

# AGREEMENT TO BE GOVERNED BY HANDBOOK POLICIES

**AFTER** reading the St. Raphael's Parent/Student Handbook thoroughly, we ask that you sign below and return this form to the school office on **THE FIRST WEEK OF SCHOOL**. Thank you.

We have received and read the St. Raphael's Parent/Student Handbook and agree to be governed by the policies contained herein.

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Student Signature

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Date

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Student Signature

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Date

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Student Signature

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Date

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Student Signature

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Date

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Student Signature

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Date

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Student Signature

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Date

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Parent/Guardian Signature

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Date