



**2024-2025 Usajili na Utambuzi /
2024-2025 Registration and Acknowledgements**

*** Rejesha fomu zilizokamilishwa kwa shule ya mtoto wako.
*Return completed forms to your child's school.**

Jina la mwanafunzi/Student Name: _____ Kitambulisho cha mwanafunzi/Student ID: _____

Jengo la Kujiandikisha/Bldg Name: _____ Darasa la Mwanafunzi/Grade: _____

Ninatoa ruhusa kwa mwanafunzi wangu kushiriki katika safari za shambani / I give permission for my student to participate in local field trips: _____ NDIYO/yes _____ HAKUNA/no

Habari ya DEMOGRAPHIC:

Anwani ya Nyumbani ya Mwanafunzi: _____ Sogeza katika tarehe: _____
Student Home Address Move in date

Jina la Mlezi #1: _____ Uhusiano na mwanafunzi: _____
Guardian #1 Name Relationship to student

Anwani ya Mlezi #1: _____
Guardian #1 Address

Mlezi #1 Simu: _____ (nyumbani) _____ (Seli) _____ (kazi)
Guardian #1 Phone home cell work

Barua pepe ya Guardian # 1: _____
Guardian #1 email

Jina la Mlezi #2: _____ Uhusiano na mwanafunzi: _____
Guardian #2 Name Relationship to student

Anwani ya Mlezi #2: _____
Guardian #2 Address

Mlezi #2 Simu: _____ (nyumbani) _____ (Seli) _____ (kazi)
Guardian #2 Phone home cell work

Barua pepe ya Guardian # 2: _____
Guardian #2 email

Maelezo mengine ya Mawasiliano: Jumuisha jina, simu, na uhusiano wa anwani za dharura.

Other Contact Information: Include name, phone, and relationship for emergency contacts.

Jina/Name: _____ Simu/Phone: _____ Uhusiano/Relationship: _____

Jina/Name: _____ Simu/Phone: _____ Uhusiano/Relationship: _____

Tafadhali tujulishe ikiwa mtoto wako atahitaji usafiri wa basi kwa mwaka wa shule wa **2024-2025 .**

BUS INFORMATION: Please let us know if your child will need bus transportation for the **2024-2025** school year.

Mwanafunzi wangu anahitaji basi la kufika na / au kutoka shuleni mwaka huu: _____ NDIYO/yes _____ HAKUNA/no

My student needs a bus to get to and/or from school this year:

Kama ndiyo, tafadhali onyesha shule, kutoka shule, au wote wawili: _____ shuleni _____ toka shule _____ zote mbili
If YES, please indicate to school, from school, or both: to school from school both

Je, mtoto wako atachukuliwa / kuondolewa kwenye anwani nyingine isipokuwa nyumba yako? * _____ NDIYO/yes _____ HAKUNA/no
Will your child be picked up/dropped off at an address other than your home? *

Ikiwa ndio, anwani mbadala ni nini: _____
If yes, what is the alternate address:

Ikiwa unaenda kwa anwani mbadala, tafadhali onyesha njia : _____ shuleni _____ toka shule _____ zote mbili
If going to an alternate address, please indicate the route(s): to school from school both

* Anwani tu ambazo ziko katika eneo moja la mahudhurio kama jengo la mahudhurio ya mwanafunzi linaweza kutumika kwa uelekezaji mbadala. / *Only addresses that are in the same attendance area as the student's attendance building may be used for alternate routing.



Usajili na Utambuzi / Registration and Acknowledgements

Shule za umma za Columbia zinahitajika kwa sheria kuuliza maswali yafuatayo:

Columbia Public Schools is required by law to ask the following questions:

1. Je, umehama kutoka mjini kufanya kazi katika kilimo na kurudi Columbia ndani ya miezi 12 iliyopita?
Have you moved out of town to work in agriculture and returned to Columbia within the past 12 months?
_____ NDIYO/yes _____ HAKUNA/no

Ikiwa ndio, tafadhali angalia aina ya kazi (yote ambayo yanatumika)/If yes, please check the type of work (all that apply):

- | | |
|---|--|
| _____ Fanya kazi kwenye kitalu (mimea);
Work in a nursery (plants) | _____ Kulisha Kuku, kukusanya mayai, kufanya kazi katika hatchery
Feeding Poultry, gathering eggs, working in a hatchery |
| _____ Kupanda au kuvuna mazao
Planting or harvesting crops | _____ Usindikaji wa nyama, kuku, matunda, mboga mboga, bidhaa za maziwa
Processing meat, poultry, fruit, vegetables, dairy products |
| _____ Kukamua ng'ombe kwenye shamba la maziwa
Milking cows on a dairy farm | _____ Uvuvi wa kibiashara au kufanya kazi kwenye shamba la Samaki
Commercial fishing or work on a fish farm |
| _____ Kupanda/kutunza miti kwa ajili ya kuuza
Growing/tending trees for sale | _____ Nyingine _____
Other |

Nafasi ya Kazi ya Mlezi: _____
Guardian's place of employment

2. Je, mtoto huyu ametelekezwa hospitalini? Has this child been abandoned in a hospital?
_____ NDIYO/yes _____ HAKUNA/no
3. Je, unatoa huduma ya malezi kwa mtoto huyu kupitia uwekaji na Idara ya Watoto ya Missouri?
Are you providing foster care for this child through placement by the Missouri Children's Division?
_____ NDIYO/yes _____ HAKUNA/no
4. Je, unashiriki nyumba za watu wengine kwa sababu ya kupoteza makazi, shida ya kiuchumi, au sababu kama hiyo? / Are you sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason?
_____ NDIYO/yes _____ HAKUNA/no (Sababu sawa – maoni / Similar reason-comment _____)
5. Je, kwa sasa unaishi katika motel, hoteli, mbuga za trela, au uwanja wa kambi kwa sababu ya ukosefu wa makazi mbadala ya kutosha? / Are you currently residing at a motel, hotel, trailer parks, or camping ground due to the lack of alternative adequate accommodations? ?
_____ NDIYO/yes _____ HAKUNA/no
6. Je, kwa sasa unaishi katika gari, bustani, nafasi ya umma, jengo lililoachwa, makazi ya kawaida, kituo cha basi au kituo cha treni, au mazingira sawa? Are you currently living in a car, park, public space, abandoned building, substandard housing, bus or train station, or similar setting?
_____ NDIYO/yes _____ HAKUNA/no
7. Je, kwa sasa unaishi katika makazi ya dharura au ya mpito? / Are you currently residing in an emergency or transition shelter?
_____ NDIYO/yes _____ HAKUNA/no
8. Je, makazi yako ya msingi ya usiku ni mahali pa umma au binafsi ambayo hayajateuliwa au kutumika kama malazi ya kawaida ya kulala kwa wanadamu? / Is your primary nighttime residence a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings?
_____ NDIYO/yes _____ HAKUNA/no



Ushiriki wa Vyombo vya Habari - Lazima usasishaji kila mwaka. / Media Participation – Must be updated annually.

_____ Ndiyo - Ninakubali wilaya ya shule kujumuisha picha ya mtoto wangu, sauti, na / au jina katika machapisho ya vyombo vya habari vya umma au shule. / Yes - I consent to the school district to include my child's image, voice, and/or name in public or school media publications.

_____ Hapana - sitaki mtoto wangu kupigwa picha, kuhojiwa, na / au video iliyopigwa na wawakilishi wa Shule za Umma za Columbia na / au vyombo vya habari. Taarifa yoyote au picha zilizopatikana kutoka kwa shughuli hizi haziwezi kutolewa na wilaya ya shule na / au vyombo vya habari kwa matumizi katika matangazo, utangazaji, au shughuli za elimu. Hii ni pamoja na: machapisho ya CPS, video, tovuti za shule, na vipindi vya televisheni vya shule. No - I do not want my child to be photographed, interviewed, and/or video taped by representatives of Columbia Public Schools and/or media outlets. Any information or images obtained from these activities may not be reproduced by the school district and/or media outlets for use in advertising, publicity, or educational activities. This includes: CPS publications, videos, school websites, and school television programs.

Kitabu cha Mwaka / Yearbook

Ikiwa unachagua kutoka kwa kutolewa kwa vyombo vya habari, tafadhali onyesha ikiwa unataka picha na jina la mtoto huyu kuonekana kwenye kitabu cha mwaka. / If you are opting out of the media release, please indicate whether or not you want this child's image and name to appear in the yearbook.

_____ Ndio, ninakubali kuwa na picha na jina la mtoto huyu kuonekana katika kitabu cha mwaka cha shule.
Yes, I agree to have this child's image and name appear in the school's yearbook.

_____ Hapana, sikubali kuwa na picha na jina la mtoto huyu kuonekana katika kitabu cha mwaka cha shule.
No, I do not consent to having this child's image and name appear in the school's yearbook.

Safari ya Shamba / Field Trip

_____ Ndio - Ninatoa ruhusa kwa mtoto huyu kuhudhuria safari za shamba zinazohusiana na shule. / Yes - I give permission for school-related curricular field trips.

_____ Hapana - Sikubali mtoto huyu kushiriki katika safari za shamba zinazohusiana na shule. / No - I do not consent for school-related curricular field trips.

Kitabu cha Mzazi / Parent Handbook

_____ Ninakubali jukumu la maudhui ya Kitabu cha Mwanafunzi / Mwanafunzi. Ninaelewa kwamba kitabu cha mkono kina habari ambayo mimi na mtoto wangu tunaweza kuhitaji wakati wa mwaka wa shule. Ninaelewa kwamba shule zinapaswa kuwa mahali salama na kwamba wanafunzi wote watawajibika kwa tabia zao. Ninaelewa kwamba nakala za karatasi za kitabu hiki zinapatikana katika kila shule au zinaweza kupatikana kwa njia ya elektroniki kwa: <https://www.cpsk12.org/cms/lib/MO01909752/Centricity/Domain/47/StudHandsec.pdf> / I accept responsibility for the content of the Student/Parent Handbook. I understand that the handbook contains information that my child and I may need during the school year. I understand that schools should be a safe place and that all students will be held accountable for their behavior. I understand that paper copies of this handbook are available at each school or may be accessed electronically

Opt-Out ya kijeshi: tu lengo kwa wanafunzi katika darasa 11/12 / **Military Opt-Out:** only intended for students in grades 11/12

Sheria ya shirikisho inahitaji wilaya za shule kutoa waajiri wa kijeshi habari fulani. Wilaya ya shule lazima itoe, kwa ombi la waajiri wa kijeshi, ufikiaji wa majina ya wanafunzi wa shule ya upili, anwani, na orodha za simu, isipokuwa mzazi aombe vinginevyo. Federal law requires that school districts provide military recruiters certain information. The school district must provide, upon request by military recruiters, access to high school students' names, addresses, and telephone listings, unless the parent requests otherwise.

- Mwanafunzi wa shule ya sekondari (ikiwa ana umri wa miaka 18) au mzazi wa mwanafunzi anaweza kuomba kwamba jina la mwanafunzi, anwani, na orodha ya simu HAI tolewa kwa waajiri wa kijeshi. Consent – The high school student (if 18 years old) or the parent of the student may request that the student's name, address, and telephone listing NOT be released to military recruiters.
- Upatikanaji wa wanafunzi - Kila wilaya itatoa waajiri wa kijeshi upatikanaji sawa kwa wanafunzi wa shule ya sekondari kama inavyotoa (kwa ujumla) kwa taasisi za elimu ya juu, vyuo vya jamii, na waajiri wanaotarajiwa. Access to students – Each district shall provide military recruiters the same access to high school students as it provides (in general) to higher education institutions, community colleges, and prospective employers.

Ikiwa hutaki jina la mwanafunzi wako, anwani na orodha ya simu iliyotolewa kwa waajiri wa kijeshi, tafadhali onyesha upendeleo huo hapa.

Wanapaswa kupokea kabla ya Septemba 30 kila mwaka./ If you do not want your student's name, address and telephone listing released to military recruiters, please

indicate that preference here. MUST be received before Sept 30th annually. _____ **Usitoe taarifa ya mwanafunzi wangu kwa ajili ya kuajiri jeshi. / Do NOT release my student's information for military recruitment.**

_____ **Allergy / Anaphylaxis:** Katika tukio la tukio la anaphylaxis, wakati mmenyuko wa mzio unaweza kusababishwa na kuumwa na wadudu, dawa au mzio wa chakula au allergen isiyojulikana, diphenhydramine (Benadryl®) na / au epinephrine inayoweza kuingizwa kiotomatiki inaweza kutolewa kwa wanafunzi. EMS (911) itaarifiwa ikiwa epinephrine inasimamiwa. / **Allergy/Anaphylaxis:** In the event of an anaphylaxis episode, when an allergic reaction may be triggered by an insect bite, drug or food allergy or an unknown allergen, diphenhydramine (Benadryl®) and/or auto-injectable epinephrine may be administered to students. EMS (911) will be notified if epinephrine is administered.

_____ **Pumu:** Katika tukio la tukio kali la pumu ambapo mwanafunzi hajibu dawa yake ya awali ya misaada ya haraka, au hana usambazaji shuleni, hatua za haraka zitachukuliwa. EMS (911) itaarifiwa na dalili za kuendelea kwa shida ya kupumua na Duoneb® itasimamiwa. / **Asthma:** In the event of a severe asthma episode where a student does not respond to his/her initial quick relief medication, or does not have a supply at school, immediate action will be taken. EMS (911) will be notified with continued signs of respiratory distress and Duoneb® will be administered.

Huduma za Lishe

____ Nakubali kuwa nina access na **Maswali ya bure na ya kupunguzwa ya chakula cha mchana na matumizi** kama sehemu ya uandikishaji wa kila mwaka wa msomi wangu, ambayo pia inapatikana kwenye tovuti ya idara ya Huduma za Lishe: <https://www.cpsk12.org/nutritionservices/> / I acknowledge that I have access to the **Free and Reduced Lunch FAQ and application** as part of my scholar's annual enrollment, which is also available on the Nutrition Services department website: <https://www.cpsk12.org/nutritionservices>

**** Maombi lazima yawasilishwe kila mwaka ili kudumisha hali ya chakula cha mchana ya bure / iliyopunguzwa. / Applications must be submitted annually to maintain free/reduced lunch status.**

____ Natambua kuwa ninafahamu kuwa **Utaratibu wa Ukusanyaji wa Deni** hati kama sehemu ya uandikishaji wa kila mwaka wa msomi wangu ambao unaweza pia kupitiwa kwenye tovuti ya idara ya Huduma za Lishe chini ya **Taratibu za kifungua kinywa na chakula cha mchana.** / I acknowledge that I am aware of the **Debt Collection Procedures** document as part of my scholar's annual enrollment which may also be reviewed on the Nutrition Services department website under **Breakfast and Lunch Procedures.**

____ Ninaelewa kwamba wanafunzi wanaohitimu Programu ya Chakula cha mchana cha Shule ya Taifa wanaweza pia kustahili msaada wa ziada wa kifedha katika mwaka wa shule. Ninatoa rufusa kwa hali ya bei ya chakula cha mchana ya mwanafunzi wangu ya bure / iliyopunguzwa ili kufunuliwa kwa ofisi ya ushauri wa shule kwa madhumuni ya kuunganisha na fursa zingine za kifedha kwa mwanafunzi wangu. / I understand that students who qualify for the National School Lunch Program may also be eligible for additional financial support throughout the school year. I give permission for my student's free/reduced lunch price status to be disclosed to the school counseling office for the purpose of connecting to other financial opportunities for my student.

Tarehe ya Saini ya Mzazi/Guardian _____

Parent/Guardian Signature Date

RUHUSA YA KUSAFIRI/Travel Consent

Ninampa mwanafunzi wangu (scholar name), _____, nambari ya mwanafunzi (nambari ya kupokea chakula cha mchana) (Lunch Number) _____, ruhusa ya kushiriki katika shughuli za usafiri. Nitajulisha shule yangu kuhusu ruhusa ya mwanafunzi wangu ya kutokuwepo ikiwa safari ya shule itafanyika wakati wa mwaka wa kawaida wa shule. I hereby give my scholar _____, Student number _____, permission to participate in the travel activities. I will notify my school of my scholar's excused absence if the school trip takes place during the regular school year.

(SAINI YA MZAZI/MLEZI) Parent/Guardian Signature

(TAREHE) Date

TARATIBU NA DESTURI ZA MWENENDO WA MWANAFUNZI/Scholar Conduct Practices and Procedures

1. Hupaswi kuharibu mali ya umma. Uharibifu wowote wa mali yoyote lazima ulipiwe na mtu binafsi au kikundi kinachowajibika. There shall be no defacing of public property. Any damages to any property must be paid for by the individual or group responsible.
2. Wanafunzi wanapaswa kuwafahamisha kila wakati washauri wao ambao ni watu wazima kuhusu shughuli zao na mahali walipo. Scholars shall keep their adult advisors always informed of their activities and whereabouts.
3. Wanafunzi wanapaswa kufika kwa wakati na kuwa tayari kwa shughuli zote. Scholars should be prompt and prepared for all activities.
4. Wanafunzi hawapaswi kuwa na vinywaji vya pombe au dawa za kulevya za namna yoyote wakati wowote, chini ya hali zozote. No alcoholic beverages or narcotics in any form shall be possessed by scholars at any time, under any circumstances.
5. Huruhusiwi kuvuta sigara ya msokoto au ya mvuke. No smoking or vaping will be permitted.
6. Hakuna mwanafunzi anayepaswa kuondoka katika maeneo yaliyotengwa (isipokuwa kwa shughuli zilizoidhinishwa) isipokuwa awe amepewa ruhusa na mshauri au mwangalizi ambaye ni mtu mzima. No scholar shall leave designated areas (except for authorized activities) unless permission has been received from the adult advisor or chaperone.
7. Wanafunzi wanapaswa kuhudhuria shughuli na vikao vyote vya jumla walivyotengewa, ikiwa ni pamoja na warsha, matukio ya ushindani, mikutano ya kamati, nk. ambako wamesajiliwa isipokuwa ikiwa wanashiriki katika shughuli fulani maalum inayofanyika kwa wakati mmoja. Scholars are required to attend all general sessions and activities assigned, including workshops, competitive events, committee meetings, etc. For which they are registered unless engaged in some specific assignment taking place at the same time.
8. Wanafunzi wanapaswa kubeba au kuvaa kitambulisho kinachofaa kila wakati. Scholars should always be carrying or wearing appropriate identification.
9. Unatarajiwa kuvaa mavazi yanayofaa. Appropriate dress is expected.
10. Wanafunzi wanapaswa kutumia teknolojia kwa njia inayofaa na ya heshima. Scholars will use technology in an appropriate and respectful manner.
11. Wanafunzi hawapaswi kutumia lugha au kujihusisha katika kitendo chochote cha uasherati, kisichofaa, cha kingono au kichafu. Scholars shall not engage in any lewd, indecent, sexual, or obscene act or expression.
12. Wanafunzi hawapaswi kujihusisha katika vitendo vya unyanyasaji wa kimatamshi, kimwili au kingono, kudhalilisha au kuwatusi wengine. Matumizi ya maneno ya kufedhehesha dhidi ya mtu yeyote kwa msingi wa asili, rangi, dini, utaifa, ukoo, umri, jinsia, mwelekeo wa kuvutiwa kimapenzi au ulemavu hayaruhusiwi. Scholars shall not engage in verbal, physical, indecent, sexual harassment, hazing, or name-calling. The use of slurs against any person on the basis of race, color, religion, national origin, ancestry, age, sex, sexual orientation, or disability is prohibited.

Ninampa ruhusa mwanafunzi aliyetajwa katika hati hii ahudurie na kusafiri kwa shughuli zinazohusiana na safari. Ninatambua kwamba ukiukaji wa sheria zozote unaweza kusababisha kurudishwa nyumbani mara moja kwa mwanafunzi, kwa gharama ya familia/mlezi. Ni jukumu la mzazi/mlezi kumchukua mwanafunzi katika uwanja wa ndege, kituo cha basi, n.k., iwapo itahitajika mwanafunzi kurudishwa nyumbani. I approve of the scholar named in this document to attend and travel to trip-related activities. I realize that violation of any rules can result in the immediate return of the scholar, at family's/guardian's expense, to their home community. It is the responsibility of the parent/guardian to meet the scholar at the airport, bus terminal, etc. Should it be necessary to send their scholar home.

Nimefafanua na kujadiliana na mtoto wangu kuhusu Taratibu na Desturi za Maadili Mema ya Mwanafunzi. I have explained and discussed the Scholar Conduct Practices and Procedures with my child.

(SAHIHI YA MZAZI/MLEZI)

Parent/Guardian Signature

(TAREHE)

Date

IDHINI YA MATIBABU/Medical Consent

BIMA: Kila mshiriki anawajibika kwa gharama zake za matibabu. Bima ya matibabu **inapendekezwa lakini si lazima.**

Insurer: Each participant is responsible for their own medical expenses. Medical Insurance is recommended but not required.

Jina la Kampuni ya Bima ya Matibabu _____
Medical Insurance Company Name

Nambari ya Simu (_____) _____ Nambari ya Bima _____
Phone Policy Number

Daktari wa Mwanafunzi _____ Nambari ya Simu (_____) _____
Scholar's Physician Phone

Daktari wa Meno wa Mwanafunzi _____ Nambari ya Simu (_____) _____
Scholar's Dentist Phone

Ninaidhinisha wafanyakazi, makandarasi, watu wa kujitolea au wafanyakazi wengine wa matibabu wa CPS, wakiona kuwa ni muhimu kwa busara na hiari yao, kupata au kutoa huduma ya matibabu kwa mwanafunzi wangu, kumpeleka mwanafunzi wangu katika kituo cha matibabu na kupata matibabu (ikiwa ni pamoja na lakini si tu huduma ya afya ya kawaida au ya dharura, kulazwa hospitalini, kudungwa sindano, kudungwa dawa ya kutia ganzi au upasuaji) yanayozingatiwa kuwa muhimu kwa afya ya mwanafunzi wangu. Ninakubali kulipa gharama zote zinazohusiana na matibabu na usafiri huo na ninakubali kutolewa (kwa au na CPS) rekodi yoyote ya matibabu inayohitajika kwa makusudi ya matibabu, kupewa rufaa, kutoza bili au bima. Dokezo kwa wazazi/walezi: isipokuwa kwa kiwango kisichoruhusiwa na fomu hii, mwanafunzi wangu ana ruhusa ya kushiriki katika shughuli zote za CPS. Ninathibitisha kwamba maelezo yote yaliyo kwenye fomu hii ni sahihi na kamili na sijaficha maelezo yoyote. I authorize CPS staff, contractors, volunteers or other medical personnel, when they deem necessary using their judgement and sole discretion, if a parent/guardian cannot be reached, to obtain or provide medical care for my scholar, to transport my scholar to a medical facility and to secure treatment (including but not limited to routine or emergency health care, hospitalization, injection, anesthesia or surgery) considered necessary for my scholar's health. I agree to pay all costs associated with that care and transportation and agree to the release (to or by CPS) of any medical records necessary for treatment, referral, billing or insurance purposes. Note to parents/guardians: except to the extent limited by this form, my scholar has permission to participate in all CPS activities. I authorize that all information on this form is accurate and complete and i have not withheld any information.

Mimi, _____,

(JINA LA MZAZI/MLEZI) (UHUSIANO NA MWANAFUNZI)

Name of Parent/Guardian Relationship to Scholar

wa _____

(JINA LA MWANAFUNZI)

Name of Scholar

UTHIBITISHAJI WA WAJIBU WA KIBINAFSI NA MSAMAHA WA WAJIBU/

Acknowledgement of Personal Liability and Release of Liability

Mimi na mwanafunzi wangu tunawajibika kwa hatari yoyote inayoweza kutokea kutokana na usafiri wa mwanafunzi wangu kwenda, kushiriki na kurudi kutoka katika safari iliyoelezwa hapo juu. Ninakubali kuwajibika kikamilifu kwa gharama yoyote/zote za matibabu ya majeraha au ugonjwa wowote unaotokea kwa mwanafunzi wangu kutokana na usafiri wa mwanafunzi wangu kwenda, kushiriki na kurudi kutoka katika safari iliyoelezwa hapo juu.

Kwa kutia saina fomu hii, tunakubali kutoa msamaha wa wajibu kwa Wilaya ya Shule ya Columbia Nambari 93, Bodi yake, wanachama wa Bodi yake, wasimamizi, wakurugenzi, maafisa, walimu, maajenti, wafanyakazi, wawakilishi na watu wa kujitolea ("Wahusika Waliosamehewa") kutokana na, na dhidi ya madai, matakwa, vitendo, malalamiko, mashtaka yoyote/yote au wajibu wa namna nyingine ambao yeyote kati yao anaweza kuwajibishwa kutokana na au kwa njia yoyote inayohusiana na kupotea kwa mali au mali yoyote ya kibinafsi, uharibifu, ugonjwa, jeraha, ikiwa ni pamoja na kifo, kilichosababishwa kwa mwanafunzi wangu kupitia usafiri wa mwanafunzi wangu kwenda, kushiriki na kurudi kutoka katika safari ya nje iliyoelezwa hapo juu (Madai Yaliyosamehewa").

Tunakubali pia kufidia na kutoa msamaha wa wajibu kwa Wahusika Waliosamehewa kutokana na Madai Yaliyosamehewa, ikiwa ni pamoja na gharama yoyote/zote zinazohusika, ada za wakili, madeni, malipo na/au hukumu.

Tunaelewa kwamba tunaweza kukataa kutia saina fomu hii.

Tunathibitisha kwamba tumesoma kwa makini hati hii ya UTHIBITISHAJI WA WAJIBU WA KIBINAFSI NA MSAMAHA WA WAJIBU na tunakubali sheria na masharti yake kwa ufahamu na kwa hiari. Ninathibitisha pia kuwa mimi ni mzazi au mlezi rasmi wa mwanafunzi aliyetajwa katika Fomu hii.

Tumesoma na kuelewa hati hii ya UTHIBITISHAJI WA WAJIBU WA KIBINAFSI NA MSAMAHA WA WAJIBU.

Tumetia saina hati hii ya UTHIBITISHAJI WA WAJIBU WA KIBINAFSI NA MSAMAHA WA WAJIBU tarehe

_____, 20____.

(SAINI YA MZAZI/MLEZI) (Parent/Guardian Signature)

(TAREHE) (Date)

English: My scholar and I assume any risk that may arise from my scholar's transportation to, participation in and transportation from the above-described trip. I accept full responsibility for any and all medical expenses for any injuries or illness that occur to my scholar as a result of my scholar's transportation to, participation in, and transportation from the above-described trip.

By signing this form, we hereby release the Columbia School District No. 93, its Board, its Board members, administrators, directors, officers, teachers, agents, employees, assigns, and volunteers (the "Released Parties") from and against any and all claims, demands, actions, complaints, suits or other forms of liability that any of them may sustain arising out of or in any way related to any personal or property loss, damage, illness, injury, including death, caused to my scholar through my scholar's transportation to, participation in, and transportation from the above-described field trip (the "Released Claims").

We also agree to indemnify and hold harmless the Released Parties from the Released Claims, including any and all related costs, attorney fees, liabilities, settlements, and/or judgments.

We understand that we have the ability to refuse to sign this form.

We confirm that we have carefully read this ACKNOWLEDGEMENT OF PERSONAL LIABILITY AND RELEASE OF LIABILITY and agree to its terms knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the scholar identified in this Form.

This ACKNOWLEDGEMENT OF PERSONAL LIABILITY AND RELEASE OF LIABILITY has been read and is understood by us.