

# PARENT / GUARDIAN PERMISSIONS NEEDED:

Student Name: (Please print) \_\_\_\_\_ Grade: \_\_\_\_\_  
Last name First Name

Student's Fifth Hour Teacher: \_\_\_\_\_

Parent Name: (Please print) \_\_\_\_\_

## 1. STUDENT HANDBOOK/STUDENT RIGHTS AND RESPONSIBILITIES (School District Policy 500 Series)

I affirm that we have reviewed the information contained in the Student Handbook/Student Rights and Responsibilities document and have knowledge of its contents.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## 2. INTERNET ACCEPTABLE USE AGREEMENT (School District Policy 524)

### STUDENT:

I have read and do understand the school district policies relating to safety and acceptable use of the school district computer system and the Internet and agree to abide by them. I further understand that should I commit any violation, my access privileges may be revoked, school disciplinary action may be taken, and/or appropriate legal action may be taken, including the possibility of expulsion.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PARENT or GUARDIAN:

As the parent or guardian of this student, I have read the school district policies relating to safety and acceptable use of the school district computer system and the Internet. I understand that this access is designed for educational purposes. The school district has taken precautions to eliminate controversial material. However, I also recognize it is impossible for the school district to restrict access to all controversial materials and I will not hold the school district or its employees or agents responsible for materials acquired on the Internet. Further, I accept full responsibility for supervision if and when my child's use is not in a school setting. I hereby give permission to issue an account for my child and certify that the information contained on this form is correct.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## 3. PRIVACY RIGHTS OF STUDENTS AND PARENTS (School District Policy 515-3C)

Information defined by law as "directory information" includes the student's name, address, telephone listing, date and place of birth, major field of study, participation in officially recognized activities and sports, weight and height of athletic team members, dates of attendance, degrees and awards received and the most recent educational institution student attended. Please sign below **ONLY** if you do **NOT** want to have directory information disclosed.

Parent Signature: (Signature needed ONLY if you do NOT want directory information shared) \_\_\_\_\_ Date: \_\_\_\_\_

**Completed forms are to be returned to your child's 5<sup>th</sup> hour teacher by September 15. Students who do not return this form and the Health/Emergency form (also enclosed) by September 15 will have their student ID cards withheld and will not be able to apply for a parking pass until these forms are completed and returned.**