



# Sacred Heart Academy

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## Memo

TO: Parents and Guardians of Kindergarten Students

FROM: Cindy Pope – Principal; Debbie Linehan – Vice Principal

DATE: September 20, 2011

RE: Important Student Information; Mid-day Contingency Plan

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### *Important Student Information:*

**Please review all information on the attached student information sheet. This information is updated on an annual basis. Please provide us with any missing information and/or make any necessary changes and return this sheet to your child's teacher on or before Monday, September 26, 2011. We need this critical information throughout the year.**

1. **Physical Address** – it is important that we have a physical address for your child. This would include street name and number.
2. **Emergency Closure Information** – We do not have this information on file for students who are new to our school. There may be occasions during the school year when we may have to close school due to weather conditions or other unforeseen circumstances. In the event that school has to be closed during the day, it is imperative that parents/guardians have a contingency plan in place. It is important that you make necessary arrangements to ensure your child's safety. This should include: how your child will travel home, who will meet your child and a telephone number for that person.
3. **Primary Synrevoice Contact Number** – this is the student's home phone number. This is the number that would be called for all general school announcements (including school closures in the morning, or a message to indicate that school is remaining closed for the day). As well, this is the first number that would be called in the event that school closed during the day. In addition, this number will be called by the automated Synrevoice System in the event of a child being absent from school.
4. **Secondary Synrevoice Contact Number** – this is the second number that would be called by the computerized system if there is no answer at the primary contact number. In many cases, this may be a parent work number. This number is only utilized for emergency closures during the day. It will not be contacted for a general school announcement, or to inform parents of closures prior to the start of the school day. In addition, this number will be called by the automated Synrevoice System in the event of a child being absent from school and we are unable to reach anyone at the primary number.

5. **Permission to use student photographs** – this allows the school and the Eastern School District to use a child’s photograph on their respective websites. As well, the school often recognizes student achievements through the local paper – *The Southern Gazette*.

#### *Mid-Day School Closure Contingency Plan*

Also, please complete the Mid-Day School Closure Contingency Plan. There may be occasions during the school year when we may have to close school due to weather conditions or other unforeseen circumstances. In the event that school has to be closed during the day, it is imperative that parents/guardians have a contingency plan in place. It is important that you make necessary arrangements to ensure your child’s safety. This should include: how your child will travel home, who will meet your child and a telephone number for that person.

If you have any questions or concerns, please contact the school.

## Mid-Day School Closure Contingency Plan

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Please check the **ONE(1)** box that pertains to your child and fill in the relevant information:

In the case of **unforeseen school closure** throughout the day, my child will:

Travel from school on his/her regular bus and get off at the designated bus stop. He/She will be met at home/bus stop by:

Name of person \_\_\_\_\_  
Relationship to child \_\_\_\_\_ Telephone: \_\_\_\_\_

Travel from school on his/her regular bus and get off at an alternate stop. My child will get off his/her regular bus at \_\_\_\_\_ and will be met at home/bus stop by:

Name of person \_\_\_\_\_  
Relationship to child \_\_\_\_\_ Telephone: \_\_\_\_\_

Travel from school on an alternate bus and will be met at home/bus stop by:

Bus/Route # \_\_\_\_\_ Driver: \_\_\_\_\_  
Name of person \_\_\_\_\_  
Relationship to child \_\_\_\_\_ Telephone: \_\_\_\_\_

Be picked up at the school by a parent/guardian or a designated person:

Name of person \_\_\_\_\_  
Relationship to child \_\_\_\_\_ Telephone: \_\_\_\_\_

My child has been informed of this arrangement and is fully aware of where he/she is to go.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Return to your child's teacher on or before September 26, 2011