

**USD 377 ATCHISON COUNTY COMMUNITY SCHOOLS
PARENT/GUARDIAN CONSENT AND RECEIPT OF HANDBOOK FORM**

Name of Student: _____	Birth Date: _____
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MEDICAL EMERGENCY PERMISSION	
<input type="checkbox"/> Yes <input type="checkbox"/> No	In case of emergency, illness or accident, to the student named above, and in the event the parents cannot be reached, I give permission to call the family physician and permission to treat the child and permission to consult with another physician if the family physician cannot be reached.
Initial: _____	

SCHOOL-SPONSORED TRIP PERMISSION NOTICE	
<input type="checkbox"/> Yes <input type="checkbox"/> No	The above named student has permission to participate in all school-sponsored academic, athletic and extra-curricular trips.
Initial: _____	

PERMISSION TO PUBLISH	
<input type="checkbox"/> Yes <input type="checkbox"/> No	I give permission for the school to publish my child's name and picture in school publications, on the district website or in local newspapers.
Initial: _____	

DIRECTORY INFORMATION NOTICE	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Regarding student records, federal law requires that "directory information" on my child be released by the District to anyone who requests it unless I object in writing to the release of any or all of this information. This objection must be filed within ten school days of the first day of classes. Directory information ordinarily includes the following:
Initial: _____	
<input type="checkbox"/> Student's Name <input type="checkbox"/> Address and telephone number <input type="checkbox"/> Dates of attendance	<input type="checkbox"/> Date and place of birth <input type="checkbox"/> Photographs <input type="checkbox"/> Awards received in school
In exercising my right to limit release of this information, I have marked the items of directory information listed above that I wish the District to withhold about my child.	

RECEIPT OF HANDBOOK	
I hereby acknowledge receipt of the student handbook/school calendar for the current school year (distributed at enrollment.) I understand that the handbook/calendar/August newsletter contains the following issues:	
<ul style="list-style-type: none"> ❖ Nondiscrimination ❖ Family Education Right to Privacy Act ❖ Directory Information ❖ Drug Free Schools and Communities Policy ❖ Inoculations ❖ Availability of Asbestos Plan 	
As a condition of enrollment, I am required to abide by all regulations contained in this handbook, as well as other policies established by the board of education. I may contact the principal or counselor with questions pertaining to this handbook.	
If I choose not to abide by the regulations contained in this handbook, any other policy established by the Board Of Education, or any reasonable request by school authorities, disciplinary action may be imposed, up to and including expulsion from school.	
Signature of Student: _____	Date: _____

Date: _____	_____ Signature of Parent/Guardian _____ Printed Name of Parent/Guardian
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