Parents/Guardians--Please print this slip and send back with your student

1-- I acknowledge receipt of the Batcheller School Parent/Student Handbook. I understand and consent to the responsibilities outlined in the District's Student Code of Conduct. I also understand and agree that my child_____shall be held accountable for the behavior and consequences outlined in this code of conduct at school and at school-sponsored activities, including travel on the bus, and for any school-related misconduct, regardless of time or location. I understand that any student who violates this code of conduct shall be subject to disciplinary action, up to and including suspension, expulsion, and referral for criminal prosecutions for violations of the law. I have read, understand, and agree to the playground rules and safety guidelines in this handbook.

_____/_____/_____

Parent/Guardian Signature **Print Name** **Date**

2-- I have also reviewed the contents and implications of the Student and Parent/Guardian Internet Access Policies with my child _____. I hereby consent to the provisions of the Winchester School District relative to Internet access as they affect my child's use of District facilities and equipment for Internet and E-mail access, including my child's liabilities for loss of privileges and disciplinary actions as a result of failing to comply with all provisions as contained in this handbook.

_____/_____/_____

Parent/Guardian Signature **Print Name** **Date**

3--There will be time when local newspaper representatives will visit our school to feature our students or the school community in a print article or photograph. In addition, sometimes teachers videotape lessons to be viewed by others to improve instructional practice. For permission or denial regarding your child being photographed, interviewed and/or videotaped, please indicate your preference.

____ I **do** give permission for my child _____to be interviewed, photographed, and videotaped for school/public relation purposes or instructional improvement ONLY.

____ I **do not** give permission for my child _____to be interviewed, photographed, and videotaped.

_____/_____/_____

Parent/Guardian Signature **Print Name** **Date**

4—I have been offered insurance through the district—a copy of this offer which is contained in this handbook.

_____I **decline** to purchase this insurance.

_____I **will purchase** this insurance as indicated in writing by my submission of appropriate forms.

READ ONLY--NOTICE OF INTENT TO RELEASE DIRECTORY UPON REQUEST

The following types of information contained in the education record of an enrolled student are hereby designated as **directory information** and may be disclosed by school officials without prior consent of a parent or eligible student except by letter of refusal as indicated below.

The student's name, the student's address, the student's telephone listing, the student's electronic mail address, the student's photograph, the student's place and date of birth, the student's dates of attendance, the student's grade level, the student's participation in officially recognized activities and sports, the student's weight and height as a member of an athletic team, and honors and awards received by the student.

A parent or eligible student may refuse to allow school officials to designate any or all of the above listed types of information as directory information. Any such refusal must be made in writing to and received by the Superintendent of Schools, no later than October 1, 2008. Send the letter of refusal to Mr. Blaise Salerno, 30 Elm Street, Winsted, CT 06098.