

PINELLAS COUNTY SCHOOLS
EXCEPTIONAL STUDENT EDUCATION (ESE)
HOSPITAL HOMEBOUND PARENT/GUARDIAN AGREEMENT FORM

The following responsibilities will be required of any parent/guardian of a student receiving services from a Hospital Homebound teacher:

1. Parent/guardian must sign the Hospital Homebound School and Physician Referrals at each initial evaluation or reevaluation giving PCS school employees permission to contact the medical doctor listed to gain information about the student's current and ongoing condition and to get pertinent information for the Hospital Homebound Referral packet.
2. Parent/guardian agrees that if the medical doctor requires a visit to examine or reexamine student to meet the criteria in number 1, parent will produce student to named medical doctor before the expiration term at no cost to parent.
3. Parent, guardian or primary caregiver shall provide a quiet, clean, animal-free, and well-ventilated setting where the teacher and student will work and ensure that the parent, guardian, primary caregiver, or supervising adult is present.
4. In collaboration with the teacher, the parent, guardian, or supervising adult, will establish a schedule for student study between teacher visits that is tailored to accommodate the student's medical condition and the requirements of the student's course of study.
5. If IEP Team has determined that telecommunication or virtual options are the best delivery of service for the student, parent shall ensure that the student is prepared to actively participate in learning during all sessions.
6. Parent, guardian, or supervising adult agrees to sign the weekly attendance logs to verify that student and teacher were present for learning during designated times. If student is absent, services will not be made up. However, if teacher is absent, teacher will work with parent to schedule a make-up day and time and will log as a make-up session on attendance logs.

I understand and agree to all the parent/guardian responsibilities listed above.

Parent/Guardian Name (print): _____

Parent/Guardian Name Signature: _____ Date: _____

Student Name (print): _____

Adult Student Signature: _____ Date: _____

Original – Homebound

Copy – Parent/Guardian