Clark County School District No. 161

INSTRUCTION **2580F**

Student Permission for Exposure to Animals(s)
To be used when animal(s) are brought into the classroom or learning center for educational purposes.

Student: _____ Grade/Teacher: _____

Dear Parent(s)/Guardian(s):
As allergies, asthma, immune problems, and/or other health concerns may make animal contact inappropriate for some students, District guidelines require prior parent/guardian permission for student contact with animal(s) in school.

On ___*(insert date)*___, the following animal(s) will visit my classroom for educational purposes:

☐ Cat	☐ Bird	☐ Ferret
☐ Guinea Pig	☐ Dog	☐ Rabbit
☐ Hamster	☐ Reptile or amphibian	☐ Rat
☐ Mouse	☐ Gerbil	☐ Other_____

The following animals are prohibited in schools:

1. Venomous or toxin-producing animals (e.g., certain spiders, insects, reptiles, and amphibians);
2. Wild or exotic animals;
3. Mammals at high-risk for transmitting rabies (e.g., bats, raccoons, skunks, foxes, and coyotes);
4. Non-human primates;
5. Stray animals;
6. Aggressive or unpredictable animals;
7. Any animal in the Idaho Invasive Species List; and
8. Any animal considered inherently dangerous.

The building principal or designee will ensure that the District's policies and procedures for the use of animals in education programs are followed. I will also supervise the entire student-animal contact session, have a clean and disinfected area for showing the animal(s), not allow food or drink in the animal showing area, and will appropriately dispose of animal waste. **Under no circumstances are students allowed to clean cages or handle animal waste.**

Please complete and return this form to me by _____*(date)*_____. If you have any questions or concerns, please feel free to contact me at _____*(insert contact information)*_____.

To Be Completed by Parent/Guardian:

☐ I **do** permit my student identified above to be exposed to the animal(s) listed above. I further agree to indemnify and hold harmless the School District and its employees and agents against any claims, except a claim based on willful and wanton conduct, arising out of my student's exposure to the animal(s) listed above.

☐ I **do not** permit my student identified above to be exposed to the animal(s) listed above. I understand that when the animal(s) listed above are present, my student will be excused from classroom attendance without penalty and given an alternative educational activity.

_____

Parent/Guardian Name (*please print*)

_____ _____

Parent/Guardian Signature Date

Parent/Guardian Name (*please print*)

_____ _____

Parent/Guardian Signature Date

Note: If only one parent/guardian signs this form, please certify the following:

I, _____ (parent/guardian), have full authority to sign and consent to this Permission Form and Release as an agent of any and all other parent(s) and/or legal guardian(s).

Policy History:
Adopted on: 09/14/2023
Revised on:
Reviewed on: