

TECHNOLOGY PERMISSION FORM

Please review the following permissions and policies and return the completed form to your homeroom:

Student's First Name: (please print)

Student's Last Name: (please print)

Student's Grade: _____ School: _____ Homeroom: _____

Name of Parent/Guardian: _____ Relation to Student: _____

I have read and understand the [FERPA notice](#) describing access rights to directory information.

FERPA Notice Reviewed

I have read and understand the district [Acceptable Use of Technology Policy](#), which governs student use of computing devices and internet access.

Yes No

I have read and understand the [Addendum to the Appropriate Use of Technology Policy](#) allowing the district to create a secure Google account and use a district Chromebook or other internet-enabled device.

I give permission for a Google Apps for Education account to be issued to the Student.

I do not give permission for the Student to have Google Apps for Education access.

Check one:

My child is under the age of 13. My child is 13 or older.

We as a school district want to celebrate your child, his/her work and his/her participation in certain programs or events. We are requesting the following permission regarding your child's image:

Full permission is granted.

This allows images (photos)/audio of my child and/or personal identifiers such as name, grade, school, and teacher to be published to the school or district website, local media, school publications like newsletters, and DVDs of school events (performances/ shows), or similar venues.

Partial permission is granted.

This includes the following, as appropriate: Image/audio only, with no personally identifying information except school.

Permission is NOT granted.

My child's image/audio may not be published on the district and/or school's website or in media generated by and under the control of the school district.

This request does not apply to yearbooks/memory books and secondary graduation videos created as regular school functions.

Signature of Parent/Guardian: _____ **Date** _____

Signature of Student: _____ **Date:** _____

Permissions granted in this form shall remain in place unless written documentation rescinding it is provided to the building principal.