

# APPLICATION for Additional Student Addendum to original Application



		Nick Name:
Gender: Male Female	e Birthdate:	Child # of
Church Affiliation:	Attends church:	Y N Years in Church School:
Years in Public School:	Place of Birth:	
for what reason?		
	Previous Schools	
Last elementary School attend	ded	Grade
	Questions for Parents	
	rvice from or been involved in: (check all	that apply)
Has student ever received ser	-	
	e 1 Reading Tutor Speed	ch Therapy Counseling
Special Education Titl		

### CONTINUING PHOTO RELEASE CONSENT

I give permission for photographs of my student to be used in school publications, public relations material, and web site display.

This consent shall remain in continuous effect until revoked in writing and delivered to the above named school.

I do not want my child's photographs used in any school publications



## Computer and Internet Acceptable Use Policy



The schools of the Seventh-day Adventist education system are pleased to offer their students access to a computer network and the internet. To gain access to the Internet, the legal parent and student sign and return this form to the school.

The Internet is a powerful resource for expanding the educational experience of each student. Access to the Internet will enable students to explore thousands of libraries, databases, and bulletin boards while exchanging messages with internet users throughout the world. Unfortunately, it is true that some materials accessible via the Internet may contain items that are illegal, defamatory, inaccurate or offensive. We believe, however, that the benefits to students in the form of information resources and opportunities for collaboration exceed any disadvantages and, therefore, support the school's choosing to make the Internet available to our students.

School computers are for educational purposes only. Since the network is provided for students to conduct research and communicate with others, access is given to students who agree to act in a considerate and responsible manner. Parental permission is required. Access is a privilege-not a right. Access entails responsibility. School staff may review files and communications to maintain system integrity and ensure that users are using the system responsibly.

Students will adhere to Christian principles and will:

- · Be responsible and courteous in all communications
- · Be responsible with all computer hardware and software
- · Keep their passwords to themselves
- · Respect the confidentiality of folders, work and files of others
- · Learn about and observe copyright laws
- Comply with the Blodgett View Computer and Internet Acceptable Use Policy
- · Not attempt to access or alter unauthorized areas of a computer system

Any activity not in compliance with these rules may result in a loss of access as well as other disciplinary or legal action.

Additional regulations may be applied throughout the year. Should this occur, information about it will be communicated to the student as well as the parents.

### **INTERNET ACCESS AGREEMENT**

### STUDENT

I understand that the Internet can connect me to much useful information stored on computers around the world.

While I have access to the internet provided by the school

- I will use it only for educational purposes.
- I will not look at or participate in anything that is illegal, dangerous, offensive or opposed to the Adventist values of this school.

If I accidentally come across something that is illegal, dangerous or offensive, I will:

- $\Rightarrow$  Clear any offensive pictures or information from my screen; and
- $\Rightarrow$  Immediately, quietly, inform my teacher.
- $\Rightarrow$  I will not reveal home addresses or phone numbers mine or anyone elses
- $\Rightarrow$  I will not use the Intenet to annoy or offend anyone else
- ⇒ I understand that if the school decides I have broken these rules, appropriate action will be taken. Any activity not in compliance with these rules may result in a loss of access as well as other disciplinary or legal action.

Student's Name:\_\_\_\_\_\_School Blodgett View Christian School\_

Student's Signature:\_\_\_\_\_ Date: \_\_\_\_\_

### PARENT OR GUARDIAN

I understand that the Internet can provide students with valuable learning experiences.

I understand that the school provides a filtering system on computers connected to the Internet and that every reasonable effort will be made to provide supervision. I also understand that the school cannot completely control what is accessed and that a very small part of that information can be illegal, dangerous or offensive.

I accept that, while teachers will always exercise their duty of care, protection against exposure to harmful information must depend finally upon responsible use by students.

I believe \_\_\_\_\_\_\_(Name of Student) understands this responsibility, and I hereby give my permission for him/her to access the Internet under the school rules. I understand that students breaking these rules will be subject to appropriate action by the school. Any activity not in compliance with these rules may result in a loss of access as well as other disciplinary or legal action.

Parent or Guardian Name (printed): \_\_\_\_\_

Parent or Guardian's Signature:\_\_\_\_\_\_Date: \_\_\_\_\_



### **Consent Form** PERMISSION FOR MEDICAL TREATMENT, PARTICIPATION IN ACTIVITIES, TRAVEL, AND RELEASE FORM



Blodgett View Christian School

I/We the undersigned parent(s) or legal guardian(s) of \_\_\_\_\_\_(minor "child hereby permit, consent and release as follows:

I. Consent to any needed emergency medical treatment as a result of accident or sickness. The teacher in charge, designated driver or any of their assistants acting at their direction shall have authority to obtain such emergency medical assistance for the child and transport the child as is necessary. Authority and permission to any x-ray examination, anesthetic, medical or surgical diagnoses or treatment and hospital service that may be rendered to the child is also granted to the medical care providers. I/We will be contacted as soon as reasonably possible regarding the medical emergency.

It is further understood that this consent is given in advance of any specific diagnosis or treatment which might be required and is given to authorize medical personnel and school personnel to exercise their best judgment as to the requirements of such diagnosis or treatment.

	The child is covered by health care insurance as follows: Insurance Company Name:
	Name of Policy Holder:
	Policy Number

The child is not covered by health care insurance.

### II. Field Trips

When parental notification has been provided I/we give permission for the child to participate in the following off-campus, board-approved school events including, but not limited to Traditional Field Trips taking place during normal school hours.

For the child to participate in off-campus, board approved trips that fall outside of normal school hours or trips not described in Section A, additional parental approval at the time of the field trip will be required.

I/We give permission for the child to be transported to and from the above-described school trips by school board approved drivers.

After receiving notification of the field trip and I do not wish for my child to participate in that trip, I will give written notification to the principal of my wishes.

IV. I voluntarily release, indemnify and hold harmless the Montana Conference of Seventh-day Adventists, and its employees, representatives, agents, and affiliates from any claims, actions, losses, damages or liabilities (including reasonable attorney fees), for myself and for any occurrences or actions which result in injury, illness, accident or harm of any kind, now or in the future, to the named child while participating in the above-referenced events or activities, and from any act or omission of negligence in rendering or failing to render any type of emergency or medical service.

By signing this form, I declare that I have read and understand the contents of this form and agree to all the terms and conditions herein.

I declare that I am the legal parent and/or guardian of the child listed above and that I am authorized to sign this document. The information I have provided is truthful and accurate to the best of my knowledge. If any provisions of this document should be invalid or unenforceable, the remaining provisions shall continue to be fully effective.

V. We hereby authorize any hospital, physician, or other person who has attended or examined the minor to furnish to Adventist Risk Management, Inc. or its representative any and all information with respect to any illness, medical history, consultation, prescriptions or treatment, and copies of all hospital or medical records. A photo static copy of this authorization shall be considered as effective and valid as the original.

Parent/Legal Guardian

Date

Date

Parent/Legal Guardian

**Emergency Contact Information:** 

	Name and Phone Numbers		
Mother:			
Home:	Cell:	Work:	
Father:			
Home:	Cell:	Work:	
Physician:		Phone	
Other:			
Home:	Cell:	Work:	

4/2/2023



# Blodgett View Christian Schoool Student Pledge & Parent Contract

### STUDENT'S PLEDGE

### Spiritual:

- 1. I am open to learning about God as revealed in the Bible
- 2. I will show reverence and actively participate in all spiritual activities and programs
- 3. I am willing to pursue a personal relationship with Jesus Christ

### Academic:

- 1. I will take responsibility for completing and turning in my assignments on time.
- 2. I will strive to do my best each day
- 3. If I am absent I will make up my assignments
- 4. I will come to class with all necessary books and materials ready to work.
- 5. I will be attentive to my teacher and use my time wisely.

### Behavioral:

- 1. I will honor and show respect to those God has put in authority over me.
- 2. I will learn and follow all school rules.
- 3. I will make sure that my teacher knows where I am at all times by staying in a supervised area or by having permission to be elsewhere
- 4. I will follow the golden rule-"In everything do to others what you would have them do to you..." Matthew 7:12
- 5. I will be truthful and honest in all my words and actions
- 6. I will be a good example to other students by using positive words and actions.
- 7. I will avoid actions, words and situations by using positive words and actions.
- 8. I will not use profane, obscene, or demeaning language, gestures, or symbols.
- 9. I will follow the dress code.
- 10. I will act responsibly to keep my books and school property in good condition.

Handbook: I have read the handbook

I understand that my attendance at Blodgett View Christian School is conditional upon keeping my pledge. If I make choices contrary to this pledge, I will actively cooperate with the redemptive discipline process of this school, or I will be ineligible to attend.

Student Signature	Date
Parent Signature	Date

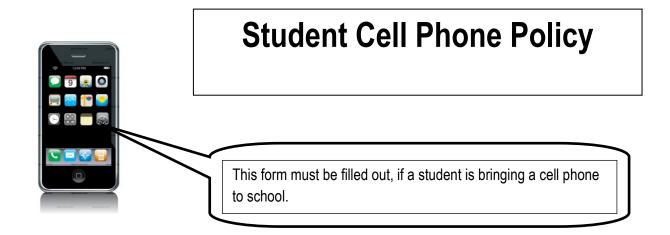
### Parent Contract

I have read the Student Pledge and handbook and am in agreement with the mission statement, guiding principles, code of ethics and regulations of the school and will work with my student to uphold this. I pledge myself to work with the school not only to meet these goals, but to give effective direction to my child's diet, rest and schedule to maximize the educational experience. My financial obligation is clearly understood and I agree to pay my child's account each month, unless I arrange otherwise with the financial committee in advance. As a parent I understand that I am welcome to volunteer and encouraged to participate in school activities and functions.

 Parent's Signature
 Date

 Parent's Signature
 Date

Blodgett View Christian School



# Cell Phone Policy

Students are not to have cell phones during the school day, or on field trips. Any students bringing cell phones to school must turn them in when they arrive to school and pick them up at the end of the day. Should a student have a cell phone that they did not turn in, the phone will be confiscated and the consequences will be:

1st Offense:	The cell phone will be taken away and the student will be given a warning and reminder from the administration that they must remember to turn in their cell phone each morning. It will be returned at the end of the school day.
2nd Offense:	The cell phone will be taken away and will only be returned when a parent comes in with the student to talk to the administration.
Further Offenses:	Consequences for any further offences will be decided by the administration.

**Cell phone use in the van or any vehicle used for school functions:** The use of cell phones or any other electronic devices on the bus are a privilege which students can lose should they share with others, play it out loud or distract the driver. Inappropriate use of any cell phone may result in losing the privilege of being able to bring the cell phone to school. We have read & understand the cell phone policy.

Parent Signature:	Date:
Parent Phone #:	
Student Signature:	Date:
Student Cell Phone #:	



Records - Email add	lress:		
Name of Previous Sch	ool		
Address			
City	State	Zip	
	Name of Previous Sch Address	Records - Email address: Name of Previous School Address	Records - Email address: Name of Previous School Address

#### **Re: Request for Transcript**

Dear Registrar:

Please send a transcript as soon as possible of all grade, credits, and health records through date of withdrawal to the address or email below for:

Student Name Grade Date of Birth

Parent Signature

According to the Final Regulations—Family Education Rights and Privacy Act (Buckley Amendments), dated June 17, 1976, it is no longer necessary to obtain written consent to release school records. It states that school officials of other schools in school systems in which the student may intend to enroll may receive a student's record without a written consent for such release.

Date

Please send student's records to: email: info@blodgettview.org or send to

Blodgett View Christian School 119 West Bridge Road Hamilton, Montana 59840