

MORRISONVILLE JR./SR. HIGH SCHOOL

REGISTRATION ACKNOWLEDGEMENTS AND CONSENTS

Student's Name _____ Grade _____

I acknowledge that I have received a packet containing the following documents or have read them from the District's web page for 2008-09 registration.

	Free/Reduced Lunch Information and Application Form. (Parents must submit a completed application or a Direct Eligibility Certificate in order to qualify.)
	Textbook Rental and Student Fee Waiver Information and Application Form. (Parents must submit application form in order to qualify.)
	Policy for Medicine Distribution and Medication Administration/Self-Administration Consent Form. (Parents must complete consent form if your child needs to take any medication at school)
	Network Administration Policy/Acceptable Use Policy (A user agreement form must be signed by the student and parent/guardian.)
	Asbestos Report and Management Plan Notice
	Head Lice Information
	Family Educational Rights and Privacy Act Information (2 pages: FERPA and PPRA)
	Illinois School Student Records Act Notice
	Notice for Directory Information (Parents must file a written request to withhold directory information by military recruiters or institutes of higher learning)
	National Standardized Test Scores Inclusion on Student's Transcript (Permission Consent Below)
	Crisis Reunification Procedures (Parents must complete Student Pick-Up Authorization for Reunification Process Form as well as Emergency Weather Planning Forms)
	<i>All Kids</i> Healthcare Program Information
	Student Accident Insurance Information

I give my consent for following items. (Please initial each item to which you give your consent and the sign at the bottom of the page. If more information is required, please contact your building principal.)

	I understand that Morrisonville Unit School District #1 participates in the Illinois Textbook Loan Program. (If an IL Textbook Loan text is lost or damaged it must be replaced by the student.)
	I give permission to allow my child's name and photograph to be posted on the District website, in the local newspapers, district newsletter and school bulletin boards.
	I wish to receive notification of the use of pesticides in my child's school. I understand that notification will be given two days prior to application or as soon before as is practicable.
	I give Morrisonville High School permission to include national standardized test scores as part of my student's official transcript.
	I give consent for my child to participate with his/her class on walking field trips planned and supervised by school staff with the understanding that school personnel will make every effort to arrange for a safe walk route and supervision to and from the school site.
	I agree to allow my child permission to charge up to (3) regular student meals in the event his/her lunch account has been depleted of funds.

I verify that I have received the above-named documents and that I have initialed the programs in which I wish my child to participate for the _____ school year.

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Note: In addition to this page, the following forms must be completed separately and returned to the school office:
 Registration/Health Information/Emergency Treatment Form
 Authorization for Electronic Network Access
 Motor Vehicle Registration (HS student drivers only)