



**UNION CITY
AREA SCHOOL DISTRICT
SIGNATURE/PERMISSION FORM
2020-2021**



Student's Name _____

Beginning of Day Teacher Name _____ Grade: _____

**Parents/Guardians are asked to sign below and return to your child's first Period/Block
(Middle/High School) or Elementary Teacher by Tuesday September 1st, 2020.**

1.) Parent/Student School District Handbook

I have read the Union City Area School District Parent/Student Handbook and I am aware and understand the rules, policies, and programs stated therein. I am aware there are new policies included in this handbook. Handbooks are also available on the District Website at www.ucasd.org.

Parent/Guardian Signature

Student Signature

Grade

2.) Videotaping/Photographing

My child may be videotaped/photographed during school activities. The images may be used in newsletters, the Union City Area School District Website, and local media outlets.

Parent/Guardian Signature

Student Signature

Grade

3.) Blackboard Connect System

I wish to be informed of school cancellations, delays, emergencies, and other activities via the Blackboard Connect System.

Parent/Guardian Signature

Phone Number

Alternate Number

Check if you would like to also receive text messages

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4.) Standing Medication Orders

I consent to the use of the listed over the counter medications for my child. They will only be administered as needed. Dosing may not exceed the manufacturer's recommended dosage.

Parent/Guardian Signature

Student Signature

Date

I have reviewed the listed medications and have listed any medications that I do not want my child to receive below.

5.) Fluoride Tablet Consent (Elementary Students Only)

By signing below, I give consent for my child to participate in the fluoride program at the Union City Elementary School.

Parent/Guardian Signature

Teacher/Grade

Date

6.) Medication Administration Consent Form Request

Please check the box below if you would like a Medication Administration Consent form sent home for your child to be given medication by a licensed prescriber during the school day.

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7.) No Internet Access

We do not have internet access at home, we are requesting all district forms be printed and sent home as hard copies.

Parent/Guardian Signature

Student Signature

Date