

**PLEASE SIGN AND RETURN THIS PAGE TO YOUR
CHILD'S SCHOOL (SEPARATE PAGES FOR EACH OF YOUR STUDENTS)**

Please indicate whether your child has your permission to use the technology available in the schools.

Legal References: Children's Internet Protection Act of 2000 (H.R.4577, P.L. 106-554)
Communications Act of 1934, as amended (47 U.S.C. 254[h], [1])
Elementary and Secondary Education Act of 1965, as amended (20 U.S.C. 6801 et. Seq., Part F)

_____ My child may use e-mail and the Internet while at school according to the rules outlined.

_____ My child may not use e-mail and the Internet while at school.

General/routine information releases, photographs, videos, interviews, etc., relative to school administration, school operations, curricular programs, extracurricular programs, awards, honors and school activities may be released through the school principal or designee to promote such school functions.

I acknowledge that the release of such information may contain my child's, name, picture, image or other information. Please indicate below whether the school/school system has your permission to release such information.

_____ My child's name, picture, image, or other information may be released to promote school functions.

_____ My child's name, picture, image, or other information may not be released to promote school functions.

_____ My child's picture may be included in the yearbook.

_____ Health information regarding my child may be left on a phone answering device or voicemail.

Corporal punishment (paddling) has been approved by the Ozark City Board of Education to be used as one form of punishment for certain types of behavior infractions. Before corporal punishment is administered; an attempt will be made to contact the parent or guardian.

_____ I do not want my child disciplined by the use of corporal punishment.

My child and I have read and understand the information contained in the Ozark City School Parent-Student Handbook. If I have any questions, I understand that I may contact my child's teacher(s) or the school Principal.

I acknowledge that I have read, understand, and agree to all terms as outlined in the Acceptable Use of Electronic Services guidelines. I further understand that this agreement will be kept on file at the school for the academic year in which it was signed.

Student's Name (printed)

Parent/Guardian's Name (printed)

Student's Signature

Parent/Guardian's Signature

Date

Date

Please return this page by the end of the first week of school. Thank you!