Mandatory Forms

Student Name: [Student Name]  Teacher Name: [Teacher Name]

Please read each section and sign your name on ALL sections. Return to school no later than August 23, 2018.

Discipline

I attest that I have read the Guide to Student Conduct and the School Handbook. I am aware of the discipline code and understand the consequences for violations of these codes.

I further attest:

1. I have read with my child and understand the varying behavioral infractions that constitute a Class I, Class II, and Class III infraction (pages 14 – 20).
2. I have read with my child and understand the procedures in place for Due Process, Procedures of Suspension, and Alternate Placement Hearings (page 23).

Parent Signature: ___________________  Student Signature: ____________________

Dress Code

I attest that I have read and understand the dress code as outlined on page 9 of this guide.

I further attest:

1. My child will wear approved uniform pants and shirts to school.
2. My child will wear approved sweatshirts/sweaters, jackets, belts, socks, and shoes.
3. My child will wear his student identification card at all times while on campus and/or while riding the school bus.
4. My child will have a moderate hair style (page 10).
5. My child will follow the dress code regarding accessories (page 11).

Parent Signature: ___________________  Student Signature: ____________________

Attendance Policy

I attest that I have read the attendance policy in its entirety as outlined on page 7 of this guide.

I further attest:

1. I understand that if my elementary or middle school student is absent more than 14 days per school year he/she will not be eligible to receive grades or credits for his/her course work regardless if the absence is excused or unexcused.
2. I understand that if my high school student is absent more than 7 days per semester year he/she will not be eligible to receive grades or credits for his/her course work regardless if the absence is excused or unexcused.
3. If my student is under the age of 18, I am legally responsible for making sure he/she attends school regularly. I understand that if my student is habitually absent or tardy I will be reported by the Supervisor of Child Welfare and Attendance to the juvenile court of St. Bernard Parish and can be fined, required to perform community services, and/or incarcerated.

Parent Signature: ___________________  Student Signature: ____________________
**Acceptable Uses of Technology**

1. Communicating with others using respectful language
2. Respecting the privacy and property of others
3. Treating technology with care
4. Utilizing the district provided network during the school day as authorized by administration
5. Using technology as directed by the teacher
6. Protecting your password in order to ensure personal security and that of the district’s technology

**Unacceptable Uses of Technology**

1. Use of personal devices such as cell phones or smart watches while on school property unless authorized by school principal
2. Filming or recording of incidents in the classroom or on campus on personal devices without permission from the teacher or principal
3. The use of personal network (internet access) is prohibited during school hours
4. Accessing, displaying, or sending messages and materials that use language or images that are inappropriate (e.g. obscene, threatening, disrespectful) in the educational setting or disruptive to the educational process
5. Unwanted and repeated written, verbal, or displays of physical behavior, including any threatening, insulting, or dehumanizing gesture (cyberbullying)
6. Violating copyright laws by copying information from the district’s technology systems and handing it in as original work (plagiarizing)
7. Placing unlawful and/or unauthorized information the district’s technology system
8. Tampering with, damaging, or modifying computers, computer systems, computer networks, school district system software, hardware, or wiring or taking any action to jeopardize or violate the school district’s technology systems security
9. Disregarding established safeguards of technology in order to comply with the Children’s Internet Protection Act and Louisiana R.S.17:100.6
10. Using the school district system or personal devices in such a way as to disrupt the use of the system by other users
11. Violating privacy rights by providing home address, telephone number, or other personal information about myself, my family, or others
12. Wasting consumables and/or resources (paper, ink, storage devices, bandwidth)
13. Spreading computer viruses
14. Installing or running a program which damages or places an excessive load on the district’s technology
15. Using another’s password or sharing passwords with others
16. Using the district’s technology systems for commercial use
17. Using technology to gain unauthorized access to information resources or accessing, changing, deleting, or damaging another person’s materials, information, or files
18. Using technology illegally or in any ways that violate district policy, and/or local, state, or federal laws and statues

**Limitations on School District Liability**

A. The school district will not be responsible for financial obligations arising through inappropriate use of the district’s technology.
B. The school district is NOT responsible for damages to, loss of, or theft of personal devices.
C. The school district, in compliance with the Children’s Internet Protection Act, will uses its best efforts to prevent access to harmful material and restrict usage of the internet to areas of educational value.
D. It should be understood that no matter how much supervision and monitoring the district provides, there will always be the possibility of a user coming into contact with inappropriate materials.

**Consequences**

Students’ inappropriate use of technology as outlined above and on page 39 of this document will result in disciplinary action ranging from parent conference to suspension or expulsion depending on the severity of the offense. Please note, ALL technology offenses may result in the confiscation of personal devices.

I have read and understood the Acceptable Use of Technology Policies. I agree to follow the district’s rules and procedures and understand that failure to do so will result in disciplinary action. I also understand that use of a personal device on school premises may result in its confiscation.

Parent Signature: ___________________________  Student Signature: ___________________________
Optional Forms

Student Name: \hspace{1.5cm} Teacher Name:

Directions: The forms below are **OPTIONAL**. If you are returning these forms, please submit to your child’s school by **August 23, 2018**.

**District Media Release – Sign ONLY if you **DO NOT WANT****

St. Bernard Parish School District utilizes the benefits of modern media and technology. Your child’s image may appear in videos, television programs, commercials, websites, social media, audiotapes, pictures, brochures, and/or newspapers. By NOT signing below, you jointly and generally forever release, discharge, acquit, and forgive the St. Bernard Parish School Board and its employees from any and all claims, suits, agreements, liabilities, and proceedings of every nature and description both at law and in equity from the use of undersigned’s image in any public medium.

Please sign below if you **DO NOT WANT** your child to appear in any videos, television programs, commercials, websites, social media posts, audiotapes, pictures, brochures, and/or newspapers.

Parent/Guardian Name (Print): ________________________________  
Parent/Guardian Signature: ________________________________

**Military Affiliation – for ALL students with a parent/guardian with military affiliation**

The federal Every Student Succeeds Act (ESSA) requires school districts to report to the state of Louisiana if a student has military affiliation. If a student’s **parent or guardian** is active duty military, active duty military reserves, or retired military, the student should be reported as having military affiliation.

By signing below, parent/guardian is reporting that their child has military affiliation – the student has a parent/guardian that is active duty, reserves or retired military.

Parent/Guardian Name (Print): ________________________________  
Parent/Guardian Signature: ________________________________
Optional Forms

Release of Personally Identifiable Information – Sign ONLY if you DO NOT WANT

By signing below, parent/guardian is requesting to withhold directory information, which is defined by the St. Bernard Parish School Board as a student’s name, address, date and place of birth, telephone number (if it is listed), grade level, electronic mailing address, photographs, participation in officially recognized activities and sports, weight and height of members of athletic teams, degrees and awards received, participation in official school-sponsored activities, and most recent previous educational agency or institution attended.

The primary purpose of the directory information is to allow the district to include information from your child’s educational records in certain school publications. Directory information can also be disclosed to outside organizations without a parent’s/guardian’s written consent. Outside organizations include, but are not limited to, companies that manufacture class rings or yearbooks, colleges and post-secondary institutions, and military recruiters.

By signing below, parent/guardian is requesting to WITHHOLD directory information in accordance with the Family Education Rights and Privacy Act (FERPA). By signing, your student’s name will be removed from all school related publications including playbills, graduation announcements, athletic rosters, yearbooks, and honor roll lists. Your student’s name will also not be shared with outside agencies for purposes such as recruiting and scholarships.

Parent/Guardian Name (Print): ________________________________

Parent/Guardian Signature: ________________________________

Student Insurance – Sign if you would like to purchase insurance

By not signing below, I attest that I was offered student insurance for my student and DO NOT want to purchase it. By signing below, I state that I wish to purchase insurance and have enclosed application and payment. I understand the policy does not take effect until the application and payment are returned.

Parent/Guardian Name (Print): ________________________________

Parent/Guardian Signature: ________________________________