

## HALL COUNTY SCHOOL DISTRICT 2025-2026 PARENT/GUARDIAN SIGNATURE PAGES

For additional languages, please visit: <https://www.hallco.org/web/hall-county-school-district/>

Dear Parent/Legal Guardian,

Welcome to the 2025-2026 Hall County School District school year! To streamline parent signatures, we have combined most beginning of year forms into one form. Please follow pertinent links and read and acknowledge the spaces in each section.

### 1. COMPULSORY EDUCATION NOTIFICATION:

The Hall County School System is required by law to inform you of the following laws and consequences. The school must keep a signed copy of this form on file for one school year. To read the Compulsory Education Notification, follow this link:

<https://www.hallco.org/web/compulsory-education-notification-to-parents/>

- O.C.G.A. 20-2-690.1 - Compulsory Education
- O.C.G.A. 20-2-150 - Compulsory Education; Law Pertaining to Kindergarten Students

☐ I sign and attest I have read the Georgia State Law on Compulsory Education. I understand and agree to the rules and procedures outlined in the “Compulsory Education Notification” section above.

### 2. BOOK NOTIFICATION:

Hall County School District encourages parents/guardians to be involved in their child’s education. You now have an option to receive daily email notifications when your child has borrowed materials from the school library. To read the Book Notification, follow this link: <https://www.hallco.org/web/book-checkout-notification/>

Please Select YES/NO:

- **YES:** Yes, I would like to receive these book notifications
- **NO:** No, I would not like to receive these book notifications

### 3. STUDENT SERVICES PROGRAM ACKNOWLEDGMENT:

Our School Counseling Program is designed to be preventative and developmental and includes individual and/or classroom guidance activities, small group support and skill building groups. To read the Student Services Program Acknowledgments, follow this link: <https://www.hallco.org/web/student-services-program-acknowledgement/>

☐ I sign and attest I have read the School Counseling Programs. I am acknowledging that I have received and reviewed the Student Services – Program Acknowledgement form. I also acknowledge that it is my responsibility to contact my child’s school if I do not want my child to participate in one or more of the programs listed for the new school year.

### 4. DIGITAL MEDIA:

It is the practice of the Hall County School System to recognize student achievement and accomplishments. I give permission for photographs and exemplary classroom projects to be posted on the school system’s web page, including local school sites, which can be accessed online at <http://www.hallco.org>. In posting a photograph or exemplary classroom projects of a student, the school system is careful not to associate a student’s full name in such a way that it can be identified with the photograph of the student.

Please Select YES/NO:

- **YES: I GIVE PERMISSION** for my child to be photographed/videotaped as outlined in the “Digital Media” section above
- **NO: I DO NOT GIVE PERMISSION** for my child to be photographed/videotaped as outlined in the “Digital Media” section above

### 5. SCOLIOSIS SCREENING PROGRAM (6<sup>th</sup> & 8<sup>th</sup> Grade ONLY. All other grades, please select ‘Does not apply’):

During the school year, Hall County school nurses and the Hall County Department of Public Health will conduct Scoliosis screenings at the 6<sup>th</sup> & 8<sup>th</sup> grade levels to identify students with suspected curvature of the spine. In Georgia, scoliosis screenings are required by law. To read the Scoliosis Screening Program Refusal Form, follow this link: <https://www.hallco.org/web/scoliosis-screening-program/>

Please Select:

- **Do not want my child to be screened:** I do not want my child to be screened for scoliosis by the school, and I plan to have him/her screened by another healthcare provider (Please share results of this evaluation with the school using form 4400). <https://www.hallco.org/web/new-year-scoliosis-update/>

- **Currently being screened:** My child is currently being seen by a healthcare provider for spinal problems, and I do not wish to have my child evaluated by the school
- **Does not apply:** My child is not in the 6<sup>th</sup> or 8<sup>th</sup> Grade and this does not apply to me or my child

#### **6. PARTICIPATION IN CLUBS AND ORGANIZATIONS (MIDDLE AND HIGH SCHOOL ONLY):**

Please indicate below if you **do NOT want** your student to participate in a club or organization found in Appendix A of this handbook (Hall County School Agenda - <https://www.hallco.org/web/school-agendas-planning-guides/>).

I **do NOT give** permission for my student to participate in the following club(s) or organization(s) during the new school year:

#### **7. CODE OF CONDUCT:**

I have reviewed the Hall County Code of Conduct and Discipline Procedures (Hall County Code of Conduct - <https://www.hallco.org/web/code-of-conduct/>) with my child. My child and I are aware of school rules and regulations. I agree to assume responsibility for the care and return of all materials issued to my child. I understand that I will be assessed a fee for loss or damage, and I agree to pay the assessed fee(s). Check the box below:

☐

**I sign and attest I have reviewed the Code of Conduct with my child. My child and I understand and agree to the rules and procedures outlined in the “Code of Conduct” section above.**

#### **8. STUDENT SCHOOL AGENDAS AND PLANNING GUIDES:**

I have reviewed the student handbook (Hall County School Agendas and Planning Guides - <https://www.hallco.org/web/school-agendas-planning-guides/>) My child and I are aware of school rules and regulations. I agree to assume responsibility for the care and return of all materials issued to my child. I understand that I will be assessed a fee for loss or damage and I agree to pay the assessed fee(s). Check the box below:

☐

**I sign and attest I have reviewed the student handbook with my child. My child and I understand and agree to the rules and procedures outlined in the “Student Handbook” section above.**

#### **9. STUDENT DEVICE ACCEPTABLE USE AND CHECKOUT AGREEMENT:**

I have reviewed the Acceptable Use Agreement (<https://www.hallco.org/web/aua-25-26-sy/>) with my child and we are aware of the conditions of the program and understand the terms of the fee schedule. Check the box below:

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**I sign and attest I have reviewed the Acceptable Use Agreement with my child. My child and I understand and agree to the rules and procedures outlined in the “Student Device Acceptable Use and Checkout Agreement” section above.**

Additionally, please see the links below to other important information regarding the new school year:

- Sick Symptoms Notification to Parents/Guardians: <https://www.hallco.org/web/sick-symptoms-notification/>
- Excused/Unexcused Absences Notification to Parents/Guardians: <https://www.hallco.org/web/excused-unexcused-absences-notification/>
- Kindergarten and School Attendance Notification to Parents/Guardians: <https://www.hallco.org/web/kindergarten-and-school-attendance-notification/>
- For all other HCSD information, please visit: <https://www.hallco.org>

***This signed form will be retained annually in each student’s file.  
If you have any questions, please contact your child’s school.***

#### **PARENT/GUARDIAN SIGNATURE:**

**ACCEPT:** Please select **SIGN** on the signature page at the end of the documents to **accept** the selections you have made for your child on these forms. By accepting these forms, parents/guardians agree to and acknowledge the terms outlined in each section as indicated by the parent/guardian selections on the forms.

**DECLINE:** Please select **DECLINE** on the signature page below to **decline** the selections you have made for your child on these forms. By declining this form, parents/guardians are refraining from acknowledging the terms outlined in each section indicated by the parent/guardian selections on the forms.