Other

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| **Orange Township Public Schools**  **STUDENT, PARENT and/or GUARDIAN**  **H.I.B. CONTRACT**  **FORM B** |

**Administration Building**

**Department of Special Services**

**451 Lincoln Avenue Orange, New Jersey 07050**

Website: http//www.orange.k12.nj.us

Office: 973-677-4027 Fax: 973-677-4035

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_**

**(print) (Current)**

**Parents/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Directions**: Please read the Parent/Student HIB Handbook and the District Harassment, Intimidation and Bullying Policy. Discuss the contents with your child. This agreement is in partnership with the Orange Township Public Schools District Harassment, Intimidation and Bullying Policy 5512 (Students) and Regulations 5512 (Students), which can be found on the school district’s webpage under Special Services (http//www.orange.k12.nj.us).

**Parent/Guardian**: By signing below, I certify that:

* I have read the Harassment, Intimidation and Bullying Policy and Regulations 5512 (Students) and understand their significance
* I have discussed the policy, regulations, and handbook with my child
* I understand the Harassment, Intimidation, and Bullying Policy will be fully enforced in schools in the district
* I understand how to report an incident of Harassment, Intimidation and Bullying and the process that needs to be followed
* I understand the Due Process Rights for All Accused and Alleged Victim (s).

Parent Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date: **\_\_\_\_**

(Please print)

**Student**: By signing below I certify that:

* I have read Harassment, Intimidation and Bullying Policy and Regulations and Handbook or have had them read to me and

understand their significance

* I have discussed the Harassment, Intimidation and Bullying Policy, Regulations, and Handbook with my parents/guardians
* I understand and agree to abide by the rules stated in the Harassment, Intimidation and Bullying Policy, Regulations, and

handbook

* I know that if I am an offender of Harassment, Intimidation or Bullying and violate this contract disciplinary actions listed in the
* Student Code of Conduct Policy may be taken against me

Student Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date: **\_\_\_**