District. There is only a very small percentage of the community with children who did not attend this district. Those of us who did not attend or graduate from this District, including our children are labeled as "Transplants." Transplants are discriminated against in every facet of the school. This ranges from the discipline received, to making a sports team, the grade earned in a class, who gets hired, fired or works for the district in any capacity.

Unfortunately, I had to remove from Moniteau and enrolled him in PA Cyber. 12 (A). My second son, the second son is a second s same school since I have spoken in front of the school board. and his wife were the only two teachers who had a combined three disciplinary reports in file the beginning of May 2018. Since speaking in front of the board in November, would specifically identify in the hallway between classes for wearing ear buds. Other students who were near or walking with him were not told to remove their ear buds or the larger Beats head phones. ent Privacy (guidance counselor) to discuss the After meeting with (b) (6) Privacy, (b) (7)(C) Enfor inconsistency of rule enforcement resulting in discrimination against progressive disciplinary policy, has resulted in 3 days suspension and over 18 detentions, thus far. The administration deemed it irrelevant that was being singled out as l "only human" and enforcing the rule as best he could. even brought up the subject in front of the entire class that a attends. Six students raised their hands that they wore ear buds in front of but none of the six had ever been disciplined by or even asked to remove them. 12 (B). My third and youngest son, who went to the high school for orientation experienced discriminatory behavior from various teachers when they learned he was the youngest of Teachers rolled their eyes and even responded, "Oh, great" in a sarcastic tone.

CONFIDENTIAL

Pursuant to section 9 of the Educator Discipline Act, 24 P.S. § 2070.9, the filing of a written educator misconduct complaint with the Department of Education will initiate the Department's review and investigation of an educator. Any person may file an educator misconduct complaint with the Department of Education. There is no limitations period for the filing of an educator misconduct complaint. However, you are strongly encouraged to file a complaint as soon as possible after learning of the educator's misconduct.

To file educator misconduct complaint, send this completed form, along with any relevant information or documentation to the Pennsylvania Department of Education, Office of Chief Counsel, 333 Market Street, 9th Floor, Harrisburg, PA 17126-0333.

1.	EDUCATOR'S NAME: (First	Name, Middle Initial, Last Name	(b) (6) Privacy, (b) (7)(C) Enforcemen
2.	EDUCATOR'S PLACE OF EN Charter School, Private Scho Moniteau School District I	ol, etc.)	hool District and School Building
3.	EDUCATOR'S JOB TITLE OR	Position:Principal	
4.	EDUCATOR'S WORK ADDRE	ESS: 1810 West Sunbury Road	
5. 6.	EDUCATOR'S WORK TELEP EDUCATOR'S HOME ADDRE	HONE NUMBER: 724-637-2091	1
7.	EDUCATOR'S HOME TELEPH	HONE NUMBER:	
8.	COUNTY AND STATE WHERE	E ALLEGED MISCONDUCT OCCUI	RRED: Butler County PA
9.	REASON FOR COMPLAINT: (Please check and complete)	
	Criminal Charge(s): (P Charge(s):	lease list charge(s)/County/Co	urt/Judge)
	County:	Court:	Judge:
	Criminal Conviction(s): Conviction(s):	(Please list crime(s)/County/C	ourt/Judge)
	County:	Court:	Judge:
below)	XX Conduct inapp	propriate for an Educator (De	tailed information to be provided

- 10. DATE OF EDUCATOR'S MISCONDUCT: (Month, Day, Year) 09/14/2017
- 11. DATE YOU LEARNED ABOUT THE CONDUCT: (Month, Day, Year) 09/14/2017
- 12. DETAILED DESCRIPTION OF THE CONDUCT:

Please summarize the educator's conduct, providing specific examples of actions or words (attach additional sheets as necessary). Any supporting documentation should be attached to the complaint. Your description should answer the following questions: What happened? Who was involved? When and where did the conduct occur? Please also include victim's name, age and brief description, if applicable. Please also provide the names and contact information of any witnesses or other persons having information related to this matter.

Please see attached sheet.

- 13. If you have filed a complaint with any other entity such as the Pennsylvania Human Relations Commission, Children and Youth Services, U.S. Department of Education's Office for Civil Rights, Pennsylvania Department of Education's Bureau of Special Education, or have filed criminal or civil charges, please identify the entity and attach a copy of the complaint and/or charges.
 Please see attached.
- 14. If you have contacted the superintendent, CEO of the charter school, school building administrators, or school board about this matter, please list the names of the individual(s) contacted, identify the position held by the individual(s) listed, and attach any documents such as letters or notes documenting your contacts. Please see attached sheet.

15.	COMPLAINANT'S CONTACT INFORMATION:
	Name and Address: (6) (7)(6) Privacy, (6) (7)(6) Enforcement Privacy

Daytime Telephone Number: (Cell Phone Number:

Best time to contact you: AM

16. VERIFICATION:

I verify, subject to the penalties of Section 4904 of the Pennsylvania Crimes Code (18 Pa.C.S. § 4904) relating to unsworn falsification to authorities, that the information above and the facts contained in this complaint and attachments are true and correct to the best of my knowledge.

(b) (6) Privacy, (b) (7)(C) Enforcement Privacy

Date: 5 30 · (8

CONFIDENTIALITY NOTICE

The educator misconduct complaint process is confidential and any unauthorized release of confidential information is a misdemeanor of the third degree. See 24 P.S. § 2070.17.2. All information relating to complaints must remain confidential unless or until public discipline is imposed. Thus, the filing of an Educator Misconduct Complaint, the Department's investigation of a complaint and the disposition of the complaint prior to the imposition of public discipline, as well as any and all information learned as a result of the Department of Education's investigation, is strictly confidential.

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2.	EDUCATOR'S PLACE Charter School, Private Moniteau School Dis	School, etc.)	Name of School District and School Bu	ilding
3.	EDUCATOR'S JOB TIT	LE OR POSITION: Assistan	t Principal	
4.	EDUCATOR'S WORK	ADDRESS: 1810 West Sui	ibury Road	
5. 6.	EDUCATOR'S WORK T EDUCATOR'S HOME A	TELEPHONE NUMBER: 72 ADDRESS:	4-637-2091	
7.	EDUCATOR'S HOME T	ELEPHONE NUMBER:		
8.	COUNTY AND STATE V	VHERE ALLEGED MISCON	DUCT OCCURRED: Butler County PA	
9.	REASON FOR COMPLA	INT: (Please check and co	mplete)	
	Criminal Charge(s):	s): (Please list charge(s)	/County/Court/Judge)	
	County:	Court:	Judge:	
	Criminal Conviction Conviction(s):	on(s): (Please list crime(s	s)/County/Court/Judge)	
	County:	Court:	Judge:	
below)	XX Conduct	inappropriate for an Ec	ducator (Detailed information to be pro	vided

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- 15. COMPLAINANT'S CONTACT INFORMATION:
 Name and Address

Best time to contact you: AM

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SIGNATURE OF COMPLAINANT

(b) (6) Privacy, (b) (7)(C) Enforcement Priva

Date: 5-30. /

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2.	EDUCATOR'S PLACE Charter School, Privat Moniteau School Di		, Name of Sch	nool District and S	School Building
3.	Educator's Job Tr	TLE OR POSITION: Teache	r	A	
4.	Educator's Work	Address: 1810 West St	inbury Road		
5.	EDUCATOR'S WORK	TELEPHONE NUMBER: 7	24-637-2091		
6.	EDUCATOR'S HOME	ADDRESS:			
7.	EDUCATOR'S HOME	ΓELEPHONE NUMBER:			
8.	COUNTY AND STATE	WHERE ALLEGED MISCO	NDUCT OCCUR	RED: Butler Cour	nty PA
9.	REASON FOR COMPLE	AINT: (Please check and co	omplete)		
	Criminal Charge Charge(s):	(s): (Please list charge(s	s)/County/Cou	urt/Judge)	
	County:	Court:		Judge:	
	Criminal Conviction(s):	on(s): (Please list crime	(s)/County/Co	ourt/Judge)	
	County:	Court:		Judge:	
pelow)	XX Conduct	inappropriate for an I	Educator (Det	ailed information	to be provided

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 Name and Address:

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SIGNATURE OF COMPLATNANT

(b) (6) Privacy, (b) (7)(C) Enforcemen

Date: 5 - 30 - (8

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LETTEL SENT HOME WITH SOUT BOOKS.

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Marriesa High Schiel - Has Levels of Disinfection Byproducts (DBPs)

Above Drinking Water	r Standards
Our water system recently emergency, as tun quatern wash we are doing to corre	wholated a drinking water standard. Although this is not an- ers, you have a right to know what happened, what you should do; and act this situation.
DBPs) on a quarterly basi	ryour drinking water for the presence of disinfection byproducts is. The DBPs jest results from the last four (4) quarters that ended on our system exceeds the standards, or maximum contaminant level
TAKEL) for Enlanceric acid:	s (HAA5). MCL for HAA5 is calculated based on locational running of samples collected from the last four (4) quarters. The LRAA of is at 0.61 mg L. This value exceeds the respective MCLs for HAA5.
What should I do? At this time no alternative health concerns, consult ye	source of water is necessary. However, if you have any specific our dector.
以后,我们是不是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的	If it had been, you would have been notified immediately. Some maming HAA5 th excess of the MCL over many years may have an occur.
the contemporation and inorganic and inorganic confective active	d in the treatment of drinking water, disinfectants react with naturally- gante matter present in water to form DBPs. We are taking have taken the solutions Louered Chicave Levels in Stocage Tauk d
以为"数据"的"数据"的"数据"的"数据"的"数据"。	ntease contact <u>Jeff Campbell</u> at 724-637-3117 tame of vener system contact there outliers with the parties of
STATE OF THE STATE	a septical the other people who divile this water, especially those says needs directly (for example, people in apartments, nursing easy for ean do this by posting this notice in a public place of the Part Part of the control of the place of the Part of the control of the place of the Part of the control of the place of the Part of the control of the place of the Part of the control of the place of the Part of the place of the Part of the place of the part o

	The state of the s	NCLG'	MCL mg/L	Standard Health Effects Language for Public Helification
	inorganic matter present in	water to form	educt Pred drinking v m chemica of disinfe	cursors, and Disinfectant Residuals: Where water, disinfectants combine with organic and its called disinfection byproducts (DSPs). EPA estants and OBPs in drinking water including
9	trihalomethanes (THMs) and see Total Inhalomethanes (TTHMs)	haloacetic ac N/A	0.080	Some people who are very some people who are very trihatomethanes in excess of the Woulder mark years may experience property with the very kidneys, or central nervous system and the responsed risk of getting cancer.
	£1 Haloacetic Acids (HAA)	N/A	0.060	Some people who drink water containing the cacetic acids in excess of the MCL over many years may have an increased risk of getting cancer.
	82 Bromate	Zero	0 010	Some people who drink water containing promate in excess of the MCL over many years may have an increased risk of getting cencer.
e.	83 Chiorite	0.8	1.0	Some infants and young children who drink water containing chlorite in excess of the MCL could experience nervous system effects. Similar effects may occur in fetuses of pregnant women who drink water containing chlorite in excess of the MCL. Some people may experience anemia.
	84. Chlorine	4 (MRDLG) ²	4 0 (MRDL) ²³	Some people who use drinking water containing chlorine well in excess of the MRDL could experience irritating effects to their eyes and nose. Some people who drink water containing chlorine well in excess of the MRDL could experience stomach discomfort.
	85. Chloramines	4 (MRDLG)	4.0 (MRDL)	Some people who use drinking water containing chloramines well in excess of the MRDL could experience irritating effects to their eyes and nose Some people who drink water containing chloramines well in excess of the MRDL could experience stomach discomfort or anemia.
	86a. Chlorine dioxide, where any 2 consecutive daily samples taken at the entrance to the distribution system are above the MRDL	0.8 (MRDLG)	0.8 (MRDL)	Some infants and young children who drink water containing chlorine dioxide in excess of the MRDL could experience nervous system effects. Similar effects may occur in fetuses of pregnant women who drink water containing chlorine dioxide in excess of the MRDL. Some people may experience anemia. Add for public notification only: The chlorine dioxid violations reported today are the result cexceedances at the treatment facility only, no within the distribution system which delivers water to consumers. Continued compliance with chloring dioxide levels within the distribution system minimizes the potential risk of these violations consumers.
COLUMN TA			Tank	

Monitaau Jr/Sr High Scl 1

School Wide Discipline Form

Student(s	Referring Staff	8) Privacy, (b) (7)(C) Enforcer	nent Privacy _ Gra	de 11 c	Date 8/8/117 Tim	ne (
Was the Classroom Beha	vior Management Plan followed?	Yes	No	N/A	1 3	All Francis
Teacher called parent:	Date:Time:	Result:	No answer	Left message	Discussion N	IA.
Phone Number(s) called:	1	2		3	The second secon	
Location			WEST TRANSPORTED FOR THE STATE OF THE STATE			Manager 1
Auditorium Bathroom/Restroom Bus Loading Zone/On E	Cafeteria Classroom Gym	×	Hailway Library Locker Rocm		_ Off Campus _ Stadium _ Other	
Problem Behavior/infraction		A COLUMN TO SERVICE DE LA COLUMN DE LA COLUM	erandere e zerentodetak an Bilantik e njelijan gov	~.	CONTRACTOR	R. Balcor Will
Abusive/Inappropriate/P Bomb Threat/False Alan Bullying Cellphone/Electronic Der Cut Detention Defiance/Disrespect/(nsu Disruption Dress Code Viciation	vice Violation H bordination In	priving/Parking Violerugs/Alcohol ighting orseplay appropriate Displate appropriate/Disording/Cheating inor Altercation	ay of Affection	Pro Pro Ski Tan Tob	acco	1
Comments: CONTINULO	1 to augue w th	e lunch	Monto	ruhe	asked to	
***Administration Use On LEVEL UNTIL, DATE 1 /0/26//7 2 /0/0//7 3 9/28//7 6 7 8 9 20	Due Process: 1. Do you know/understand w. 2. Can you explain to me what 3. Would you like to make a w. 4. Do you understand the Leve been explained to you toda: 5. Will this cause the student to	: happened? ritten statement? els of Progressive y?	Discipline as the	y have	Yes No No No No Yes No	
Administrative Decision Bus Suspension Conference with Student Citation Conflict Resolution Detention - Date(s) Out of School Suspension - #	Hall P Law E Loss o	g/Parking Restrict ass Restriction inforcement Conte of Privilege t Contaction Privilege	ided 128%	In School Suspen	Referred to Guidance Referred to SAP Restitution Warning Other	9
Comments:						-
(b) (6) Privacy, (b) (7)(C) Enforcement Priv	8/31/2017	(b)	(8) Privacy, (b) (7)(C) Enfo	proement Privacy was a series of the series	عاداد	
	Date	3	ludent Signatur	8	3/31/11 Date	(

MONITEAU JUNIOR-SENIOR HIGH SCHOOL

1810 West Sunbury Road, West Sunbury, PA 16061 Phone: (724) 637-2091 Fax: (724) 637-3878

www.moniteau.k12.pa.us

Dedicated to the past...committed to the future.

08/31/2017

Dear (b) (6) Privacy

RE: Grade 11, has received the following discipline for DEFIANCE/INSUBORDINATION, INAPPROPRIATE BEHAVIOR IN CAFETERIA on 08/31/2017.

09/01/2017 OUT OF SCHOOL SUSPENSION, CONFERENCE WITH STUDENT, PARENT CONTACT

Because the student code of conduct is based on the concept of progressive discipline, students are encouraged to refrain from continued misbehavior that results in increased levels of disciplinary disposition. In other words, "continued misbehavior will result in stronger disciplinary actions."

If a student is assigned to Detention, Detention begins at 3:00PM and ends at 5:00PM. An activity bus is available for transportation home. Students are to report to the cafeteria at 2:35PM for Detention.

Please contact my office if you require any assistance in this matter.

Thank you.

Sincerely,

Principal

Enclosure cc: file

(b) (6) Privacy, (b) (7)(C) Enforcement Privacy

Assistant Principal

(b) (6) Privacy, (b) (7)(C) Enforcement Privacy

Harrisville PA 16038

Moniteau Jr/Sr High Sc!)!

School Wide Discipline Form

(a) (b) Privacy, (b) (7)(C) Enforcem	(b) (6	Privacy, (b) (7)(C) Enforcement Privacy	. 1.1	011-	
Student(s)	Referring Staff_	Gr	ade Da	ate/112/17	Time_
Was the Classroom Behavior	Management Plan followed		N/A)	Î .	
Teacher called parent: Date	e:Time:	Result: No answer	Left message	Discussion	N/A
Phone Number(s) called: 1		2	3		Marie Marie Ave.
Location		and an annual section of the control of the section		Military description and the position to	
Auditorium Bathroom/Restroom Bus Loading Zone/On Bus	Cafeteria Classroom Gym	Hallway Library Locker Room	(1) CONTROL (1)	Off Campus Stadium Other	
Problem Behavior/Infraction			Blacker 4000 Done control and the second	Billion and the second half on the second half of	
Abusive/Inappropriate/Profant Bomb Threat/False Alarm Bullying Cellphone/Electronic Device V Cut Detention Defiance/Disrespect/Insubordi Disruption Dress Code Violation	Dr. Fig. Fi	ving/Parking Violation ugs/Alcohol hting replay ppropriate Display of Affection ppropriate/Disorderly Conduct ug/Cheating or Altercation	Prop	occo pons	dalism
Comments: TOOK Q VIC	leo auring clas	ss of the wa	fer four-	tain,	
***Administration Use Only**	* Someone	to the butler	easie lix	205/201	4
LEVEL UNTIL DATE 1	Due Process: 1. Do you know/understand wh 2. Can you explain to me what h 3. Would you like to make a wri 4. Do you understand the Levels been explained to you today? 5. Will this cause the student to	nappened? tten statement? of Progressive Discipline as th	ey have	Yes No Yes No Yes No Yes No Yes No	0
		SECRETARIO DE POSTO DE LO POSTO DE LA TRADADA DE LA TRADAD		THE RESERVE COMPANY TO SERVE THE PROPERTY OF T	MANAGEMENTS.
Bus Suspension Conference with Student Citation Conflict Resolution Detention - Date(s) Out of School Suspension - # of Date	Hall Pa			Referred to Guida Referred to SAP Restitution Warning Other	ance
mments: MATCHE MULL MANGE DIONALLA MANG (6) Erivacy, (6) MOS Erivacy	15/172 9/18/17 - VICLO W/ (b) (6) 10 Dowthe SHU	Privacy, (b) (7)(C) En It M and resultin	forcement Pri	vacy Slock ne.	10_
	9/11/2013		<u> </u>		-
	Date	Student Signatu	TO	Date	
		1.50		Defraal & be	

MONITEAU JUNIOR-SENIOR HIGH SCHOOL

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Dedicated to the past...committed to the future.

09/18/2017

De ar (b) (6) Privacy, (b) (7)(C) Enforcement Privac

RE: Grade 11, has received the following discipline for CELL PHONE VIOLATION on 09/12/2017.

09/15/2017, 09/18/2017 OUT OF SCHOOL SUSPENSION, CONFERENCE WITH STUDENT, PARENT CONTACT

Because the student code of conduct is based on the concept of progressive discipline, students are encouraged to refrain from continued misbehavior that results in increased levels of disciplinary disposition. In other words, "continued misbehavior will result in stronger disciplinary actions."

If a student is assigned to Detention, Detention begins at 3:00FM and ends at 5:00PM. An activity bus is available for transportation home. Students are to report to the cafeteria at 2:35PM for Detention.

Please contact my office if you require any assistance in this matter.

Thank you.

Sincerely,

Principal

Enclosure cc: file

(b) (6) Privacy, (b) (7)(C) Enforcement Privacy

Assistant Principal

(b)(6) Privacy, (b)(7)(C) Enforcement Privacy

Harrisville PA 16038

Moniteau High School Progress Report for

PLANT SYSTEMS

Thursday, September 28, 2017

Termi Asserago: 57.5 Termi Grade: 58 Final Average: 57.50 Final Grade: 58 Owerall Rank: 12 Absent Days: 0 Tardy Days: 0

A	90.00D	60-00
3	80.00E	100 To 10
C	70.00I	

		Score	Information					
Name	Date	Category	Score	Mast	\$	Grd	Footnote	Mean
							- t ₀	
weekly	09/07/17		40	50	80	80		49
weekly	09/07/17	cp	40	50	80	80		49
weekly	09/19/17	CD	25	50	50	50		47
notes	09/19/17	note she	10	50	20	20		46
Term #1	Subtotal		57.5	100	57	58		96

X = Exempt, NC = No Credit

Assignment Descriptions

weekly = 8/28-9-1
weekly = 9-4/8
weekly = 9/11-15
notes = external plant parts

Skill Information Term #1