



VALLEY CENTRAL SCHOOL DISTRICT

TECHNOLOGY DEPARTMENT

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OFFICE OF THE
DIRECTOR OF TECHNOLOGY

CHRISTOPHER MOHR

To all Parents and Guardians of the Valley Central School District:

This summer, the Valley Central School District will be migrating over to a new student management system. Starting in September of 2017, we will be utilizing the "SchoolTool" system to manage our student information.

It has been decided that we will take this opportunity to collect updated student EMERGENCY CONTACT INFORMATION in order to eliminate the possibility that our current information is not up to date. This information is used in situations where we are unable to reach the students' primary guardians during an emergency. In these rare moments, we will always try to contact the primary guardians first, but if that is not possible we will call the contacts provided by you on this form in the order you have specified.

Since the EMERGENCY CONTACT INFORMATION can be different for each child, we ask that you fill out and return a separate form for each child that will be attending school in the 2017-2018 school year.

Once it has been filled in, please send this form back with your child no later than March 23rd.

We appreciate your patience and understanding during this process as it is imperative that our information is up to date.

Best regards,

A handwritten signature in blue ink that reads "Christopher Mohr". The signature is written in a cursive style with a long, sweeping underline.

Christopher Mohr
Director of Technology

VALLEY CENTRAL SCHOOL DISTRICT

Confidential Emergency Contact Form

School (Circle One):

Berea
Elementary

East Coldenham
Elementary

Montgomery
Elementary

Walden
Elementary

Middle
School

High
School

ALC

Student Information

Last Name: _____ First Name: _____ ID# _____

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian Information

Father's Name: _____ Mother's Name: _____

Is either Parent an Active Duty Member of the Armed Forces? _____ (If yes, please specify below)

Parent Name: _____ Branch of Service _____ Entry Date: _____

Parent Name: _____ Branch of Service _____ Entry Date: _____

Emergency Contact Information

In the event of an emergency, the district will call parents first, then, follow the sequence below:

First Contact Name: _____ Relationship: _____ Daytime Phone: _____	Third Contact Name: _____ Relationship: _____ Daytime Phone: _____
Second Contact Name: _____ Relationship: _____ Daytime Phone: _____	Fourth Contact Name: _____ Relationship: _____ Daytime Phone: _____

If the School District is unable to reach a parent/legal guardian, I do hereby authorize the School District to call the emergency contacts listed.

Parent/Guardian Signature: _____ Date: _____