Student Name (please print): ______________________________________________________  Grade: ________

TECHNOLOGY RESPONSIBLE USE OPT OUT
ADMINISTRATIVE REGULATION: 3225/4312/7320-F1

PARENT/GUARDIAN AGREEMENT

As the parent/guardian of this student, I have read policy 3225/4312/7320, Technology Responsible Use. By signing below, I affirm that I understand that this policy governs my child’s use of all school system technological resources both on and off school property, and I accept full responsibility for my child’s compliance with this policy. I also consent to school personnel monitoring my child’s Internet activity, email communication, and any other use of school system technological resources. I understand that the school system takes reasonable efforts to filter inappropriate content on the Internet accessible through school system devices but that the school system is not responsible for Internet content accessed by my child via his/her personal mobile technology (e.g. 3G, 4G service).

☐ By checking this box, I DENY permission for my student to independently access the Internet. I understand that while my child will not be able to use the Internet independently, he/she will be granted supervised access to the Internet, third party systems used for school-related projects designed to meet certain educational goals, and other school system technological resources.

Note: If the above box is not checked (and/or the form is not returned to the school), your child WILL be granted independent access to the Internet. While school system personnel will take reasonable precautions to prevent your child from accessing inappropriate material, it is possible that your child will access inappropriate material while engaged in independent use of the Internet.

Parent Name (please print): ______________________________________________________
Parent Signature: ___________________________________________ Date: __________________

PUBLISHING OF STUDENT PHOTOS, ARTWORK, OR WRITING

It is the practice of Transylvania County Schools to promote our students, staff, and school system community by publishing student photos, artwork, and writing on the system webpage, social media, and other media with public access.

☐ By checking this box, I DENY permission for my student to have his/her photo, artwork, or writing published through Transylvania County Schools.

Note: If the above box is not checked (and/or the form is not returned to the school), your child’s photo as well as his/her artwork or writing may be published by the school system in various media.

Parent Name (please print): ______________________________________________________
Parent Signature: ___________________________________________ Date: __________________