

St. Croix Catholic Faith Formation Code of Conduct 2011-2012

Every Student has the right:

- To attend faith formation classes without fear of being bullied, harassed, or abused
- To learn without being distracted by bad behavior of others

St. Croix Catholic Faith Formation will therefore use a variety of measures against any student:

- Who uses aggressive, threatening, or offensive language or behavior
- Who interrupts learning through persistent bad behavior
- Who fails to respect other people's property
- Who brings tobacco, alcohol, or drugs onto parish property

Consequences of bad behavior:

- A student will first be given a verbal warning.
- If the student does not stop the behavior that is causing a problem in the classroom, the teacher will walk over to the student and ask them to stop, giving them their second warning.
- If a student does not respond to the second warning, the teacher will ask them to leave the room.
- The faith formation coordinator will then talk to the student about the behavior that is disrupting class.
- If a student is asked to leave the classroom three times during the year, a parent will be asked to come to classes with their child and sit with them so that the teacher can have a productive session with the students. The parent will need to attend with their child in order for the child to remain in classes.
- There will be a ZERO tolerance for drugs, alcohol, or tobacco brought onto any campus. Parents will be notified immediately to come and pick up their child in the event that a student disregards this rule.

Our family has read the Code of Conduct policy for St. Croix Catholic Faith Formation and agrees to follow it throughout the 2011-2012 year.

Signature of Parent(s)

Date

Print First and Last Name

218 E. Willard Street
Stillwater, MN 55082
651-351-3175

2011-2012

Image Release Permission and Parent Authorization **(All Grades PreK – 12)**

Image Release

During the 2011 – 2012 school year your student's image may be used in a variety of communications produced by St. Croix Catholic Faith Formation, St. Michael's Parish, St. Mary's Parish or St. Charles' Parish. Examples of possible publications could include, but are not limited to, our Mustard Seed Gazette, our website (www.sccff.net), classroom produced videos, church bulletins, local newspapers, promotional brochures, or the Catholic Spirit newspaper. Please be aware that you can also indicate below if you would like to be contacted for your verbal consent if your child is identified by name in a caption for any image.

Please complete and sign this form and return it to the school during Registration.

Student's Name:

Grade

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

CHECK ONLY ONE OF THE OPTIONS BELOW.

_____ I authorize the use of my child's image and name in publications from St. Croix Catholic Faith Formation, St. Michael's Parish, St. Mary's Parish, St. Charles' Parish and the community.

_____ I do not authorize the use of my child's image in publications from St. Croix Catholic Faith Formation, St. Michael's Parish, St. Mary's Parish, and St. Charles' Parish.

Parental Authorization

I give my permission for my child(ren) to take part in Faith Formation and all the associated activities. In consideration of the opportunity for my child(ren) to participate and fully recognizing that such an undertaking involves an element of risk, we assume all risks and hazards incidental to such participation and do hereby release, absolve, indemnify, and agree to hold harmless the Archdiocese of St. Paul and Minneapolis, St. Croix Catholic Faith Formation, the Churches of St. Charles, St. Mary, and St. Michael, its agents, employees and officers, and the chaperones, leaders, organizers and sponsors, and persons transporting our child to and/or from these activities, except for gross negligence. Neither the Archdioceses of St. Paul and Minneapolis, St. Croix Catholic Faith Formation, the Churches of St. Charles, St. Mary, and St. Michael, nor any of said persons shall be held financially responsible for any injury, illness, or death incurred as a direct or indirect result of this activity, except for gross negligent acts. There is NO medical insurance provided by the above organization, parishes, or the Archdiocese.

We, the undersigned, have read this release and understand all its terms and execute it voluntarily and with full knowledge of its significance.

Parent Signature

Date

St. Croix Catholic Faith Formation
Emergency Information
2011-2012

Emergency Contact (*other than self): _____

Contact Phone: _____

Doctor's Name: _____

Doctor's Phone #: _____

Name of Clinic: _____

Hospital of Choice: _____

*In the event of an emergency we will make every attempt to contact you first; however, if you cannot be contacted we would like an emergency name and number.

I hereby authorize that emergency treatment may be administered.

Signature of Parent(s)

Date

Print First and Last Name

Good Shepherd Families

SCCFF/SCVFF Toileting Policy

Saint Croix Catholic Faith Formation requests your permission to assist your student in the case that he/she needs toileting help and/or if he/she asks for such help.

The following outlines the activities which may be involved in such assistance:

1. Assistance with clothing: Removing and/or replacing clothing including undergarments when requested and/or needed.
2. Assistance with positioning: If requested, staff will assist the child on to or off of the toilet.
3. Assistance with wiping: Staff will assist child with wiping when requested.
4. In case of accident: If a child has an accident, staff will do what they can to make the student comfortable, and call the parent/guardian responsible for the child.

I have read the above policy and agree that my son/daughter may be assisted as stated during toileting, when needed and/or when he/she asks.

Parental Signature: _____

Date: _____