Parent Requests for Emergency Safety Intervention Notification



| Student's Name: | Student's KIDS Student ID: |
|---|--|
| 2017 Supp. 72-6154(a)(1), requires that when an erschool must notify the parent on the same day the may designate a preferred method of contact to re- | text message, or another method. Please ensure that method of contact is on file in the school office. |
| (Signature of Parent) | (Date) |
| One Same-Day Notification for Multiple Incidents: from the school for multiple emergency safety inte | , , |
| (Signature of Parent) | (Date) |
| and the complaint process of the state boa(4) Information that will assist the parent in na information for Families Together and the I | ident in which an emergency safety intervention is e the parent with the following information in y safety interventions can be used; omplaint through the local dispute resolution process rd of education; and vigating the complaint process, including contact Disability Rights Center of Kansas. |
| I request that upon the first occurrence of an eme this school year that the school provide me with the my current email address on file in the school office | nis required information by email. I agree to keep |
| (Signature of Parent) | (Date) |