Pre-Employment Transition Services

Parent & Student Consent and Release Form

Pre-Employment Transition Services ("Pre-ETS") is a project serving students with disabilities, ages 14-22. Sycamore Services contracts with Indiana Vocational Rehabilitation to provide these transition services at no cost to eligible students. Services include teaching positive strategies through supported decision-making concerning community living, and further educational and employment opportunities for students with intellectual and other disabilities. Participation in the project and assessment of student needs is completely voluntary.

CONSENT TO PARTICIPATE IN PRE-ETS AND WAIVER OF LIABILITY

Consent: I agree to allow my student to participate in all aspects of the project and assessment, including virtual services, field trips, and transportation, under the supervision of Sycamore Services staff. I give my permission to share information between School and Sycamore Services staff, such as copies of school records and other confidential information that is necessary for eligibility to participate. In addition, Sycamore Services has permission to obtain information from Indiana Vocational Rehabilitation on the status of the student regarding their case status with Vocational Rehabilitation during the time the student is enrolled in Pre-ETS and for one-year post-exit from Pre-ETS. I further agree to allow Sycamore Services to use my student's picture or video image to promote Pre-ETS services.

Release and Waiver of Liability & Indemnification: By signing this form, Lagree to hold harmless, defend, indemnify, release, waive discharge, and covenant not to sue the Evansville Vanderburgh School Corporation, its officers, employees, agents, its partners, and Sycamore Services staff members (the "Released Parties") from any liability for any accident, illness, injury, death, loss, damage to personal property, or any other consequences arising or resulting directly or indirectly from the student's participation in Pre-ETS. 1 understand that as a participant in the activity, my student could sustain personal injuries, illness, and/or property damage, as a consequence of not only the Released Parties' actions or inactions, but also the actions, inactions, negligence, or fault of others, and that there may be other risks not known to me or not reasonably foreseeable at this time. 1 acknowledge the Released Parties assume no responsibility for any liability, damage, injury, illness, or death that may be caused by my or my student's negligent or intentional acts or omissions committed prior to, during, or after participation in Pre-ETS.

Lacknowledge that (a) I have read this Consent to Participate and Waiver of Liability carefully, (b) I understand the risks and benefits of Pre-ETS, (c) I have the legal capacity and authority to provide this consent for the student, and (d) I have received a copy of this Consent to Participate and Waiver of Liability form.

Student's Name	School and Grade	Teacher of Record	
Parent/Guardian Full Name (Printed)	Signature of Parent/Guardian	Date	
Parent Email Address:			
Student Consent: I agree to participate under the supervision of Sycamore Ser	in all aspects of the project, including vi vices staff. I give my consent knowingly	rtual services, fieldtrips, a /, freely, and voluntarily.	and transportation,
Student Full Name (Printed)	Signature of Student	Date	
Student Email Address:			
Updated 8-5-24			