



**ST. ROSE OF LIMA**  
CATHOLIC SCHOOL

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

Child/ren: \_\_\_\_\_

**The following forms are to be turned in at Meet the Teacher to complete your child's registration:**

- ☐ TAUP Agreement (one per student)
- ☐ Parent Student Handbook Acknowledgment (one per family)
- ☐ Media Release (one per family)
- Health Survey (one per student)

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**Technology Acceptable Use Policy Agreement**

Your child has the opportunity to access the technology resources at St. Rose of Lima Catholic School. With this educational opportunity also comes responsibility. It is important you and your child/ren read the enclosed Technology Acceptable Use Policy and discuss it together.

When your child is given an account and a password to use on the computer, it is extremely important that the rules be followed. Failure to follow the rules will result in the loss of the privilege to use this educational tool.

Remember that you are legally responsible for your child/ren's actions. Please stress to your child/ren the importance of using only his or her own account and password, and the importance of keeping it a secret from other students. Under NO circumstances should your child let anyone else use his or her account and password!

Although we have established acceptable use of policies and filters on our server, please be aware that there may be unacceptable material or communication on the Internet that your child can access. We cannot control materials available on other computer systems.

After you have read and discussed this with you child/ren, both you and your child/ren sign the agreement below.

As a parent/guardian and student/s of St. Rose of Lima Catholic School, we have read the information in the handbook on the appropriate use of technology at school and we understand this agreement will be kept on file. I further agree and understand this privilege may be revoked at any time.

**Parent/Guardian Name (Print)** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student Name (print)** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_



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**FAMILY HANDBOOK  
ACKNOWLEDGMENT FORM  
2020 - 2021**

Dear Parent/Guardian:

Please sign, date and return this acknowledgment form to your oldest child's teacher. Your signature (and that of your child/ren) indicates that you have read this handbook. It also means that you have discussed with your child/ren the appropriate items from the handbook, and that you and your child/ren agree to abide by the school procedures, regulations and policies discussed in this handbook.

The school retains the right to amend this handbook for just cause. Families will be notified if changes are made.

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Our family has discussed the St. Rose of Lima Catholic School Parent-Student Handbook.  
We agree to follow the school procedures, regulations and policies addressed in this Handbook for the School Year 2020-2021.

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**Family Last Name**

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Parent Signature

Date

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Parent Signature

Date

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Student Signature

Grade

Date

---

Student Signature

Grade

Date

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Student Signature

Grade

Date



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**MEDIA RELEASE FORM**  
**2020 - 2021**

Please check one of the choices below:

I hereby grant permission to St. Rose of Lima Catholic School to allow my child/ren to be photographed, videotaped, interviewed, or posted through images on the parish/school websites, social media, and other printed material such as newsletters.

It is my understanding that this photograph/interview or portions thereof will be used for public view and for teacher training purposes. Images will not be bought or sold. I agree to participate without financial remuneration, and I understand that this releases St. Rose of Lima Catholic School, and the Archdiocese of Galveston-Houston, from any future claims as well as from any liability arising from the use of said photograph/interview.

\_\_\_\_\_ I DO NOT give permission for my child (ren) to be used in marketing/promotions or for any school use.

Print Family Last Name \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade: \_\_\_\_\_

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

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



# ST. ROSE OF LIMA

## CATHOLIC SCHOOL

### Health Survey

In accordance with Texas Education Agency guidelines and in consultation with the Harris County Health Department, St. Rose of Lima must gather the following information about each student attending St. Rose of Lima Catholic School during the Fall of 2020. This form must be printed, completed, signed, and submitted during arrival on the first day of school. In the case of a minor, the form must be completed by a parent/guardian.

Anyone who does not have a completed form will be required to complete one before students will be admitted to school. Anyone who refuses to complete the form will not be allowed to participate in school activities.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Grade Level: \_\_\_\_\_

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

Have you experienced new or worsening of the following symptoms (please check all that apply):

☐ Cough

☐ Muscle pain

☐ Shortness of breath or difficulty breathing

☐ Headache

☐ Chills

☐ Sore throat

☐ Repeated shaking with chills

☐ Diarrhea

☐ Loss of taste or smell

☐ Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit

☐ Known close contact with a person who is lab confirmed to have COVID-19 if exposure to the active confirmed case occurred within the last 14 days

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