



# Claymont High School

Robert Clarke, Principal  
Scott Golec, Assistant Principal

EXCELLENCE IN EDUCATION

## CHS ENROLLMENT PROCEDURES

In order to be enrolled as a student at Claymont High School, state law requires that we have copies of the following documents in our possession:

1. Birth Certificate
2. Social Security Card
3. Custody papers (in the event the student does not live with both biological parents)
4. Immunization records (former school may provide)

*In the event the student is over the age of 18 years old, the student must provide the following in addition to the above (with the exception of custody papers):*

1. Proof of Claymont residency
2. Letter from an employer stating the amount of income earned by the student to determine if the student is self-supporting. Final entrance approval will be determined by the superintendent.

The student will not be permitted to enroll at Claymont High School until all of the above requirements are met.

Sincerely,

Scott Golec  
Assistant Principal

**REQUEST FOR INFORMATION**

The Family Education Rights and Privacy Act of 1974, and recent Amendments, states that in order to release school records, there must be written consent of the parent, legal guardian or student that is 18 or older. This request must specify the records to be released, the reasons for such a release and to whom the records are to be released.

I HAVE READ THE ABOVE AND AUTHORIZE:

\_\_\_\_\_  
(Previous School)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (State) (Zip)

Academic grades

OGT results

Attendance Data

Individual Career Plan Folder (ICP)

Health & Immunization Records

Grades In-Progress

Testing Data/Psychological Reports

All

IEP/ETR

Other \_\_\_\_\_

**Send To:** CLAYMONT HIGH SCHOOL  
4205 Indian Hill Rd.  
Uhrichsville, OH 44683  
Fax # (740) 922-1031

Regarding:

\_\_\_\_\_  
(Student's Name)

\_\_\_\_\_  
(Current Address )

\_\_\_\_\_  
(City) (State) (Zip)

Reason for Release: Enrolled in CLAYMONT HIGH SCHOOL in Grade \_\_\_\_\_.

\_\_\_\_\_  
(Signature of parent/guardian) or \_\_\_\_\_  
(Student - if 18 or over)

Date of request \_\_\_\_\_ Counselor \_\_\_\_\_

BUILDING \_\_\_\_\_  
BUS STUDENT \_\_\_\_\_

ENROLLMENT DATE \_\_\_\_\_  
GRADE \_\_\_\_\_  
TEACHER \_\_\_\_\_

## CLAYMONT CITY SCHOOLS

201 N. Third Street, Dennison, OH 44621

### NEW PUPIL REGISTRATION FORM

The confidential information requested below is necessary for the protection of your child and for completion of his/her permanent school record. **PLEASE PRINT**

#### STUDENT INFORMATION:

STUDENT'S FULL NAME: \_\_\_\_\_ MALE: \_\_\_\_\_  
(Last) (First) (Middle)  
FEMALE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
(City) (State)

STUDENT'S SOCIAL SECURITY NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_  
\_\_\_\_\_ COUNTY: \_\_\_\_\_

Please give any information, which will help us locate your house if it is outside the city limits. \_\_\_\_\_

WAS THIS STUDENT OPEN ENROLLED FROM CLAYMONT TO THE LAST DISTRICT ATTENDED? \_\_\_\_\_

HAS STUDENT PREVIOUSLY ATTENDED CLAYMONT CITY SCHOOLS? YES \_\_\_\_\_ NO \_\_\_\_\_

Name of School District last attended: \_\_\_\_\_

Address of district \_\_\_\_\_

TYPE OF KINDERGARTEN YOUR CHILD ATTENDED: FULL DAY \_\_\_\_\_ HALF DAY \_\_\_\_\_

#### **HANDICAPPED:**

- \_\_\_ \* Not Applicable (No handicap)
- \_\_\_ 1. Multi-Handicapped (Not deaf or blind)
- \_\_\_ 2. Deaf/Blind
- \_\_\_ 3. Hearing Handicapped
- \_\_\_ 4. Visually Handicapped
- \_\_\_ 5. Speech Handicapped
- \_\_\_ 6. Orthopedic ally Handicapped
- \_\_\_ 7. Other Health handicapped
- \_\_\_ 8. Severe Behavior Handicapped
- \_\_\_ 9. Developmentally handicapped(DH)
- \_\_\_ 10. Specific Learning Disability (LD)
- \_\_\_ 11. Non-Specific Handicapped(Ages 3-5)

#### **RACE:**

**Hispanic / Latino** \_\_\_Yes \_\_\_NO (A person of Cuban, Mexican, Puerto Rican, South or Central American, Or other Spanish Culture or origin, regardless of race.)

\_\_\_ **American Indian or Alaska Native**

\_\_\_ **Asian**

\_\_\_ **Black or African American**

\_\_\_ **Native Hawaiian or Other Pacific Islander**

\_\_\_ **White**

\_\_\_ **Other**

#### **CITIZENSHIP:**

- \_\_\_ United States Citizen
- \_\_\_ Exchanged Student
- \_\_\_ Other/Non U.S. Citizen





**MEDICAL INFORMATION THE SCHOOL SHOULD KNOW IMMEDIATELY**

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**IF YOU CAN NOT BE REACHED WHOM SHALL WE CALL IN CASE OF AN EMERGENCY?**

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

PHYSICIAN: \_\_\_\_\_

PHONE: \_\_\_\_\_

I hereby state that the information I provided on this form is true to the best of my knowledge.

\_\_\_\_\_  
Signature

Revised 05/2011

**CLAYMONT HIGH SCHOOL**

**Proof of Custody Questionnaire**

With whom is the student residing?

\_\_\_\_ Parent/or Guardian with Custody\* \_\_\_\_\_

\_\_\_\_ \*\*Non-custodial relative \* \_\_\_\_\_

\_\_\_\_ \*\*Non-custodial/Non-relative\* \_\_\_\_\_

\_\_\_\_ \*\*Foster Family\* \_\_\_\_\_

\_\_\_\_ \*\*Other\* \_\_\_\_\_

\_\_\_\_ \*\*Non-parent with Custody\* \_\_\_\_\_

\*\* Please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\* Signature of Adult Required on Appropriate Line

**Court Documents are required as proof of custody.**

If not a legal resident of the Claymont City School District

1. Do you plan to file for legal change of custody? \_\_\_\_\_
  - a. If yes, have you submitted a letter from an attorney verifying the process has been initiated? \_\_\_\_\_
  - b. Date submitted \_\_\_\_/\_\_\_\_/\_\_\_\_
  - c. Deadline for submission of court document (60 days) \_\_\_\_/\_\_\_\_/\_\_\_\_
  - d. First day of attendance \_\_\_\_/\_\_\_\_/\_\_\_\_
  
2. Are you applying for the "Grandparent Clause?"
  - a. Receipt of letter from other district \_\_\_\_/\_\_\_\_/\_\_\_\_
  - b. Action by Claymont Board \_\_\_\_/\_\_\_\_/\_\_\_\_
  - c. First day of attendance \_\_\_\_/\_\_\_\_/\_\_\_\_
  
3. Are you requesting to be admitted as a tuition student? \_\_\_\_\_
  - a. Letter of request submitted \_\_\_\_/\_\_\_\_/\_\_\_\_
  - b. Approved/denied by Superintendent \_\_\_\_/\_\_\_\_/\_\_\_\_
  - c. First day of attendance \_\_\_\_/\_\_\_\_/\_\_\_\_

*Continued on back side*

Does the child live with a non-parent who has legal custody?

1. If yes, when was the custody changed? \_\_\_/\_\_\_/\_\_\_
2. Name (address also if out-of-state) of school district where parent lived when custody was changed \_\_\_\_\_

- 
3. Court document for change of custody must be provided.

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Person Completing this Questionnaire

Date

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Administrator Reviewing this Questionnaire

Date

Claymont City Schools  
Home Language Survey

Date \_\_\_\_\_

Name of Student \_\_\_\_\_  
Family Name
First Name
Middle I.

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month
Day
Year
City
State
Country

Name of Parent/Guardian \_\_\_\_\_  
Family Name
First Name

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**For Parents/Guardians:**

Please answer the following questions:

1. What language did your son/daughter speak when he/she first learned to talk? \_\_\_\_\_
2. What language does your son/daughter use most frequently at home? \_\_\_\_\_
3. What language do you use most frequently to your son/daughter? \_\_\_\_\_
4. What language do the adults at home most often speak? \_\_\_\_\_
5. How long has your son/daughter attended school in the United States? \_\_\_\_\_

**For School District Personnel:**

If the answer to any of the first four questions above is a language other than English, indicate the student's native/home language in EMIS Student Data Element (G-1270), and proceed to assess the student's English language proficiency.

INITIAL ENGLISH LANGUAGE ASSESSMENT

**Communication Skill**

**Proficiency Level**

Listening	_____	Pre-functional	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Speaking	_____	Pre-functional	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Reading	_____	Pre-functional	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Writing	_____	Pre-functional	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Comprehension*	_____	Pre-functional	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Composite**	_____	Pre-functional	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient

\*The Comprehension level is derived from Listening and Reading

\*\*The Composite level is derived from Listening, Speaking, Reading, Writing and Comprehension

Assessment instrument(s) used: \_\_\_\_\_

Student is LEP? \_\_\_\_\_ Yes \_\_\_\_\_ No

Indicate the student's status as LEP or not LEP in EMIS Student Data Element (G-1230)

If student has been in U.S. schools for less than three years, is the student eligible for extended accommodations for statewide academic assessments? \_\_\_\_\_ Yes \_\_\_\_\_ No





## Claymont City Schools

### Technology, Computer Network and Internet User Acceptable Use Policy (AUP)

#### Introduction

*Claymont City Schools* is pleased to make available access to interconnected computer systems within the district and the worldwide network to provide various means of accessing educational materials. The following Acceptable Use Policy is created to ensure that the technology available through *Claymont City Schools* provides a safe learning environment for our staff and students.

This policy is reviewed and updated yearly to remain current with changes in federal and state legislation as well as technology enhancements and is reviewed with students as part of the student handbook.

The signed application for network and Internet privilege is signed only once and remains on file throughout the student or staff's duration at Claymont. A signed application is required for use of the schools computer and networking equipment. If you do not want your student to have access to these resources, you must submit in writing a request for no computer privileges.

#### Policy Purpose

The purpose of this policy is to ensure school-level compliance with policies and guidelines concerning the use of Claymont's technology equipment for educational purposes. All activities that use our computer systems, whether they are during or after school, are covered by this policy. Use of a personal computing device follows the same guidelines as a school computer when connected to the network.

#### Policy Changes

The school policies may be altered by action of the Claymont Technology Steering Committee and with approval of the Claymont City School Board of Education at any of its regular meetings.

#### Network & Internet Use Agreement

Network and Internet access is coordinated through a complex association of government agencies, regional, and state networks. The smooth operation of the network relies upon the proper conduct of the end users who must take responsibility for appropriate ethical and legal use of this access. Internet access for *Claymont City Schools* is a privilege, not a right. The signatures on the ***Application for Network Privileges & Internet Access*** are legally binding and indicate the parties who signed have read the terms and conditions carefully and understand their significance. (Appendix A for students and Appendix B for staff)

#### Network and Internet Terms & Conditions

1. Respect and protect your privacy and the privacy of others.
  - a. Use only assigned accounts.
  - b. Avoid sharing of account information and/or passwords to others or leaving an account logged in for others to access.
  - c. Do not reveal or distribute private information about yourself or that of others.

2. Respect and protect the integrity, availability, and security of all electronic resources.
  - a. Report security risks or violations to a teacher or technology coordinator.
  - b. Any files introduced into the network must be for educational assignments and approved by staff. This includes but is not limited to downloads, CDs, flash drives, cell phones, or videotapes.
  - c. Any use of the network in such a way that would disrupt the uptime or speed of the network by other users, such as, intentional deletion of files, using bandwidth for non-educational purposes, or introduction of computer viruses, is prohibited.
  - d. Any installation of software which introduces spyware or malware onto computers, or other software which reduces the efficiency of the computer is discouraged.
  - e. Intruding into the networks, computers or phones of others, without permission by the owner is discouraged.
  - f. Protect network use. Do not destroy, remove, or damage data, equipment, or resources not belonging to the owner.
3. Respect and protect the intellectual property of others.
  - a. Written permission of the copyright owner must be obtained if intellectual property is protected by copyright laws.
  - b. Plagiarizing in any form is prohibited.
4. Respect and practice the principles of community.
  - a. Avoid language that is offensive to others.
  - b. Streaming audio or video for non-educational purposes is prohibited.
  - c. The network or educational software cannot be used for commercial activities, entertainment, advertisement, or political lobbying.
  - d. Any use of messaging software that disrupts the classroom, including but not limited to, Instant Messaging, phone text messaging, or any other methods that send messages.
  - e. Avoid intentionally accessing, transmitting, copying or creating material that is illegal.
  - f. Avoid misrepresentation by impersonating anyone, such as, the creation of an online profile.
  - g. Ask permission to post photos or videos of faculty or fellow students.

### **Consequences of Inappropriate Internet & Network Behavior**

The staff or student's Building Principal, in conjunction with the District's Technology Coordinator, will reprimand any staff or student who does not comply with Policies and Guidelines accordingly. User infractions may result in appropriate disciplinary action as outlined in the disciplinary policy for the building. Unauthorized use of the network, intentional deletion or damage to files and data belonging to other users, or copyright violations may be termed theft or destruction of school property. In addition to appropriate disciplinary actions, the user may be responsible for any charges, costs, liabilities or damages incurred by *Claymont City Schools*. This includes (but is not limited to) the cost of time to repair the damaged component, cost of parts to repair the component, or the cost of outside companies to repair damaged components. The district will cooperate fully with local, state, or federal officials in any investigation concerning or relating to any illegal activities conducted using the school's technology. Penalties imposed under applicable federal, state, or local laws will supersede any local penalties.

### **Websites Created at School**

The Board of Education authorizes the creation of web sites by employees and students of the School District to be published on the World Wide Web. School web sites must be located on the District-affiliated servers. The creation of web sites by students must be done under supervision of a professional staff member. These web sites must reflect the professional image of the District, its employees, and students. The content of all pages must be school appropriate and consistent with the School District's Mission Statement. Under no circumstances is a web site to be used for commercial purposes or to provide financial gains for any individual. All links included on the pages must also meet the above criteria.

When the website content includes a photograph or information relating to a student, the creator will abide by the provisions of the Claymont Board of Education policy 8330 – Student Records.

## **Copyright- Multi-Media Material**

*Claymont City Schools* encourages the use of electronic media in student projects but the following guidelines must be followed to be acceptable.

- a. Any audio or video clip, whether downloaded or copied from home, must be limited to 10% or 30 seconds for music or 10% or 3 minutes for video, whichever is less. If a longer duration is needed, you must have permission by the owner to redistribute.
- b. Any inclusion of copied Internet material, such as, text, video, audio, or images, must include proper credit to the copyright holder or the work is subject to student rules regarding plagiarism.

## **Use of Email**

*Claymont City Schools* recognizes the efficiencies that can result from the use of technology and authorizes the establishment of an E-mail system for District use. Each person using email must read the following policy and agree, in writing, to the terms.

- a. System users shall have no expectation of privacy in their E-mail communications, and shall not have the ability to deny access to their E-mail by the Superintendent.
- b. The District shall issue a password to each person authorized to use the E-mail system.
- c. E-mail should only be used to support the goals of the district and carry out a person's job description. It should not be used for unsolicited mass mailings.

## **Use of Personal Electronic Devices**

Students and staff are allowed to use personally owned devices to access the school's wireless network to support education. Anyone who brings their own electronic device is personally responsible for the equipment and must follow guidelines outlined in Appendix D.

It is strongly recommended that staff use the district's wireless access when educating students, keeping in compliance with the Children's Internet Protection Act.

Student use of the devices in the classroom is based on the teacher's decision on each given day. The administration reserves the right to determine if the device is being used inappropriately and may take disciplinary action, including but limited to, confiscation of the device. For this policy, a personal electronic device is defined as a device capable of communication with other electronic devices. Use of any of these devices for non-scholastic communication during school hours is strictly prohibited.

## **Use of Portable Equipment**

While we encourage equipment use, persons must take responsibility for the care of the equipment while in their possession. Equipment damaged or lost by students or staff could result in financial liability for the repair or replacement costs.

**Student Use-** Equipment can only be used for school assignments and must be returned by the next school day. Equipment check-out and check-in procedures must be followed.

**Staff Use-** Staff may use school equipment outside of the building, after getting administrative approval, but must follow building check-out procedures. All portable equipment must be returned at the end of the school year for updates and inventory. If equipment is needed over the summer, it can be signed out, but no equipment is to be taken for the entire summer. If staff members have equipment in their possession that students use for assignments, they are responsible for documenting equipment loan information, (serial number, tag number, and student information) and should inspect the equipment for damage upon return.

## **Privacy**

Network and Internet access is provided as a tool for your education. *Claymont City Schools* reserves the right to monitor, inspect, copy, review and store any and all usage of the computer network and Internet access and any information created, transmitted or received in connection with such usage. All such

information files shall be and remain the property of *Claymont City Schools* and no user shall have any expectation of privacy regarding such materials.

A supervising teacher or administrator may authorize the release of directory information, as defined by Ohio law, for internal administrative purposes or approved educational projects and activities.

### **Student Safety and Children's Internet Protection Act**

Each year the District provides education for students regarding online safety and appropriate use within the District's board-approved curriculum which includes, but is not limited to, appropriate online behavior, interacting with other individuals on social networking sites and in chat rooms, and cyber bullying awareness and response.

In compliance with the Children's Internet Protection Act, *Claymont City Schools* employs the use of filtering software to prevent children from accessing offensive sites. (See Appendix C for Filtering Guidelines) Yet in a global network, there is the potential to access controversial materials. If a person finds an offensive site, he or she should report this to a teacher or the Technology Coordinator. The district can then prevent this site from being accessed again. In the event the filtering software is unsuccessful, the District will not be held liable for access to inappropriate content.

### **Online Communities and Cyber Bullying**

Cyber bullying is the act of harassment that takes place via some method of technological media. It is unacceptable to use computing devices or services to propagate abuse that is insulting, rude, abusive, or offensive. Please refer to *Policy 5517.01 Aggressive Behavior Toward Students* for a complete definition of harassment. If a student is being harassed and the effect carries over into school, it does not matter where the offense originates, it is in our best interests to take appropriate action.

### **Important User Information**

Students are asked to clean their directories at the end of each school year. Files in student accounts will be automatically purged upon graduation.

Files in staff accounts will be evaluated in July of every year. Staff will be notified with a list of files that have been inactive or unused for an entire school year. At that time a person has 10 days to respond to the notification or the files will be removed.

### **Fees**

Claymont City Schools will not charge any fees to access the Internet services. However, it is possible that users of the system may subscribe to services, which a fee is charged while using the schools equipment. The user is solely responsible for any charges, costs, liabilities or damages caused by the way the account holder uses his/her account.

### **District Liabilities**

*Claymont City Schools* makes no warranties of any kind, whether expressed or implied, for the service it is providing. Claymont City Schools will not be responsible for any damages users may suffer. This includes loss of data resulting from delays, non-deliveries, mis-deliveries, or service interruptions caused by its own negligence or user errors or omissions. Use of any information obtained via the Internet is at the user's risk. *Claymont City Schools* specifically denies any responsibility for the accuracy or quality of information obtained through its services. The user and parent(s) or guardian(s) agree to cooperate with the school in the event of an investigation of a person's use of computer access to the network, whether that use is on a school computer or on another's outside the district's network.

A copy of these forms can be found at: [www.claymontschools.org/district/technology.html](http://www.claymontschools.org/district/technology.html)

Claymont City Schools  
Technology, Computer Network, and Internet  
*USER ACCEPTABLE USE POLICY SIGNED AGREEMENT (AUP)*

(Appendix A)

**STUDENT AGREEMENT**

Every student, regardless of age, must read and sign this agreement to gain user privileges on the district's computer network and obtain a student login account.

I have read, understand, and agree to abide by the terms of the Acceptable Use Policy of the *Claymont School District*. Should I commit any violation or in any way misuse my access to the district's computer network and the internet, I understand and agree that my access privilege may be revoked and other disciplinary action may be taken against me.

\_\_\_\_\_  
Name (PRINT CLEARLY)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State & Zip

User (place an "X" in the appropriate box):     I am a student 18 or older     I am a student under 18

If I am signing this agreement when I am under the age of 18, I understand that when I turn 18 this agreement will continue to be in full force and effect, and I will continue to abide by the Acceptable Use Policy.

**PARENT'S OR GUARDIAN'S AGREEMENT**

Every student, regardless of age, must have a parent or guardian read and sign below to obtain privileges or regain denied privileges in the case of a violation of the User Acceptable Use Policy.

As the parent or legal guardian of the above student, I have read, understand and agree that my child or ward shall comply with the terms of the *Claymont School District's* Acceptable Use Policy for the student's access to the school district's computer network and the internet. I understand that access is being provided to the students for educational purposes only. However, I also understand that it is impossible for the school to restrict access to all offensive and controversial materials and understand my child's or ward's responsibility for abiding by the policy. I am therefore signing this agreement and agree to indemnify and hold harmless the school, the school district and the data acquisition site that provides the opportunity to the school district for computer network and internet access against all claims, damages, losses and costs, of whatever kind, that may result from my child's or ward's use of his or her access to such networks or his or her violation of the Acceptable Use and Internet Safety Policy. Further, I accept full responsibility for supervision of my child's or ward's use of his or her access account if and when such access is not in the school setting. I hereby give permission for my child or ward to use the building-approved account to access the school district's computer network and the internet.

\_\_\_\_\_  
Parent's/Guardian's Name (PRINT CLEARLY)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# CLAYMONT CITY SCHOOLS

201 N. Third St.

Dennison, OH 44621

(740) 922-5478

School \_\_\_\_\_ Student's Name \_\_\_\_\_  
Grade \_\_\_\_\_ Address \_\_\_\_\_  
Teacher \_\_\_\_\_ Zip \_\_\_\_\_  
Home Telephone (\_\_\_\_) \_\_\_\_\_

**Purpose** – To enable parents and guardians to authorize the provision of emergency treatment for children who become ill while under school authority, when parents or guardians cannot be reached.

## Residential Parent or Guardian:

Mother's Name \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Zip \_\_\_\_\_

Father's Name \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Zip \_\_\_\_\_

Guardian's Name \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Zip \_\_\_\_\_

## Relatives and/or Childcare Provider:

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Cell phone (\_\_\_\_) \_\_\_\_\_

**PART I OR II MUST ALSO BE COMPLETED**  
(See reverse side)

**PART I: TO GRANT CONSENT**

I hereby give consent for the following medical care providers and local hospital to be called:

Physician \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Dentist \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Medical Specialist \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Local Hospital \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by the above-named doctors, or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity of such surgery, are obtained prior to the performance of such surgery.

Facts concerning the child's medical history, including allergies, medications being taken, and any physical impairments to which a physician should be alerted:

\_\_\_\_\_  
\_\_\_\_\_

This information will be shared with the appropriate school personnel as needed.

Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

**PART II: REFUSAL TO CONSENT**

I do NOT give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action:

\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_