

# PERMISSION FORM

## St. John's Day School

Please complete this form and return it to the office.

Student's Name \_\_\_\_\_ Parent's Name \_\_\_\_\_  
Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Work Phone \_\_\_\_\_

### FIELD TRIP PERMISSION

I grant permission for my child to participate in field trips sponsored by St. John's Day School which will take my child away from the school premises. I understand this approval is for the School Year and I will be notified by my child's teacher prior to each field trip.

\_\_\_\_\_  
Date \_\_\_\_\_ Date \_\_\_\_\_

- Approved by Parent/Guardian  
 Not Approved by Parent/Guardian

### PERMISSION TO PHOTOGRAPH

I grant permission for St. John's Day School to photograph and/or videotape my child and my child's work and to publicly publish and distribute the same. This information may be published in, but is not limited to, newsletters, media releases, and website information. I understand that my child's image, name, school, and grade may be revealed. Photos may be taken at various times throughout the year without advance notice.

\_\_\_\_\_  
Date \_\_\_\_\_ Date \_\_\_\_\_

- Approved by Parent/Guardian  
 Not Approved by Parent/Guardian

### DIRECTORY INFORMATION

The following information concerning a student of St. John's Day School will be designated as Directory information and may be disclosed without prior written consent unless a parent or eligible student request otherwise in writing: the student's name, address, telephone number, parent or guardian, date of birth, and email address. If you do not want any of the listed information disclosed, you must notify the school in writing within two weeks after the first day of school. Please understand that we are extremely careful about which individuals or groups have access to our students' information.

\_\_\_\_\_  
Date \_\_\_\_\_ Date \_\_\_\_\_

- Approved by Parent/Guardian  
 Not Approved by Parent/Guardian

### STUDENT HANDBOOK

I acknowledge that I have read the student handbook for the current school year and understand its contents. You may view the handbook online at [sjdsl Laurel.com/about/student-handbook/](http://sjdsl Laurel.com/about/student-handbook/).

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

Date \_\_\_\_\_

Date \_\_\_\_\_

# **St. John's Day School – Appropriate Use Policy**

## **Student – Internet Use Agreement**

Internet resources can be valuable for a student's education. School Internet access is a privilege which may be authorized as well as withdrawn. Students are expected to be aware of and abide by the following:

### **1. Student Personal Safety**

Personal contact information may not be entered on Internet sites open to public access. This includes student address, phone numbers and personal e-mail addresses.

### **2. Internet Use**

Students may use school Internet access, including e-mail, only for teacher-directed educational activities. Students may use school Internet access only when authorized, and only when supervised by a teacher or teacher assistant.

### **3. Prohibited Computer and Device Uses**

#### **Students are strictly prohibited from:**

- Accessing or creating files or materials without authorization
- Accessing storing or creating offensive, profane, or pornographic files/software/applications
- Use of Internet games, MUDs (multi-user domains), IRCs or web chats
- Plagiarizing works or violating copyrights or trademarks
- Damaging, altering, or modifying hardware or software
- Attempting to bypass computer security
- Downloading and use of non-approved software
- Using the internet to harm, defame, harass or otherwise cyberbully individuals
- Unauthorized use during class time

### **4. Expectation of Privacy**

Students do not have an expectation of privacy in files, disks, documents, e-mail, etc., which have been used or created with District equipment.

### **5. Disciplinary Actions**

Disciplinary actions will be taken to meet the specific concerns related to violations of this agreement (e.g. loss of access to computers, office referrals, etc.). *For further information, please contact your student's teacher or school administration.*

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

**If I have the opportunity to use computer equipment, I will do so subject to the provisions of the Student Internet Use Agreement.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**I give permission for my child to use the Internet subject to the provisions of the Agreement.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_