



Dear Parents,

Welcome back! We're happy to have our students returning to school and a special welcome to the new students joining our community. We want your child to be happy, safe, and successful at St. Joan of Arc Catholic School.

We have attached a packet of permission slips that need to be read and appropriately signed for each family. This packet needs to be returned to the office or homeroom teacher on or before Monday, August 29, 2016.

## **Handbook Acknowledgement**

I have received and read the St. Joan of Arc School Parent/Student Handbook. We agree to abide by all policies in the 2016-17 Handbook.

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Parent Signature

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Date

ARCHDIOCESE OF BALTIMORE  
DIVISION OF CATHOLIC SCHOOLS  
320 Cathedral Street  
Baltimore, Maryland 21201

To: Parent(s)/Legal Guardians

Date: August 29, 2016—June 9, 2017

From: St. Joan of Arc  
(School)

Principal: Mrs. Virginia Bahr

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**Re: Field Trip Permission**

We have arranged for your child to participate in a planned field trip experience to:

Walking Field Trips for the 2016-17 School Year, Students walking to Church and the Church Hall, Students supervised on parish grounds.

The following provisions have been made and approved by the school:

Date: \_\_\_\_\_

Cost: \_\_\_\_\_

Departure Time: \_\_\_\_\_

Return Time: \_\_\_\_\_

Type of Transportation: Walking

Supervisory personnel: Teachers and School Staff

Dress requirements: \_\_\_\_\_

Meal arrangements \_\_\_\_\_

Emergency phone number to contact supervisory personnel: \_\_\_\_\_

Reasonable care will be taken by the supervisory personnel to insure the safety of your child. It is absolutely essential, however, that you, as parent or legal guardian, give written permission for your child to participate in this activity. Therefore, please sign the slip below and have your child return it to his/her teacher no later than \_\_\_\_\_. If your child does not return the signed slip, he/she will not be able to take advantage of this opportunity.

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(Please detach and return this portion to your child's teacher.)

**Release and Waiver**

In consideration of my child participating in this field trip experience, I hereby release St. Joan of Arc School, Archbishop William Lori, Roman Catholic Archbishop of Baltimore, a corporation sole, and their agents, employees and principals of and from any and all liability, claims, demands, actions, and a causes of actions whatsoever, arising out of or related to any loss, damage, or injury that may be sustained by my child or children. I hereby grant permission for my child, \_\_\_\_\_ to participate in the trip to \_\_\_\_\_

I acknowledge receipt of the information describing the details of the field trip experience.

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian phone number on day of trip: \_\_\_\_\_

(If applicable)

Medications(s) to be administered during the field trip: \_\_\_\_\_ Dosage: \_\_\_\_\_

Time dosage is to be administered: \_\_\_\_\_

I hereby authorize supervisory personnel to administer the indicated medication.

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



# St. Joan of Arc School Media Release Form

I hereby agree and give my permission for St. Joan of Arc School to record, film, photograph, audiotape, or videotape my child's first name, image, likeness, spoken words, student work, performance, and movement, in any form (hereinafter collectively referred to as "Works"), to display, publish, distribute, or exhibit these Works or any part thereof for the purpose and in connection with any material that may be created by St. Joan of Arc School including without limitations broadcasting on television.

I hereby further agree that St. Joan of Arc School is the sole owner of all rights, title, and interest, including any copyrights in such Works and any parts thereof for all purposes, as St. Joan of Arc School shall determine in their sole discretion without limitation, reservation, or compensation to me or my child.

By entering into this informed consent and release and granting the permission as stated herein, I am expressly authorizing St. Joan of Arc School to use, in whole or in part, my child's name, likeness, image, spoken words, student work, performance and movement in connection with any materials for the St. Joan of Arc School, in all manner and media, as St. Joan of Arc School determines in their sole discretion.

I have read this Informed Consent and Release and understand its terms. I sign it voluntarily and with full knowledge of its significance.

In consideration of my son/daughter's participation in this program, I agree to RELEASE AND HOLD HARMLESS AND INDEMNIFY the Archdiocese of Baltimore, St. Joan of Arc School, the Roman Catholic Archbishop of Baltimore and his successors, a Corporate Sole, and all their agents, servants and employees from liability, claims, demands, causes of action, loss, damage, or injury sustained in connection with or arising out of my son/daughter's publication of Works.

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Signature: \_\_\_\_\_ Teacher: \_\_\_\_\_  
(If 14 years of age or older)

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Yes, St. Joan of Arc School may use my child's work.

\_\_\_\_\_ No, St. Joan of Arc School may not use my child's work.



ARCHDIOCESE OF BALTIMORE  
OFFICE OF CHILD AND YOUTH  
PROTECTION

**Parent/Guardian Declination**

*For Catechesis for Family Life*

Child's Name: \_\_\_\_\_ Child's Grade: \_\_\_\_\_

Parish/School: \_\_\_\_\_

Parents/Guardians have the right to opt out of Catechesis for Family Life, in whole or in part, by expressing this request to the parish catechetical leader or school principal and signing the following declaration.

\_\_\_\_\_ As a parent/guardian, I have decided to have my child participate in Catechesis for Family Life.

\_\_\_\_\_ As a parent/guardian, I have decided to not have my child participate in Catechesis for Family Life.

\_\_\_\_\_ The parish/school has offered to provide safe environment training materials for me to utilize with my child.

\_\_\_\_\_ I have received the safe environment training materials from the parish/school.

\_\_\_\_\_ My child may participate, however I would like the following accommodations for my child when he/she participates in Catechesis for Family Life:

\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Name (printed): \_\_\_\_\_ Date: \_\_\_\_\_

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



August 10, 2016

Dear Parents:

All of the schools of the Archdiocese of Baltimore participate in several federal programs that provide our students with a variety of materials and services. It is one of the ways in which we receive benefits from your tax dollars. We certainly wish to receive our fair share of federal dollars in education and your assistance is critical in supporting our efforts.

Did you know your child (ren) may be able to benefit from:

- Extra Reading, Mathematics, ESL Instruction
- Free Extended Year Summer Programs
- Professional Development for Teachers and Principals
- E-Rate Funding for Technology
- Instructional Coaches

In order to determine eligibility for these programs, parents must fill out the attached form and return it to your child's teacher by August 29, 2016. Please list all the names of children attending our school on the application and complete all questions on the form.

Every family contributes and every eligible student can benefit, regardless of income level. **OUR SCHOOL CAN BE ELIGIBLE FOR Federal funding for each form returned!**

Please note, these forms are confidential; they are not shared or distributed. The information is aggregated. Once it is determined that the school qualifies for federal funding, the school personnel will determine which programs will most benefit the school and the children.

Thank you for your cooperation. Please do not hesitate to contact me if I may be of further assistance.

Sincerely,

Mrs. Virginia P. Bahr  
Principal  
St. Joan of Arc School  
230 South Law Street  
Aberdeen, Maryland 21001  
Phone (410)272-1387  
Fax (410)272-1959  
[vbahr@stjoanarc.org](mailto:vbahr@stjoanarc.org)

**TITLE I PARTICIPATING PRIVATE SCHOOLS  
2016 – 2017 FAMILY INCOME SURVEY**

**All other County RESIDENTS (exc. City and AA County)**

PLEASE PRINT

NAME OF CHILD: \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/COUNTY: \_\_\_\_\_ ZIP \_\_\_\_\_

STATE: \_\_\_\_\_

**PUBLIC SCHOOL YOUR CHILD WOULD ATTEND:** \_\_\_\_\_

A) DIRECTIONS:

- 1) On the chart below, find your family size (family size is equal to the total of parents and children)
- 2) Circle your family size
- 3) Make an "X" under the **YES** column if your family income is **less than or equal to** the income level given
- 4) Make an "X" under the **NO** column if your family income is **more than** the income level given

FAMILY SIZE	ANNUAL INCOME	YES	NO
1	\$21,978		
2	\$29,637		
3	\$37,296		
4	\$44,955		
5	\$52,614		
6	\$60,273		
7	\$67,951		
8	\$75,647		

For each additional family member, add \$7,696

\*This may be a foster child (considered a family of one), an emancipated youth or a special education child over the age of 16.

B) Please list the family size (total number of children and parents). \_\_\_\_\_

C) Is your household homeless? YES \_\_\_\_\_ NO \_\_\_\_\_

D) Does your household receive FOOD STAMPS OR TEMPORARY CASH ASSISTANCE (TCA)?  
YES \_\_\_\_\_ NO \_\_\_\_\_

**Please fill out the survey and return it to your child's teacher by August 29, 2016.**

**TITLE I PARTICIPATING PRIVATE SCHOOLS  
2016– 2017 FAMILY INCOME SURVEY**

**Out of State Residents**

PLEASE PRINT

NAME OF CHILD: \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/COUNTY: \_\_\_\_\_ ZIP \_\_\_\_\_

STATE: \_\_\_\_\_

**PUBLIC SCHOOL YOUR CHILD WOULD ATTEND:** \_\_\_\_\_

B) DIRECTIONS:

- 5) On the chart below, find your family size (family size is equal to the total of parents and children)
- 6) Circle your family size
- 7) Make an “X” under the **YES** column if your family income is **less than or equal to** the income level given
- 8) Make an “X” under the **NO** column if your family income is **more than** the income level given

FAMILY SIZE	ANNUAL INCOME	YES	NO
1	\$21,978		
2	\$29,637		
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For each additional family member, add \$7,696

\*This may be a foster child (considered a family of one), an emancipated youth or a special education child over the age of 16.

B) Please list the family size (total number of children and parents). \_\_\_\_\_

C) Is your household homeless? YES \_\_\_ NO \_\_\_

D) Does your household receive FOOD STAMPS OR TEMPORARY CASH ASSISTANCE (TCA)?  
YES \_\_\_ NO \_\_\_

**Please fill out the survey and return it to your child’s teacher by August 29, 2016**