



Educational Services That Transform Lives

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EMERGENCY PHONE NOTIFICATION SYSTEM

ESBOCES Teacher: _____

____ AM Session ____ PM Session

The Academy prides itself on putting the health and safety of our students first at all times. In an effort to keep parent(s)/person(s) in parental relation abreast of up-to-the minute information regarding emergency situations, we are instituting an Emergency Phone Notification System. This system will contact you with important information if there is a situation you need to be aware of.

The telephone numbers you provided on your child's most recent Academy Application Form will be used as your notification phone numbers. If you wish to update that information or make changes, please complete the information below:

Parent/Person in Parental Relation Name: _____
(Please print)

Parent/Person in Parental Relation Email: _____

Child's Name: _____
(Please print)

Telephone Number(s) you wish to receive message on:

Home: _____

Cell: _____

Work: _____

NOTE: *Emergency Messages will go to ALL available numbers.*

Please check here if you need communication in another language.

Home Language: _____
(Please print)

If you have any questions, or require any additional information, please do not hesitate to contact your child's Academy center. Thank you for your anticipated cooperation.

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