St. Mary's Academy Charter School
507 N. Filmore, Beeville, Texas 78102
Phone: (361) 358-5601

2025-2026
Notice and Consent for Health Services

Our school offers a variety of health-related services to each student. This notice is meant to inform you of all available health-related services we offer, not necessarily to indicate any of these services will be provided to your child.
Health-related services offered on your child's campus consist of the following.
Please initial any service you wish to **REJECT**, that you **DO NOT** want your child to receive at any point in the school year:

Health-Related Service	Parent Initial to OPT OUT	Health-Related Service	Parent Initial to OPT OUT
First Aid		Wellness Promotion and Education	
School Counseling Services Related to Mental or Emotional Health		Nutrition Health and Education (beyond what is taught through grade-level or course instruction)	
Emotional Regulation Activities		Substance Abuse Prevention	
Physical Health Screenings		Suicide Prevention	
Mental Health Screenings		Crisis Prevention Training	
Opportunities for Physical Activity		Social Skills Training	
Illness Symptom Support		Stress Management	

You have the right to opt out and withhold consent of any of these services to your child, by submitting this form to **Mrs. Marissa Esquivel, Principal, 507 N. Filmore, Beeville, Texas 78102.** **We will assume consent is provided unless you opt out**. You can update your decisions at any time.
We will attempt to notify you prior to initiating any proposed change in services provided to your student related to the student's mental, emotional, or physical health or wellbeing. If prior notification is not possible, you will be notified within three school days.
Before administering a well-being questionnaire or a health screening form to your child, a copy will be provided to you. Consent would have to be received from you for the school to move forward with administering the questionnaire or form.

(Please print.)

Student's name: _____

Student ID No.: _____

Current grade level: _____

Campus: _____

Parent's name: _____

Parent's signature: _____

Date: _____

Please return this form at your earliest convenience to Mrs. Marissa Esquivel, Principal, 507 N. Filmore, Beeville, Texas 78102