



**Boarding Application for Graybill Hall
Lancaster Mennonite High School**

Name of Student: _____

Grade entering: _____ Birth Date: _____ Gender _____

Applying for : _____ four-day program (Mon am- Fri pm) _____ seven-day program

1. CONTACT INFORMATION

Parents

Father _____ Mother: _____

Telephone Number _____ Telephone Number _____

Email: _____ Email: _____

If parent does not speak English, list a relative, neighbor, or friend who can speak/read English:

Name _____ Relationship _____

Telephone Number _____

Email Address _____

US Contact Person (required)

Name _____ Relationship _____

Telephone Number _____

Email Address _____

2. MEDICAL HISTORY

Please mark any health conditions that your child has or has had:

___ asthma (is inhaler needed? _____)

___ seizures (type _____ date of last seizure _____)

___ diabetes (type 1 ___ type 2 ___)

___ cardiac condition

___ severe allergies (peanut, tree nuts, milk, shellfish, etc)

___ Please list: _____

___ drug allergies

___ Please list: _____

___ serious illness, injury, or operation

___ Please list: _____

Please list any diet restrictions:

Please list any other medical conditions:

Any restrictions on physical activity?

Medications (taken at home or in school)

Name: _____ dose: _____ Times: _____ Reason: _____
Name: _____ dose: _____ Times: _____ Reason: _____
Name: _____ dose: _____ Times: _____ Reason: _____
Name: _____ dose: _____ Times: _____ Reason: _____
Name: _____ dose: _____ Times: _____ Reason: _____

Student has the following:

glasses contact lenses hearing aids ear tubes

other devices: _____

Date of last Tetanus booster (Tdap): _____

3. MEDICAL PERMISSION

PERMISSION TO TREAT (must be signed by a parent or legal guardian)

In the event of an emergency, school staff will attempt to contact the listed parents or guardians. If the school is unable to reach a parent or legal guardian, the undersigned authorizes school staff to make whatever arrangements it deems necessary for the health and safety of the child.

I hereby give consent for licensed health care providers to carry out accepted procedures for diagnosis, immunization, medical and minor surgical treatment, or counseling for my son or daughter. In the event that I cannot be reached, I also hereby give my consent for emergency treatment for the above-named Lancaster Mennonite School student according to the judgment of the attending physician, nurse, and/or athletic trainer.

The school nurse may prepare a confidential list of students with significant health concerns of which teachers and staff should be aware to protect the health and well-being of those students. By signing below, I also allow the nurse to share any health information she/he deems appropriate for persons caring for my child to know.

Signature of Parent or Legal Guardian _____

Print Name _____ Date _____

4. OVERNIGHT PERMISSIONS

(Please check one.)

The School will need my specific permission each time my son/daughter visits the home of another Lancaster Mennonite student overnight.

The School will need my specific permission each time my son/daughter visits the home of another Lancaster Mennonite student overnight except for the following student(s) listed here:

The School does not have to get my specific permission each time my son/daughter visits the home of another Lancaster Mennonite student overnight.

Note: Before a student leaves campus for an overnight visit, the Graybill Hall office must receive two critical pieces of information: 1.) Permission from the student's own parent as marked above, and 2.) Word from an adult host present at the destination who agrees to take responsibility for the student while they are away from the school.

5. DRIVING PERMISSIONS

Before a student rides with someone other than a Lancaster Mennonite parent/guardian, faculty, or staff member, he/she must obtain permission from a Residence Hall advisor. Residence Hall advisors will honor the permissions below.

(Please check one.)

My son/daughter needs my specific permission to ride in a car, with the exception of faculty, staff members, relatives, Lancaster Mennonite parents/guardians, or others as designated by the School.

My son/daughter may ride in a car only with the people listed below; otherwise he/she needs my specific permission, with the exception of faculty, staff members, relatives, Lancaster Mennonite parents/guardians, or others as designated by the School.

My son/daughter does not need my specific permission to ride in a car.

6. OTHER PERMISSIONS

My son/daughter may participate in day or overnight off-campus, school chaperoned activities such as class field trips and class activities without my specific permission.

7. RESIDENCE HALL BREAKS/ TRAVEL

Graybill Hall closes over the Christmas school break. All boarding students are **required** to do one of the following over this time:

- Return home.
- Board with the U.S. contact person listed on the student application forms.
- Board with a local, approved host family. Please note that LMH does not provide host families. All host arrangements must be made by an approved agency or U.S. guardian.

Plans for Christmas Break

_____ I will return home for Christmas break.

_____ I have arranged to stay with a local host family or my listed U.S. contact person.

Name: _____

Address: _____

Telephone (home/cell): _____

Email Address: _____

Students, regardless of age, are not permitted to travel at any time during the school year without a parent, guardian, or approved adult chaperon, unless they are traveling home or to the family listed above. Male and female students may not schedule an overnight trip together without proper supervision and approval.

8. BOARDING EXPECTATIONS

The Lancaster Mennonite High School boarding program creates a nurturing, safe, and inclusive community that is committed to excellence and shaped by the life and teachings of Jesus.

All students should expect to have a roommate. Most rooms in Graybill Hall house two or three students. The Residence Hall Director makes room assignments. Any questions regarding housing may be addressed to the Residence Hall Director at least two weeks prior to arrival.

- The residence hall requires a commitment to participation on community building activities.
- Boarding students are expected to maintain satisfactory school attendance and conduct.
- Boarding students, regardless of age, **are not permitted to possess or use alcohol, tobacco, tobacco products, or illegal drugs.**
- Boarding students are expected to comply with the daily residential schedule as determined by school administration and residential staff.
- Boarding students are not permitted to travel during the school year without a responsible, approved adult chaperon.

I have read the information on this application and am willing to comply with the rules, policies, and expectations of Lancaster Mennonite School and Graybill Hall, as explained above and in the school Policy Manual, the student handbook, and the Residence Hall handbook.

I understand that failure to comply with rules, policies, or expectations may result in my being asked to leave Graybill Hall. I further understand that Lancaster Mennonite School reserves the right to interpret and apply, and modify and adopt, with or without notice, its rules and policies, in its discretion.

Signature of Student _____ Date _____

Signature of Parent/ Legal Guardian _____ Date _____