**PARENT**

**RECEIPT OF INFORMATION:**

Information to Parents Document

Policy on the Release of Children

Positive Guidance and Discipline Policy

Policy on Methods of Parental Notification

Policy on Communicable Disease Management

Expulsion Policy

Policy on the Use of Technology and Social Media

*I have read and received a copy of the information/policies listed above.*

|  |  |  |
| --- | --- | --- |
| Child(ren)’s Name: |  |  |
| Parent/Guardian’s Name: |  |  |
|  |  |  |
| Signature |  | Date |