

Drug Testing Consent Forms

STUDENT AND PARENT/GUARDIAN CONSENT TO PERFORM URINALYSIS FOR DRUG TESTING

School (Please Print) MADISONVILLE NORTH HOPKINS HIGH SCHOOL

Student Athlete Name (Please Print) _____

Parent/Guardian Name (Please Print) _____

We have read and understand the Hopkins County School Board Policy 09.423 dealing with *Use of Alcohol, Drug and other Controlled Substances*. We understand that as a participant in groups checked below student is subject to the terms of Board policy 09.423. We consent to the means and methods used to test under the policy and waive any rights to nondisclosure of test records/information to the extent that disclosure is required under the program and policy. We understand by signing this consent form student agrees to be bound by the terms and conditions contained in Hopkins County Board Policy 09.423.

Check all that apply:

- Athlete
- Extracurricular Activity Participant
- Driver and/or Parked on School Property
- Volunteer Pool

SIGNATURES:

Student _____ Date _____

Parent/Guardian _____ Date _____

HIGHER EDUCATION/MILITARY PERMIT

Dear Parents/Guardians:

According to the Elementary and Secondary Education Act, section 9528, schools must release students' names, addresses and phone numbers to higher education institutions and military recruiters if they request it without notifying parents first. This letter is to inform you of your right to prior consent. In other words, parents have the right to refuse having this information about their child released.

PLEASE SELECT ONE OF THE OPTIONS BELOW:

Student's Name _____ Grade _____

I DO NOT want my child's name, address and phone number released to institutions of higher education and military recruiters.

Parent/Guardian Signature _____

Date _____

Student's Name _____ Grade _____

I DO want my child's name, address and phone number released to institutions of higher education and military recruiters.

Parent/Guardian Signature _____

Date _____

Publication Consent Form

PLEASE COMPLETE THIS FORM AND SUBMIT IT TO THE SCHOOL.

Dear Parent/Guardian:

At some time during the school year, school/District personnel or other District-authorized persons may videotape or photograph classroom activities or special projects in which your child participates during or after the school day for public awareness or fund-raising purposes.

This form covers permission for the District to record and use the recorded image, voice, or work of the student (photographed, filmed, taped, or digitally recorded) for public awareness purposes, including publication on the school and/or District's web site and in school yearbooks.

Please review this form carefully, sign and date the form, and submit the form to the school annually.

As the parent(s)/guardians(s) of _____, I/we give the

Student's Name

School District permission to release my/our child's name,

District's Name

photograph, work, and/or audio/video reproduction for publication to the general public concerning school functions and activities, including academic and athletic activities.

Name of Parent(s)/Guardian(s) (Please print.) _____

Parent/Guardian's Signature

Date

NOTE: If the recorded image, voice, or work of a student is to be included in a publication as part of a commercial or for-profit fund-raising endeavor, affirmative authorization of the parent/guardian or eligible student must be obtained.



Home Language Survey

Student Name: _____ Parent Name: _____

Address:

School: _____ Grade: _____

1. What is the language most frequently spoken at home?

2. Which language did your child learn when he/she first began to talk?

3. What language does your child most frequently speak at home?

4. What language do you most frequently speak to your child?

Math Department Calculator Policy

The Math Department recommends that all students have TI-84 calculators for all math classes. If you have a TI-83 at home, it is acceptable. However, it cannot be upgraded which limits its effectiveness in the upper level courses. While we realize that this is a sizeable purchase (\$95 - \$150), this is a one-time purchase for your student's high school AND post-secondary careers. Please do not decide that bigger is better. We do not teach how to use the TI-Inspires (the one exception would be an Inspire with interchangeable keyboards) or TI-CAS calculators. Once your student has his/her own calculator, please make sure your student's name is permanently on the body and on the cover of the calculator.

As a result of this recommendation the following policies are being enacted for the classroom setting.

1. There will be some TI-84's in the classroom for student use during the class period.
2. Calculators may **NOT** be checked out for any reason from the classroom teacher nor will they be sent to the ICE room.
3. During test students will not be allowed to share calculators.
4. Depending on the concepts being tested, students may not be allowed to use calculators on parts or all of some tests. Students will be told in advance when this will be the case.
5. Students will be expected to show process on all open response portions of homework and tests. With no process very little credit will be given.
6. Homework involving calculators will be given and will **NOT** be excused due to a lack of the appropriate calculator. Please be aware that no extra in class time will be given to complete homework assignments.
7. There are smart phone apps for graphing calculators that can be downloaded that would help your students get the assigned homework completed. However, cell phones are **NOT** allowed to be used in the math classrooms.
8. Mr. Campbell, Youth Service Center, has a limited number of calculators that may be checked out for the school year.

Thank you for your cooperation in getting a calculator into every student's hands every day. The feedback from our students at all levels is that if the calculator becomes a daily tool they are much more able to handle the standardized tests that they face during their last years in school.