



2018-2019 PARENT/STUDENT ACKNOWLEDGEMENT

By signing this form, we acknowledge that our family has received and reviewed the Code of Student Conduct and:

- By providing the district with your telephone number and signing below, **I grant express consent for the school system to contact me using an automatic dialing system** to provide information about my child and the school. I understand that it is my responsibility to contact the school with any changes to my telephone information and I will indemnify and hold harmless the school and the school system from and against any claims, damages, or causes of action arising from the school system's use of the telephone contact information I have provided to the school. *(See page 70)*

Yes **No**

- Read the information about the **Georgia Student Health Survey 2.0 (Grades 3 – 12)** and grant permission for my child to participate in the survey. *(See page 65)*

Yes **No**

- Read the section on Directory Information (FERPA) and grant permission for my child's directory information to be disclosed upon request. *(See page 62)*

Yes **No**

- Read and agree to abide by the VCS Cyber Safety Acceptable Use Agreement for Students. *(See pages 49-57)*

Yes **No**

- Grant permission for my child to be photographed, videotaped or interviewed by the news media at school or any school activity/event or by school officials as part of school publications, including school/system web sites and social media sites.

Yes **No**

- Read the section on Attendance Information that outlines the possible consequences and penalties of violating the Georgia Compulsory Attendance Law. *(See pages 12-16)*

Yes **No**

Signature of Parent or Guardian

Student's Signature (If Age 10 or older)

School

Date

Please review, sign and return to your child's school within five (5) days.