



ST. TERESA CATHOLIC SCHOOL
 1108 LEBANON AVENUE
 BELLEVILLE, IL 62221

SCHOOL EMERGENCY FORM

Family Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Primary Family Phone Number: _____ Primary Email Address: _____

NAMES OF CHILDREN ATTENDING

NAME	GRADE	BIRTHDATE	SCHOOL DISTRICT/PUBLIC SCHOOL
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PARENT/GUARDIAN INFORMATION:

Name: _____ Relationship to Student: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Place of Employment: _____

Name: _____ Relationship to Student: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Place of Employment: _____

In case of natural disaster or emergency, your child(ren) may not leave school unless picked up by an adult. Please list several adults who you would authorize to pick up your child(ren) in case of natural disaster or emergency.

NAME	RELATIONSHIP TO STUDENT	PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

PHYSICIAN TO CONTACT IN CASE OF AN EMERGENCY:

Name: _____ Phone Number: _____

PLEASE PROVIDE ANY PERTINENT MEDICAL INFORMATION THE SCHOOL SHOULD KNOW, FOR EXAMPLE POOR HEARING, EYE SIGHT, ALLERGIES, ETC.:

NAME	GRADE	PERTINENT MEDICAL INFORMATION
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

THIS INFORMATION WILL BE USED FOR SCHOOL CLOSINGS:

Parent(s) Name(s): _____ Student(s) First Name(s): _____

Phone #1: _____ Phone #2: _____ Phone #3: _____

Email #1: _____ Email #2: _____ Email #3: _____

**CERTIFICATION OF MEDICAL INSURANCE
AND
INDEMNITY AGREEMENT**

The undersigned, as parent(s) or legal guardian(s) of _____
("Child"), do hereby certify to 1 ~ ("School") and the Catholic Diocese of Belleville ("Diocese")
the following:

(complete Section below that applies)

SECTION 1

_____ The Child is covered under a medical insurance policy or health care plan,
specifically:

_____ (Name of Insurer or Plan)

_____ (Policy or Group Number)

SECTION 2

_____ I/We agree to obtain Student Accident Insurance which is offered through
the School.

I/We further understand that the School does not provide any medical insurance coverage
for the Child, and that I/We assumes all responsibility for payment of any medical expenses
(including, but not limited to, doctors' fees, hospital charges, or any other medical or related
charges) incurred by the child due to any injury or illness that occurs while the Child is in
attendance at the School, or participating in any School-sponsored activity, including athletic
events.

I/We hereby agree to hold harmless and indemnify the School and Diocese, including
their employees, volunteers, clergy and religious, from any claims for medical expenses
described above.

I/We have read the above Agreement and fully understand the terms contained herein,
and agree to abide by its terms.

(Date)

(Parent/Guardian)

(Parent/Guardian)



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ADDENDUM I
ANTI-BULLYING PLEDGE

Anti-Bullying Pledge – Parents

We the parents of St. Teresa's Catholic School agree to join together to stamp out bullying at our school.

We believe that everybody should enjoy our school equally, and feel safe, secure, and accepted regardless of color, race, gender, popularity, athletic ability, intelligence, religion, and nationality.

Bullying can be pushing, shoving, hitting, and spitting, as well as name calling, picking on, making fun of, laughing at, and excluding someone. Bullying causes pain and stress to victims and is never justified or excusable as "kids being kids," "just teasing" or any other rationalization. The victim is never responsible for being a target of bullying.

By signing this pledge, we the parents agree to:

1. Keep themselves and their children informed and aware of school bullying policies.
2. Work in partnership with the school to encourage positive behavior, valuing differences, and promoting sensitivity to others.
3. Discuss regularly with their children their feelings about school work, friendships, and relationships.
4. Inform faculty of changes in their children's behavior or circumstances at home that may change a child's behavior at school.
5. Alert faculty if any bullying has occurred.

Parent Signature: _____

Parent Name (printed): _____

Date: _____

Parent Signature: _____

Parent Name (printed): _____

Date: _____



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618-235-4066

PARENT HANDBOOK

I (We) have received, discussed, and support the contents of the 2018-2019 Parent Handbook for St. Teresa School.

Parent Signature: _____

Parent Name (printed): _____

Date: _____

Names of Student(s) and Grades: (Please print)

_____	Grade _____
_____	Grade _____
_____	Grade _____
_____	Grade _____
_____	Grade _____



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August 9, 2018

Hello, Parents and Guardians of St. Teresa Students!

For those of you who have not met me, my name is Janine Gosebrink. I am the nurse at St. Teresa School. My hours are 7:30am-3:30pm on regular school days. I work in the office with our secretary, Mrs. Heinen, and her assistants, Mrs. Dowling and Mrs. Dunn. I often assist answering the phones and the door in addition to my regular nurse duties.

There are some important forms that should be on file at the beginning of the school year. If your child(ren) have any health concerns or special medication needs, please plan to contact me. I can be reached at the school office at 235-4066.

For food allergies, we do have additional forms that need to be completed by the physician. Please contact the office for those forms or you can find them on the school website. Medications for food allergies need to be in the office by the first day of school since lunch will be served starting that day. Also, those students with asthma are required to have an asthma action plan on file in addition to an inhaler kept at school. Please make sure that the medications are in their original packaging, marked with the student's name. The physician's orders must accompany the medications.

I manage all paperwork related to the Illinois-required physicals, dental exams and eye exams, including sports physicals. Additionally, I provide hearing and vision screening in late October for those students required by the State of Illinois to be screened. If your child is followed for hearing and/or vision concerns, please contact me.

I look forward to meeting you and your students, as well as seeing our returning families this upcoming school year. Don't hesitate to contact me with any questions or concerns.

Sincerely,

Janine L. Gosebrink, RN, BSN
Nurse
St. Teresa School



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July 1, 2018

Hello, I would like to take this opportunity to welcome back all returning students and send out a very special welcome to all of our new students. For those of you who do not know me, I am Sharon Sullivan, and I am the food administrator for St. Teresa School. The rest of the cafeteria staff is Sue Potje, Vicky Dunn, Chris Boivin, and Carl Reed. We are looking forward to a great year serving your child/children through our lunch program. If anyone has any suggestions, please don't hesitate to bring them to my attention.

The cost of the lunch for this year will be **\$2.75**. The **\$2.75** cost will include the entrée, sides and choice of milk. If a student wishes to purchase extra milk, or bring their lunch and wish to purchase milk, the cost is **\$.60**. Their options are 1% white, fat free white, or fat free chocolate milk.

At this time, we will only be offering snacks/ala carte items (extra prepared meal items), or extra entrees on an as-available basis to fifth through eighth grade students, at a price of **\$.35 to \$.75** (snacks/ala carte items) and **\$2.00** (extra entrée). Snacks typically consist of yogurt, pretzels, baked chips, fruit, etc. All prices are subject to change.

Pre-K Parents: Your children only have the option of the first choice on the lunch menu.

There are two options for paying for lunch this year:

Look at the monthly lunch menu, determine the number of meals your child/children will purchase, either weekly or monthly, multiply by **\$2.75**, and use one of the two options below for paying for your child/children's lunches.

OPTION #1: ONLINE PAYMENT – Payments can be made using your We Share account. This option can be accessed through the school's website.

OPTION #2: PREPAID ACCOUNT – This is a prepaid account to **St Teresa School Lunch Account**. Checks are preferable, made payable to **St. Teresa School Lunch Account**.

Please put your child/children's name(s), dollar amount, grade, and the word 'lunch' on the envelope with the check made out to 'St. Teresa School Lunch Account'.

One check per family will suffice. Please do not include any other money owed to school in this check i.e.: extended care, library books, field trips, etc.

To check your lunch account balance, you may look on your OptionC account.



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To address safety and time constraints, the microwave ovens will be available for 5th grade through 8th grade students. Each student will be allowed 90 seconds to warm their food items with the microwave ovens.

Again this school year all students must have the form at the bottom of this page on file whether or not they have any allergies or food restrictions. Please fill out and return the bottom portion **by August 9, 2018 (packet pick-up)** so that I can make sure all of our students are getting any special diet needs they require.

We do not serve lunch on early dismissal days. If your child/children will be staying at extended care those days they will need to bring a lunch from home.

Please either pay online or prepay your account by bringing a check or cash to Packet Pick Up on August 9, 2018.

Sincerely,

Sharon A. Sullivan

Please list below any allergies or dietary restrictions that I will need to be aware of, or if you do not wish your child to purchase snacks/ala carte items, or extra entrees and return it to the school **by August 9, 2018.**

This form needs to be updated yearly! This must be turned in for every student.

Student Name and Grade: _____

Yes/No Allergies: _____

Yes/No Food Restrictions: _____

My Child/Children **May Not Buy** (circle one or more) Grades 5-8 are the only students that can buy these items: Snacks/Ala Carte Items Extra Entrees