



Student Name:

Grade:

Homeroom Teacher:

SCCHS
Chinook School Division Permissions Form
Please Circle Your Choice

1. I give permission for my child to use technology in a responsible way as outlined in the Chinook School Division Responsible Use of Technology Policy. Should the school's computers be used in an inappropriate manner, I understand that my student will lose school internet and computer privilege for the rest of the school year.

(P1-A9 Responsible Use of Technology Policy)

YES NO

2. I give permission for my son/daughter to participate in low risk educational activities/excursions that occur during the normal school hours away from the school grounds. I understand that the activities will be connected to educational outcomes. The school will inform me when the trip will occur.

YES NO

3. I give permission for the school or school division to use student work samples, photos and videos of my child for school or school division publications including newsletters, **yearbooks**, websites and social media; as well as news and external media. Student names will not appear in public materials without parent consent.

(P1-F34 – Parental Consent)

YES NO

Parent/Guardian Name Printed _____

Parent/Guardian Signature: _____ Date: _____

Policies listed above can be seen on our school website under PUBLICATIONS.