Consent Form
2011-2012 Academic Year

Sylvania SCHOOLS
An Expectation of Excellence

Complete and sign one form for each student in your family. Please clearly print information when appropriate. Remember to fill out each of the five (5) sections completely before signing and dating the form. Please, return completed form to the school office as quickly as possible so changes can be made to your child's records.

Student's Name _____ School _____ Grade _____ Teacher _____

Student's Home Address _____

Language spoken in the home (if not English) _____

I. Permission to Contact Using Email:
I would like to be contacted by an administrator, counselor or teacher by email. I understand that my email address will remain confidential and will be not given out or used for any other purposes other than for district and/or school-related information.

Name _____ Email Address _____

Name _____ Email Address _____

II. Permission to Display Photographs, Audio, Video, or Electronic Images, Artwork and Stories:
I give consent (or do not give consent) for photographs, audio, video or electronic images of my student; original written materials, artwork, or other work created by my child during the course of instruction; as well as quoted statements by my child to be used by the Sylvania School District for exhibition, public display, publication, publicity materials, advertising, news media stories, video, audio, or other electronic media such as the Internet, television, CD-ROM, or DVD and Facebook. I understand that my student's full name may also be used with such display with the exception of the District and/or school websites/facebook which will only include my student's first name.

☐ I give my consent ☐ I do not give my consent

III. Permission for Internet Usage:
I give consent (or do not give consent) for my student to utilize the internet. I understand that my child must follow all of the guidelines and policies of the district or all internet privileges will be revoked.

☐ I give my consent ☐ I do not give my consent

IV. Permission for Directory Information:
I give consent (or do not give me consent) for my students' name, address, and phone number to be listed in the school directory. I understand that this is different from the district listing and that to exclude that information from being listed on a district level requires a separate letter to the superintendent. (see FERPA letter)

☐ I give my consent ☐ I do not give my consent

V. Emergency Notification System
I authorize district/school personnel to notify our family in the event of an emergency using the following three numbers. I understand that this automated notification system will only be used for emergencies and will not be shared for any other purposes.

☐ Check here if you want these numbers to be used for absentee/tardy calls

Phone One _____ Phone Two _____ Phone Three _____

Signature of Parent or Responsible Custodian/Guardian _____ Date _____

Print Name of Parent/Guardian _____

Please return the completed form to your student's school office.