

Child Name _____

Grade _____



The Jewish Primary Day School of the Nation's Capital



**STUDENT INFORMATION FORM FOR TEACHERS
2011-2012**

A) Parent /Guardian Name(s): _____

B) Babysitter/Caregiver name (if applicable): _____

C) Synagogue Affiliation: _____

D) Does the child live in more than one household: ____Yes____ No

E) Other members of household (grandparents, etc.): _____

F) Do you have pets? ____Yes____ No If yes, please describe _____

G) Sibling(s) name(s), date of birth, school, and grade(s) _____

H) What are your child's strengths?

I) What are your child's areas for growth?

J) Describe your child's temperament and personality: _____

Please complete and return this form for each child by July 22, 2011 to:
schoolforms@jpds.org or to 6045 16th Street, NW, Washington, DC 20011.

Child Name _____

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K) Describe your child's friendships: _____

L) Have there been any changes in your child's family life in the past 12 months that you would like to share?

M) Please add any comment(s) that might further our understanding of your child or his/her background and add any specifics you wish us to know.

N) Please inform us of any special health problem your child may have (including food sensitivities, allergies, chronic health issues, emotional concerns, etc.).

O) What are *your* expectations of your child's coming year at JPDS? (Please feel free to attach additional sheets if necessary.) _____

Parent/Guardian Signature: _____ **Date:** _____

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**PHOTOGRAPHY RELEASE FORM
2011-2012**

(Please complete a different form for each child at JPDS-NC)

Student Name

Grade

I understand that photographs and video of my child may be taken during the 2011 - 2012 academic year and that my child may produce artwork as part of his or her activities at JPDS-NC. These photographs, videos and/or this artwork may be used in promotional or educational materials published by JPDS-NC and non-JPDS-NC publications. JPDS-NC will not use the names of students with their photographs/artwork for non-JPDS-NC publications without specific approval from the student's parent or guardian.

Sign to *give* permission or to *deny* permission:

1) I hereby **give** my permission for the photographs, videos and/or student artwork of _____ to be used in program brochures, on websites, or in other promotional or educational materials. Child's names will be used only on the password protected website, unless specific approval from the student's parent or guardian otherwise granted.

Date

Parent/Guardian Signature

Print Name

or

2) I hereby **do not give** my permission for the photographs, videos and/or student artwork of _____ to be used in program brochures, websites, or other promotional or educational materials.

Date

Parent/Guardian Signature

Print Name

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FIELD TRIP PERMISSION FORM 2011-2012



(Please complete a different form for each child at JPDS-NC)

My child _____ in grade _____ has permission to go on any field trips planned by the Jewish Primary Day School of the Nation's Capital (JPDS-NC) during the 2011-2012 school year. I/We understand that some trips will be on foot, while others will be by rented bus, Metrobus/Metrorail, or parent-driven cars.

I further grant permission for the staff of JPDS-NC to administer first aid and authorize emergency medical treatment for my child, if necessary, during the trip. I understand that any medical expenses will be billed directly to my insurance company or to me.

While I understand that JPDS-NC will use its best efforts to ensure the safety of my child, I am aware that JPDS-NC cannot assume responsibility for any injury or damage that might result from my child's participation in the trip. By signing below, I/We hereby waive any right to seek reimbursement from JPDS-NC, its directors, officers, employees, volunteers and agents for any bodily injury, death or disability sustained by my child, whether caused by the negligence of JPDS-NC or otherwise.

Parent/Guardian Signature _____ **Date** _____

Parent/Guardian Name (please print) _____

Failure to sign will prevent your child's participation in class trips; you will assume responsibility for your child during that time.

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