



Student Name: _____

Grant Permissions

- My child has permission to be contacted by the military. Grades 9-12 only.
- My child has permission to be contacted by institutions of higher education. (Ex: colleges/universities/tech schools). Grades 7-12 only.
- My child has permission to create necessary accounts on educational technology sites (such as Edmodo and Kahn Academy) that are teacher and school approved/directed.
- My child has permission to appear in the media. If you have questions please refer to the school Policy Manual, Section 7:3040-E2 on our district webpage: www.macomb.185.org.
- My child has permission to attend school field trips.

Special Services Assurance

In order to assure that your child receives his/her proper placement for the current school year, please indicate by checking below any services your child was receiving at his/her previous school.

Student's Name: _____ Teacher's Name at Previous School: _____

- | | |
|--|--|
| <input type="checkbox"/> Speech Therapy | <input type="checkbox"/> Title 1/RTI Services |
| <input type="checkbox"/> Hearing Therapy | <input type="checkbox"/> 504 |
| <input type="checkbox"/> Adaptive Physical Education | <input type="checkbox"/> Special Transportation |
| <input type="checkbox"/> More than ½ day in Special Education (Resource) | <input type="checkbox"/> Other (please explain: _____) |
| <input type="checkbox"/> Less than ½ day in Special Education (Resource) | <input type="checkbox"/> None |

Family Access Permission

Each legal guardian may have his/her own login information to access your child's records. Non-custodial parents may have access to their student(s) records as long as the appropriate forms are on file at the school in which the student(s) is enrolled.

By completing and signing this release I understand that I will be provided with credentials that will grant access to student records for the above student and agree to the following terms and conditions:

- ▶ Student records provided **may** include attendance records, student schedules, food service records, grades, contact/demographic information, discipline records, health records, bussing information and account/fee information.
- ▶ I accept full responsibility for the use of my credentials (user ID and password) and will use due diligence to protect such credentials and will not reveal them to any other party or individual.
- ▶ I will hold the District harmless in the event that student information is inadvertently released as a result of my compromised credentials.
- ▶ Inappropriate or unauthorized use of this system may result in civil or criminal penalties.

I agree to the above statements and certify that I am the legal guardian for each of the above students. I authorize Macomb Community Unit School District 185 to provide credentials that will grant access to these student's records.

Parent/Guardian Signature

Date