

ROE26 Alternative Programs/Safe School AGREEMENTS 2022-2023

Student Name:	Student Date of Birth:	Parent Name:
Student Agreement		
agree to pursue an education	by attending and completing the classes pr	rescribed in my educational plan. I agree to attend
no less than the minimum atte	endance requirements. I understand that I a	am responsible for my success. I have been
informed that I may be immed	liately dismissed from the program if I enga	ge in vandalism, physical assault or intimidation,
fighting, possession of drugs o	r alcohol, and/or any other behavior which	disrupts the educational process. I also
understand that I may be refer	rred back to the home district if I do not adh	nere to school handbook. I agree to work with
	endance and to make good academic progre	
Parent/Guardian Agreement		
understand that my child has	enrolled in a Safe School and/or Academy I	Program operated by Regional Office of Education
#26. My child understands and	d will abide by attendance policy and acade	mic policies. My child will follow the student
guidelines and behavior expec	tations outlined in the handbook and apper	ndix. I further agree to working with staff to
promote my child's academic	success. I agree to be in communication wit	h ROYALS staff as necessary for my child's success.
understand that my child ma	y be referred back to the home district shou	uld my child not adhere to the handbook.
		Parent Initials:
Handbook		
have received and read the h	andbook and appendix for ROE26 Academy	/Safe School Program. I agree to abide by the
guidelines set forth. I understa	and the disciplinary and/or legal consequence	ces that may occur.
		Student Initials:
		Parent Initials:
Counseling/Social Work Ackno	owledgement	
acknowledge that my child w	ill meet with the school counselor and/or so	chool social worker a minimum of one time at the
onset of his/her enrollment to	an ROE26 alternative program. I understan	d that my child may voluntarily visit with the
school counselor and/or social	worker as part of the program goals.	Student Initials:
		Parent Initials:
Social Emotional Screening		
,	complete a Social Emotional Screener with Rial and emotional difficulties and prevent fu	ROYALS staff. I understand that the goal is to
dentity students at-risk of soc	iai and emotional difficulties and prevent id	Student Initials:
		Parent Initials:
Consent to Release Information	on	
give consent for ROE26 ROYA	LS and my child's home school district to re	elease information to each other regarding above
_	nation should thusly benefit the student's e	
		Parent Initials:

(OVER)

Emergency Hospital Consent

I authorize the responding paramedics to transport my child to the nearest medical facility which will in the opinion of the paramedics
on the scene, provide the care needed by my child. I further authorize Ombudsmen or its representatives to call 911 and summon
emergency medical help when, in the judgment of said personnel, it is in the best interest of my child. If medical care is necessary, I
authorize treatment of my child. I also agree to pay any medical cost associated with transportation and/or treatment of my child.

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	Parent Initials:
Bullying and Cyber-Bullying Bullying on the basis of actual or perceived race, color, religion mental disability, military status, sexual orientation, gender-remilitary service, association with a person or group with one or characteristics, or any other distinguishing characteristic is prohandbook and will adhere to the "no bullying" policy.	lated identity or expression, unfavorable discharge from r more of the aforementioned actual or perceived
Media The Regional Office of Education #26 Academy Programs and Sa information regarding schools. ROE26 also hosts several internet may be included in pictures or articles featuring the school and photographed or interviewed by the newspaper/TV/media and administered by the Regional Office of Education #26 and ROE2	et websites and social media sites. At various times your child activities. I hereby give permission for my child to be to have my child's image used as part of the internet sites
Field Trips I grant my permission to ROE26 Academies and Safe Schools for during his/her enrollment.	r my son/daughter to attend school sponsored field trips Parent Initials:
Internet/Acceptable Use Policy (AUP) I understand and will abide by the AUP presented in the handborn my access privileges may be revoked, and school disciplinary accusing the ROE26's Internet connect and having access to public agents from any claim and damages arising from my use.	tion and/or legal action may be taken. In consideration for
I have read the AUP. I understand that access is designed for edeprecautions to eliminate controversial material. However, I also all controversial and inappropriate materials. I will hold harmless caused by materials or software obtained via the network. I accuse in not in the school setting. I understand that I am responsi have discussed the terms of the AUP with my child. I hereby recommendations are supported by the setting of the AUP with my child.	recognize that it is impossible for ROE26 to restrict access to ss the ROE26 and its employees and agents for any harm tept full responsibility for supervision if and when my child's ble for any costs related to a broken or damaged device. I
I understand and agree to the above statements: Student Signature: Parent Signature:	