



Emergency Contact /Medical Treatment Consent/Health History

School Year 2025/2026

Student Name		Grade/Teacher	D.O.B.
Mailing Address		Parent/Guardian Email Address	Gender
Parent or Guardian	Relation to student	☎ Phone	
Parent/Guardian:		Home: _____ Cell: _____ Work: _____	
Parent/Guardian:		Home: _____ Cell: _____ Work: _____	
*Other Emergency Contacts	Relation to student	☎ Phone	
1 st :		Home: _____ Cell: _____ Work: _____	
2 nd :		Home: _____ Cell: _____ Work: _____	

**The individuals above will assume responsibility & are authorized to pick up your child from school in the event the parent/guardian is unable to do so.*

Student's doctor/healthcare provider: _____ Phone: _____

Specialist (allergist, endocrinologist, etc.): _____ Phone: _____

Health Insurance Information (or indicate NONE): _____

Please **CIRCLE** any over the counter oral medications that may be given to your child by the clinic. This provides authorization for the medications circled to be given without calling for permission each time your child visits the clinic with a headache, stomachache, etc. The clinic has limited supply of these medications on hand that will be given if deemed appropriate. **IF YOUR CHILD TAKES ANY OF THESE MEDICATIONS ON A REGULAR BASIS, PLEASE PROVIDE THE MEDICATION IN IT'S ORIGINAL CONTAINER WITH CHILD'S NAME PRINTED ON PACKAGE TO BE KEPT IN THE CLINIC FOR THEIR USE ONLY.** Each child is required to have their own medication, siblings cannot share (for dose count /charting purposes).

Tylenol Advil Benadryl/Claritin/Zyrtec Throat Lozenges/Cough Drops Tums/ Pepto Bismol Cough/Cold Medication/Syrup

List other medication(s) you will provide _____

Please **CIRCLE** any topical medications that may be used on your child by the school clinic: _____ (medications are stocked by school clinic)

Antibiotic Ointment Anti-itch/Hydrocortisone Cream Anti-fungal Cream Eye Drops Anbesol/Oragel Burn/Lidocaine Cream

Permission to Treat/ Emergency Release -the information on this form may be shared confidentially with Odyssey Charter School staff and emergency responders as needed. I give Odyssey Charter School staff permission to administer medications as I have indicated above. In the event of a medical emergency, I understand every effort will be made to inform me. If emergency care is needed, I authorize qualified professionals to provide assessment, diagnosis and any necessary emergency treatment, up to and including a call to EMS to transport to the hospital. I understand that Odyssey Charter School assumes no financial liability for expenses incurred due to accident, injury, and/or unforeseen circumstance. **I will notify the school in writing of any changes to the health information and/or contact information.**

Hospital Preference: 1st _____ 2nd _____

PARENT/GUARDIAN SIGNATURE

PRINTED NAME

DATE

PLEASE COMPLETE THE REVERSE SIDE OF FORM FOR CURRENT HEALTH HISTORY (SCHOOL CLINIC USE ONLY)

BELOW FOR SCHOOL CLINIC USE ONLY:

Reviewed by School Nurse (Signature/Date): _____ Physician Documentation Provided /Care Plan Initiated? YES / NO

STUDENT NAME _____

School Year 2025/2026

PLEASE INDICATE IF STUDENT HAS BEEN DIAGNOSED WITH ANY OF THE FOLLOWING: If you mark 'Yes' for any questions below, please provide physician's documentation so the school nurse can establish an 'Individualized Emergency Health Care Plan' for the CURRENT school year. If physician documentation is not provided, an individualized care plan WILL NOT be initiated. Medical conditions/allergies must be updated on this form each year in order to be considered current conditions since some allergies and conditions may be outgrown as a child ages. If this side is left blank, the clinic will presume that your child has no current medical issues of which we should be aware.

PLEASE PLACE AN 'X' IN THE APPROPRIATE BOX FOR EACH CONDITION (YES/NO)

Health Condition	Yes	No	Explanation if "Yes"
Food Allergies (Please provide Allergy Care Plan from Health Care Provider)			Food(s): _____peanut _____dairy _____eggs _____other If other, please list _____ Rate the reaction: _____mild _____moderate _____life-threatening Does your child require an EPI-Pen? _____yes _____no EPI Pen required for: _____
Allergy to Insect Bites /Environmental Allergies/ Medication Allergies (Please provide Allergy Care Plan from Health Care Provider)			Insect type(s): _____ Rate the reaction: _____mild _____moderate _____life-threatening Medication name(s): _____ Rate the reaction: _____mild _____moderate _____life-threatening Environmental: _____ Rate the reaction: _____mild _____moderate _____life-threatening Does your child require an EPI-Pen for any the above? _____yes _____no EPI Pen required for: _____
Asthma (Please provide Asthma Action Plan from Health Care Provider)			Rate the severity: _____mild _____moderate _____life-threatening Asthma medication taken at home: _____ Medication taken at school: _____ Special instructions? _____
Diabetes/Other endocrine disease (Please provide Diabetes Management Plan)			_____Type 1 (Insulin Dependent) _____Type 2 _____ Please specify for endocrine disease: _____ Diabetes Medication(s) taken at home: _____
Seizure / Neurological Disorder			Type of Seizure: _____Medications: _____
Heart or Blood Disorder			Specify: _____Treatment: _____
Bowel/Bladder Conditions			Specify: _____
Migraine Headaches			Triggers: _____Treatment: _____
Bone/Muscle Issues			Specify: _____Activity Restrictions: _____
ADD/ADHD			Treatment for ADD/ADHD: _____
Mental Health Behavioral Health			Specify: _____ Treatment/Medication: _____
Vision -Glasses/Contacts			_____Glasses _____Contacts _____For Distance _____Reading Only
Hearing Loss			_____Hearing Loss Right Ear _____Hearing Loss Left Ear _____Hearing Aid(s)
Other Illness/Injury/Surgery			Specify: _____Date of Onset: _____
Other Home Medications	List: _____		

BELOW FOR SCHOOL CLINIC USE ONLY:

Reviewed by School Nurse (Signature/Date): _____

Physician Documentation Provided /Care Plan Initiated? YES / NO

ODYSSEY CHARTER SCHOOL
Attendance/Truancy Information Sheet

- Every parent, guardian or other person residing in the school system is required either to enroll and send children in their care and charge between their sixth and sixteenth birthdays to a public or private school or to provide a home study program for these children which meet the requirements set forth in law, unless the child is specifically exempt. The Board of Education shall assure that all children between their sixth and sixteenth birthdays be enrolled in the public schools in the district in which they reside unless they are enrolled in a private school or home study program. Specific exemptions from the requirements of the compulsory school attendance law are provided in State Board Policies JB, JBD, O.C.G.A. 20-2-693, O.C.G.A. 20-2-690.1, and O.C.G.A. 20-2-692.
- The parent who fails to comply with mandatory attendance requirements may be found guilty of a misdemeanor. Each day's absence from school in violation of said law, after the child's school notifies the parent, guardian or other person who has control or charge of a child of 5 unexcused days of absence for such child shall constitute a separate offense. Upon conviction, the parent may be fined not less than \$25, nor more than \$100, imprisoned for 30 days, required to do community service, or any combination of such penalties. *See Code Section 20-2-690.1(c).* **A complaint will be filed in the appropriate court on the sixth (6th) unexcused absence and on each unexcused absence from that point forward.**
- A child who fails to comply with mandatory attendance requirements may be adjudicated unruly and either placed on probation, required to undergo a psychiatric or other mental health evaluation, placed on supervised or unsupervised abeyance, committed to the Department of Juvenile Justice, or ordered to do community service. As a general rule, the Court is not permitted to detain such a child in restrictive custody. If a child is found to have violated the mandatory attendance laws, the Court will enter a separate protective order requiring the parent to insure the child's future compliance with the law at the risk of being held in contempt, fined and/or imprisoned. *See Code Section 15-11-67.*
- Absences will be classified as excused or unexcused. Excused absences are those due to emergencies such as illness, death in the family, or other extreme circumstances. Excused absences are religious holidays, service as a page in the General Assembly, school-sponsored activities, and voter registration (Policy JBD). Unexcused absences are all failures to attend school without proper documentation. A written explanation for all absences is required.
- **Upon returning to school, students must bring documentation stating the student's full name (printed clearly), the date, and the reason for absence with the signature of a parent/guardian, doctor, dentist, or judge. The student and/or parent have the responsibility to present the written excuse within three (3) school days of the student's return to school. At each school, the attendance clerk will receive and file excuses. The principal will resolve any question in determining whether an absence is excused or unexcused.**
- The school administration may require an excuse from a doctor, dentist, health center, or court after five (5) consecutive absences, or twelve (12) excused absences related to health, except for mitigating circumstances. Truancy charges may be filed after twelve (12) excused absences unless there is documentation from a doctor.
- For students in any grade K-8, students are absent from school if not present for at least half of the school day (must be present for a minimum of three (3) hours).
- A student must be enrolled a minimum of 80 days per semester (including days transferred from other schools) to receive Carnegie unit credit for a course. A student who misses one-half or more of a class period will be counted absent for that class.
- Excused and unexcused absences will result in the loss of full credit for class participation unless students arrange to make up the work within 3 school days of returning to school. The student must complete makeup work and tests within a reasonable amount of time.
- **Any student missing 15 or more school days is subject to academic probation and/or grade retention for the following school year, based on the results of a hearing before the Board's attendance sub-committee.**
- School driving privileges may not be obtained or may be revoked for 5 unexcused absences or 10 unexcused tardies.
- Students with more than 10 tardies and/or early dismissals WILL NOT be eligible for the Perfect Attendance Awards at the end of the school year. Students may be required to serve before or after-school detention or lunch detention for excessive tardies. Georgia policy also empowers schools to turn the names of excessively tardy students over to the court for possible fines.
- **Should a student acquire 20 unexcused tardies within a year, they will be placed on probation and suspended for two school days following the 20th tardy.**

Student Name _____

Signature of students 10 years of age or older _____ Date _____

Parent/Guardian Signature _____ Date _____

School District: _____

Date: _____

Parent Occupational Survey

Please complete this form to determine if your child(ren) qualify to receive supplemental services under Title I, Part C

Name of Student(s)	Name of School	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Has anyone in your household moved in order to work in another city, county, or state, in the last three (3) years? ☐ Yes ☐ No
- Has anyone in your household been involved in one of the following occupations, either full or part-time or temporarily during the last three (3) years? ☐ Yes ☐ No

If you answer "yes", check all that applies:

- ☐ 1) Planting/Picking vegetables (tomatoes, squash, onions, etc.) or fruits (grapes, strawberries, blueberries, etc.)
- ☐ 2) Planting, growing, cutting, processing trees (pulpwood), or raking pine straw
- ☐ 3) Processing/Packing agricultural products
- ☐ 4) Dairy/Poultry/Livestock
- ☐ 5) Packing/Processing meats (beef, poultry, or seafood)
- ☐ 6) Commercial fishing or fish farms
- ☐ 7) Other (Please specify occupation): _____

Names of Parent(s) or Legal Guardian(s) _____

Current Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Thank You! Please return this form to the school

Please maintain original copy in your files.

MEP funded school/district: Please give this form to the migrant liaison or migrant contact for your school/district.

Non-MEP funded (consortium) school/districts: When at least one "yes" and one or more of the boxes from 1 to 7 is/are checked, districts should email, always through the DOE's Portal, occupational surveys to the Regional Migrant Education Program Office serving your district. For additional questions regarding this form, please call the MEP office serving your district:

GaDOE Region 1 MEP, Rose McKeehan
Phone: 470-763-1137
rmckeehan@doe.k12.ga.us

GaDOE Region 2 MEP, Pearl Barker
Phone: 470-763-1138
PBarker@doe.k12.ga.us

Family Contacted/Attempt Date: _____

Sent to Regional Office on: _____

1562 Twin Towers East • 205 Jesse Hill Jr. Drive • Atlanta, GA 30334 • www.gadoe.org

Richard Woods, Georgia's School Superintendent

An Equal Opportunity Employer



Distrito Escolar: Odyssey Charter School

Fecha: _____

Encuesta Ocupacional para Padres

Favor de completar este formulario para ayudarnos a determinar si su(s) hijo(s) califica(n) para recibir servicios suplementarios de parte del Programa de Título I, Parte C. El completar esta forma es opcional.

Nombre del/los Estudiante(s)	Nombre de la Escuela	Grado
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. ¿Alguien en su casa se ha mudado para trabajar en otra ciudad, condado, o estado, en los últimos tres (3) años? ☐ Sí ☐ No
2. ¿Alguien en su casa trabaja o ha trabajado en una de las siguientes ocupaciones de forma permanente o temporaria en los últimos tres años? ☐ Sí ☐ No

Si la respuesta es "sí", marque todo trabajo que aplique:

- ☐ 1. Sembrando/Cosechando vegetales (tomates, calabazas, cebollas, etc.) o frutas (uvas, fresas, arándanos, etc.)
- ☐ 2. Sembrando, cortando, procesando árboles, o juntando paja de pino (*pine straw*)
- ☐ 3. Procesando/Empacando productos agrícolas
- ☐ 4. Trabajo en lechería, polleras o ganadería
- ☐ 5. Empacando/Procesando carnes (res, pollo, o mariscos)
- ☐ 6. Trabajos relacionados con la pesca (pesca comercial, o criadero de pescados)
- ☐ 7. Otra actividad. Por favor especifique en cuál: _____

Nombre de los padres o guardianes legales: _____

Dirección donde vive: _____

Ciudad: _____ Estado: _____ Código Postal: _____ Teléfono: _____

¡Muchas Gracias! Por favor regrese éste formulario a la escuela

Please maintain original copy in your files.

MEP funded school/district: Please give this form to the migrant liaison or migrant contact for your school/district.

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ODYSSEY CHARTER SCHOOL

Please read and sign last page.

Uniform Policy

The Odyssey dress code has been established to support and encourage a standard of respect for all scholars and results in a higher standard of behavior. The dress code guidelines indicate appropriate school dress for normal school days. Odyssey Charter School administration reserves the right to interpret these guidelines and/or make changes during the academic school year.

School uniforms shall be worn by every scholar in attendance, every day and will be strictly enforced.

If scholars are in violation of the dress code:

1. Scholars will be sent to the office/ISS to call parents
2. Once the dress code is corrected the student may return to class
3. If the dress code is NOT corrected, the scholar will remain in In School Suspension for the remainder of the day
4. If a scholar is a habitual violator, the policy will be followed with Out of School Suspension and/or expulsion

Uniforms are to be purchased from the following vendor **ONLY**:

1. J&R Clothing

- a. 600 W. Lanier Ave, Fayetteville, GA 30214
- b. Phone: (770)461-3440
- c. <https://www.jandrclothing.com/>

Section 1: Uniform Attire

Shirts:

1. Black, White, and Gold Polo shirts-(long or short sleeves) must have Odyssey logo
2. White Oxford Shirt with the Odyssey logo
3. Shirts must be tucked in at all times

*****All Scholars must have 1 Black Odyssey Polo for Field Trips*****

Slacks/Shorts:

1. Pants, skirts, shorts, or skorts must be khaki or plaid as specified by the vendors.

*****All shorts/skirts/skorts must be mid-length *****

Socks/Shoes:

1. Black or white low-cut tennis shoes. High tops will be allowed this year.
2. Black dress shoes

*****Tights, ankle, or knee socks must be solid in color *****

Jackets/Sweaters:

1. Must have Odyssey logo and should be purchased through specified vendors

*****NO hooded jackets or sweatshirts*****

Belts:

1. Brown or black belts must be worn with pants or shorts in grades 4th-8th

Hair:

1. Headbands or bows may be worn to match uniforms.
2. Hair designs are not permitted including: Mohawks, shapes, sports logos

*****No hair wraps, hats, or head coverings except of religious standards *****

Face Covering:

1. No longer allowed unless it is required per our nurses' recommendations at which point a medical mask will be given.

Section 2. IMMEDIATE DRESS CODE VIOLATIONS

(Shall Not Be Worn at School)

- Hoodies worn in the building
- Jackets with hoods worn on the property
- Pants not worn at the waist, No Sagging
- Halter-top, tank tops, fishnet tops, and midriff blouses
- Excessively large or baggy clothing
- Tops and dresses with spaghetti straps or sleeveless
- Muscle shirts
- Shirts that advertise alcohol, tobacco, or drugs
- Short shorts and skirts (Must be mid-length)
- Shorts covered by a full-length shirt
- Bicycle pants or shorts
- Yoga pants or shorts
- Clothing with holes
- Clothing that is suggestive, advocates disobedience to society, or causes a possible disruption to the school
- Clothing or attire with statements or symbols that might be deemed offensive to others, violent, or of a threatening nature
- Shoes with cleats and/or wheels (Heelys) or flashing lights. Gliders, flip-flops, house slippers, house shoes, high-top tennis shoes, mid-top tennis shoes, or boots of any kind.
- No wheeled backpacks or tow-behind cases
- Hardware chains
- Caps, hat, visors, any other headgear, and sunglasses
- Boys and girls may not wear body piercings other than earrings or studs in their earlobes.

Odyssey Charter School uniforms may not be required for all Odyssey Charter School functions i.e. athletic events, parties, and/or social gatherings. Scholars should wear clothing that is clean and suitable for school activities. Keeping in mind weather conditions, location, and type of event. See the parent's handbook for specific instructions on dress code for casual events.

I understand the updated changes to the dress code policy.

Parent

Signature: _____ Date: _____



ODYSSEY Charter School

Scot Hooper
Principal

To: Parents of Scholars
Odyssey Charter School

Re: No Cell Phones on Campus Policy

Date: July 15th, 2025

Dear Parents,

Thank you for your continued support of Odyssey Charter School. The staff at Odyssey Charter School is working diligently to establish a safe school environment for the 2025/2026 school year.

The State of Georgia has passed House Bill 340 ***Distraction Free Schools*** effective July 1st 2025:

- Prohibits students in K-8 from accessing personal electronic devices (PED) during the school day.

As we are sure you are aware, Odyssey Charter School has had a ***No Cell Phone on Campus*** policy since 2022.

So, what happens if there is an emergency on campus? During a school emergency you will be contacted in the following manner;

- A text will be sent directly to your phone (all numbers listed in our system)
- An E-mail will be sent to the address currently in our system
- A phone call will be made directly to the numbers we have on file for your family

This will happen simultaneously.

Should you need to speak with your scholar during the school day, phones are available in every classroom and in our main office.

Thank you for your continued support of Odyssey Charter School.

Scot Hooper
Principal



ODYSSEY

Charter School

Scot Hooper
Principal

Cell Phones, Cell phone Devices, Electronic Readers, etc.

Scholars are **NOT** permitted to bring cell phones, smart watches or cell phone devices to school. Scholars having cell phones on campus during the school day (including before and after school) or caught operating cell phones, or a cell phone device will be suspended. Parents will need to come to school and pick up their scholars and their phone. These methods of communication violate the Odyssey Board of Education Communication Policy. If a scholar needs to make an emergency phone call, they are to ask their teacher and use the classroom phone. If a parent needs to get a message to their scholar they can call the office and we will deliver the message. If it is imperative that the scholars answer the phone, we will bring the scholar to the office for the call. **No recording devices of any type are to be used during school hours for any reason.** **Recording of teachers or classmates will result in a level IV discipline violation up to and including expulsion.**

Scholars are **Not** permitted to bring personal electronic reading devices such as Nooks, Kindles, Smart Watches or the like. Odyssey Charter School accepts no responsibility for lost, damaged or stolen electronic devices.

“Personal Electronic Device” – any portable electronic device capable of transmitting, receiving, or accessing communications, data, or media – includes but is not limited to smartphones, smartwatches, tablets, e-readers, headphones, or other devices with capabilities like wireless communication, internet access, messaging, gaming, social media access, or data transmission. It does not apply to school equipment of the same types that are made available for student use.

Signature: _____ Date: _____

Student Signature: _____



ODYSSEY CHARTER SCHOOL

2025-2026 Odyssey Scholar and Family Handbook Acknowledgement Form

We, the _____ family, hereby acknowledge and accept the conditions set forth in this Odyssey Scholar & Family Handbook (<https://odysseycharterschool.net/scholar-family-handbook/>). We have received and read a copy of Odyssey Scholar & Family Handbook, and understand the rules, regulations, and procedures of the school. By signing this acknowledgment form I, along with my scholar(s), agree to abide by all rules, regulations, procedures, and policies as outlined. Information and policies in this handbook may be updated at any time, as the Odyssey administration may deem necessary.

Date: _____

Parent Name (print): _____

Signature of Parent/Guardian: _____

Scholar (print): _____ Grade: _____

Scholar Signature: _____

THIS ACKNOWLEDGMENT FORM IS TO BE SIGNED AND RETURNED TO YOUR HOMEROOM TEACHER

Acceptable Use Policy (AUP)

For Chromebooks, Computers and Internet

Student Agreement

1. I will take care of my school issued Chromebook and know that I will be issued the same Chromebook each year.
 - a. Cords and cables must be inserted carefully into the device to prevent damage.
 - b. Devices must never be left in an unlocked locker, car or any unsupervised area.
 - c. Report any software/hardware issues to the appropriate Odyssey personnel.
 - d. Keep the device in a well-protected, temperature-controlled environment when not in use.
2. I will never leave my Chromebook unattended in an unsecured or unsupervised location.
3. I will never loan out my school-issued device to other individuals.
4. I will fully charge my Chromebook each night.
5. I will keep food and beverages away from my device.
6. I will not disassemble, jail break or hack into any part of my or any school-issued device.
7. I WILL NOT attempt to make any repairs to my device.
8. I will protect my school-issued device by carrying it in the case provided.
9. I will use my school-issued device in ways that are appropriate and meet the school's expectations whether at school, home, or anywhere else. If I use my device in an inappropriate way, I may be subject to disciplinary actions by my school.
10. I WILL NOT place decorations (such as stickers, markers, etc.) on the school-issued device.
11. I will not deface the serial number sticker on any school-issued device.
12. I understand that my school-issued device is subject to inspection and auditing at any time without notice. NOTHING I do to or on the device is private.
13. I will not share my password(s) with anyone other than a teacher or adult from my school or my parent/guardian.
14. I understand Chromebooks remain the property of Odyssey and must be returned upon withdrawal from Odyssey and/or end of academic school year during the collection process.
15. I understand that if I damage or lose my device and/or its parts, or it is stolen, I am subject to cost of replacing the device.
16. I will not access, attempt to access, share or attempt to share inappropriate, damaging, or threatening information on the device or Odyssey network/Internet.
17. I will not share personal information with anyone other than Odyssey staff while using the Odyssey network/Internet for school.

I understand that rules and regulations are necessary in order to offer technology opportunities to Odyssey students. In order to use technology resources, I understand and agree to the above statements and I will abide by the Odyssey Acceptable Use Policy and Chromebook Policy in this handbook.

Should I commit any violation, I understand access privileges may be revoked, school disciplinary action may be taken and/or appropriate legal action may be initiated. I further understand that any violation of the regulations is unethical and may constitute a criminal offense.

Student Signature: _____ *Date:* _____

Parental Agreement

As the parent or guardian of the above named user, I hereby certify that I have read and understand the Odyssey Charter School Chromebook and Acceptable Use Policies. I understand that Chromebook and Odyssey Network/Internet access are designed for educational purpose and that Odyssey has taken available precautions to control inappropriate materials. However, I also recognize it is impossible to restrict access to all inappropriate materials, and I will not hold Odyssey Charter School responsible for materials acquired on the Internet. With that understanding, I hereby give permission to Odyssey Charter School to provide a Chromebook and Internet/Network access to my student. I further agree to indemnify and hold harmless Odyssey Charter School, its employees and agents, for any and all claims arising from or related to my child's use or misuse of the Internet/Network, and waive any and all claims I may have against the School for such use or misuse.

I agree to help my student understand and abide by the Chromebook and Acceptable Use Policy. I understand that I may be held personally or criminally liable for damage to or failure to return school property.

I grant permission for my student to be assigned a Chromebook for educational use only. Yes No

I grant permission for my student to use the Internet and Network. ___Yes ___No

I grant permission for my student to use an email account at school for instructional purposes only. ___Yes ___No

I grant permission for publication of any work of my student. ___Yes ___No

Odyssey can repair or replace your student's device after payment has been received. Please remit the following amount based on the issue as described in the "Description of Damage." Charges as followed:

<input type="checkbox"/> LCD Replacement	\$ 160.00
<input type="checkbox"/> Keyboard / Trackpad	\$ 140.00
<input type="checkbox"/> Top Encasement	\$ 90.00
<input type="checkbox"/> Bottom Encasement	\$ 90.00
<input type="checkbox"/> Hinge Replacement (each)	\$ 80.00
<input type="checkbox"/> Charge Port Replacement	\$150.00
<input type="checkbox"/> Repairs equal or exceeds price to replace	\$500.00
<input type="checkbox"/> Lost or Stolen	\$500.00

By signing below, I acknowledge that I have had an opportunity to review the Odyssey Charter School Chromebook and Acceptable Use Policy and agree to abide by their terms. I also acknowledge the repair/replacement policy should my scholar damage a computer.

Parent's Signature: _____ Date: _____

Parents Printed Name: _____ Phone : _____



ODYSSEY

Charter School

Photo and Video Permission

I grant permission for my student's photograph to be published in the

- school and/or district website _____ Yes _____ No
- in the classroom _____ Yes _____ No
- yearbook _____ Yes _____ No
- online _____ Yes _____ No
- newspaper articles _____ Yes _____ No
- Class Dojo _____ Yes _____ No

I grant permission to watch movies rated:

- G _____ Yes _____ No
- PG _____ Yes _____ No
- PG-13 _____ Yes _____ No

Parent/Guardian Signature: _____

Date: _____



Odyssey Charter School Student Bus Rules, Procedures and Electronic Use for the School Buses

This form must be turned in by ALL Students attending Odyssey Charter School 2025-2026

Even if they DO NOT ride the bus. Children will not be allowed to go on Field Trips if it is not signed.

Please read this over with your student, sign and return

Bus Pick-Up/Drop-Off Rules and Procedures

- 1. Riding the bus is a privilege, not a right.**
2. Students violating the Odyssey discipline policy and/or bus rules may receive disciplinary consequences at school and temporary or permanent suspension of bus privileges.
3. When seats are assigned, students will remain in their assigned seats until the student reaches their assigned stop. By the end of the first full week of school, all bus-riding students will have an assigned seat.
4. Students not complying with the directions of the bus driver or any other Odyssey staff member aboard the bus will be subject to discipline policy and may have their bus privileges suspended.
5. Students **may not eat or drink** anything except water while on the bus.
6. Students must remain seated while the bus is moving and during all stops (except for their stop).
7. Students may not place any parts of their body outside the bus windows.
8. Odyssey will run scheduled bus routes with specific pick-up and drop-off points.
9. Odyssey will not provide pick-ups or drop-offs at individual homes or locations.
- 10. Students can only be dropped off or picked up from their assigned bus stops unless a parent request was written or instructed by Odyssey Administration.**
11. Any changes or deviations from the schedule or published route must be authorized by the Executive Director, Head of School, or their designee.
12. Buses run on fixed schedules. Once they have reached their departure time, the bus will leave for the next stop. Bus drivers are not permitted to stop once leaving the designated area.
13. You must be at the bus stop location at least **five minutes** before pick-up and drop-off.
14. Buses will not wait for late parents.
15. Parents of students riding the bus will be issued purple placards. In order for their student to be dropped off, parents should meet the bus and hold up the placard for the driver.
16. Parents should remain in their vehicles when the bus arrives and stay until the bus leaves.
17. Students must be supervised at bus stop drop-off locations.
18. Students should **NEVER** be behind the bus. Please load from the front of the bus or the door side only.
19. Parents or others picking up the student who does not have a purple placard will have to show ID and be on the Bus Emergency Contact List.
20. Multiple placards will be given to families. You may request and receive as many placards as you need.
21. Students in elementary grades will not be dropped off unless an authorized person is present to pick them up.
22. Elementary school students may be escorted by middle school students exiting the bus **ONLY** if parents/guardians complete a form in advance authorizing such a drop-off.
23. If a student misses the bus, parents must arrange transportation for the student to get to school.

- 24. Students who do not have an authorized form on file and who do not have an authorized person at the drop-off point to pick them up will be returned to school.
- 25. If students are returned to school, parents will be notified via phone. Odyssey does not provide after-school care, so parents must be at school before the bus arrives.
- 26. Please also email Kim DiGiulio with any changes you may have to the Bus Emergency Contact Sheet.
- 27. All bus changes must be made in writing or by email to both the homeroom teacher and Kim DiGiulio at the front desk the morning they are needed. Changes must **be made by 1:00PM the day of.**

NO Electronic devices will be used on Odyssey School buses during regular routes.

This signed form must be turned in by ALL Students attending Odyssey Charter School

Even if you are not riding the bus.

Children will not be allowed to go on field trips if this form is not signed.

Please sign below after reading over and discussing the Bus Rules and Procedures with your child. Please turn in one form per child.

I have read and understand the rules regarding using Odyssey bus transportation and agree to abide by them. If my students and/or I do not abide by the rules, I acknowledge that my student may be suspended from bus privileges and possibly face other disciplinary consequences. I understand and will not have any sort of electronics on the bus. I further understand that any violation of the regulations could result in my access privileges being revoked and appropriate school disciplinary action and/or legal action being initiated.

Student's Name (print)

Student's Signature

Date

Parent's Name (print)

Parent's Signature

Date

Grade



Check Day(s):

Morning Bus Needs: M T W T F Pick up Point: _____

Afternoon Bus Needs: M T W T F Drop off Point: _____

Student Name(s)	Boy	Girl	Grade
_____			_____
_____			_____
_____			_____

Person Normally Picking Up Student from Bus Stop: _____

Cell# _____ Alt# _____

Mother or Guardian(Print): _____

Address: _____

Mom: Work # _____ Cell# _____ Home# _____

Father or Guardian(Print): _____

Address: _____

Father: Work # _____ Cell# _____ Home# _____

Emergency Contact Names:	Phone Number(s):
_____	_____
_____	_____

- ☐ I hereby authorize Odyssey to allow my middle school student to be dropped off without supervision.
- ☐ I hereby authorize Odyssey to allow my middle school student to escort the following elementary school student off the bus without adult supervision (please list names below)

- ☐ My student will not be allowed to leave the bus stop without adult supervision.

Parent signature: _____

Date: _____