



## Please acknowledge your receipt of important school policies

Teachwell Academy makes printed copies of the Teachwell Academy Handbook available. Access the Teachwell Academy Handbook at: <https://bit.ly/Teachwell>. If contents of the handbook are updated during the school year, Teachwell will make reasonable attempts to notify parents. Read each statement below and place your initials in the box to acknowledge that you have been made aware of the following expectations.

I understand that this acknowledgement is required to enroll a student at Teachwell Academy.

\_\_\_\_\_  
INITIAL

I acknowledge I have been provided a copy of the Teachwell Academy Handbook.

\_\_\_\_\_  
INITIAL

I acknowledge that changes to the Teachwell Academy Handbook may be made at any point during the school year, and, in such cases the most current version is available on Teachwell's website.

\_\_\_\_\_  
INITIAL

I acknowledge receipt of the school's policy and procedures relating to cell phones

\_\_\_\_\_  
INITIAL

I acknowledge receipt of the school's policy and procedures relating to transportation

\_\_\_\_\_  
INITIAL

I acknowledge receipt of the school's policies and procedures relating to the search and seizure of personal property.

\_\_\_\_\_  
INITIAL

I acknowledge receipt of the school's policy and procedures relating to transportation.

\_\_\_\_\_  
INITIAL

I acknowledge receipt of the school's policy related to medication administration.

\_\_\_\_\_  
INITIAL

### STUDENT NAME AND GRADE

### BIRTH DATE

\_\_\_\_\_  
STUDENT FIRST NAME (PRINTED)    \_\_\_\_\_  
STUDENT LAST NAME (PRINTED)    \_\_\_\_\_  
STUDENT GRADE    \_\_\_\_\_  
MM    DD    YY

### PARENT INFORMATION

### DATE

\_\_\_\_\_  
FIRST NAME (PRINTED)    \_\_\_\_\_  
LAST NAME (PRINTED)    \_\_\_\_\_  
SIGNATURE    \_\_\_\_\_  
MM    DD    YY

SEND FORM AND RECORDS TO  
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