

San Dieguito Union High School District
ANNUAL NOTIFICATION 2015 - 2016
Signature Page

PARENT/GUARDIAN ACKNOWLEDGEMENT OF SPECIFIC SCHOOL ACTIVITIES:

Education Code Section (EC §48982) **REQUIRES** parent/guardian to sign and return this acknowledgement to the school attendance office indicating you have been informed of your rights and have been provided all other mandatory information necessary for your student to attend school. However, your signature does not authorize consent to participation in any particular program that has either been given or withheld.

I hereby acknowledge receipt of information regarding my rights, responsibilities and protections. I also attest, under penalty of perjury, that I am a resident of the District, as previously verified, or attend under an approved Inter-District Agreement.

Student Name (print): _____ Birthdate: _____ Grade: _____

Parent/Guardian Name (print): _____ Date: _____

Required Parent/Guardian Signature: _____

MEDICAL INFORMATION (EC §49423):

Name of Student's Physician/Clinic: _____

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|------|---------|
| Name | Address |
|------|---------|

Phone # of Physician/Clinic _____

I give my consent for school personnel to communicate with my son/daughter's physician:

NO ____ YES ____

Does the student take continuing medication: NO ____ YES ____

Will it be necessary to take medication at school: NO ____ YES ____

If student requires administration of medication during school hours: Parent must **complete** and deliver to the school's Health Office the "**Authorization for Administration of Medication**" **form signed by parent/guardian and physician.** The form is available at:

<http://www.sduhsd.net/downloads/>

DIRECTORY INFORMATION:

The District makes student directory information available in accordance with state and federal laws. This means that each student's name, birthdate, birthplace, address, telephone number major course of study, participation in school activities, dates of attendance, awards and previous school attendance may be released in accordance with board policy. In addition, height and weight of athletes may be made available. Appropriate directory information may be provided to any agency or person except private, profit-making organizations. Names and addresses of seniors or terminating students may be given to public or private schools, colleges, employers and military recruiters.

Upon written request from the parent of a student age 17 or younger, the District will withhold directory information about the student. If the student is 18 or older or enrolled in an institution of post-secondary instruction and makes a written request, the pupil's request to deny access to directory information will be honored. Requests must be submitted within 30 calendar days of the receipt of this information.

If you **DO NOT** elect to allow directory information to be released to any outside agency, including the military, please sign below and return to the school attendance office within 30 days. Parent signature will prohibit the District from providing directory information to the military, news media, employers, schools, parent-teacher organizations and similar parties.

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| <p>OPTIONAL SIGNATURE: Please check if you <u>DO NOT</u> want information regarding your student released to:</p> <p>_____ Military _____ Colleges & Universities _____ Employers</p> <p>_____ Internet (photos and interviews on school's web site regarding school activities/athletics)</p> <p>_____ News Media (photos and/or interviews regarding school activities/athletics)</p> <p>_____ Yearbook ("no release" indicates that you do not want your student's photo in yearbook)</p> |
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RETURN THIS SIGNED PAGE TO YOUR STUDENT'S SCHOOL