

Parental Assurances

I understand that if my student is enrolled in the Houston County Board of Education's Work-Based Learning (WBL) or Youth Apprenticeship (YAP) Program he/she will be released from school prior to regular dismissal in order to work an equal number of hours on a worksite. I acknowledge that the WBL/YAP program is a semester-long course and, once enrolled, my student must remain for the duration of that time.

I assume full responsibility for my student upon dismissal from school, including days when my student is not required to be at the worksite.

I accept responsibility for the safety of my student while he/she is traveling to and from school, the worksite, and his/her home.

I agree that my student, and any person transporting my student, should be covered by automobile insurance. The Houston County School System, nor any agent of, does not bear liability in my student's transportation.

I understand that my student may be photographed while on the worksite and I grant permission for photographs and/or videos of my student to be taken by either school system personnel or media representatives.

I will allow the school system the right to use and/or reproduce photographs, video, likenesses, or the voice of my student in any legal manner and for the internal/external promotional and informational activities of Houston County Schools. This includes area newspapers, local television stations, and system publications. I waive any and all present or future compensation and the right to the use of the above stated materials for these promotional and educational purposes.*

I acknowledge that my student, if 16 or 17 years old, may not work in any of the 17 occupations deemed too hazardous by the Department of Labor. (See handbook.)

I understand that it may be necessary for the WBL/YAP Coordinator to discuss with an employer some of the following items related to my student's education: career goals, skills, attendance, grades, punctuality, proficiencies, quality and quantity of work, and hours.

I agree to maintain confidentiality at the worksite. I will not discuss any matter relating to my student's work with anyone, except proper school/business authorities.

I understand that failure to follow all agreements could result in my student's dismissal from the WBL/YAP program.

I will make any work-related inquiries about my student to the WBL/YAP Coordinator rather than to the employer.

I agree to encourage my student to carry out his/her duties effectively at both the school and place of employment.

I have read the Work-Based Learning Handbook and agree to all guidelines set forth by the Houston County School System.

do not want my student's image used for promotional purposes. _____ (initial, if desired)

Liability Release

I give my student, _____, permission to participate in the Houston County School System's Work-Based Learning Program or Youth Apprenticeship Program

By giving permission, I hereby release and hold harmless the Houston County Board of Education, its members, agents, and employees from any and all liability that might arise out of my student's participation in this activity.

If my student needs immediate medical attention, the Houston County Board of Education, or any agent of it, has my permission to seek medical attention.

I agree to adhere to all terms and conditions as described above in the Parental Assurances.

Parent Signature

Date

Parent Name, printed

For optional use

Automobile Accident Insurance

Check one:

- My student does **not** drive; therefore, does not have auto insurance.
- My student is covered under the following insurance policy provider:

Provider _____

Policy Number _____

Health Insurance

Check one:

- My student is covered by health insurance purchased through the school.
- My student is covered by health insurance through the following provider:

Provider _____

Policy Number _____

Address _____