

## K- 6 Permission for students to have an online services account

(Please write the name using one capital letter per box)

Stu	der	nt's '	first	na	me													
Student's last name																		
Stu	der	nt's	pref	erre	ed n	ame	e	-	-		-	-		-				 
Yea	ar Lo	evel													-			 
	]																	

Parent/responsible person
I give permission for my child to have an online services account
I DO NOT give permission for my child to have an online services account
I agree to and understand the responsibilities my child has when using the online services provided at school for educational purposes, in accordance with the Acceptable Usage Agreement for school students. I also understand that if my child breaks any of the rules in the agreement that the principal may take disciplinary action in accordance with the Department's <i>Student Behaviour in Public Schools Policy and Procedures</i> .
Name of parent or responsible person:
Signature of parent or responsible person: Date:
Note: while every reasonable effort is made by schools and the Department of Education to prevent student exposure to inappropriate online content when using the Department's Online Services, it is not possible to completely eliminate the risk of such exposure. The Department cannot filter internet content accessed by your child from home or from other locations away from the school. The Department recommends the use of appropriate internet filtering software.
Office use only: Date processed: / / Processed by (initials):

**Note:** This permission should be filed by the school.