| Emergency Information If information changes over the course of the year, contact the Main Office to ensure our records are up-to-date. | | | | | | | | |
|---|---|------------------|-------------------|--------------|-----------------|------------|--|--|
| Student Name | | | | | | | | |
| Address | | | | | | | | |
| Date of Birth | | / /20 | Current Grade | | Bus Number | | | |
| Mother/Guardia | Mother/Guardian Contact Information □ Check if this person should be called first | | | | | | | |
| P Name. | | | | | | | | |
| > Address: | | | | | | | | |
| > Home Phone: Work Phone: | | | | | | | | |
| Cell Phone: Email Address: | | | | | | | | |
| Father/ Guardian Contact Information □ Check if this person should be called first | | | | | | | | |
| > Name: | | | | | | | | |
| > Address: | | | | | | | | |
| > Home Ph | Home Phone: Work Phone: | | | | | | | |
| Cell Phone: Email Address: | | | | | | | | |
| • · | | • | ersons who will a | • | | r child if | | |
| you cannot be re | ached. | Please list them | | | m to be called. | | | |
| Name | | | | Relationship | | | | |
| Best phone # | | | | Alternate | | | | |
| | | |] | phone # | | | | |
| Name | | | 6 | Relationship | | | | |
| Best phone # | | | | Alternate | | | | |
| | | | 1 | ohone # | | | | |
| Medical Related | | | | | | | | |
| Allergies | | | | | | | | |
| Special information | | | | | | | | |
| Student's Physician | | | | | | | | |
| Physician's Telephone # | | | | | | | | |

I, the undersigned, do hereby authorize officials of the Lincoln Public Schools to contact and release my child to the persons named on the card, and do authorize the officials of the Lincoln Public Schools to treat my child as may be deemed necessary in an emergency.

Signature of parent or guardian: ______Date: _____Date: ______Date: _____Date: _____Date: _____Date: _____Date: ______Date: _____Date: ______Date: _____Date: ______Date: ______Date: ______Date: ______Date: ______Date: _____Date: ____Date: _____Date: _____Date: _

| Daily Dismissal Plan | | | | | | | | | | |
|--|-------------|---|------------------------|-------------------------|---------------------|--|--|--|--|--|
| If your child is taking the bus, write BUS. Include the bus number. | | | | | | | | | | |
| If your child is going to the YMCA, write YMCA. | | | | | | | | | | |
| | | | | | | | | | | |
| • If your child is parent pick up, write PICK UP. Identify the person who will sign your child out | | | | | | | | | | |
| and their relationship. That person must have a valid form of identification. | | | | | | | | | | |
| | | | | | | | | | | |
| If the information needs to change, please send in/drop off a note in the Main Office the morning of the | | | | | | | | | | |
| change. In unforeseen situations, call the Main Office before noon. | | | | | | | | | | |
| | | -, | | | | | | | | |
| Mondays | Tuesdays | | Wednesdays | Thursdays | Fridays | | | | | |
| Wondays | Tuesuuys | | Weanesdays | marsaays | Thays | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | Emor | ancy Dismissa | l Dlan | | | | | | |
| Emergency Dismissal Plan | | | | | | | | | | |
| The purpose of this section is to ensure your child will have a predetermined destination in the event of | | | | | | | | | | |
| an early dismissal due to inclement weather or other unforeseen circumstances. Please know it is your | | | | | | | | | | |
| responsibility to make sure your child clearly knows and understands where to go in case of an emergency dismissal. Please know that we are not able to contact parents individually should an | | | | | | | | | | |
| emergency dismiss | | | | | idually should an | | | | | |
| emergency dismissal occur. Be prepared and plan ahead. | | | | | | | | | | |
| In order to get the meet up to date information regarding the school sign up for the List Convertible LDC | | | | | | | | | | |
| In order to get the most up-to-date information regarding the school, sign up for the List Serv on the LPS website and make sure your email is up-to-date. Emergency announcements are also broadcast on | | | | | | | | | | |
| WPRO 630 AM, 92.3 FM; WJAR Channel 10; WPRI Channel 12 | | | | | | | | | | |
| In event of an | | Check <u>one</u> option: | | | | | | | | |
| | | □ Go home as usual following the Daily Dismissal Plan. | | | | | | | | |
| emergency early | | □ Go to the home of | | | | | | | | |
| dismissal, my child has been directed to: | | [□] Go to the nome of who lives at | | | | | | | | |
| | | which is an my child's normal bus route | | | | | | | | |
| | | which is on my child's normal bus route | | | | | | | | |
| | | □ Be picked up by This person will be sure to bring a valid form of identification | | | | | | | | |
| | | This person will be sure to bring a valid form of identification. | | | | | | | | |
| Student Handbook an | nd Behavio | r Code | | | | | | | | |
| The Student Handbook | | | le of Conduct have he | en emailed to you If | you would like to | | | | | |
| request a paper copy, | | - | | | | | | | | |
| | • | | | | | | | | | |
| Handbook and Discipline Code of Conduct with your student. Signing this document affirms that you have read each document and that your student agrees to adhere to the Student Handbook and the | | | | | | | | | | |
| Discipline Code of Cor | | ,, | | | | | | | | |
| Photo/ Video Release | | ee page 1 | 3 of the Student Hand | lbook. | | | | | | |
| Select one option | | 1 0 | | | | | | | | |
| □ I give permission to | the LPS to | use phot | os and videos that ma | y or may not include | my child's name, on | | | | | |
| its website, in other publications (including the Valley Breeze Newspaper and the Yearbook), and in other | | | | | | | | | | |
| forms of social media. | | | | | | | | | | |
| □ I do not give the LPS | | otos. I ui | nderstand that my chil | ld will be excluded fro | m the Yearbook, | | | | | |
| newspaper articles an | d slideshov | vs. | | | | | | | | |
| | | | | | | | | | | |