

**Holy Name School**  
**850 Pearce Street-Fall River, MA 02720-508-674-9131-Fax 508-679-0571**  
**Family and Emergency Information- 2016-2017 (updated annually)**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

(Last) (First) (MI)

Address \_\_\_\_\_

(No.) (Street) (City/Town) (State) (Zip)

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Social Security Number (optional) \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Fax \_\_\_\_\_

Religion \_\_\_\_\_ Parish \_\_\_\_\_

City/Town of Parish \_\_\_\_\_

Student lives with \_\_\_\_\_ Guardian \_\_\_\_\_ (if applicable)

Race (optional-used to provide information for yearly statistical reports) \_\_\_\_\_

Father's Name \_\_\_\_\_

(First) (Last)

Religion \_\_\_\_\_

Parish \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Father's Occupation \_\_\_\_\_

Title or Position \_\_\_\_\_

Name of Company \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Mother's Name \_\_\_\_\_

(First) (Last)

Religion \_\_\_\_\_

Parish \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Title or Position \_\_\_\_\_

Name of Company \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

**Other siblings presently attending Holy Name School**

1. \_\_\_\_\_ Grade \_\_\_\_\_

2. \_\_\_\_\_ Grade \_\_\_\_\_

**List two available neighbors/relatives who could assume temporary care of your son/daughter should you be unavailable.**

Name \_\_\_\_\_

Relation \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Relation \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**(Over)**

**Are there any individuals who are restricted from picking up your son/daughter?** \_\_\_\_\_

Name of individual \_\_\_\_\_ Relationship to child \_\_\_\_\_

Official Parent Signature \_\_\_\_\_

**Health Information**

Health Update for \_\_\_\_\_ Grade \_\_\_\_\_

Please fill in the following information, which is important in case of serious illness or emergency. Please notify the school nurse of any changes in student health history or changes in medication.

Health Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

If allergies exist, please describe the specific allergic reaction:

Allergies to environment \_\_\_\_\_

Allergies to food \_\_\_\_\_

Allergies to medication \_\_\_\_\_

Vision problems \_\_\_\_\_ Glasses \_\_\_\_\_ Contacts \_\_\_\_\_

Hearing problems \_\_\_\_\_

Illness, injuries, or surgeries since last year? \_\_\_\_\_ If yes, please describe:

List all medication taken on a regular basis. List dosage, time and reason the medication is taken.

Medication	Dose	Time Taken	Reason for taking medication
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**Please refer to medication administration policy in the student handbook. Medication forms are needed for any medication given to students at school.**

Is there any additional information that the school nurse should be aware of? Please explain.

In case of accident or serious illness, and I am unable to be contacted, the school will call the physician named below and follow his instructions. If it is impossible to contact the physician, the school will make whatever arrangements are deemed necessary.

Name of Physician \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

I give permission for the school nurse to share pertinent medical information with the school staff.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Holy Name School**  
**2016-2017 School Year**  
**Public Relations, Family Directory, Communications Media Form**

The completion of this form will update our files for the **School Reach Telephone numbers, email addresses, public relation permission and family directory.**

In our effort to continue to improve communications between parents and school, Holy Name School will continue to use **School Reach** which is a telephone (email) broadcast system that will enable school personnel to notify all households and parents by phone (email) within minutes of an emergency or unplanned event that causes early dismissal, school cancellation or late start. The service may also be used from time-to-time to communicate general announcements or reminders.

We will continue to send our Tuesday letter and other informational flyers and sheets via email to those parents who would like to receive the information electronically. Other sheets that ask for a response will still be sent to all parents via the Tuesday envelope (field trip permission slips and the like) , and will also be available on our website- [www.hnsfr.org](http://www.hnsfr.org) Please seriously consider receiving the Tuesday letter via email, it helps both the school and the environment.

**School Reach Information:**

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

Telephone Number for School Reach calls: \_\_\_\_\_

Email Address (**Please Print**): \_\_\_\_\_

**Public Relations:**     **(Please Initial)**

\_\_\_\_\_ Yes, my child(ren)'s picture and/or work (**no names**) may be used in public relation materials- sent to the Anchor, Herald News, Our Website, Open House flyers, brochures and the like.

\_\_\_\_\_ No, my child(ren)'s picture and/or work (**no names**) may not be used in public relation materials- sent to the Anchor, Herald News, Our Website, Open House flyers, brochures and the like.

**Family Directory:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Child(ren)'s Name and Grade: \_\_\_\_\_

Returning Parents:     **(Please Initial)**

\_\_\_\_\_ Family Directory information is the same as last year- Child(ren)'s grade increased by one.

## Student Handbook Form

August, 2016

To: All parents and students of Holy Name School

From: Patricia M. Wardell Ed. D., Principal

The school administration retains the right to amend the handbook for just cause- Parents will be given prompt notification if changes are made.

Please sign indicating that you and your child have read and agree to be governed by this handbook. Students in Grade 3 through Grade 8 are also asked to sign this form. Thank you.

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**Parent/Guardian Signature**

**Date**

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**Student's Signature (Grades 3-8)**

**Date**

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**Student's Printed Name (ALL GRADES)**

**Date**

HOLY NAME SCHOOL  
850 PEARCE STREET  
FALL RIVER MASSACHUSETTS 02720  
PHONE: (508) 674-9131  
FAX: (508) 679-0571

**STUDENT'S PRESCRIPTION DRUG FORM**  
**(this must be completed by a physician)**

Date \_\_\_\_\_

I hereby request the nurse or school designee to see that my child,  
\_\_\_\_\_, receives the medication as prescribed by  
\_\_\_\_\_ for the period of \_\_\_\_\_ to  
\_\_\_\_\_.

Medication will be supplied by me in the original bottle and labeled with my child's name,  
name of medication, dosage, and time to be given.

Parent/Guardian Name (Please print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

-----  
The above-named child is under my care. Please give medication as prescribed by me -

Physician Name (Please print) \_\_\_\_\_

Physician Signature \_\_\_\_\_

Physician Address \_\_\_\_\_

Physician Phone Number \_\_\_\_\_

Name of medication \_\_\_\_\_

Duration of treatment \_\_\_\_\_

Diagnosis \_\_\_\_\_

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Holy Name School faculty feels it is important to know of students who have allergies, asthma, bee sting reactions, etc. For that reason, we want to make available to teachers and extended care staff a list of those with such a condition.

If you indicated on the school emergency form that your child has such a condition, please sign below indicating your permission for teachers to be aware of this in order that we may care for your child.

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Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

I hereby give the faculty of Holy Name School my permission to know of my child's  
medical condition. \_\_\_\_\_

Parent Signature

Date

**HOLY NAME SCHOOL  
EXTENDED CARE PERMISSION FORM  
SCHOOL YEAR 2016-2017**

Child's Name (Please Print) \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name and where parents can be reached between 2:30 and 5:30 p.m.:

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Name

Phone

---

Name

Phone

In the event that there is an emergency and you cannot be reached, please give the names and numbers of those people authorized to act in your absence. (Phone number needs to be where the person can be reached between 2:30 and 5:30 p.m.).

---

Name

Phone

---

Name

Phone

If no one listed above can be reached, I want my child to be brought to the hospital Emergency Room.

---

Parent/ Guardian Signature

Child's Physician (Please Print) \_\_\_\_\_

Physician Phone Number \_\_\_\_\_

Medical conditions, treatments and allergies we should be aware of: \_\_\_\_\_

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THIS PERSON(S) MAY NOT CALL FOR OR PICK UP MY CHILD(REN):

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Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Diocese of Fall River  
Holy Name School - Fall River  
Student**

**Computer System and Internet Acceptable Use Agreement**

School believes in the educational value of a computer system, the Internet and other technologies and recognizes their potential to support and enrich the curriculum and the student learning process. Our goal in providing a computer system, Internet access and other technologies is to promote educational excellence by facilitating resource sharing, innovation, and communication. This agreement would apply to the use of individually owned technologies in the form of personal communication devices when used on school grounds, at school functions, or for school-related purposes. This agreement would also apply to school owned technologies used outside of school. Use of the computer system, the Internet and other technologies is a privilege and access entails responsibility. School cannot prevent the availability of all inappropriate material on the Internet and other technologies. The use of the system, Internet and other technologies is subject to this acceptable use agreement and the rules, regulations and policies of school, the Department of Education and the Diocese of Fall River. School supports and respects each family's right to decide whether or not to apply for student computer system and Internet access and other technologies.

**Acceptable Use** The computer system, Internet access and other technologies has been established for an educational purpose. The user understands and agrees to the following:

- The use of the system, the Internet and other technologies must be consistent with and in support of the educational goals and objectives of school's curriculum and mission statement.
- The use of any material in violation of any law is prohibited. This includes, but is not limited to, copyrighted material, threatening or obscene material, or material protected by trademark or trade secret.
- The purchase or sale of any product or service, or any other commercial use, is prohibited.
- The listing of any advertisements or political materials is prohibited.
- Illegal activities of any kind are prohibited.

**Behavior** The user is expected to follow the generally accepted rules of computer use/Internet and other technologies etiquette. These rules include, but are not limited to, the following:

- Be polite. Always use the system in an ethical and respectful manner.
- Use appropriate language.
- User shall not reveal his/her name, home address, personal telephone number or any other personal information. User shall not reveal the personal information of any other person.
- User shall not disrupt or congest the computer system and/or Internet and/or other technologies in any manner.
- User shall not post anonymous messages.
- User shall not access, create, or distribute harassing, defaming, discriminatory, abusive, pornographic, fraudulent, obscene, racist, sexist, or threatening material or imagery.
- User shall not attempt to access blocked Internet sites.
- User shall only use school approved, licensed software and shall not use other programs or applications or download any information without the permission of the head of school.
- User shall not use the account or password (if the school assigns one) of another user or attempt to impersonate any other person.
- Confidential information should not be transmitted over the Internet or other technologies.
- User shall report any known or suspected misuse of the computer system and/or Internet and/or other technologies to the head of school. User shall not make any false complaints against any other user.
- User shall not access any "chat rooms" unless access has been approved by the head of school.

**NOTE:** *User may be given an e-mail account on the computer system. User shall not sign up for or access any e-mail service offered through the Internet or other technologies. School explicitly prohibits user from having any access to any e-mail services unless it has been specifically approved for a limited time and purpose by the head of school. If user has been granted approval to use e-mail, user understands that e-mail is not private. Any messages received that relate to or are in support of illegal activities, or*



*that are prohibited by this acceptable use agreement, or that make the user feel uncomfortable, shall be reported immediately to the head of school. User shall not send messages or use the computer system and/or Internet and/or other technologies in any manner that they would not be comfortable seeing reproduced publicly.*

**Services** School makes no warranties of any kind, whether express or implied, with respect to the use of the computer system and/or Internet and/or other technologies. Use of any information obtained through the use of the computer system and/or Internet and/or other technologies is at the user's own risk. School does not accept any responsibility for the accuracy of information obtained through the Internet or other technologies or for any damage user may suffer as a result of use of the computer system and/or Internet and/or other technologies including but not limited to, loss of data or interruption of service. School is not responsible for any financial obligations arising from the unauthorized use of the computer system and/or Internet and/or other technologies.

**Security** Security on any computer system or other technologies system is a high priority. If a user identifies a security problem, he/she shall notify the head of school immediately, without discussing it or showing it to another person. Any user identified as a security risk will be subject to disciplinary action, up to, and, including expulsion.

**Vandalism** Vandalism includes, but is not limited to, any attempt to harm or destroy the computer system, hardware, software, or data of school, another user or of any other agency or network that is connected through the Internet or any other technologies. Vandalism will subject the user to disciplinary action, up to, and, including expulsion, and may involve a referral to appropriate law enforcement agencies.

**Password** If the school uses passwords, user understands that the password chosen is for personal use only and shall not be shared with any person, except as directed by school. The password may be changed at any time according to the needs of school.

**Monitoring** The computer system and all communications and information transmitted by, received from, or stored in the computer system or other technologies, including e-mail, are the property of the school. User should not expect that his/her use of the computer system, Internet and other technologies is private. User has no expectation of privacy in any use of the Internet or computer system or other technologies. School has the right, at any time, to access, monitor, and disclose any and all use of the computer system and Internet and other technologies, including but not limited to, back-up files, e-mail messages and the transmission, receipt or storage of information in the computer or other technologies as it deems necessary. Monitoring will be conducted to ensure system integrity and to ensure that all users are using the computer system and Internet and other technologies responsibly and according to this acceptable use agreement. *User acknowledges and expressly consents to school accessing, monitoring, and disclosing his/her use of the computer system and/or Internet and/or other technologies at any time at school's discretion.*

**Termination** School has the sole right at any time, with or without cause, to terminate or suspend any user's access to, and use of, the computer system and/or the Internet and/or other technologies.

**Responsibility** User understands that the computer system, the Internet, and other technologies are to be used only for educational purposes. Any violation of the terms of this acceptable use agreement may result in loss of computer system, Internet privileges, and other technologies disciplinary action, up to, and, including expulsion, and appropriate legal action.

The Internet and/or any other technologies links users around the world and provides access to a wide variety of information and resources. The law affecting the Internet and/or other technologies is developing and changing daily. No acceptable use agreement could identify each and every inappropriate use of the computer system and/or Internet and/or other technologies through school property. School is the sole judge of whether the use of the computer system and/or Internet and/or other technologies is consistent with this acceptable use agreement and its decision shall be final. If user is unsure whether use of the computer system, Internet or other technologies is appropriate, user shall confer with the head of school. School reserves the right to modify this acceptable use agreement at any time in any manner.

I have read this acceptable use agreement in its entirety. In consideration of granting me access to the computer system and/or Internet and/or other technologies, I agree to be governed by the provisions of this agreement.

\_\_\_\_\_  
Print Name of User (Student)

\_\_\_\_\_  
User (Student) Signature

\_\_\_\_\_  
Date

**PARENT/GUARDIAN**

As the parent or guardian of this user I have read this acceptable use agreement and understand that access to, and utilization of, school computer system, Internet access and other technologies is intended and designed for educational purposes. I understand that security cannot be made perfect and it is possible that an industrious user could make use of the computer system and Internet and/or other technologies for inappropriate purposes. I will instruct my child regarding the acceptable behavior and restrictions as noted in this acceptable use agreement and any additional restrictions that I may have. **I have specifically reviewed the monitoring section of this acceptable use agreement and expressly consent to school's accessing, monitoring, and disclosing this child's use of the computer system and/or Internet and/or other technologies at any time at school's discretion.**

I agree to release and hold school, the Department of Education, and the Diocese of Fall River, and their agents, employees, and representatives forever harmless and indemnified against and from any and all liability, loss, damages, costs, claims, and/or causes of action, including any legal fees in defending such claim, resulting from or arising out of this student's use of, or inability to use, the computer system and/or Internet and/or other technologies.

I also agree to release and hold school, the Department of Education, and the Diocese of Fall River, and their agents, employees, and representatives forever harmless and indemnified against and from any and all claims or right of actions for damages which this student has or hereafter may acquire either before or after the student has reached majority, including but not limited to property damage, and including any legal fees in defending such claim, resulting from or arising out of this student's use of, or inability to use, the computer system and/or Internet and/or other technologies.

I have read this acceptable use agreement in its entirety. In consideration of granting this student access to the computer system and/or Internet and/or other technologies, I agree to be governed by the provisions of this agreement.

\_\_\_\_\_  
Print Name Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



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T: 508-674-9131 • F: 508-679-0571 • W: [www.holynamefr-school.com](http://www.holynamefr-school.com)  
Dr. Patricia M. Wardell, Principal  
Rev. Jay T. Maddock, Director

## Cell Phone Permission Form

Name Of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

I hereby give permission for my child to bring a cell phone to school. I understand that the cell phone will be collected in the morning, placed in a locked drawer in Mrs. Chippendale's office during the day, and returned to my child at 2:20 p.m. for dismissal. However, if my child is staying after school for any reason it will be held until my child leaves the premises for the day.

Signature of Parent/Guardian: \_\_\_\_\_

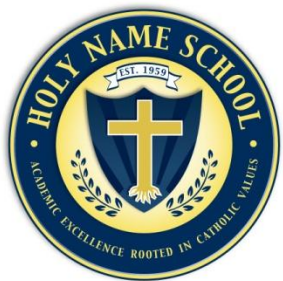
Printed Name of Parent/Guardian: \_\_\_\_\_

Holy Name School provides a Catholic education within an atmosphere of academic excellence. While providing Catholic values, students are challenged to do their best, to nurture their gifts and talents, and to develop curiosity, creativity, and critical thinking.

Holy Name School strives to produce confident, competent, and caring individuals who can work cooperatively, show respect for one another, and who demonstrate an understanding and appreciation of Catholic values.

Accredited by the New England Association of Schools and Colleges





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Holy Name School Pick-up Authorization Form

As an added security and safety measure, we are asking all Holy Name School parents to list individuals who may pick up your child. This list should coincide with those who have ID cards to pick up your child. This list will be used by your son/daughter's classroom teacher and the school's extended care personnel. Thank you.

Name:

Relation:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Student's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

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