To accompany the	Yellow Emergency Form		
*******	********	******	
YES NO	Our residence has in	ternet access for com	puter use.
defined as full-time		Air Force, Marine Cor	ne Armed Forces? (Active Duty ps, or Coast Guard. This also unch?
		NON	
	HHOLDING OF PERMISS		
	•		one and email information for a Education Foundation use.
********	**********	************	*******
ANNUAL NOTIFIC PROCEDURES	CATION AND ACKNOWL	EDGEMENT OF DIST	RICT POLICIES AND
•	ative I have so designated	•	to be released to me or my spo y ambulance to the nearest hos
	es/illnesses occurring at s	•	ent medical/dental coverage for nat I may voluntarily purchase a
	•	•	l, dental, ambulance, or other h ccur as a result of such illness o
I have been provid Handbook.	ded a copy of the school h	nandbook and Annual	Parent Notification / District
I have read and ur	nderstand the school and	district's policies on:	
Procedures (Due I	•	hool Records and Ach	e Education / Uniform Complair nievement / Alternative Schools ance Options / Asbestos
Please check box	below to acknowledge th	e following statements	S.
_	ceive the 'Annual Notifica forward. Hard copies car		District Handbook' electronically quest.
Signature			
	dian		Date
Student Name:		Teacher:	Grade:

Student Name:	Teac	her:	G	rade: