

**COCHRANE-FOUNTAIN CITY ELEMENTARY SCHOOL
MANUAL AND POLICY UNDERSTANDING AGREEMENT
2018-19**

Dear Parent/Guardian:

Your child has been issued a copy of the Cochrane-Fountain City School District Student-Parent Manual. We ask both parent and student to read through this manual in order to better understand the policies and rules of our school.

Your signatures below indicate that parent and student have read, understand and agree to abide by all the policies and procedures as contained in the entire manual.

Students who do not return this form will not be allowed to participate in any co-curricular activities, field trips, etc., until the form is received by the office.

We have read, understand and agree to abide by the policies and procedures as outlined in the 2018-19 Cochrane-Fountain City Student-Parent Manual.

**Student's Grade _____ Date _____

**Student Signature _____

**Parent/Guardian Signature _____