

Block #

Blanche Ely High School
Information & Emergency Card

Legal Name of Student

Last Name: - _____
First Name: - _____
Middle: - _____
Cell Phone: - _____
Email Address: - _____
Computer at Home (Y/N): - _____
Printer at Home (Y/N): - _____
Internet Access at Home (Y/N): - _____

Address

Address Line #1: - _____
Address Line #2: - _____
City: - _____
Zip: - _____

FSI #: _____
Birthday: - _____

Mother/Guardian

Last Name: - _____
First Name: - _____
Home Phone: - _____
Work Phone: - _____
Cell Phone: - _____
Email Address: - _____

Family Doctor

Name: - _____
Phone: - _____

Please list any Special Health Concerns below {Respiratory ailments, animal allergies, plant allergies, food allergies, diabetes, etc}

1. _____
2. _____
3. _____

In case of an emergency, 911 will be called and your child will be taken to the nearest hospital if deemed necessary.

Student Signature: _____

Date: - _____

Parent/Guardian Signature: - _____

Date: - _____

Parent/Guardian Signature: - _____

Date: - _____

Father/Guardian

Last Name: - _____
First Name: - _____
Home Phone: - _____
Work Phone: - _____
Cell Phone: - _____
Email Address: - _____

Student may be released to (Please Check)

Both Parents: - _____
Mother: - _____
Father: - _____
Legal Guardian(s): - _____

In case of Emergency, name(s) of those who may be contacted if parents cannot be located

Name: - _____
Phone: - _____
Name: - _____
Phone: - _____
Name: - _____
Phone: - _____

Acknowledgement Form

Forms are due : -Friday August 10th, 2018 {Green Day}/Monday August 13th, 2018 {Orange Day}

I have received, reviewed, read and understand the content of the course description and syllabus found at the course website <http://www.elysciencecenter.com>.

Initials: - Student _____ Parent _____

I understand and acknowledge that the course will require computer use and internet access. Furthermore, in the event that there is no computer and/or internet access at current place of residence, that computers, with internet access, are available at the Media Center in the morning and during lunch hours.

Initials: - Student _____ Parent _____

I understand that the course involves group based assignments and that the consequences for partially complete or incomplete assignments can result in a zero for all members of the group.

Initials: - Student _____ Parent _____

I understand that, and acknowledge, the timeline for the completion of Science Fair Projects, mini-projects and other assignments may be found at <http://www.elysciencecenter.com>.

Initials: - Student _____ Parent _____

I understand that this course may involve the discussion of biomedical ethical issues facing medical professionals.

Initials: - Student _____ Parent _____

I have received, reviewed, read and understand the basic rules of the classroom, the Biology Bill of Rights, found at the course website <http://www.elysciencecenter.com>, and agree to adhere to those rules.

Initials: - Student _____ Parent _____

I have received, reviewed, read and agree to abide to the rules specified in the Student Lab Contract, found at the course website <http://www.elysciencecenter.com>, and that failure to follow those guidelines will result in reduction of grade, disciplinary action and possible exclusion from laboratory activities.

Initials: - Student _____ Parent _____

I am aware that the course is not limited to the material posted in the syllabus and/or course website. Furthermore, I am aware that additional material may be added at the instructor's discretion.

Initials: - Student _____ Parent _____

I have successfully completed and submitted an information and emergency card.

Initials: - Student _____ Parent _____

I am aware that student grades may be viewed online at <http://gradebook.browardschools.com/piv>

Initials: - Student _____ Parent _____

I am aware of the contents of the Student Code and Conduct Book, including but not limited to conduct policy, cell phone policy, technology use policy and consequences for any and all infractions, found at <http://www.browardschools.com/codeofconduct>.

Initials: - Student _____ Parent _____

Student Name Print: - _____

Student Signature: - _____ Date: - _____

Parent(s)/Guardian(s) Name Print: - _____

Parent(s)/Guardian(s) Signature: - _____ Date: - _____