

Wendell School District

[School Name]

Date: _____

Student Subject to Agreement:

Name: _____ Grade: _____ Student ID#: _____

Protected Student:

Name: _____ Grade: _____

1. **Purpose of Agreement.** This Stay-Away Agreement is issued to protect the safety and well-being of a student who has reported experiencing relationship abuse, harassment, intimidation, or unwanted contact. The purpose is to establish clear behavioral expectations and boundaries while the school investigates and implements safety measures. This agreement is administrative, not disciplinary, and does not constitute a finding of wrongdoing.

2. **Required Conduct.**

A. **No Contact.** The student subject to this agreement identified above must not initiate or engage in any form of contact with the protected student, including but not limited to (check all that apply):

- In-person communication
- Written notes or messages
- Verbal comments or gestures
- Phone calls, texts, or emails
- Social media messages, tags, comments, or indirect communication through others
- Photographing, recording, or attempting to monitor the protected student
- Other (describe) _____

B. **Physical Distance.** The student subject to this agreement identified above must remain at least [xx] feet away from the protected student at all times, including (check all that apply):

- Classrooms
- Hallways
- Cafeteria
- Restrooms
- School Events
- Bus stops and school transportation
- Other (describe): _____

The school may adjust schedules, passing routes, or seating assignments to support this requirement.

C. **Activity Restrictions.** The student subject to this agreement identified above must not (check all that apply):

- Enter areas designated as safe spaces for the protected student.
- Attend optional activities where the protected student is present unless approved by the administration.
- Attempt to obtain information about the protected student’s schedule, location, or personal life.
- Other (describe): _____

3. **Duration.** This agreement is effective immediately and remains in place until: (a) modified or terminated by school administration; or (b) replaced by a disciplinary action, safety plan, or court order. If applicable, include agreed upon end date: _____.

4. **Consequences for Violations.** Failure to comply with this agreement may result in: (a) disciplinary action under district policy; (b) loss of privileges; (c) removal from activities or classes; and/or (d) referral to law enforcement if conduct violates Idaho law.

5. **Supportive Measures.** The school will offer supportive measures to both students, which may include:

- Schedule adjustments
- Counseling or mental-health supports
- Safety escorts
- Classroom accommodations
- No-contact seating arrangements

These measures are non-punitive and designed to ensure safety and access to education.

6. **Acknowledgment.** By signing below, the student and parent/guardian acknowledge that they have reviewed this agreement, understand the expectations, and agree to comply.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Printed Name of Parent/Guardian: _____

Administrator Signature: _____ Date: _____

Printed Name/Title: _____



LEGAL REFERENCE:

Idaho Code Sections

33-1612 – Thorough System of Public Schools

IDAPA 08.02.03.160 – Safe Environment and Discipline

ADOPTED: March 17, 2026

AMENDED: