



Exceptional Student Education

Parent/Student Agreement for Hospital Homebound Services

Form with fields for Student Name, Date, Grade, School, Student Number, Address, Date of Birth, City/State, Phone, and Alternate #.

Purpose of Hospital Homebound Program: Parent must initial each below

Alachua County Public Schools provides hospital homebound (HHB) services to students who are unable to attend school regularly

when eligibility requirements of state law are met and the student's Individual Education Plan (IEP) Team determines that instruction in the home or hospital is the least restrictive environment.

Per the Florida Department of Education's Bureau of Exceptional Education and Student Services (BEESS) Policy and Procedures Manual: Hospital Homebound Program and Services (2008), HHB should be viewed as a temporary intervention and are not intended to replace the classroom experience.

Before HHB services are initiated, the Parent/Guardian must agree to the following conditions:

- List of conditions for HHB services including: Provide a quiet, clean, well ventilated setting; Ensure that a responsible adult is present; A regular schedule, agreeable to both the family and HHB teacher; Notify the assigned HHB teacher if an appointment cannot be met; The parent/guardian will establish a schedule for student to study; Although the law requires annual medical reports, more frequent medical evaluations may be requested; The parent/guardian is responsible for obtaining a medical certificate renewal; The parent/guardian will make every effort not to schedule doctor appts. during scheduled instructional time; Absences will only be excused for medical appointments documented by a doctor's note.

Cause for Consideration for Dismissal

- List of causes for dismissal including: If the licensed physician or licensed psychiatrist recommends that the student is able to attend school or can no longer participate or benefit from HHB services; If required updated Medical Certificate has not been received before expiration date; If the student is employed in any capacity, goes on vacation, regularly participates in extracurricular activities, or is no longer confined at home; If the parent/guardian or student 18 years old or older cancels three sessions without 24 hours' notice; If the condition of the location where the HHB services are provided are not conducive for instruction or threatened the health and welfare of the HHB teacher.

Your signature below indicates your agreement with the terms listed above and understand the reasons for possible dismissal from the program.

Signature of Parent/Guardian

Date