

Wall Township Schools Anti-Substance Use and Student Conduct Agreement Extra-Curricular Activity Involvement Form 2023-2024 School Year

Name	D.O.B	Grade
I,_	wish to participate in extra-cu	rricular club/activity/athletic team(s) for the
Wall Township School District. I vo	untarily agree to abide by the following conditions	of my participation in any and all activities,
clubs and/or athletics for the above-	eferenced school year.	

- 1. My participation is a privilege. As such, the administration has the right to revoke this privilege and terminate my participation if I do not conduct myself in an acceptable manner; this includes driving on campus.
- 2. I am a representative of the Wall Township Board of Education. I understand that standards for my behavior must be kept high. Because extra-curricular activities are a reflection of our school program, my fellow participants and I must always conduct ourselves in an appropriate manner.
- 3. I will challenge myself to be the best I can be through my participation in this activity. I therefore agree not to engage in any substance use at all. This includes my conduct on or off school property, during or outside of school hours.
- 4. I also understand and accept that "substance use" includes, but is not limited to:
 - Use or possession of a controlled dangerous substance
 - Use or possession of alcoholic beverages
 - Use or possession of any tobacco or smoking products
 - Unlawful use or possession of any substance prohibited by law
 - Use of items containing THC (excluding those prescribed to the student by a physician) and verified by the school
- 5. I understand that my use of any of the above substances poses a threat to the safety of myself, other players and other students.
- 6. I also agree to conduct myself in an appropriate and acceptable manner according to the laws of this state, and any other rules and requirements of my school as a member of an interscholastic team and/or extracurricular and intramural activity.

Violations of the above conditions will be handled in accordance with N.J.A.C.6A:16-7.5 and may result in my dismissal from any activity for a 4-week period.

The 4 -week period will commence with any of the following:

- The official notification of charges being filed by the named student or their parent/guardian.
- The completion of an administrative investigation for a school related violation.
- The official notification through law enforcement under the authority of N.J.S.A. 2A:4A-60c.

The four week period will commence on the date of notifications from an administrator (usually the first day of the in-school or out of school suspension).

At the conclusion of the suspension, the student may participate in practices and/or meetings with the team/club however, may not compete in events until a 4-week period has elapsed from the initial date of notification.

The student may participate after the 4-week period only if he/she has completed 5 hours of independent work with the Student Assistance Counselor and made arrangements to complete a pre-treatment program approved by the Student Assistant Counselor (SAC) and Administration. The student will remain eligible to compete if pre-treatment meetings are attended as scheduled until 5 hours are met. The Student Assistance Counselor (SAC) will monitor progress and report to the principal.

Nicotine/Tobacco Only

The student will be placed on in-school suspension for 3 days (1st offense). At the end of the suspension period, the student may practice/attend meetings, however, may not compete until 2 weeks after the return date from suspension (in-school suspension).

While serving in-school suspension, the student must c (SAC).	omplete 3 hours of smoke cessation with the Student Assistance Counselor
Upon successful completion of the above criteria, the st	tudent will be permitted participation in activities.
Second and subsequent violations may result in dismiss	sal for the season/school year.
WE ACKNOWLEDGE THAT WE HAVE READ	AND UNDERSTAND THIS DOCUMENT AND AGREE TO BE BOUND BY ITS TERMS.
Student's Signature Date	Date
Parent's Signature Date	Date