

Quincy Area Vocational Technical Center/
West Central Regional System #240
2018-2019 Parent/Guardian Permission Form

Student's Name _____

I hereby give my permission to Quincy Area Vocational Technical Center & the West Central Regional System #240 to provide the following services for my child:

Yes	No*	
		1. To participate in field trips taken by his/her class throughout the school year 2018-2019, including educational-related and recreational-related trips (for example, trips to public parks, swimming pools)
		2. To have photographs, videotapes or audiotapes of my son/daughter and/or me to be used for program documentation, news releases and training of personnel.
		3. To have photographs of my son/daughter on the district's website and/or other promotional materials.
		4. To have the following screenings: a) speech, b) vision, c) hearing
		5. To be provided professional medical emergency treatment in the event of accident, injury and/or illness.
		6. To be assessed for Talented and Gifted services, if deemed necessary.
		7. To participate in support groups if necessary.
		8. The Illinois State Board of Education's Textbook Loan Program provides funding to QAVTC for the purchase of secular textbooks and other educational materials for student use. In all likelihood, your son/daughter will at the same time have the opportunity to use these textbooks/materials. Your signature below indicates that you are requesting the loan of these secular textbooks and educational materials for use by your son/daughter. This request is required by the Illinois School Code, Section 5/18-17.

** A "No" response is a release of responsibility for the specific service unless the service is requested in writing at a later date.*

I have been provided a copy of the Quincy Area Vocational Technical Center handbook. I will become familiar with the policies and will read and discuss, as appropriate to the age of my child/children, the contents of the handbook.

Signature of Parent/Guardian _____ Date _____

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