

**PAXTON CONSOLIDATED SCHOOLS  
2020-2021 STUDENT & PARENT/GUARDIAN ACKNOWLEDGEMENT FORM  
SEPARATE FORM REUIRED FOR EACH STUDENT**

**Please Print: STUDENT:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_

◆ **SCHOOL POLICIES** CAN BE FOUND AT: <http://www.paxtonschools.org>

◆ **STUDENT HANDBOOK:** I (We) have read the 2020-2021 Student Handbook for Paxton students as approved by the Paxton Consolidated Schools Board of Education and administration. The handbook can be found at <http://www.paxtonschools.org>  
We understand that these guidelines may not cover all incidents and that some situations may need to be handled by the administration on an individual basis. We also understand that we have the right based on the Student Discipline Act (sections 79-4, 170 to 79-4, 205 of the Nebraska statutes) to meet with the administration about an individual situation or problem.

◆ **SCHOOL TECHNOLOGY ACCOUNT:** Your signature below verifies your acceptance of the Paxton Consolidated Schools Technology System Agreement and the conditions outlined. By your signature, you acknowledge that you have read and retained the Paxton Consolidated Schools Technology System Use Rules and Agreement located in the Paxton Consolidated Schools Student Handbook. Your signature herein indicates that you are bound with said agreement.

◆ **INSURANCE: (check ONE)**

We have adequate insurance and DO NOT wish to participate in any of the policies offered.

We wish to participate with insurance policy offered (form available on website and enclosed in back-to-school mailing)

◆ **IMAGE RELEASE: (check ONE)** From time to time, we feature some of our students on our school's website, especially if your child is involved in extra-curricular activities. We need you to sign this form and check the appropriate box indicating yes that we can post your child's picture as well as to allow news and media when they do their school coverage; or no that you do not wish us to do so.

YES we authorize Paxton Consolidated Schools permission to post our child's picture/video AND first name on the school website as well to allow news and media coverage.

YES we authorize Paxton Consolidated Schools permission to post our child's picture/video WITHOUT first name on the school website as well as to allow news and media coverage.

NO we do not authorize photo/video release of our child.

◆ **CONCUSSION FORM:** I (We) have received a copy of the Concussion Protocol Form; and will comply by it.

◆ **SCHOOL COMPUTER LOAN AGREEMENT Gr 6-12:** I (We) acknowledge we have read the Computer Loan Agreement located within the Paxton Consolidated Schools student handbook and agree to comply with the Computer Loan Agreement. **The signature of both the student and parent/guardian are needed on this form for student to receive a school-issued digital device.**

◆ **DRUG-FREE SCHOOLS STATEMENT:** RECEIPT SHALL ALSO SERVE TO DEMONSTRATE THAT YOU AS PARENT OR GUARDIAN OR A STUDENT ATTENDING PAXTON CONSOLIDATE SCHOOLS HAVE RECEIVED NOTICE OF THE STANDARDS OF CONDUCT OF THIS DISTRICT EXPECTED OF STUDENTS CONCERNING THE ABSOLUTE PROHIBITION AGAINST THE UNLAWFUL POSSESSION, USE, OR DISTRIBUTION OF ILLICIT DRUGS AND ALCOHOL ON SCHOOL PREMISES OR AS A PART OF ANY OF THE SCHOOL'S ACTIVITIES AS DESCRIBED IN BOARD POLICY OR ADMINISTRATIVE REGULATION. THIS NOTICE IS BEING PROVIDED TO YOU PURSUANT TO THE SAFE AND DRUG-FREE SCHOOLS LAW AND 34C.F.R. PART 86, BOTH FEDERAL LEGAL REQUIREMENTS FOR THE DISTRICT TO OBTAIN FEDERAL FINANCIAL ASSISTANCE.

YOUR SIGNATURE ON THIS RECEIPT ACKNOWLEDGES THAT YOU AND YOUR CHILD OR CHILDREN WHO ARE STUDENTS ATTENDING THIS DISTRICT FULLY UNDERSTAND THE DISTRICT'S POSITION ABSOLUTELY PROHIBITING THE UNLAWFUL POSSESSION, USE, OR DISTRIBUTION OF ILLICIT DRUGS AND THE POSSESSION, USE, OR DISTRIBUTION OF ALCOHOL OR TOBACOO ON SCHOOL PREMISES OR AS A PART OF THE SCHOOL'S ACTIVITIES AS HEREIN ABOVE DESCRIBED AND THAT COMPLIANCE WITH THESE STANDARDS CAN AND WILL RESULT IN PUNITIVE MEASURES BEING TAKEN AGAINST ANY STUDENT FAILING TO COMPLY WITH THESE STANDARDS.

With your **signature** below you are acknowledging you have read all the information on this page and any documentation that is pertinent. Your signature below states that you have read and agree to comply with each of the forms, documents and policies outlined above. **Please return this signed form to the Paxton School Office by August 13, 2020.**

**Student:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_ **Date signed:** \_\_\_\_\_

**Note: Paper copies of any of the forms, documents and policies outlined above are available at the school office upon request.**