Short-Term Disclosure Statement

Purpose: The Short-Term Home & Hospital Program was developed to meet the basic academic needs of Jordan School District students who cannot attend school for a short period of time. This may include recovering from a severe illness, an injury, an operation or condition that will not allow the student to be in attendance at regular school.

Procedure: In order to register for H & H services, parents must contact an Administrator at the student’s school, request H&H and provide the following documentation:

- Health Professional’s Statement of Needs with a projected time table of required services (a minimum of ten consecutive school days up to forty-five school days).

Protocols: Due to difficulties of delivering instruction in a setting other than at school, the guidelines are as follows:

1. The student will continue to be enrolled as an active student at their boundary school.
2. The Home & Hospital Program is a basic maintenance service. Because of limited instructional time & the requirements of certain classes, it is not always possible to maintain instruction or earn credit in all classes/subjects while a student is on short-term Home & Hospital.
3. When the registration process has been completed, your student will be assigned an H&H teacher, typically from the student’s school, who will meet with the student once a week for 2 hours. The teacher will act as a liaison between the school and home, helping the student complete work they are assigned by their regular teachers on CANVAS or on paper.
4. The H&H teacher will contact the parent/guardian to arrange an appropriate time for the weekly meetings. A responsible adult must be present in home the entire time during every H&H visit.
5. Failure to notify the H&H teacher of any cancellations will result in the student being dropped upon the second absence. If your student has 3 cancellations in a row the student will be dropped from the H&H program.

Teacher: have 2 copies signed. Leave one with parent/guardian; keep one for district file.
Parent Signature: _______________________________ Date: ____________
Student Signature: _______________________________ Date: ____________