

Parent Permission / Release Form

PLEASE INITIAL:

2018-19: _____
2017-18: _____
2016-17: _____
2015-16: _____
2014-15: _____
2013-14: _____

Parent/Guardian Name: _____

Student(s) Name: _____

Student(s) Name: _____

Please read each of the following releases and BOTH A PARENT and the STUDENT(S) sign at the bottom of the page:

1. **I GIVE PERMISSION** for the Northwood-Kensett CSD to **photograph and use photos** of my child(ren) for a newsletter, brochure, annual report, website, yearbook or other printed/electronic information for print or electronic public use featuring Northwood-Kensett CSD services. I give this consent and will make no further claims of any nature.
2. **(Student)** I understand and will abide by the **Internet Use Policy** of the Northwood-Kensett CSD. I also understand any violation of the regulations is said policy is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges shall be revoked, school disciplinary action may be taken, and/or legal action may result.

(Parent) As the parent/guardian of the student(s), I have read the Internet Use Policy of the Northwood-Kensett CSD. I understand internet access is designed for educational purposes. The Northwood-Kensett CSD reserves the right to restrict access to controversial materials and I will not hold them responsible for materials acquired on the network. Also, I accept full responsibility for supervision if and when my child's use is not in an educational setting. **I hereby give permission for my child's use of the internet. I understand that without my permission, my child will not be granted access to this technology.**

3. I have read the **Attendance Policy** and understand it.
4. I have read the **Good Conduct Policy** and understand it.
5. I have read the **Dress Code** and understand it.
6. I have received the information concerning the **"New Visions" Intervention Center**. I understand that this is a resource available to the school staff to aid students in their development of skills needed for academic success.
7. I give permission for my child(ren) to participate in other pre and post program surveys, including the Building Tomorrow Survey.
8. I have received the Heads Up form regarding concussions in high school sports.

Student(s) Signature: _____

Student(s) Signature: _____

Student(s) Signature: _____

Student(s) Signature: _____

Parent / Guardian Signature _____