

# Parent Permission / Release Form

**Parents: Please complete this form or submit your electronic signature on JMC to verify that you agree to the following statements. The permissions below apply to both buildings in the Northwood Kensett CSD and may require you to read the mentioned policies.**

1. **INTERNET APPROPRIATE USE POLICY (Grades K-3)**

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.** I will make sure my child understands the **Internet Appropriate Use Policy**.

2. **Grades K-12:** I give my permission for my child(ren) to take part in all class field trips during the school year. I understand that a notice will be sent home with my child prior to any field trip informing me of the trip, but not asking for a return permission slip. I also understand that I can inform the school if I do NOT want my child to take part in a particular field trip.
3. I give permission for my child to work with the school counselor in individual, small group, and large group settings. I understand the school counselor will contact parent as situations or concerns arise throughout the school year.
4. I give permission for my child(ren) to participate in all pre and post program surveys.
5. ***I authorize the administration of ibuprofen or acetaminophen to my child for fever and/or minor pain by authorized school personnel.*** You may view the blank parental authorization and release form that is a part of the board policy posted in forms. **\* This form must be completed for any prescription medication that is to be administered to my child. All medications must be turned into the school nurse or the school office.**
6. Student & parent understands the **Attendance Policy** in the **Student/Parent Handbook**.
7. Student & parent understands the Good Conduct Policy. **(Jr. Sr. HS Only)**
8. Student & parent understands the Dress Code. **(Jr.Sr. HS Only)**
9. 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 (including social media) for print or electronic public use featuring Northwood-Kensett CSD services. I give this consent and will make no further claims of any nature.

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**Parent / Guardian Signature:**

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**Date**

\*This form serves as permission/release for all years enrolled. Parent/guardian may contact the Elementary or the Jr.Sr. High school office to revoke any of the above release statements.

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Please print student names on lines provided above: