Minidoka County Joint School District #331

INSTRUCTION 2580F2

Student Permission for Exposure to Animals						
To be i	, ,	re brought into the clas	sroom o	r learning center for educational		
Studen	Student:			rade/Teacher:		
Dear P	Parent(s)/Guardian(s):					
inappr	_	nts, District guidelines		concerns may make animal contact prior parent/guardian permission for		
On	(insert date), the fo	llowing animal(s) will	visit my	classroom for educational purposes:		
	□ Cat	□ Bird		□ Ferret		
	☐ Guinea Pig ☐ Dog			□ D -4		
		☐ Reptile or amphibia☐ Gerbil		□ Rat □ Other		
	□ Mouse	□ Geron				
The fo	llowing animals are pro	ohibited 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					
4	coyotes); Non-human primates;					
	Stray animals;					
	Aggressive or unpredictable animals;					
	Any animal in the Idaho Invasive Species List; and					
8.	8. Any animal considered inherently dangerous.					
use of contact drink i	animals in education p t session, have a clean	rograms are followed. and disinfected area fo area, and will appropria	I will als r showin itely disp	ict's policies and procedures for the so supervise the entire student-animal ag the animal(s), not allow food or pose of animal waste. Under no dle animal waste.		
	complete and return the			e) If you have any (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:* (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).