

Dear Parents

This package of information is crucial to the registration of your child at Lorne Akins for the 2018/2019 School Year.

Every year, several documents must be signed by students and/or parents to indicate a willingness to comply with various policies and regulations established by St. Albert Public Schools. To minimize the amount of paper collected, we have consolidated several signatures to a single sheet of paper.

The accompanying documents go into more detail about what each signature you're providing covers. Please make sure you've read and understand each agreement you're signing your name to. If you have any questions, please feel free to talk to anyone in the front office.

Please sign every section of this package (signatures are required on both sides of this sheet):

Please return this sheet to the office.

Student Name

ID Number

Grade

TA

1. Student Acceptable Use of Technology Agreement

Student Section: By signing below, I acknowledge that I have read the *Acceptable Use of Technology Agreement*. I agree to follow the rules and expectations contained in this agreement. I understand that if I violate the agreement, my accounts can be terminated and I may face other disciplinary measures. I understand that my computer and network use may be monitored at any time.

Student Name

Student Signature

Date

Parent Endorsement: By signing below, I acknowledge that I have reviewed the document and each paragraph with my child. I have discussed the importance of this agreement with my child.

- Computer access is for educational purposes. I will instruct my child regarding acceptable use, including that which is set forth in the *Acceptable Use of Technology Agreement*. I will emphasize to my child the importance of following the rules for personal safety.
- My child's computer and network use may be monitored at any time.
- Some materials on the Internet may be objectionable, and that my child may manage to access those materials despite efforts of the District and its staff. *I hereby release St. Albert Public Schools and its personnel from any and all claims and damages arising from my child's use of, or inability to use, the St. Albert Public Schools' computer systems.*
- I give permission to allow Internet access for my child and certify that the information contained in this section is correct.

Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date

2. Freedom of Information and Protection of Privacy (FOIP) Act

Parent & Guardian Section: By signing below, I acknowledge that I have read *St. Albert Public Schools' FOIP Notification* and understand that my child's personal information will be used to provide an educational program that meets their needs and provides a safe and secure environment

Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date

3. License to Use School Locker

Student Section: By signing below, I acknowledge that I have read the *acceptable use guidelines*. I understand that, if I violate the rules, my use of a school locker may be terminated and I may face other disciplinary measures

Student Name

Student Signature

Date

Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date

