

**BANDERA INDEPENDENT SCHOOL DISTRICT
2014-2015 PARENT AND STUDENT ACKNOWLEDGEMENT FORM**

I have either received or reviewed on-line a copy of the documents listed below. I understand that these documents contain information that my child and I may need during the year. We are responsible for reading, understanding and abiding by the information presented in these documents. These documents are available on-line at www.banderaisd.net or in hard copy at any school office or at the BISD Administration Office.

I understand and agree that my child shall be held accountable for the behavior and consequences outlined in these documents at school and at school-sponsored and school-related activities, including school-sponsored travel, and for any related misconduct.

I understand and consent to the responsibilities outlined in the documents listed below.

**2014-2015 Student Handbook
2014-2015 Student Code of Conduct
2014-2015 Attendance Warning Notice Acknowledgement
2014-2015 Bus Rider Safety Handbook
2014-2015 Electronic Use Policy and Handbook
2014-2015 Student Directory Information Acknowledgement
2014-2015 Health Services Handbook**

**I understand and consent to the responsibilities outlined in the document listed below if participating in any extra-curricular activity like a club, organization, or sport.
2014-2015 Extracurricular Code of Conduct**

Student Name (please print)

Grade and Campus

Student Signature

Date

Parent/Guardian Signature

Date

**Alternative to Corporal Punishment - Middle School and High School ONLY
[Corporal Punishment is not administered at the BISD elementary schools]**

A parent who refuses to have corporal punishment administered to his or her child may, annually, submit a written notice to the Principal within five days of enrollment. The notice should state the objection to corporal punishment and should be signed by the parent/guardian. The acknowledgement below contains such a statement and may be used for this notice. In lieu of corporal punishment, the student may be removed to in-school suspension, suspended from school, or assigned to Saturday school at administrator's discretion. Please check your your response below.

I DO _____ DO NOT _____

give the school permission to administer corporal punishment to my child
within the guidelines set forth in the policy.

Student Name (please print)

Grade and Campus

Parent/Guardian Signature

Date