



2018-2019 Permission Slip

Student name: _____ Date of birth: _____

Trips will be taken within the local area, which will be of interest and educational value to the students. By signing below, you understand that the trips will be made by school vehicles driven by Jackson County Intermediate School District (JCISD) drivers and/or JCISD staff. The trips are under the direct supervision of your child's teachers and staff.

Do you wish for your student to participate in all excursions taken by his/her classroom?

Yes **No**

JCISD uses photographs and videos at their discretion for educational purposes which will assist the professional staff in determining an appropriate educational program. Photographs are used in educational printed materials and the district's various websites that share information on student programs.

It is okay for JCISD to obtain the following of my student for educational use, including film productions, bulletin boards & Facebook, related to JCISD programs:

Photos: **Yes** **No**

Videos **Yes** **No**

Yearbook **Yes** **No**

First Name as caption on JCISD websites, such as the Torrant/Kit Young Facebook page, related to JCISD programs **Yes** **No**

Swim program opt out (**OPTIONAL**): Sign **only** if you **DO NOT** want your child to participate in the Torrant adaptive/therapy swim program. I **DO NOT** want my student to participate in the adaptive nor therapy swim program at the Lyle Torrant Center. Parent signature: _____

JCISD has standing orders to be used with any student when necessary. The standing orders are:

- Give oxygen and/or use suction as needed in an emergency
- Use Caladryl Clear Lotion as needed for insect stings.
- Use Benadryl Liquid and EpiPen for acute allergic reaction.
- Use sunscreen and/or bugspray as needed.
- Use Solarcaine Aloe Extra Burn Relief for sunburns.
- Use Calmoseptine Ointment as needed for skin irritation/breakdown.
- School nurses may trim student's fingernails as needed.

By signing below, you request that the standing orders above be used for your child when needed.

These permissions will remain in effect for the 2018-2019 school year.

Parent Signature: _____

Date: _____