



Department of School Support  
7905 S. Redwood Road, West Jordan, UT 84088  
(801) 567-8088

## Disclosure Statement

Purpose: The Long-Term Home & Hospital Program was developed to meet the basic academic Needs of Jordan School District students in the following categories:

- Long-Term Illness- Student requires H & H services for nine weeks or longer due to physical/emotional reasons.
- At Risk- District expulsion for weapons or disruptive behavior as designated by the Jordan School District Appeals Committee.
- High Risk – District suspension for drugs or alcohol (2<sup>nd</sup> or 3<sup>rd</sup> violation for use or possession & 1<sup>st</sup> offense for selling or distributing).

Procedure: In order to register for H & H services, parents must schedule an intake interview with Mary Ann Erdmann (801) 567-8088 and provide the following documentation:

- Physician's Statement of Needs with a projected time-table of required services (Long-Term Illness Only)
- Transcript- 9<sup>th</sup> grade and above
- Copy of IEP (Special Education students only)
- Civics Test results (if available)
- Release of Information

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

1. Students are allowed to register for up to eight classes.
2. The Home & Hospital Program is a *basic maintenance service*. Because of limited instructional time & the requirements of certain classes, it is not possible to maintain credit in all classes while a student is being served on Long-Term H & H Program.
3. Once the registration process has been completed, a H & H instructor will be assigned. The instructor will contact the parents to schedule an appointment to meet with the students *once each week for two hours*.
4. A parent/adult **must** be present during each H & H visit.
5. Failure to notify the H& H teacher of cancellations will result in the student being dropped upon the second absence.
6. Upon termination of services parents are to contact **Mary Ann**.

*I have reviewed and received a copy of this Disclosure Statement.*

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_