



Allison Myers
Principal
Diane Malanga
Assistant Principal

The North Hills School
2023 & 2013 National Blue Ribbon School
57-40 Marathon Parkway Little Neck, NY 11362
Tel: 718-225-7029 Fax: 718-225-7030
www.ps221q.org

2026-2027 North Hills IMPORTANT Welcome Packet

Dear Parent(s)/Guardian(s) of North Hills,

Welcome Back! We look forward to another great year!

Attached you will find important documents that must be completed and returned to your child's teacher by **Monday, September 14, 2026**.

Thank you in advance for your cooperation.

Sincerely,

Allison Myers, Principal

尊敬的 North Hills 家长/监护人：

欢迎大家回来！我们期待新学年的到来，并相信这将是又一个精彩的学年！

附件中包含一些重要文件，请填写完整，并于**2026年9月14日（星期一）**之前交回给您孩子的老师。

感谢您的配合与支持！

此致，

Allison Myers, 校长

North Hills 학부모님/보호자님께,

환영합니다! 새 학년을 맞이하여 또 하나의 멋진 한 해를 함께 만들어 가기를 기대합니다!

첨부된 자료에는 작성 후 **2026년 9월 14일(월요일)**까지 자녀의 담임 선생님께 제출해야 하는 중요한 서류들이 포함되어 있습니다.

협조해 주셔서 미리 감사드립니다.

진심으로,

Allison Myers, 교장

Estimados padres/tutores de North Hills:

¡Bienvenidos de nuevo! ¡Esperamos con entusiasmo otro gran año escolar!

Adjunto encontrarán documentos importantes que deben completar y devolver al maestro(a) de su hijo(a) antes del **lunes 14 de septiembre de 2026**. Gracias de antemano por su cooperación.

Atentamente,

Allison Myers, Directora



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2026-2027 ALLERGY & HEALTH FORM

Child’s Name: _____ Class: _____

Please list any food allergies your child has. If none, write NONE.

Please list any food restrictions your child might have (i.e. beef, pork etc.) If none, write NONE.

Please advise on any medical conditions you think we should be aware of:

Thank you in advance for your cooperation.

Sincerely,

Allison Myers, Principal



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2026-2027 BUS INFORMATION

Dear Parent(s)/ Guardian(s) of Bus Children,

This letter is only for parent(s)/guardian(s) whose child(ren) receive bus service. If your child is designated as receiving bus transportation services, they will receive this service every school day.

If you are planning on picking up your child at school; instead of having them ride the bus on any given day, you **MUST SEND IN A WRITTEN NOTE WITH YOUR CHILD, OR SEND AN EMAIL.**

IMPORTANT: Without a note or email, we will be putting your child on their regular bus. Thank you for your cooperation in ensuring your child's safety.

If you would like your 4th or 5th grade child to walk home instead of taking the bus, a written note or email must be given to the school prior to dismissal. Emails can be sent to the addresses below.

Sincerely,

Debbie Greene & Debbie Chow, Bussing School Aides

DGreene4@schools.nyc.gov

DChow2@schools.nyc.gov

718-225-7029 Ext. 1202



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4th and 5th Grade WALK HOME Permission 2026-2027

Dear Parent(s)/Guardian(s) of 4th and 5th Grade Students,

The safety of your children is always our greatest concern. Students in grades in 3K, Pre-K, Kindergarten through third grade must be picked up by a parent/guardian or designee that is on the BLUE EMERGENCY CARD. Only children in grades 4 and 5 with written permission (note to teacher or email) are permitted to walk home alone at dismissal.

Please list anyone who has authorization to pick up your child(ren) on the Blue Emergency Card. Please be aware that if someone other than the individuals listed on the emergency card is picking up your child, there must be a written note and that person must have a valid photo ID.

For the safety of our children, students will NOT be released to individuals without ID. Please remind grandparents, relatives, and neighbors that they must come to school with a photo ID. If an older child is picking up a younger student, their middle or high school ID is sufficient with a written note. Thank you in advance for your cooperation.

Sincerely,

Allison Myers, Principal

_____ **RETURN 4th and 5th Grade Parent(s)/Guardian(s)** _____

4th/5th Grade Student Name : _____ Class: _____

Dear Ms. Myers,

I give permission for my 4th or 5th grade student to walk home alone. I am aware that should they be picked up from school, that person picking up should be on the Blue Card and have photo ID when picking up my child.

Parent Signature

Date



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2026-2027

CONSENT for NAME RELEASE for VARIOUS SCHOOL ENDEAVORS

Dear Parent(s)/Guardian(s),

We are asking your consent/permission for your child's name and class to be released to approved vetted organizations and vendors our school is working with for a variety of school-wide and PTA activities.

This a general year-round consent notification. If any other partnership/event arises, we will send home a specific request for that consent. Thank you always for your support and partnership.

I hereby consent to allowing my child's name and class to be released to Community and Educational Organizations /Government Offices. This may include but is not limited to the following:

- IRVIN SIMON Photography (School Picture Provider)
- Make Your Move Chess
- Square Art Fundraising
- Scholastic Inc.
- Politician Offices for Awards (i.e. Councilwoman Linda Lee, Assemblyman Edward Braunstein)

_____ Return to Classroom Teacher_____

Child's Name: _____ Class: _____

Name of Parent/Guardian: _____

() YES! I give consent for my child's name and class to be released to vetted organizations working with The North Hills School.

() No. I do not give consent for my child's name and class to be released to vetted organizations working with The North Hills School.



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Media Consent 2026-2027

Student Name: _____

Class: _____



Media Consent for NYC Public Schools Use

Student Name: _____ Student ID Number: _____

Date of Birth: _____

School: **The North Hills School 26Q221**

By signing below, I give permission to New York City Public Schools (NYCPS) and members of the press at NYCPS events to interview, photograph, and record audio and video of the student named above (the "Student") and to publish the Student's name, image, and likeness, including any photographs, audio recordings, and video recordings in print, on broadcasts, in online spaces (including websites and social media accounts), on apps, and all other forms of media. I understand that when NYCPS hosts a public event, some attendees may take their own photographs, videos, and audio at the event that capture me or my child, and that these photographs, videos, and audio may be made public. By signing below, I also release NYCPS from all claims, demands, and liabilities in connection with the above consent. If Student is Under Age 18:

Name of Parent / Guardian: _____

Signature of Parent / Guardian: _____ Date: _____



North Hills Student Photo Privacy Reminder

To help safeguard the privacy of PS 221 families who do not want their child's photo taken, posted on social media, or used outside the classroom, please complete the Google Form below.

Students who are identified as not to be photographed will wear ORANGE BRACELETS during North Hills events. These bracelets will alert guests and PTA members not to photograph or include those students in public posts.

***Please complete the form to help us ensure your child's photo privacy:

<https://forms.gle/mTdw8e2kkkaurMh4A>

Thank you for helping us protect our students' privacy and making our school events welcoming and respectful for all families.



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