

Cleburne County Schools 2023-2024

Code of Student Conduct Notice of Receipt

Student Name: _____ Grade: _____

School: _____ Homeroom Teacher: _____

It is the intent of the Cleburne County Board of Education that each student and his/her parent/guardian receive a copy of the Cleburne County Board of Education Code of Student Conduct. The faculty within each school is charged by the Cleburne County Board of Education to review the Code of Student Conduct with the student body. By signing this form, you are verifying receipt of the Cleburne County Code of Student Conduct.

Code of Student Conduct - I acknowledge that I have received a copy of the Cleburne County Code of Student Conduct that has been adopted by the Cleburne County Board of Education.

Bus Safety/Student Transportation - I acknowledge that I have received information concerning bus safety and student transportation. Refer to **pages 14-15**.

Special Education - I acknowledge that I have received information concerning the availability of Special Education Services for students enrolled in Cleburne County Schools. Refer to **pages 15-17**.

Mental Health Services - I acknowledge that I have received information about the Mental Health Services Annual Notification. Refer to **pages 26-27**.

Textbooks - I acknowledge that I have received information concerning the care of state-owned textbooks. Refer to **page 28**.

Over-the-Counter Sunscreen - I acknowledge that over-the-counter sunscreen may be applied by a school board employee. Refer to **page 45**.

Child Nutrition Program (CNP)-I acknowledge that I have received the information regarding the Child Nutrition Program's Charged Lunch Policy. Refer to **pages 50-52**.

Internet Use - I understand that if I object to my child using the Internet and/or e-mail, I shall place written Objections on file with the school at the time of the student's enrollment or any time thereafter. Refer to **pages 53-54**

FERPA - I acknowledge that I have received information regarding the Family Education Rights Privacy Act. Refer to **pages 55-56**.

Directory Information - I understand that if I object to the disclosure of any or all of the items specified as directory information, I shall place written objections on file with the school at the time of the student's enrollment or any time thereafter. Directory Information is explained on **page 56**.

Data Governance - I acknowledge that I have received information regarding the Data Governance Policy and Use of Student Data. Refer to **pages 56-57**.

My signature acknowledges receipt of Cleburne County Code of Student Conduct and individual school sections, which includes Bus Safety/Transportation, Special Education Information, Mental Health Services, Textbook Rules and Regulations, Over-the-Counter Sunscreen, CNP, Internet Use, FERPA, Release of Directory Information, and Data Governance.

Student Signature _____ Date _____

Parent/Guardian Name (Printed) _____

Parent/Guardian Signature _____ Date _____