



*"Inspire learners, Integrate sustainability,  
Involve community"*

## SCHOOL DISTRICT NO. 64

### PROCEDURE 3050-1

## Student Emergency Release Form -Information Gathering

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Section: Learning and Working Environment

Dates of Revisions:

Date of Adoption and

Resolution Number: June 13, 2018- 76/18

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In the event of an earthquake or other serious emergency, the school may implement a controlled release of students to ensure their safety and well-being. If you are not able to reach the school, staff will release your child to persons authorized on this form or, if necessary, to emergency medical personnel.

### **LIST CHILDREN ATTENDING SCHOOL(S) IN THE DISTRICT**

Chart with Student Name(s), Teacher, School, \*Medical Conditions (\*List any life threatening medical conditions, medications, severe allergies, medical information or any instructions on the back side of this page.)

### **PARENTS' / GUARDIANS' Contact Information**

Chart with Parent/ Guardian Details: Name(s), Home Phone, Cell Phone, Email Employer Name and Phone; Typical Work Times

### **AUTHORIZED DESIGNATES FOR EMERGENCY RELEASE STUDENT PICK UP**

Chart with Emergency Contact Details: Name(s), Relationship, Home Phone, Cell Phone, Email Employer Name and Phone; Typical Work Times.

I acknowledge that I have spoken to the above alternates who have accepted responsibilities associated with being an emergency contact for my child(ren). I have also advised my child. I realize that in the event of a controlled student release, only the above authorized individuals will be able to claim my child (unless they are referred to emergency medical personnel).

Upon release of my child(ren), a record shall be kept of the name of the authorized person, the time released and expected destination.

**INDIVIDUALS TO WHOM CHILD(REN) MAY NOT BE RELEASED IN AN EMERGENCY SITUATION:**

Chart allowing for LIST

First & Last Name Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_