

20 \_\_\_\_ - 20 \_\_\_\_

Career Technical Center

### NOTICE OF RECEIPT

\_\_\_\_\_ enrolled in  
(name of student)

Chambers County Career Technical Center and \_\_\_\_\_  
(name of parent/guardian)

hereby acknowledge by our signatures that we have received and read, or had read to us, the Career Technical Center Student Handbook. We understand that these policies apply to all students and parents in the public schools; to school campuses, school buses, and other school-owned/operated vehicles; and school-related activities and events.

(Signed) \_\_\_\_\_  
Student Date

(Signed) \_\_\_\_\_  
Parent/Guardian Date

(Signed) \_\_\_\_\_  
Parent/Guardian Date

**NOTE: The student is to sign the above statement. If the student lives with both parents or guardians, both are to sign the statement. If the student lives with only one parent or guardian, only one is to sign.**

**A separate statement is to be signed for each student enrolled at the CTC.**

**Please sign this page and have the student return it to their CTC teacher. Keep the accompanying book for future reference.**