PARENT NOTIFICATION & AGREEMENT - THREAT ASSESSMENT

STUDENT: SCHOOL:
PARENT/GUARDIAN: DATE:
The parent/guardian of the student noted above has been called into a conference to discuss a threat made by their child. In an effort to keep all students safe, the parent/guardian has been advised of the following:
\Box I have been advised that my child has expressed a substantive threat
□ The threat assessment process and the Intervention and Monitoring Plan to be implemented has been explained to me/us.
\Box I have been advised of home safety and the need for supervision
□ I have been given a provider list of available community supports
□ I have been advised to seek an evaluation for my child: □ Immediately □ Within 24 hours □ Other Type of evaluation:
□ I understand that School District is not financially responsible for community-based evaluation or treatment, but is simply alerting me to this emergency as they would inform me of any health problem.
District mental health professional was consulted
□ School disciplinary action:
□ Law enforcement was contacted
\Box I understand that upon further investigation additional action may be taken by the school or law enforcement
□ Staff: □ request □ require a re-entry meeting to the student returning to school
□ Other:
Agreement: (Note: interventions required to help ensure safety in the school environment may be implemented regardless of agreement)
 I agree to follow the recommendations of the Threat Assessment Team understanding that fulfilling those recommendations comes at my expense, unless otherwise identified through the Intervention and Monitoring Plan.

 $\hfill\square$ I accept the recommendations of the Threat Assessment Team with the following exceptions:

 $\hfill\square$ I do not agree to follow the recommendations of the Threat Assessment Team.

Parent or Guardian	Date	Parent or Guardian

Date

Student

Date