

Union County TEAMS Charter School and High School/College Leadership Academy 515-517 West Fourth Street, Plainfield, NJ 07060 *PHONE: 908-754-9043 *FAX: 908-754-9053 *WEBSITE: www.ucteams.org

PARENT/GUARDIAN SIGNATURE CONSENT FORM

(Print Student's Name)	Grade
(Print Student's Name)	Grade
(Print Student's Name)	Grade
(Print Student's Name)	Grade
Dear Parents and Guardians: By affixing your signature below, indicates that you the Parent/Student Handbook with your child/ren and will abide by the policies a within each form and policy. REFER TO UC TEAMS WEBSITE www.ucteams.org FOR	and procedures as stated
FIELD TRIP PARENTAL CONSENT FORM. I give my child/ren permission to attend an TEAMS sponsored field trips this school year. I acknowledge that I have read, the statements outlined in the form (initials)	
GOOGLE APPS FOR EDUCATION FORM. I give permission for my child/ren to be as Charter School Google Apps for Education Account. This means my child will access to Google Docs, Calendar and Sites (initials)	
STANDARD PHOTO RELEASE FORM. I give permission for my child/ren to be publication format to be used in publications including the website (initial)	<u> </u>
HEADPHONE USAGE . I have read, understand and agree to provide my child/ren v headphones or ear buds as established in the procedure (initials)	vith a personal pair of
STUDENT CODE OF CONDUCT POLICY. I have read and discussed with my child are and conditions stated within the policy and the consequences that will be rendered	<u>•</u>
UC TEAMS COMPUTER USE POLICY. I have read, understand and will abide by the established by the policy statement. I further agree to repair and replacement compartment. (initials)	-
Parent/Guardian Print Name:	
Email Address (Print):Primary Pl	none #
Parent/Guardian Signature	Date:

"We Are Community Builders...Aiming High, Achieving Greatness and Blue Ribbon Bound"