

# **DIVINE WISDOM CATHOLIC ACADEMY**

### ACKNOWLEDGEMENT OF RECEIPT

#### FOR PARENTS/GUARDIANS

I acknowledge that I have received and read the Parent-Student Handbook and all subsequent forms ("Handbook").

I have read and understood the contents of this Handbook, and will act in accord with these policies and procedures. I have explained the contents of this Handbook to my child. I agree that I am responsible for my child's adherence to the policies in this Handbook.

I understand that this Handbook supersedes any other previously issued handbook and personnel manual and that all previous versions are hereby revoked.

I understand that the Academy reserves the right to add, amend, modify, or discontinue any of the policies and procedures as set forth in the Handbook at any time, with or without notice.

I have read the Parent-Student Handbook, have discussed its contents with my

Print Name:

Date: \_

**FOR STUDENTS GRADES 5-8** 

Signature: \_\_\_\_\_

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parent/guardian, and agree to abide by all its terms.
Print Name:
Signature:
Date:
Print Name:
Signature:
Date:
(Electronic Authorization on next page)

Sparking minds, Enriching souls, Inspiring futures!

Miriam Bonici Principal

Linda Keppel **Associate Principal** 

Sylvia Roccia **Associate Principal** 

Frank Signorello **STEM Program Director** 

45-11 245th Street Douglaston, N.Y. 11362 718.631.3153 Fax: 718.631.3945



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### **ELECTRONIC SIGNATURE AUTHORIZATION**

If a parent/guardian chooses to sign any form electronically, the following MUST be submitted <u>beforehand</u> to the Academy with an original, and not electronic, signature:

I authorize the Academy to accept my electronic signature.

Print Name: \_\_\_\_\_

Date:

Signature: \_\_\_\_\_

Sylvia Roccia Associate Principal

**Associate Principal** 

Miriam Bonici

Linda Keppel

Principal

Frank Signorello STEM Program Director

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