



## ILLINI CENTRAL C.U.S.D #189

208 N. West Avenue, Mason City, IL 62664

Mr. Mike Ward, Superintendent

[www.illinicentral.org](http://www.illinicentral.org)

Phone: (217) 482-5180

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Dr. Jennifer Durbin, MS/HS Principal

Mrs. Michelle Hellman, GS Principal

Mr. Kris Kloba, MS/HS Assistant Principal

Ms. Lori Avart, Special Education Coordinator

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### Therapy Dog Opt-Out

Illini Central Parents,

Illini Central has a wonderful resource to help support the social-emotional needs of our students, staff, and community. Kevin is a certified social-emotional/therapy dog. Due to the nature of his breed, he is hypoallergenic and does not produce dander. His gentle and loving demeanor, along with his extensive training, make him a wonderful added resource for our Illini Central community in relation to social-emotional needs. Kevin assists in building student relationships, enabling students to feel safe opening up to him and Mrs. Baugher. As great of a resource that Kevin is, we understand you may prefer your child not to interact with Kevin in a one-on-one environment. If you are unsure or have any question regarding Kevin and any interactions with students, please feel free to contact our school counselor, Annie Baugher at [abaugher@illinicentral.org](mailto:abaugher@illinicentral.org). If at this time you **DO NOT** want your child to have direct personal interaction with Kevin, please complete the form below and return it to the counseling office. If this is the case, please remind your child that he/she cannot approach or interact with Kevin.

Sincerely,

Dr. Jennifer Durbin

Principal

ICMS/ICHS

[jdurbin@illinicentral.org](mailto:jdurbin@illinicentral.org)

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By completing the form below I understand that Kevin will be present in the building and in classrooms, but my child will not have direct contact with Kevin. I understand it is my responsibility to speak with my child and remind him/her to not interact with Kevin.

Student's Name (Printed) \_\_\_\_\_ Grade \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_