

## MEMORANDUM

TO: Saturday-at-the-Sea teachers and other chaperones

FROM: Barbara M. Shoplock, Director- Saturday-at-the-Sea Programs

RE: Responsibilities of the chaperones

Thank you for agreeing to be a chaperone at Saturday-at-the-Sea. I want to fill you in on the responsibilities involved with being a chaperone:

**MOST IMPORTANTLY: Good student behavior is the responsibility of the chaperones.** Our staff must concern themselves with instructing the students, handling equipment, and running the program safely and efficiently; they cannot spend the day monitoring the students' general behavior. Arguing, pushing or fighting; destroying marine lab property; and disobeying the instructors' requests are not tolerated by our program. Such incidents are not fair to the well-behaved students and are likely to influence the teacher's future participation in the Saturday-at-the-Sea program.

**IN ADDITION:** Though you might not know the exact answers to the students questions, that's not important!!! You can make a HUGE difference in the students thinking and learning experiences by asking student the following type of open-ended questions:

- \* What did you observe?    \* What did you discover about...?    \*What could we do to find out...?
- \* How is this the same or different from...?    \*Can you compare this with something else?
- \* Why do you think that?    \* What questions do you have?

Thanks for taking the time to help make this learning experience successful. Your attention to student behavior & group dynamics will make the experience more rewarding for all involved. We look forward to meeting you soon!

**Please FILL OUT the information form (on reverse side) and BRING THIS WITH YOU on your Saturday-at-the-Sea date.**

**Over, please**



State of Florida Workers' Compensation  
Special Disability Trust Fund 440.49 F.S.

**Chaperone Information**

Chapter 440, Florida Statutes, provides for recovery from the Special Disability Trust Fund where an injury merges with a pre-existing permanent physical impairment to cause a greater disability than would have resulted from the injury alone. However, in order to recover from the Special Disability Trust Fund, it is required that the State have knowledge of this impairment prior to the occurrence of the compensable injury. In addition to a general category of impairments, there are certain specific impairments outlined by the above statutes. Therefore, the following questions are to be answered by each employee.

1. Have you ever had a serious illness, injury, or operation? YES\_\_\_ NO\_\_\_
2. Have you ever received Workers' Compensation benefits for an injury? YES\_\_\_NO\_\_\_
3. Do you now have or have you ever had any disability rating, either temporary or permanent, assigned to you by an insurance company or governmental agency, either federal, state, county, or city? YES\_\_\_NO\_\_\_
4. Do you now have or have you ever had any physical handicap or disability including the following? If so, please circle.

Epilepsy	Diabetes	Cardiac Disease
Cerebral Palsy	Vascular Disorder	Parkinson's Disease
Hemophilia	Hyperinsulinism	Muscular Dystrophy
Thrombophlebitis	Total Deafness	Mental Retardation
Multiple Sclerosis	Chronic Osteomyelitis	Marie-Strumpell Disease

5. Have you ever had or do you now have back trouble or complaints? YES\_\_\_NO\_\_\_

6. Have you ever had:

Amputation of foot, leg, arm or hand? YES\_\_\_NO\_\_\_    Hernia? YES\_\_\_NO\_\_\_

Total loss of sight of one or both eyes or a partial loss of corrected vision of more than 75% bilaterally? YES\_\_\_NO\_\_\_

Allergic dermatitis or other allergies? YES\_\_\_NO\_\_\_

Herniated intervertebral disc? YES\_\_\_NO\_\_\_

Surgical removal of an intervertebral disc or spinal fusion? YES\_\_\_NO\_\_\_

Residual disability from poliomyelitis? YES\_\_\_NO\_\_\_

Psychoneurotic, emotional or nervous disorder? YES\_\_\_NO\_\_\_

Ankylosis of a major weight-bearing joint? YES\_\_\_NO\_\_\_

Any permanent physical condition which constitutes a 20% impairment of a member or of the body as a whole? YES\_\_\_NO\_\_\_

Explain all YES answers. \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

(printed)

I understand that I am acting as a volunteer and will receive no salary or benefits for services rendered.

\_\_\_\_\_  
Chaperone's Signature