



Consent for EVS O&M Instruction between Home and School

Student Name: _____ **Date** _____

School _____ **School Telephone** _____

I give consent for my child, _____, to participate in orientation and mobility (O&M) lessons that specifically address travel between my child’s home and school. This instruction will take place before school, during, and after school at the times that appear below.

I understand that learning to travel between home and school is one of my child’s IEP goals. Instruction will take place in the neighborhood near my child’s home and school, and on public transportation, as indicated below. Instruction for travel between home and school and/or between school and home is door to door. I understand that an EVS O&M teacher will accompany my child at all times during this instruction.

In the event there are incidents that, in the judgment of the O&M teacher, affect my child’s safety during this instruction, I specifically give consent for the EVS O&M teacher to obtain appropriate assistance for my child in accordance with the procedures of the New York City Department of Education. Accordingly, I agree to provide the information below along with my signature.

Morning O&M lesson days or dates _____ **Lesson time** _____

Afternoon O&M lessons days or dates _____ **Lesson time** _____

City bus travel _____ **Yes** _____ **No,**

Subway travel _____ **Yes** _____ **No**

Please provide the information requested below, sign, and date this form. Return it to school with your child.

Parent’s Name (Please print) _____ **Daytime telephone** _____

Emergency contact _____ **Telephone** _____

Student’s physician _____ **Telephone** _____

Parent’s Signature _____ **Date** _____

Cc: Building principal or designee